

Personal and Public Involvement Handbook

May 2021



Purpose of Handbook

This handbook has been developed to help service users and carers who attend the Western Health and Social Care Trust Adult Learning Disability Local Involvement Group (LIG) / Strategic Involvement Group (SIG) gain a better understanding of the Health and Social Care system in Northern Ireland including key information relating to the Western Health and Social Care Trust in terms of:

- Organisational Structures;
- Health and Social Care Values;
- Overview of Services delivered;
- Adult Learning disability Management structure and services provided;
- Care Pathway into Adult Learning Disability Services;
- Personal and Public Involvement Process;
- Objectives of the Local Involvement and Strategic Involvement Groups;
- Roles and Responsibilities of Members;
- Overview of Budgetary Management.

Personal Public Involvement Process

Personal and Public Involvement (PPI) is a process whereby service users, carers and the public are empowered and enabled to inform and influence the commissioning, planning, delivery and evaluation of services in ways that are relevant and meaningful to them. People have a right to be involved and increasingly they expect to be actively involved in decisions that affect them.

PPI is a statutory responsibility as detailed in the HSC (Reform) Act (NI) 2009 through the statutory duty to Involve and Consult. Each Health and Social Care organisation, to which the legislation applies, is required to involve individuals in the planning and delivery of Health and Social Care (HSC) services.

Specifically, sections 19 and 20 of the above legislation require that service users and carers are involved in and consulted on:

- The planning of the provision of care;
- The development and consideration of proposals for change in the way that care is provided;
- Decisions that affect the provision of care (HSC 2012).

Levels of Involvement

The Western Trust Adult Learning Disability Service is continuing with a process of developing an involvement mechanism for service users, carers, Trust staff and providers to shape and influence service delivery in the Western Trust Region.

This process has seen the development of a new 'Hub and Spoke' infrastructure, see diagram opposite, with five local implementation groups (LIGs) working with a Strategic Involvement Group (SIG). The five Local Involvement Groups are in Limavady, Derry, Strabane, Omagh and Fermanagh.



This Hub and Spoke model provides a safe forum and structure that will enable service users and carers to work together in partnership with Western Trust staff to influence, inform and advise on the commissioning and delivery of Adult Learning Disability services.

Local Level

At a local level the groups will meet in Derry, Strabane, Limavady, Omagh and Fermanagh. Each group will strive to involve and gather the views of members from their area who have more complex needs and cannot attend the meetings and also those who live in rural, isolated areas.

The Local Involvement Groups will:

- Identify and discuss issues to be addressed in the local area to improve life for service users and carers;

- Enable information to be shared widely within the community and will identify issues and areas of service improvement to be discussed at Strategic Involvement Group;
- Have regular feedback from the Strategic Involvement Group about the progress of issues brought to it and will have the opportunity to discuss, deliberate and influence, in a timely manner, any policy and service developments that will affect service users and carers locally.

The Local Involvement Group may discuss things like:

- Service users, carers and advocates may discuss ideas for their health, care or treatment;
- Service users and carers experiences of services;
- The Trust's plans and staff experiences;
- What aspects of services may need to change;
- What service users and carers want from services and staff;
- How to make the best use of resources;
- How to improve the quality and safety of services.

Strategic Level

At a Strategic Level, one western trust wide group will meet regularly. The members of the Strategic group will consist of:

- Western Trust Learning Disability staff and Finance staff at Assistant Director or Director level;
- Western Trust PPI representation;
- Two representatives elected from each local involvement group;
- Representation from Public Health Agency and Health and Social Care Board.

The Strategic Involvement Group will:

- Debate and address the issues brought to them by the Local Involvement Groups;
- Will ensure that the issues and ideas generated by the Local Involvement Groups are fully debated and considered in the planning, development and commissioning of services;

- Will ensure and open and two-way dialogue with each Local Involvement Group to ensure each group is kept abreast of developments which will impact Learning Disability services, service users and carers
- Will oversee the development of the Local Involvement Groups and will be accountable to ensure the agreed involvement process

The Strategic Involvement group will be informed by the Local Involvement Groups as well as policy and strategic directives, and taking this all into account may discuss and make decisions about:

- What and how, aspects of services may need to change;
- What service users and carers want from services and staff and how to deliver this;
- How to make the best use of resources;
- How to improve the quality and safety of services for service users and carers

