

# People and Communities Involvement Report 2023-24



**Lincolnshire**  
Integrated Care Board

**April 2024**



# About this document

This document demonstrates how as Lincolnshire Integrated Care Board (ICB) we have met our statutory duties for involvement and are delivering our Lincolnshire People and Communities Strategy.

The NHS Constitution sets out a clear message that the NHS should put patients and the public at the heart of everything it does – this annual involvement report explains how we have fulfilled our public involvement duty and gives an outline of how we work with people and communities and involve people in our decision making.

When we describe ‘Our People and Communities in Lincolnshire’, we mean our:

- residents
- people who access care and support (and those who do not)
- unpaid carers
- families
- staff
- stakeholders
- partner organisations
- community champions and leaders

## Contents

About us in Lincolnshire and Integrated Care Board



About our county, Lincolnshire



Why we involve people and communities



How the ICB works with partner organisations



How insight and data have been used by the ICB to inform its work with people and communities



How the ICB listens and involves people and communities



Our commitment to involving people and communities



Involving people and communities to tackle health inequalities



Examples of involvement in specific projects and programmes



Planned future involvement activities and continuous community development



# About us in Lincolnshire

The **NHS Lincolnshire Integrated Care Board** (ICB) was established on the 1st July 2022 to arrange the provision of services for the purposes of the health service in England in accordance with the Health and Care Act 2022. It is a statutory organisation bringing the local NHS together to improve Lincolnshire's health and wellbeing.

The Integrated Care Board and Lincolnshire County Council have established a joint committee known as an **Integrated Care Partnership**. This Partnership has developed an Integrated Care Strategy which sets out how the needs identified in the Joint Strategic Needs Assessment for Lincolnshire are being met by the NHS and local authority.

Our **Integrated Care Systems** (ICSs) is a partnership of organisations that come together to plan and deliver joined up health and care services, and to improve the lives of people who live and work in their area. In Lincolnshire, our ICS is known as **Better Lives Lincolnshire** – for more information click [here](#).

Click here to see ICP strategy



Click here to see ICB membership details



Click here for more information on the ICP



# NHS Lincolnshire Integrated Care Board



The ICB will use its resources and powers to achieve clear progress on its aims, working in partnership to tackle complex challenges, including:

- Improving the health of children and young people
- Supporting people to stay well and independent
- Acting sooner to help those with preventable conditions
- Supporting those with long-term conditions or mental health issues
- Caring for those with multiple needs as populations age
- Getting the best from collective resources so people get care as quickly as possible.

The ICB is committed to involving people and communities together with local stakeholders in the development of services and identifying priorities. The details of how we involve and engage our residents can be found in the ICB's People and Communities Strategy (see below). The ICB aims to improve local health services and respond to the health needs of everyone in the area by ensuring patients and the public are at the heart of all our decision making.

The ICB has an experienced and dedicated Involvement Team, providing strategic advice and guidance, managing involvement activities within priority programmes and developing the building blocks to provide a solid basis of relationships and links with our people and communities.

Click here to see ICB's People and  
Communities Strategy



# About our county, Lincolnshire

- Lincolnshire is the **4th largest county** in England with an area of 5,921 sq. km.
- It has **768,364 residents (2021) and 813,119 GP registered patients (Feb 2023)** dispersed across city, market towns, rural and coastal areas. The nature of our geography and communities make up alone is incredibly diverse and varied.
- Lincolnshire is predominately rural**, being the 4th most sparsely populated county, with no motorways, little dual carriageway and 80km of North Sea coastline, which provides fundamental difficulties in service provision.
- The population is on average older than the population of England and the East Midlands.** It also has a higher proportion of adults over the age of 75 and the number in this age range is expected to almost double over the next 25 years. Year-to-year increases in the size of this ageing population are one of the key planning assumptions for Lincolnshire's health and care system.
- The combination of an **ageing population, a rural geography and areas of high socio-economic deprivation** defines the specific challenge of delivering high-quality and effective treatment and preventative services in Lincolnshire.

## Age

The age range 0-15 makes up 15.6% of the population, whilst the other sections of the population aged 16-64 and 65+ years and over make up 61.0%, and 23.4% respectively.

