

## Engagement and Participation Committee

### Committee Report to Grampian NHS Board - Committee Meeting 9 June 2021

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#### Purpose of Report

This report updates the Grampian NHS Board on key issues arising from the Committee meeting on 9 June 2021 which the Committee considered would be of interest to Board members. The Board is asked to note the following key points:

#### 1. Engagement and Participation Committee Discussion Paper

##### Risks identified:

As reported in the last formal Committee report in December, if NHS Grampian does not have a clear strategic intent for engagement and participation, there is a risk of too great a focus on operational detail and not enough on strategic oversight and input.

A small working group of members of the Committee is therefore developing a paper setting out its strategic intent. A draft of this was shared for discussion and the feedback from members will now be taken forward at the next meeting of the sub-group of the committee, prior to its submission to the Board.

##### Opportunities identified:

The aim of the paper is to re-establish the Committees' strategic assurance role and seek Board approval for the Committee's ambition to support NHS Grampian's People-Powered Health agenda, whilst also providing a common definition of key terms such as this for the organisation.

#### 2. Draft Workplan of EPC

##### Risks identified:

A discussion took place about what the Committee's focus should be for the rest of this year. It was agreed that this will be clearer when the strategic remit of the Committee was finalised but that the remit would reflect a need to not get pulled into the detail of engagement plans and outcomes, which is better discussed at an operational level.

It was suggested this could be achieved through a sub-committee of EPC which could provide updates to the Committee and ensure it is sighted on all reports relevant to the EPC before they are published, as well ensuring gaps are identified to support its assurance role.

##### Opportunities identified:

The workplan of the EPC will therefore be populated for the next 12 months following Board approval of the paper setting out the strategic intent of the Committee.

### **3. Handling and Learning from Feedback Annual Report**

#### Risks identified:

The findings from the Feedback Annual Report 2019/20 and the various ways of how feedback is captured were discussed by the Committee. Assurance was provided that all feedback is notified through the weekly CRM and SLT, reported to the Clinical Governance Committee and externally to Healthcare Improvement Scotland.

It was agreed that the report showed that NHS Grampian has mechanisms in place to hear from people but there is also a need to be assured that analysis of what has been heard takes place and the improvements made due to the learnings.

#### Opportunities identified:

It was concluded that this paper should continue to come to the EPC on an annual basis. It was also agreed that further discussion should take place between the Feedback & Quality Assurance Team and Corporate Communications to explore how improvements or service changes made as a result of Feedback might be reported to EPC.

### **4. Equality & Diversity Outcome Report and covering paper**

#### Risks identified:

The NHS Grampian Equality Outcomes Report 2021 to 2025 had been published and uploaded to the NHS Grampian website on 12 April. The Committee noted that it would have been helpful for the EPC to have seen the report prior to publication. However, due to the deadline set by the European Health Rights Commission and the pausing of Committee meetings due to the pandemic, this had not been possible on this occasion.

The report sets out what NHS Grampian wishes to achieve in the period April 2021 to March 2025 to progress equality both in the services it provides and within NHS Grampian. A legal requirement when formulating the outcomes is to involve and consult with local equality and diversity groups, other local organisations, partner agencies, individuals and the wider community of Grampian. It was noted that this had been done primarily online and by telephone due to the ongoing pandemic.

#### Opportunities identified:

It was agreed that going forward that all reports relevant to the EPC will be shared with the Committee for awareness and to enable it to provide assurance when appropriate.

It was suggested that the report be used as an action plan, which would allow the Committee to review the breadth of the work being undertaken with/by Third Sector Agencies. It was noted the EPC workplan will be developed to incorporate a timeline for future reports and their review.

## 5. Strategic Plan Development

### Risks identified:

The Committee were taken through a presentation which provided an update on the high-level process, timescales and approach of the NHS Grampian Strategic Development Plan with staff, the public and partners. The key messages were:

- Strategic Plan will cover the period from 2022-28 ~ signed off Feb 2022
- The Plan is being co-created with public, service users, future service users, staff and partners.
- Inclusive engagement is planned via multiple mechanisms, targeted approaches and bespoke for different stakeholders.
- Utilisation of existing groups and networks, as well as wider public engagement
- Focus on the seldom heard – those underserved and with particular needs to enable participation.
- Journey to a more inclusive engagement process will improve opportunities and reduce barriers.

### Opportunities identified:

The EPC was asked to:

- Note the work undertaken to engage at the inception of the process to ensure support and an inclusive, joined-up approach with partners, reducing duplication and building on existing networks and engagement undertaken to date;
- Note the next steps and that regular assurance reports will be provided to the EPC during the next 9 month period;
- Advise that they are assured that the process (both that which has been completed and that which is proposed) is comprehensive and enables all stakeholders, including those with lived experience of local services and hard to reach individuals/groups to have an influence on the development of the strategy; and
- Agree that the approach is in-line with statutory duties and best practice, as set out in national and local engagement and participation guidance.

The Committee agreed to all 4 of the recommendations, and it was agreed that this item would report back to EPC as a standing item on the agenda to all EPC meetings in the future and will be included in the EPC Workplan.

**Amy Anderson**  
**Engagement and Participation Committee Chair**