Roles and Responsibilities of Members

Following workshops held across the Western Trust, service users and carers developed and agreed a Terms of Reference for LIG and SIG members. This was to ensure clarity and openness of process and procedure to safeguard the integrity and reputation of the work and its members. Key principles include:

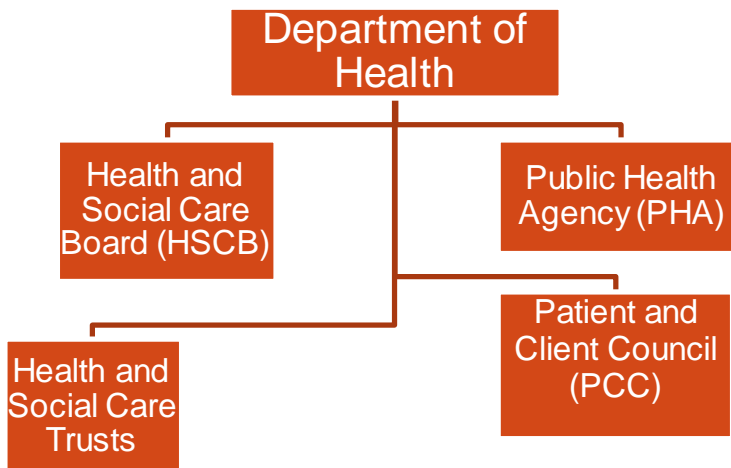
- Adherence to meeting etiquette, showing respect and consideration for other members' values, beliefs and points of view.
- Ensure openness and transparency in particular any conflict of interest.
- Contribution is genuinely representative of the wider community of Adults with Learning Disability and their Carers.
- Observance to confidential information that has not been made public and/or is provided in confidence.

A full copy of the Code of Conduct/Terms of Reference is included in Appendix 2.

Health & Social Care Structure

HSC TRUSTS

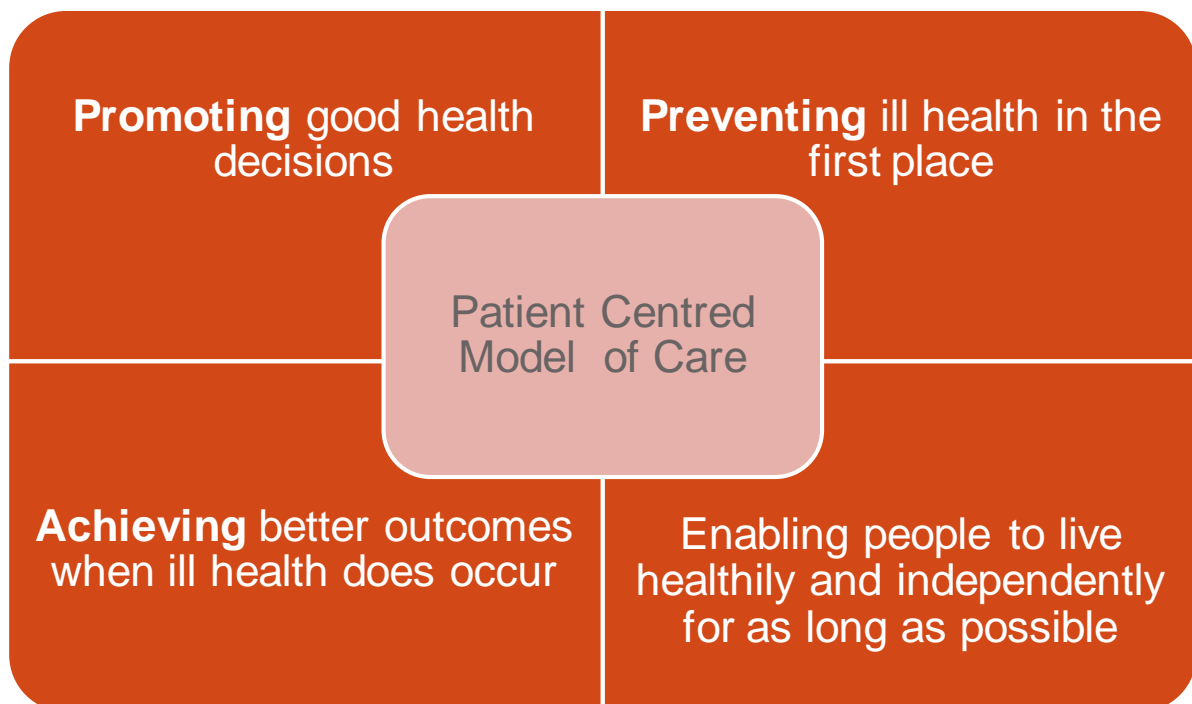
Belfast Trust
 Southern Trust
 South Eastern Trust
 Western Trust
 Northern Trust
 Northern Ireland Ambulance Service



