

# Improving services together

Involvement and Engagement Strategy – 2015-2017



# Introduction

Norfolk and Suffolk NHS Foundation Trust (NSFT) provides services in mental health, substance misuse and learning disability across Norfolk and Suffolk and ensures that service users and carers are involved as equal partners in the decisions that will directly affect their lives.

We will also ensure that service users and carers work with us to co-produce, influence and shape our organisation, at a strategic, operational and individual level.

This strategy recognises that equality issues of: religion, race, disability, sexual orientation, age, ethnicity and culture must be integral to service user and carer involvement. All service users and carers will be treated with respect.

## Purpose of the strategy

The purpose of developing this strategy is to ensure that all trust services benefit from the experience of the people who use our services and their carers. The strategy is designed to enable all groups and networks to become engaged with our trust and support us in our drive to become more inclusive and responsive to the needs of the individuals who use our services and to improve the overall service user and carer experience.

## Acknowledgements

This trust-wide strategy has been developed with input from people who use services and carers from our trust-wide locality forums, service user and carer Governors, trust staff, partner organisations, Chair and Director of Nursing, Quality and Patient Safety.

## Definitions

For the purpose of this strategy, a **service user** is defined as anyone who is currently using or has recent experience of using any service provided by NSFT.

A **carer** is defined as a family member or close friend identified as providing a caring role to anyone using the services of NSFT.

## What is coproduction

Coproduction is people, carers and professionals working together as equal partners to: Design, develop, commission, deliver and review services, information and advice.

## Statement from the Chair – Gary Page

On behalf of the Board of Directors, I welcome this new Service User and Carer Involvement Strategy – written and developed by you, as it should be!



The Board is committed to ensuring that service users and carers are central to our decision making processes. They are the reason we are all here – to provide safe, quality mental health services for some of the most vulnerable people in Norfolk and Suffolk. We are committed to the principle of co-production with our service users and carers, which means they must be involved in a meaningful way in everything we do.

It is essential that we involve service users and carers in how we develop and run the services that we provide. That means not just paying lip service to their involvement but fundamentally embedding it in all of our internal workings. This is not only because, as the users of our services, they have a right to be involved, but also because we recognise that they have a unique and valuable expertise because of their lived experience.

Our strategy must recognise that all service users and carers irrespective of religion, race, disability, sexuality, age and culture will be treated with respect and dignity and valued as equal citizens.

The trust's objectives include a very clear statement about our aim to "improve patient experience, satisfaction and engagement". Our commitment to Implementing Recovery Through Organisational Change (ImROC) and the Triangle of Care are key components of that.

We want to ensure meaningful service user and carer involvement at a local level throughout Norfolk and Suffolk and, via the Service User and Carer Trust Partnership, provide a mechanism through which service user and carer issues that cannot be resolved locally can be escalated to the Board of Directors.