## Disability

26.8% of households in Lincolnshire have one person or more with a long-term disability.

## Ethnicity

89.2% of residents identify themselves as White British with a significant 6.1% identifying as White Other. The non-white population makes up 4.9% of the total population.

8.71% use a main language that is not English

## Gender

According to the 2021 census, Lincolnshire's population was 768,364, with 51% females and 49% males.

## Religion

Christians make up the largest group 53.7%, followed by those who do not have religion at 38.3%.

Other responses: Muslim (6.5%); Hindu (1.7%) ; Jewish (0.5%); Sikh (0.9%) and Buddhist (0.5%)

## Sexual Orientation

89.55% of the population are straight or heterosexual; 1.22% gay or lesbian; 1.26% are bisexual; with other sexual orientations include pansexual (0.2%), asexual (0.06%), queer (0.01%) and other (0.02%)

The 2021 census has been the first time sexual orientation information was collected.



# Why we involve people and communities

The ICB is fully committed to involving patients, the public, partners and key stakeholders in the development of services and ensuring they are at the heart of everything we do.

We understand that partnership working is key to empowering patients to have more choice and control over their own health. Through these partnerships, we can better understand the health needs of our population, resulting in improved health outcomes.

The Health and Care Act 2022 mobilised partners within Integrated Care Systems (ICSs) to work together to improve physical and mental health outcomes, ensuring they are informed by the needs, experiences and aspirations of the people and communities they serve.

It also required the Lincolnshire Integrated Care Partnership (ICP) to develop an Integrated Care Strategy to support the people of Lincolnshire to enjoy the highest quality health and wellbeing for themselves, their families and their communities, and as part of the ICP we are dedicated to working together to achieve this.



- The Lincolnshire ICB Constitution sets out the legal duties and principles we will adhere to when developing and maintaining arrangements for public involvement
- Our People and Communities Strategy demonstrates how we will deliver our duties to understand and empower our communities
- Listening to the patient and members of public that use our services help us understand the needs of the communities that we serve
- By giving local people and partners a voice, we can make sure that the services meets the needs of the local community
- The Integrated Care Board has a legal duty to involve patients and the public in decision making and service development.
- There are clear standards for public engagement to shape decisions, monitor quality and to set priorities

Involvement can be in different ways:



# Our legal duty to involve

As outlined in section 14Z45 of the NHS Act 2006 and amended by The Health and Care Act 2022, the ICB has discharged its public involvement duty by having in place provisions for involving the public in the planning of commissioned services; and the development and consideration of proposals for changes in the commissioning arrangements which would have an impact on service delivery; and decisions which would have an impact on services.

By listening to local people and co-producing with them or those who represent them, we can improve the decisions we make and ensure we are considering the health needs of Lincolnshire residents.

The ICB is continuously improving and developing the ways we can involve our communities. It is important to us that the public sees how their feedback has helped to shape local services and how much we value all feedback and engagement.

We do this as set out in our values which are outlined in our Constitution and the principles detailed in our People and Communities Strategy. This explains how we work with people and communities and continue to develop and strengthen this with our partner organisations and patient representatives.



To see our other legal duties and responsibilities:

[Click here to see Lincolnshire ICB constitution](#)



[Click here to see public sector equality duty](#)



[Click here to see Health and Care Act 2022](#)



[Click here to see Health Act 2006 \\*\\*](#)



\*\* Health Act 2006 covers:

- Duties as to reducing health inequalities – s.14Z34 NHS Act 2006
- Annual reporting – s.14Z58 NHS Act 2006
- Duty to promote involvement of each patient – s.14Z36 NHS Act 2006

# Governance and assurance

Timely and meaningful engagement is a priority for us, and a strong framework, with clear structures and assurance processes, plays a key role in making sure that patients and communities are central to our decision-making.

Reports on our involvement activities and the feedback gathered from these are reported to the ICB Operational Quality Assurance Group with escalation as required to the System Quality and Patient Experience Committee (QPEC) and to our Primary Care Commissioning Committee (PCCC) if it is regarding a GP surgery.