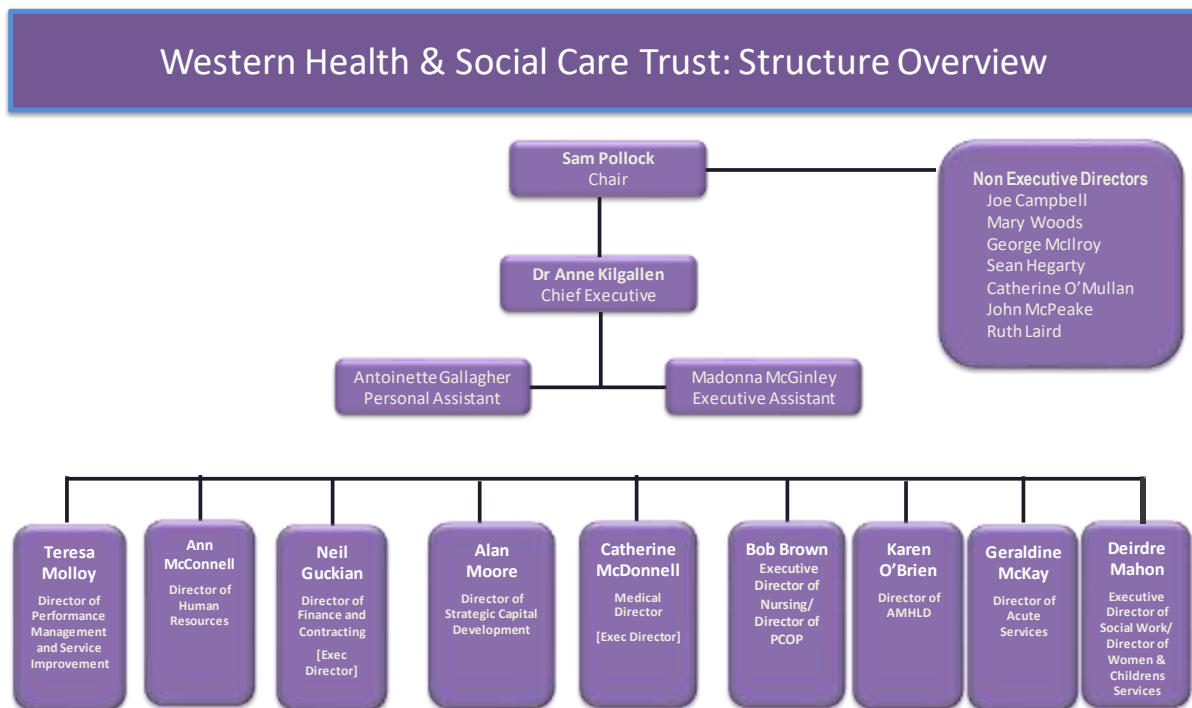
- Organisation (BSO)
- Regulation and Quality Improvement Authority (RQIA)
- NI Guardian Ad Litem Agency (NIGALA)
- NI Blood Transfusion Service (NIBTS)
- NI Social Care Council (NISCC)
- NI Practice and Education Council for Nursing and Midwifery (NIPEC)
- NI Medical and Dental Training Agency (NIMDTA)

What is Health and Social care?

The Health and Social Care Trusts provide integrated health and social carer services. Their function is to manage and administer hospitals, health centres, residential, day centres and other health and social care facilities and provide a wide range of health and social care services in the community.



WHST Structure



Services Delivered in the Western Health & Social Care Trust

- Employs approximately 12,500 staff and spends **£704** million annually in the delivery of health and social care services.
- Services:
 - Primary Care and Older Peoples (including Nursing and AHP services)
 - Women and Children's (includes Social Work services)
 - Adult Mental and Health and Disability Services
 - Acute Services
- 50 Independent GP practices
- GP out of Hours (Western Urgent Care)
- 80 community pharmacies
- Ambulance Service (emergency and non-emergency)
- Nursing Homes
- Social Care (including domiciliary care)

Learning Disability Structure



Adult Learning Disability Services

The Adult Learning Disability Division of the Western Trust provides a range of services across the Londonderry, Limavady, Strabane, Omagh and Fermanagh areas. These services are delivered directly by the Trust or on a contractual basis with the independent sector.

