


Agenda Item 6

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of Derek Ward, Director of Public Health

Report to	Health Scrutiny Committee for Lincolnshire
Date:	19 April 2023
Subject:	Joint Engagement Approach – Joint Health and Wellbeing Strategy and Integrated Care Strategy

Summary:

This report sets out the joint engagement approach, agreed by the Health and Wellbeing Board (HWB) and Integrated Care Partnership (ICP) in March 2023, to inform the review of the Joint Health and Wellbeing Strategy and the next iteration of the Integrated Care Strategy.

Actions Required:

The Committee is asked to consider the joint engagement approach set out in the report, including the prioritisation processes detailed in Appendix A.

1. Background

1.1 Context

As previously reported to the Committee, because the Lincolnshire Integrated Care System (ICS) area is coterminous with the HWB, the local ambition is to align, as far as possible, the Integrated Care Strategy with the Joint Health and Wellbeing Strategy (JHWS) for Lincolnshire. The agreed approach is to connect the strategies, avoiding duplication, or gaps, between the two. Each will maintain their own identity with the JHWS focusing on “what” the identified needs are; and the integrated care strategy setting “how” we collectively prioritise, and address identified needs, as a system.

1.2 Statutory Guidance

Statutory guidance on the preparation of the [Joint Health and Wellbeing Strategy](#) and the [Integrated Care Strategy](#) requires the Health and Wellbeing Board and Integrated Care Partnership to take account of the evidence in the Joint Strategic Needs Assessment (JSNA). Lincolnshire's new JSNA is now live on the [Lincolnshire Health Intelligence Hub \(LHIH\)](#) following approval at the HWB on 28 March 2023. As a result, both the JHWS and Integrated Care Strategy need to be reviewed and updated to take account of the new JSNA. Due to the alignment of the two strategies, the HWB and ICP have agreed a joint engagement approach.

In addition, the ICP guidance acknowledged that 2022/23 was a transition year, so the level of engagement in the preparation of the interim integrated care strategy was limited. However, there is an expectation that engagement will increase as the ICP matures and the integrated care strategy develops.

In addition to engaging with local authorities and the Integrated Care Board, guidance includes an extensive list of organisations and stakeholders who the HWB and ICP could consider engaging with. However, it suggests the following people and organisations should be involved in the production of the JHWS and integrated care strategy:

Healthwatch Lincolnshire as a member of both the HWB and ICP, Healthwatch Lincolnshire can support the engagement work by sharing existing insight about people's experience of health and care services; undertaking additional research and engagement to gather views and experiences of local people, including those from marginalised groups; and helping to collaborate with people with lived experience.

Providers of health and social care services, including primary care, community health services, secondary care, providers of adult and children's social care and public health services, all have important insights into how the needs of local people can be met, and can draw on their links with people who use health and social care services. Input should come from a broad spectrum of health and care providers; however, communications and involvement should be appropriate and make clear the value and purpose of their involvement, so it is relevant and meaningful.

Voluntary, Community and Social Enterprise (VCSE) Sector covers a wide variety of organisations with an equally wide range of experience and insights. VCSE organisations fulfil a variety of roles including, but not limited to, organisations led by people with lived experience, service providers, advice, and advocacy services.

Wider organisations that impact on people's health and wellbeing but are not health and care services. For example, employment support, housing and homelessness services and leisure services.

Other partnerships and forums operating at a system level. Where possible these should be engaged with rather than duplicating work.

People and Communities – ICPs should draw upon local experience, for example; district councils, providers, VCSE organisations, and Healthwatch. This will ensure inclusion of residents with lived experiences, seldom heard voices, the homeless or at the risk of becoming homeless, people who face additional challenges such as severe mental illness, learning disabilities or digital exclusion, and people providing unpaid care.

1.3 Purpose and Objectives

To reflect the guidance detailed in section 1.2, the primary focus of the joint engagement approach will be to engage key stakeholders, partners, and the voluntary and community sector to gather their views and perspectives on the health and wellbeing priorities in Lincolnshire. The feedback will inform the JHWS review and the next integrated care strategy iteration.

The objectives are:

- To use the evidence from the new Joint Strategic Needs Assessment (JSNA) to:
 - reaffirm the current priorities in the JHWS
 - identify any further areas of concern and collectively consider alterations to the priorities in JHWS
- To gather views on how partners in the health and care system can increase collaboration to address JHWS priorities and meet the ambition of the integrated care strategy.