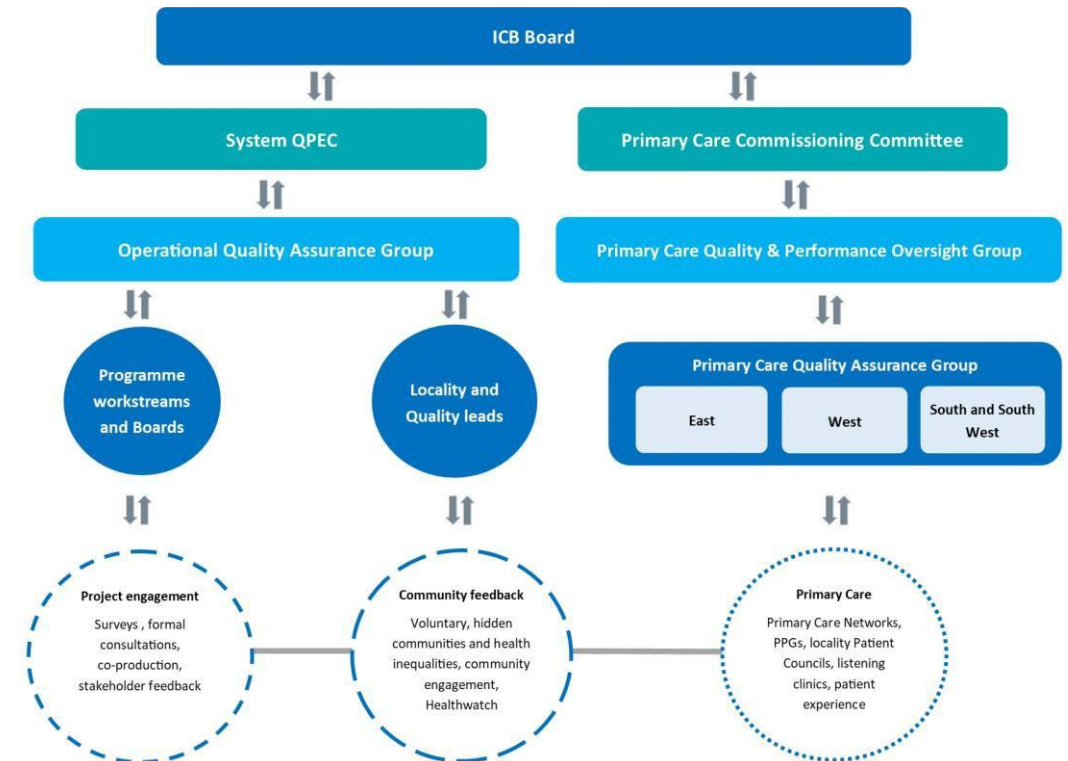
Feedback from programme specific engagement including any differences in equality or health inequality group is also shared with our project leads to help shape and steer their programmes of work. See diagram opposite.

Reports of our involvement feedback are also regularly shared with partners via our System Quality and Patient Experience Committee, who also review our People and Communities Involvement Annual Report and monitor our delivery plan for our People and Communities Strategy.

Feedback from our engagement activities and consultations is also reported into our Board meetings to inform decision making on large projects and programmes of work.

Our engagement and involvement function is part of the ICB's Strategic Planning, Integration and Partnerships team, ensuring patients and our communities are at the heart of service development, improvement, and transformation. Strong links are maintained with the ICB Nursing and Quality Team to align patient experience and engagement with quality and safety. Our colleagues across ICB departments who provide dedicated communications and engagement support to specific projects are an integral part of our wider team.

How we report and listen to the feedback we've heard:




# Working with partner organisations

There is a long history of joint working in Lincolnshire between the Local Authority, the NHS, and wider partners. We have worked hard to build the relationships needed to support the people of Lincolnshire to enjoy the highest quality health and wellbeing for themselves, their families, and their communities.

Lincolnshire ICB recognises the importance of working with our partners, to enable a collaborative approach to involving our communities and benefiting from the trusted and established relationships they have with the people of Lincolnshire.

By working together, we reach different people in different ways and have the conversations with them that are important to them with trusted individuals.



The ICB is committed to delivering engagement at all levels from working with community leaders at a neighbourhood level or through partnership working such as Lincolnshire's Integrated Care Partnership - Better Lives Lincolnshire.