Services include the following:

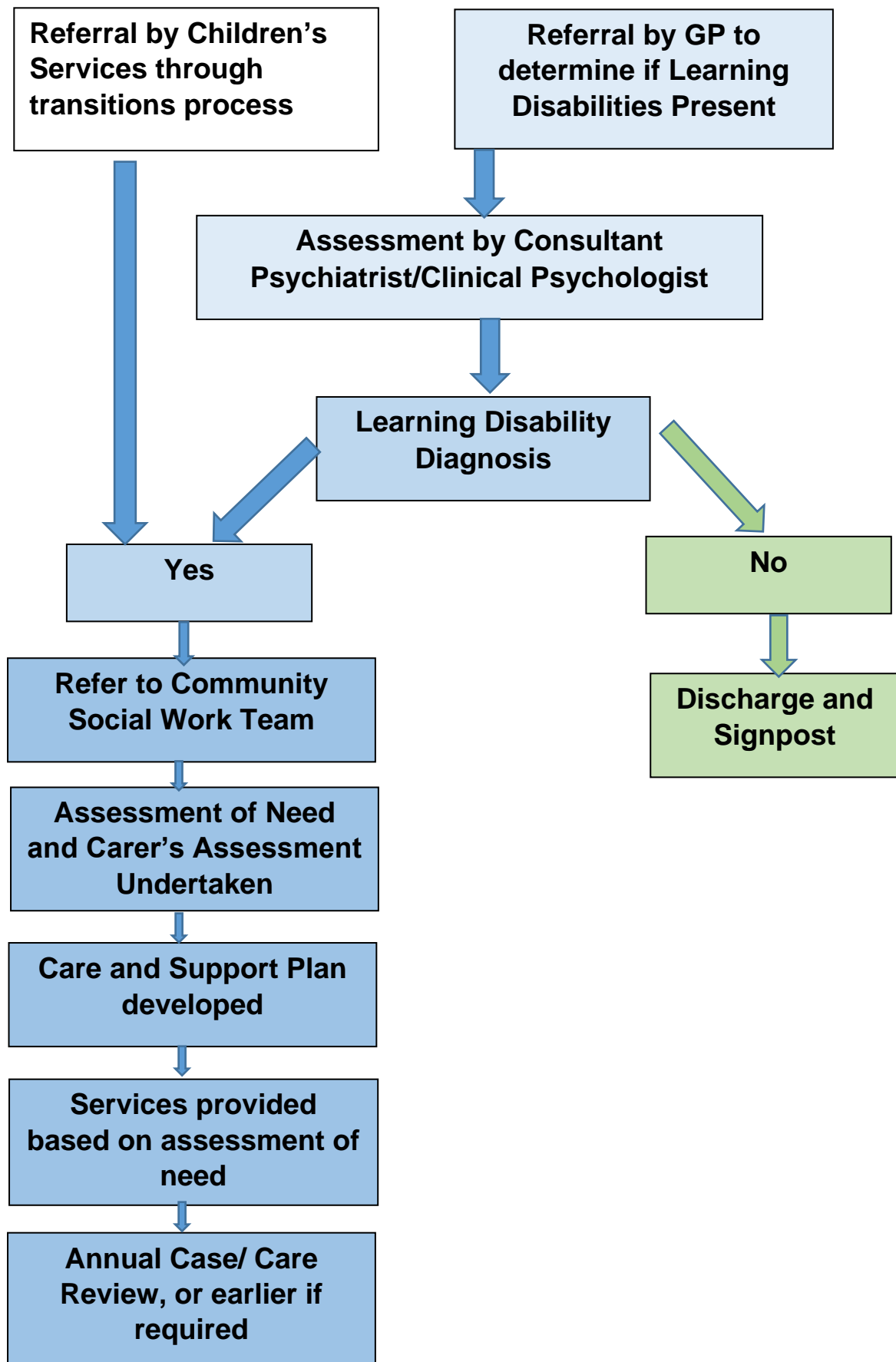
- Day Care and Day Opportunities
- Hospital Assessment and Treatment
- Short Breaks (Residential and other forms of short breaks)
- Domiciliary Care
- Self-Directed Support/ Direct Payments
- Shared Lives Adult Placement Scheme (Long and Short Term)
- Psychiatry, Psychology and Behaviour support
- Community Social Work Teams and Family Support
- Transitions
- Accommodation Provision (Residential, Supported Living, Nursing)
- Allied Health Professionals
- Community Learning Disability and specialist Nursing
- Community Forensic services

At March 2021, there are approximately 2015 adults (aged 18+) with a learning disability who are registered with the Western Health and Social Care Trust. This number includes the Northern sector, Southern sector and Out of Trust area figures. Of this number 1519 are currently open cases. This information is held on the Master Patient Index, a database managed by Trust staff and governed by Data Protection legislation.