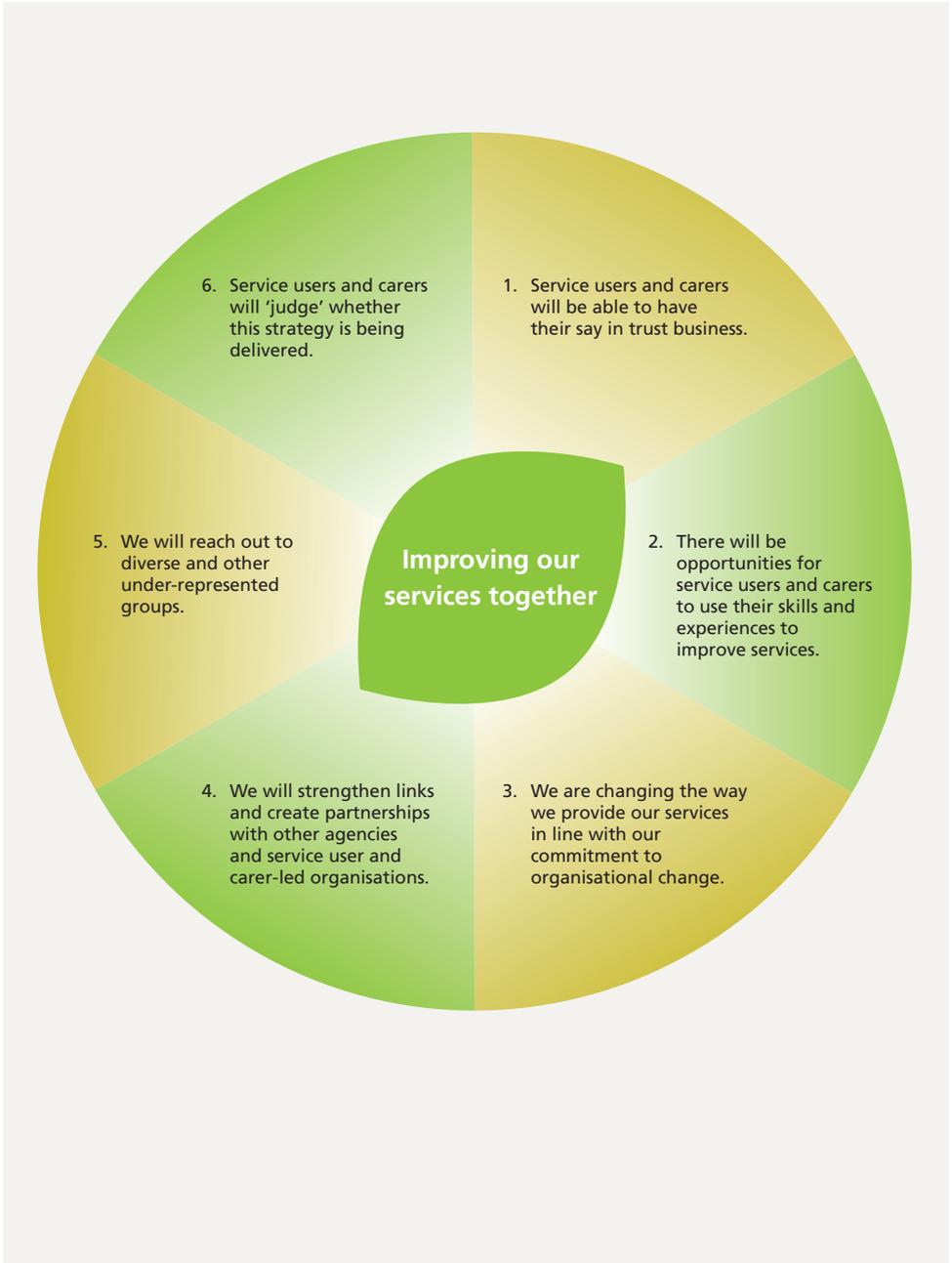
While our commitment is clear, making it a reality is much more difficult. We will monitor the implementation of this Involvement and Engagement Strategy in order to review how well we are doing. This involves celebrating our successes but also recognising where we haven't yet got it quite right.

As Chair of the Service User and Carer Trust Partnership, I am making a personal commitment to do everything I can to ensure we deliver as a trust on this strategy. Our service users and carers will be the judge of that.

**Gary Page**

Chair

Norfolk and Suffolk NHS Foundation Trust



## Commitment 1

Service users and carers will be able to have their say in Trust business.

### What you will see at the Trust Board

1. Service user and carer experience stories shared with the Board.
2. Service users and carers involved in review of the complaints process.
3. We will increase the opportunity for service users and carers to be involved in the Trust audit process.
4. Our trust will ensure our payments policy provides reimbursement to service users and carers involved in Trust activities.
5. Service users and carers will work together with the Board to design and develop Trust vision and values.

### What you will see in services and teams

1. Service users and carers based in localities to support and increase involvement and participation.
2. Identified carers' leads in service lines and localities across the trust to support the Triangle of Care implementation.
3. Locality Forums, supported by staff, with clear plans for increased two-way engagement and communication.
4. Service users and carers attending locality business and governance meetings.
5. Service user and carer stories at locality meetings.

### What YOU will see

1. 'Nothing about us, without us' approach to the way we work with you.
2. Staff will discuss what support you might need to develop an Advanced Statement. These tell us how to provide support if you suffer loss of capacity.
3. Service users and carers to be involved in training for staff on the Mental Capacity Act and other mental health legislation.
4. You will receive information about, and links to, advocacy services.
5. You will receive information on how to have your say in all aspects of your direct care. From assessment to discharge from services.
6. Your supporters / carers will be respected and included in the development of your recovery plan.
7. Inpatient ward-based meetings will be in place to hear your concerns.

## Commitment 2

There will be opportunities for service users and carers to use their skills and experiences to improve services.