1.4 Engagement with the Public

Meaningful public engagement needs to be focused on matters that have not been decided and could therefore still be influenced or changed by public feedback as this ensures communities feel their voice is heard, is listened to, and valued. There is little point in undertaking community engagement exercises if there is little to influence or change as this potentially raises expectations that are unlikely to then be met.

Based on the advice from the Community Engagement Team and taking account of the statutory guidance, the process outlined in section 1.5 takes a phased approach beginning with key stakeholders and partners. Based on the outcome of phase 1, the HWB and ICP will be asked in June to decide if a second phase of engagement with the public is then required.

The Community Engagement Team have also advised an Equality Impact Assessment (EIA) will only be required if a change requiring public and community engagement is proposed. Therefore, the requirement to develop an EIA will be kept under review and depend on the outcome of phase 1 engagement.

1.5 Proposed process and timeframe

The following table outlines the phases and activities planned for 2023.

Timeframe	Activity
Phase 1 – Prioritisation and engagement with partners and stakeholders	
28 March 2023	<ul style="list-style-type: none"> • JSNA signed off by HWB – the online resource now live • Agreement of the overall engagement approach for the JHWS / ICP Strategy at the HWB / ICP meeting - this will ensure transparency, as well as raising awareness amongst key partners on the HWB / ICP
Early April 2023	Desktop exercise to map JSNA using the matrix / approach detailed in Appendix A to feed into the prioritisation workshop(s)
19 April 2023	Health Scrutiny Committee – present report on engagement approach during 2023
27 April 2023	Prioritisation Workshop with representatives from the organisations on the HWB/ICP to shortlist the JNSA – using outcomes from the desktop mapping exercise
April – July 2023	Engagement with key stakeholders and partners – including Healthwatch, districts, voluntary & community organisations, JHWS priority delivery groups. Wherever possible, existing partnership meetings and engagement opportunities to be used
June 2023	<p>Report to HWB/ICP – update report on the outcome of the prioritisation workshops and feedback to date from partners and stakeholders</p> <p>Based on emerging outcomes from Phase 1, HWB/ICP to decide either:</p> <ol style="list-style-type: none"> a) public engagement (Phase 2) is required – <i>what things can the public influence and/or change?</i> Or b) communication and awareness raising exercise if required
Phase 2 – Public Engagement and/or Communication – Full detail to be confirmed	
June – Sept 2023	Engagement/communication exercise with the public
June – Sept 2023	Online survey
Phase 3 – Produce final documents and sign off	
September 2023	HWB / ICP – update report on activities/feedback to date
Sept - Oct 2023 (complete earlier if no phase 2)	Analyse feedback & produce engagement summary documentation
Oct 2023	HWB/ ICP workshop – to finalise the aims and priorities for JHWS and ICP Strategy
Oct / Nov 2023	Report to Health Scrutiny Committee – to ask the committee to comment on the draft strategies prior to final approval in December
Oct / Nov 2023	Report to LCC and ICB governance
Dec 2023	HWB / ICP sign off JHWS & ICP Strategy

2. Consultation

Not applicable

3. Conclusion

The engagement approach outlined in this report will inform the review of the Joint Health and Wellbeing Strategy and the next iteration of the Integrated Care Strategy. The Committee is asked to note and comment.

4. Appendices

These are listed below and attached at the back of the report	
Appendix A	Methodology for identifying priorities from the new Joint Strategic Needs Assessment to inform the review of the Joint Health and Wellbeing Strategy

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Alison Christie, Programme Manager, who can be contacted on alison.christie@lincolnshire.gov.uk

Methodology for identifying priorities from the new Joint Strategic Needs Assessment to inform the review of the Joint Health and Wellbeing Strategy

A simplified evidence-based methodology using the matrix below to classify health and wellbeing issues according to their potential impact on the Lincolnshire population (defined by the prevalence or incidence) and the recent direction of trends (improving or worsening).

HIGH BURDEN	<p>Issues that have a large impact and trends indicate the impact on the Lincolnshire population is improving</p>	<p>Issues that have a large impact and trends indicate the impact on the Lincolnshire population is worsening</p>
LOW BURDEN	<p>Issues that have a relatively low impact and trends indicate the impact is improving</p>	<p>Issues that have a relatively low impact, but trends indicate the impact is worsening</p>
	IMPROVING	WORSENING

The Public Health Intelligence Team will work with the HWB Programme Manager to complete a desktop JSNA prioritisation exercise using the grid above.

The stakeholder workshops will focus on those JSNA factsheets plotted in the red and amber quadrants to produce a shortlist of JSNA factsheets that will form the basis of the engagement with wider partners.