40 people are cared for Out of the Trust Area

LEARNING DISABILTY MASTER PATIENT INDEX 31.03.2021						
AGE /LDC	DERRY	LIMAVADY	STRABANE	OMAGH	FERMANAGH	TOTAL
18-64	650	148	159	434	393	1784
65+	68	15	20	41	47	191
TOTAL	718	163	179	475	440	1,975

Pathway to Adult Learning Disability Services

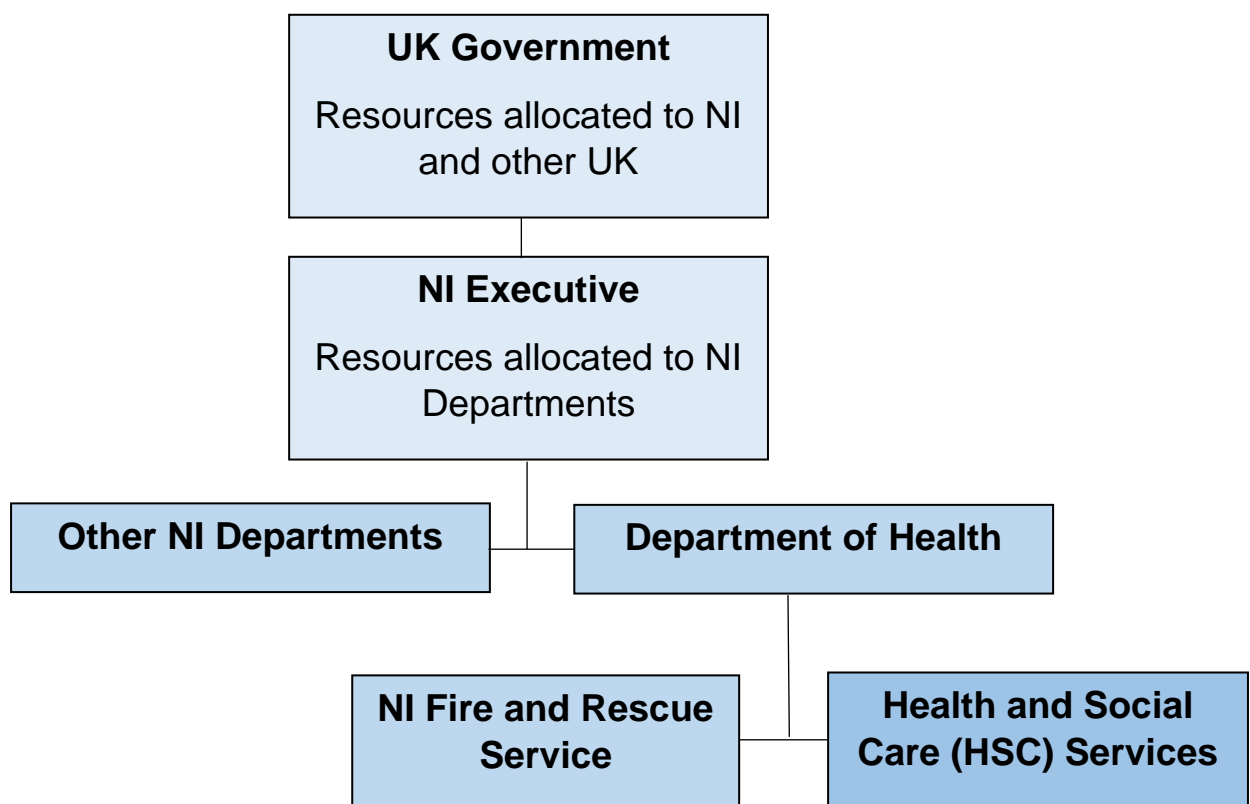


NI Executive Revenue Budget

The main source of funding for public expenditure in Northern Ireland is a block grant from HM Treasury derived through proceeds of general taxation. Changes in level of funding are determined through application of the Barnett Formula.