What you will see at the Trust Board	What you will see in services and teams	What YOU will see
<ol style="list-style-type: none"> <li>1. Elected service user and carer Trust Governors.</li> <li>2. Service users and carers will be represented in our trust service governance structure.</li> <li>3. A register of individuals who have an interest, skills and experience to support our trust in initiatives or service improvements.</li> <li>4. Service users and carers will be involved in and undertake research.</li> <li>5. Service users and carers to undertake inspections (such as PLACE) to ensure that our environment and services are the best they can be.</li> <li>6. Training and support needs identified and addressed to increase uptake of opportunities by service users and carers.</li> <li>7. Formal consultation will continue, as is our legal duty.</li> <li>8. Our trust will work together with commissioners to support service users and carers to be involved in commissioning.</li> </ol>	<ol style="list-style-type: none"> <li>1. Service / team managers, in collaboration with identified service users and carers, will provide role descriptions for involvement opportunities that clearly set out skills, knowledge and experience.</li> <li>2. Locality forums will work with locality teams to develop a register of involvement and engagement activities that are in place.</li> <li>3. Access to Recovery College courses to improve confidence and gain new skills.</li> <li>4. Teams will ensure that service users and carers are able to participate in the staff recruitment process.</li> </ol>	<ol style="list-style-type: none"> <li>1. Involvement in 'care planning' process, ensuring your views, experiences and opinions are clearly stated and documented throughout your time in the service.</li> <li>2. Working together with staff to develop a Wellness and Recovery plan.</li> <li>3. An opportunity to produce, develop and deliver training with NSFT staff in the Recovery College.</li> <li>4. An opportunity to take part in service user and carer questionnaires and surveys to highlight experience.</li> <li>5. Staff will provide information about other agencies that will support your needs, and increase your inclusion and engagement with mainstream services in your community.</li> </ol>

### Commitment 3

We are changing the way we provide our services in line with our commitment to organisational change.

What you will see at the Trust Board	What you will see in services and teams	What YOU will see
<ol style="list-style-type: none"><li>1. Sign up and commit to the principles of the Triangle of Care.</li><li>2. Implementing the ImROC 10 challenges, linked to organisational change, across the Trust.</li></ol>	<ol style="list-style-type: none"><li>1. Employment of Peer Support Workers across service lines.</li><li>2. Locality management will receive quarterly reports on Triangle of Care, and Recovery College performance for their area.</li><li>3. 'You said, we did' report on service user / carer-led service improvement suggestions.</li></ol>	<ol style="list-style-type: none"><li>1. Carers needs are addressed through the Care Act and Triangle of Care self - assessments.</li><li>2. Carers will have access to training to support them in their caring role.</li><li>3. Services will work together with service users and carers, adopting the principles of the Triangle of Care throughout an episode of care.</li><li>4. Carers will be routinely informed of their right to a carer assessment and support plan.</li><li>5. On admission into services, you will be informed of how you and your carer / supporters can be active participants in the care and treatment process.</li><li>6. As a partner in the process, you will be invited to produce a plan of care with staff, valuing your experience.</li></ol>

## Commitment 4

We will strengthen links and create partnerships with other agencies and service user and carer-led organisations.

### What you will see at the Trust Board

1. Work with other organisations to identify involvement opportunities.
3. Develop relationships and partnerships with other stakeholder groups to increase diversity of the user / carer voice in all trust initiatives, and improvement plans.

### What you will see in services and teams

1. Service user and carer locality forums to include partner organisations and other stakeholders.
2. Specific task and finish groups set up to increase better partnership working.
3. Teams linking with partner agencies to provide support in the care pathway.

### What YOU will see

1. Other mental health agencies and mainstream services involved in supporting the individual's recovery journey, including housing, employment and social inclusion.
2. Opportunities to work alongside other agencies to co-produce training.
3. Promote opportunities to become members of other groups, agencies and partnership forums.