Further information available on Barnett formula at:

http://en.wikipedia.org/wiki/Barnett_formula and www.niassembly.gov.uk/finance/2007mandate/research/090320c.htm.

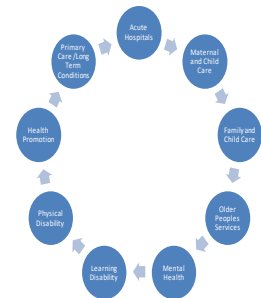


Northern Ireland Capitation Formula

The Northern Ireland Capitation Formula is currently used to establish the fairest way to divide resources for hospital, community and personal social services in Northern Ireland between the five Local Commissioning Groups/Health and Social Care Trusts.

How the Capitation Formula is applied:

- ▶ There is a separate formula for each of the nine Programmes of Care PoCs with two for Acute (Non-elective and Elective) - see diagram opposite noting the nine PoCs.
- ▶ The formulas are combined to give a Weighted Capitation share covering all services;
- ▶ Population size is the most important element;
- ▶ Adjustments are made for Age/gender ;
- ▶ Additional needs adjustment;
- ▶ Other adjustments;
 - Rural costs
 - Economies of scale.










Adult Learning Disability Budget

The recurring budget for Adult Learning Disability at April 2021 is £53.6m as outlined in the table below.

TOTAL BUDGET	£53.6m
Pay Budget (staff)	£23.6m
Non Pay Budget (Goods & Services including Contracts)	£30.0m

The table below provides an overview of the annual budget per service area.

Service Area		Annual Budget (£'m)
Residential, Nursing & Supported Living Care		£28.3m
Day Services (incl Day opps)		£8.5m
Domiciliary Care/Self Directed Support		£5.2m
Community Social Work & Nursing Teams		£5.7m
Short Breaks Service		£1.6m
Hospital Services		£2.2m
Psychological Services		£1.3m
Other Services		£0.8m
TOTAL		£53.6m

Allocations from Health and Social Care Board – 2020/21

During 2020/21, the Health and Social Care Board confirmed funding for services totalling £0.976m (Full Year Effect – FYE) for transitions/high cost/complex cases, community infrastructure for crisis/out of hours including demography.

Learning Disability Underfunding

The Western Trust continues to address the LD underfunding.

Glossary of Terms

A Service User

A person who received services from a Health or Social Care provider

A Carer

A person who provides regular and substantial unpaid care to a partner, family member (child or parent), friend or neighbor and who is entitled to a Carer's Assessment by their local HSC Trust.

Community Sector

Smaller more informal organisations and self-help initiatives at community level, for example a local Community Association. This sector may provide services to local communities on behalf of the local HSC Trust.

Voluntary Sector

Organisations that are independent of government and local councils. Their jobs is to benefit the people they serve and are often referred to as not for profit or the third sector. Both paid workers and volunteers will undertake work in this sector. Social Care services are often provided by local voluntary organisations, by arrangement with the local HSC Trust or with individuals.

The voluntary sector also includes "user led organisations", which means they are run by and for the people the organisation is designed to benefit.

Department of Health

The Department of Health is one of 9 Northern Ireland Government Departments.

Health and Social Care

Health and Social Care in Northern Ireland are provided as an integrated service. There are a number of organisations who work together to plan, deliver and monitor Health and Social Care across Northern Ireland.

Health and Social Care Board (HSCB)

The Health and Social Care Board is responsible for commissioning services, resource management and performance management and service improvement. It works to identify and meet the needs of the Northern Ireland population through its five Local Commissioning Groups, which cover the same geographical areas as the HSC Trusts.

Local Commissioning Groups (LCGs)

Committees of the Health and Social Care Board that are comprised of GPs, dentists and social workers and community and elected representatives. Their role is to commission health and social care services at a local level.

Health and Social Care Trusts

There are a total of 6 Health and Social Care (HSC) Trusts in Northern Ireland.

5 HSC Trusts provide integrated health and social care services across Northern Ireland: Belfast HSC Trust, South Eastern HSC Trust, Western HSC Trust, Southern HSC Trust and Northern HSC Trust. HSC Trusts manage and administer hospitals, health centres, residential homes, day centres and other health and social care facilities and they provide a wide range of health and social care services to the community.