## Commitment 5

### Reach out to diverse and other under-represented groups.

#### What you will see at the Trust Board

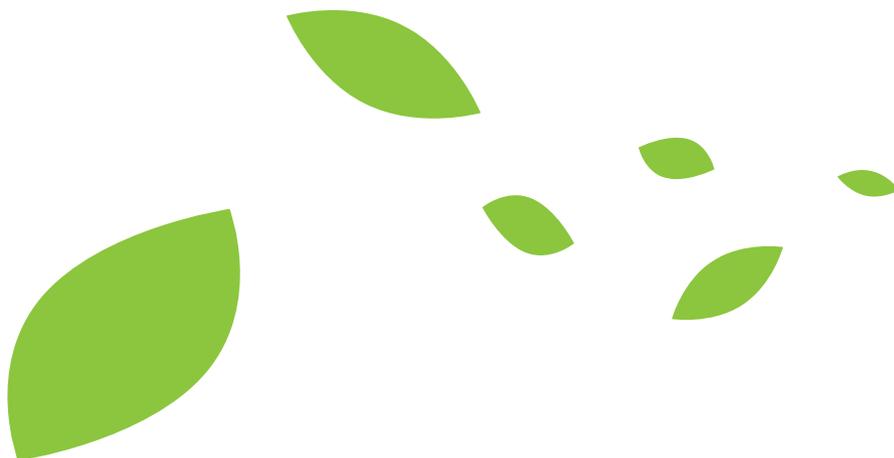
1. Service users and carers involved with reviewing and evaluating the trust's Equality Objectives to ensure delivery of equality standards.

#### What you will see in services and teams

1. Services lines and localities to ensure that all information provided is accessible.
2. Work in partnership with equality champions to reach out and engage with underrepresented groups in localities.

#### What YOU will see

1. Care is provided in a person-centred way according to your needs and wishes.
2. Provide links to other appropriate community groups and support organisations.
3. Your care team will work with you to ensure that all barriers to accessing the service and having your voice heard are identified and addressed.



## Commitment 6

Service users and carers will 'judge' whether this strategy is being delivered.

### What you will see at the Trust Board

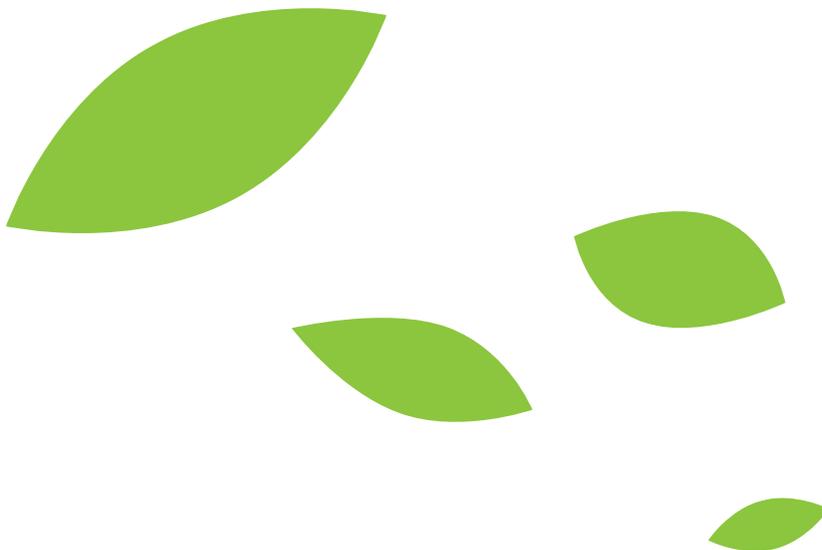
1. Service users and carers will work together with the Service User and Carer Trust Partnership to review the delivery of this strategy. This will be clearly defined, and measured.
2. Outcomes will be reported to the our Board of Directors and Governors.

### What you will see in services and teams

1. Locality service user and carer groups will be included in the evaluation of the impact of this strategy.
2. 'You said, we did' report on service user / carer-led service improvement suggestions.