The sixth Trust is the Northern Ireland Ambulance Service, which operates a single Northern Ireland wide service to people in need and aims to improve the health and well-being of the community through the delivery of high quality ambulance services.

- www.belfasttrust.hscni.net
- www.southerntrust.hscni.net
- www.setrust.hscni.net
- www.westerntrust.hscni.net
- www.northerntrust.hscni.net
- www.niamb.co.uk

Public Health Agency (PHA)

The Public Health Agency (PHA) has the key functions of improving health and wellbeing and health protection. It also provides professional input to the commissioning process. The PHA is jointly responsible (with the HSCB) for the development of a fully integrated commissioning plan

for health and social care in Northern Ireland. The PHA works in partnership with local government, key organisations and other sectors to improve health and wellbeing and reduce health inequalities.

Patient and Client Council (PCC)

The Patient and Client Council (PCC) is a regional body with local offices covering the geographical areas of the five integrated Health and Care Trusts. The overarching objective of the PCC is to provide a powerful, independent voice for patients, clients, carers, and communities on health and social care issues.

The Business Services Organisation

The Business Services Organisation (BSO) is responsible for the provision of a range of business support and specialist professional services to the whole of the Health and Social Care sector including, HR, finance, legal services, procurement, ICT and other services. This will be taken forward in a phased approach.

Other organisations

Regulation and Quality Improvement Authority (RQIA)

The Regulation and Quality Improvement Authority (RQIA) is the independent health and social care regulatory body for Northern Ireland. In its work, RQIA encourages continuous improvement in the quality of these services through a programme of inspections and reviews.

- www.rqia.org.uk

NI Guardian Ad Litem Agency (NIGALA)

The functions of the Northern Ireland Guardian Ad Litem Agency (NIGALA) are:

- to safeguard and promote the interests of children by providing independent social work investigation and advice in specified proceedings under the Children (Northern Ireland) Order 1995 and in Adoption (Northern Ireland) Order 1987; and
- to provide effective representation of children's views and interests.
- www.nigala.hscni.net

NI Blood Transfusion Service (NIBTS)

The NI Blood Transfusion Service (NIBTS) exists to supply the needs of all hospitals and clinical units in the province with safe and effective blood and blood products and other related services. The discharge of this function includes a commitment to the care and welfare of voluntary donors.

- www.nibts.org

NI Social Care Council (NISCC)

Northern Ireland Social Care Council (NISCC) is the regulatory body for the social care workforce in Northern Ireland. Its aim is to increase the protection of those using social care services, their carers and the public.

- www.niscc.info

NI Practice and Education Council for Nursing and Midwifery (NIPEC)

NIPEC aims to improve the quality of health and social care by supporting the practice, education and professional development of nurses and midwives.

- www.nipec.hscni.net

NI Medical and Dental Training Agency (NIMDTA)

The Northern Ireland Medical and Dental Training Agency (NIMDTA) is responsible for funding, managing and supporting postgraduate medical and dental education within the Northern Ireland Deanery. It provides a wide range of functions in the organisation, development and quality assurance of Postgraduate Medical and Dental Education and in the delivery and quality assurance of Continuing Professional Development for general, medical and dental practitioners.

Integrated Care partnerships (ICPs)

Collaborative networks of health and social care professionals, community and voluntary sector, users and carers, working as part of a multidisciplinary team to provide and support a more complete range of services.

Primary Care

The care services that people receive while living at home in the community from people such as their GP, district nurse, physiotherapist or social worker.

Programmes of Care

For the purposes of resource allocation and activity, the health and social services in Northern Ireland are subdivided into Programmes of Care (PoC). There are nine of these in all:

- PoC1** Acute Services
- PoC2** Maternity and Child Health
- PoC3** Family and Childcare
- PoC4** Elderly Care
- PoC5** Mental Health Services
- PoC6** Learning Disability Services
- PoC7** Physical and Sensory Disability
- PoC8** Health Promotion and Disease Prevention
- PoC9** Primary Health and Adult Community

Elective Care

Care that is planned, for example, when a patient has an appointment for an operation or procedure or just to see a specialist as an outpatient.

Unscheduled Care

Any unplanned contact with the health and social services such as urgent care and emergency care

Involving You, Improving Lives

Adult Learning Disability Strategic Involvement Group (SIG)

Code of Conduct/ Terms of Reference

The purpose of this Code of Conduct and Terms of Reference is to ensure clarity and openness of process and procedure to safeguard the integrity and reputation of the work of the Strategic Involvement Group and its members.

1. This strategic group is a partnership of Adults with a Learning disability, their representatives and Carers, Senior WHSCT staff working in Adult Learning Disability and Personal Public Involvement Staff who provide leadership, advice and guidance in the specialism of Personal, Public Involvement.
It is agreed that the knowledge, experience and ability to harness the views of many service users and carers is essential and will positively contribute to the work of this group.
2. The Strategic Involvement Group will debate and address the issues brought to them by the Local Involvement Groups (LIGs).
3. The Strategic Involvement Group will ensure that issues and ideas generated by the Local Involvement Groups (LIGs) are fully debated and considered in the planning, development and commissioning of services.
4. The Strategic Involvement Group will ensure an open and two way dialogue with each Local Involvement Group (LIG) to ensure each group is kept abreast of developments which will impact Learning Disability Services, service users and carers.

5. The Strategic Involvement Group will oversee the development of the Local Involvement Groups (LIGs) and will be accountable to ensure the agreed involvement process.
6. The Strategic Involvement Group will be informed by the Local Involvement Groups, (LIGs) as well as policy and strategic directives and taking this into account will discuss and make decisions, such as;
 - What and how, aspects of services may need to change
 - What service users and carers want from services and staff and how to deliver this
 - How to make the best use of resources
 - How to improve the quality and safety of services for service users and carers
7. Members will adhere to meeting etiquette, showing respect and consideration for other members' values, beliefs and points of view.
8. To ensure openness and transparency of this group, members of the group have been asked to declare any conflict of Interest. In the case of Learning Disability Service Providers, due, recordable consideration must be given by each group to the management of both conflict of interest and equality of representation.
9. The group consists of original members, including Local Involvement Group (LIG) reps, as nominated by fellow Local Involvement Group (LIG) members. Additional members may be invited to the SIG meetings with prior group agreement, as co-opted members to inform discussion around particular areas. These can be representatives from Public, Private, Community and Voluntary sector organisations.

10. In the event of a member/s leaving which would leave an area or community of interest unrepresented around the table, the group can agree to target new members.
11. Members must ensure that their contribution is genuinely representative of their wider community of Adults with Learning Disability and their Carers.
12. The group should nominate two Co-chairs, the AD WHSCT Learning Disability Services and one Service User/ Carer. Both will ensure that all business is carried out in a structured manner and that all views are heard. Every member should be given the opportunity to express a view and have it considered.
13. All members will participate in an honest and open manner. To achieve openness, it is important for members to feel able to share information and express their opinions and concerns freely in meetings.
14. Members will be expected to be responsible when sharing the groups' discussions to ensure that their feedback is above-board, accurate and fair to all those present.
15. Members will bring any criticisms or concerns they might have about the value, role and functioning of the Strategic Involvement Group to the meeting for discussion, to provide the Strategic Involvement Group with an opportunity to address them. These items should be shared with the co-chairs prior to the meeting to be added to the agenda.
16. Members will keep confidential any information that has not yet been made public and/or is provided in confidence. Members shall not use confidential information for their individual personal advantage or for anyone known to them or to disadvantage or discredit the Strategic Involvement Group or anyone else.
17. All members will disclose any potential conflict of interest on joining the Strategic Involvement Group. If at a meeting a particular issue arises that could

give rise to a potential conflict of interest then the member should again disclose their interest to the co-chairs and, if appropriate, withdraw from any further discussion or consideration of the matter.

- 18. All members will give timely apologies to staff at Lakeview, in advance of the meeting. In the event that apologies are not given, they will not be noted.
- 19. Absence without apologies for 3 consecutive meetings will be regarded as withdrawal.
- 20. Members who decide to resign from the group must do so formally through the Co-chairs, in writing.
- 21. Minutes, papers and notes of discussions arising from the meetings will only be shared with active members of the group who have signed the Code of Conduct.
- 22. The TOR and Code of Conduct will be reviewed annually
- 23. All members will sign this agreement confirming that they will comply with the conditions set out in the Code of Conduct for the Strategic Involvement Group.

Signature

Date.....

Statement on Reimbursement

Reimbursement for miles travelled is based on current Public Transport Rate or where alternative travel arrangements has been made such as bus fare or taxi fare. Evidence i.e. a valid ticket must be shown as proof of purchase. All reimbursements must be authorised by chair of meeting or co-authorised where applicable and forwarded to ManualPayments.whsct@hscni.net for processing and payment