### What YOU will see

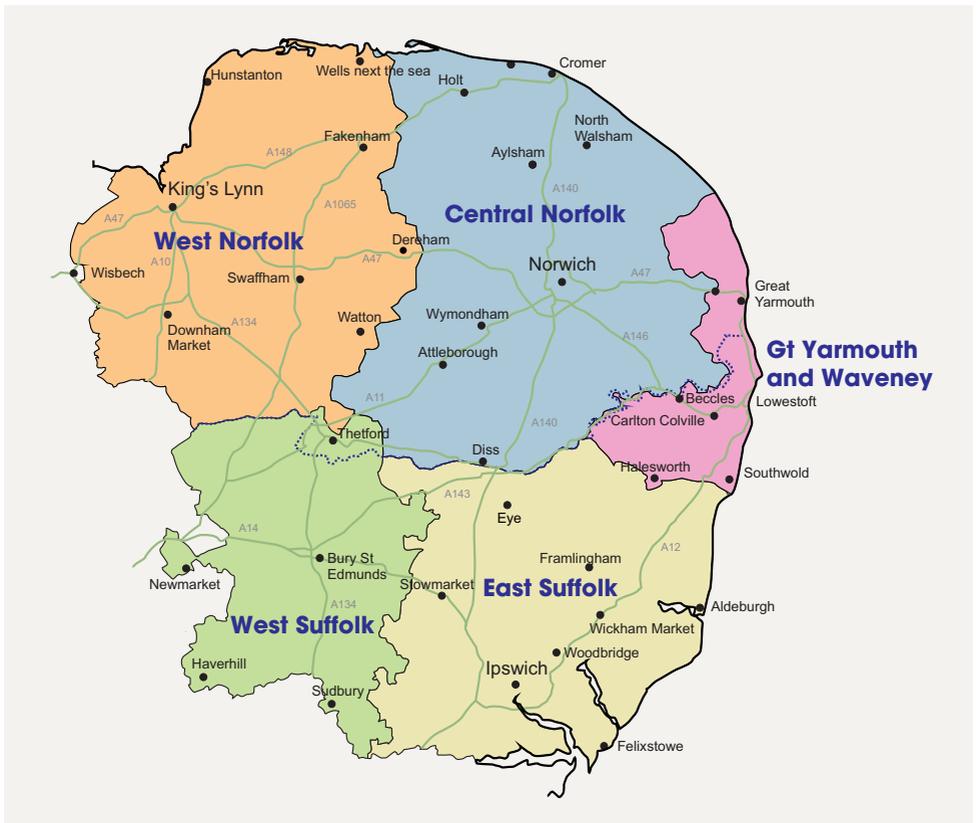
1. You will have the opportunity to have your say on whether or not we are delivering on the strategy.



# Current picture of involvement / participation

NSFT locality groups, forums and consultation groups, work across the areas highlighted in bold on the map.

They work at a strategic level, as well as supporting the development of our front line services, ensuring that there is partnership working in strategy development and service developments and that people who use our services are involved and can equally participate in the way their care is delivered.



## The key principles and values included in this strategy are supported within the following guidance:

- NHS Constitution (DH 2009)
- Section 242 and 244 of the NHS Act 2006 the new Health and Social Care Bill (2012)
- Making Experiences Count
- The Point of Care; improving patients' experience (Kings Fund, 2008),
- Equality Act 2010
- NICE Guidance – Patient Experience in Adult NHS Services (NICE, 2012)
- NHS Midlands and the East – Good Engagement Practice for the NHS
- The NHS Constitution for England 2012
- National Involvement Standards 4PI – Network, NSUN for mental health Together We are Stronger – [www.nsun.org.uk](http://www.nsun.org.uk)
- Triangle of Care – Carers included. A Best Practice Guide in Acute Mental Health Care – [www.carers.org](http://www.carers.org)  
The Triangle of Care is a guide to identify ways to help staff achieve better collaboration and partnership with carers in the service user and carer journey through a typical acute episode. It helps to bring together the knowledge of all people involved in the care of a service user, with the aim of creating a fuller picture of their needs.
- IMROC – Making Recovery a Reality - Sainsbury Centre for Mental Health Removing Barriers and Achieving Change – [www.scmh.org.uk](http://www.scmh.org.uk)  
Geoff Shepherd, Jed Boardman & Mike Slade
- Health and Social Care (Safety and Quality) Act 2015 – [www.parliament.uk](http://www.parliament.uk)



# For more information or to get involved, contact:

By email: [PALs@nsft.nhs.uk](mailto:PALs@nsft.nhs.uk)  
or call PALS Freephone: 0800 279 7257

Leaflet code: 15/021  
Produced: June 2015

Email: [PALs@nsft.nhs.uk](mailto:PALs@nsft.nhs.uk) or call  
PALS Freephone: 0800 279 7257

Norfolk and Suffolk NHS Foundation Trust values and celebrates the diversity of all the communities we serve. We are fully committed to ensuring that all people have equality of opportunity to access our service, irrespective of their age, gender, ethnicity, race, disability, religion or belief, sexual orientation, marital or civil partnership or social & economic status.



If you would like this leaflet in large print, audio, Braille, alternative format or a different language, please contact PALS and we will do our best to help.