Our strong relationships with Voluntary, Community, and Social Enterprise organisations enables us to commission them to undertake some work on behalf of the ICB.

On a local level we continue to build strong relationships with our community groups and support organisations to help us reach individuals and communities.

We work closely with groups and venues providing warm spaces, foodbanks, and services to our communities as well as individuals such as Islamic leaders, social prescribers and community connectors to draw on their wealth of experience and links us to people we might not otherwise be able to reach.

# Better Lives Lincolnshire – our shared agreement

Over a few years, the people of Lincolnshire have been sharing their views on their health and care and how it could be improved via a number of involvement opportunities: Joint Health and Wellbeing Strategy for Lincolnshire 2017; The Lincolnshire Public ‘Talk About’ NHS Long term Plan 2019; Healthy Conversation 2019; NHS Lincolnshire Citizen Panel Survey 1 - personalised Care 2021; Involvement Team Summer Roadshows 2022; and The NHS Lincolnshire Joint Forward Plan 2023-28.

This feedback has been used to develop our **Shared Agreement**. This describes a **new relationship between the health & care system and the people of Lincolnshire**, where individuals play an equal part in their health, well-being, and care.

Our shared agreement is one of our priorities of the NHS Lincolnshire Joint Forward Plan 2023-28. – ‘a new relationship with the public’.

Together with the people of Lincolnshire, we want to build a shared view and agreement on what the best wellbeing, care and health for Lincolnshire looks like.

At its core this will describe and illustrate the foundations of a new relationship which have been developed by working with people from Lincolnshire:



# Working with partners to bring funding for involvement into Lincolnshire

Lincolnshire ICB have partnered with our community and voluntary sector to apply for various bids for regional and national funding to support our involvement activities across our communities.

## **NHSE funding – REN Cohort 2**

### **Increasing diversity in participation in Research**

In September 2023, a bid for £100,000 was awarded to Lincolnshire ICB and partners. The aim was to set up a resilient, local research network of groups and community partners who will support their communities and the wider system to get involved in and research and engagement activities.

The partners involved in the bid are Lincolnshire Voluntary Engagement Team, Every-One, University of Lincoln, Lincolnshire ICB and support from Healthwatch Lincolnshire, Lincolnshire YMCA and NIHR CRN East Midlands

Unfortunately, our subsequent bid with partners for funding to reduce language barriers to research in Lincolnshire was unsuccessful but our ambition was there!

## **NHSE funding Primary Care Networks**

The ICB was successful in bidding for £7k to support Primary Care Networks with community engagement. This work aims to build and maintain good relationships between PCNs and their local population by holding 'Meet and Greet' events.

Work will continue into Spring 2024.

## **NHSE funding - Volunteering for Health**

The application was submitted in February 2024 to secure funding of £500k to develop excellence in volunteering practice across health and care. We will build on good practice and develop the existing infrastructure to volunteering thrives in our urban, rural and coastal communities. We are still waiting to hear the outcome.

## **EMAHSN - Increasing participation through incentivisation**

The ICB was successful in securing £2,000 to spend on the coast to incentivise participation. For more information see [page 90](#).

# Working with our Provider Trusts

Working with our Community Health Trust, we engaged with people and communities across Lincolnshire to understand their views on the temporary changes to Children's Speech and Language Therapy (SaLT) services.

This was in response to a sharp rise in referrals resulting in growing waiting times for assessment and interventions and to protect and maintain services for children and young people who need it most.

Working in conjunction with our Mental Health Trust, we presented the results of a locally-led targeted consultation on the proposed changes to local mental health rehabilitation services in Lincolnshire to our Health Scrutiny Committee.

## Working with our Acute Trust to consult people and communities on changes to paediatric services

After five years of ongoing engagement to develop proposed models of care, a full public consultation on the future of the paediatric service at Pilgrim Hospital, Boston was developed jointly with ULHT and the ICB and ran for 12 weeks during June to September 2023.

Lincolnshire's Health Scrutiny Committee received regular updates on the proposals and supported the process. Following discussions with NHSE England on the proposal it was agreed to commission the Clinical Senate to undertake a Clinical Review of the service change which was considered as part of the final decision making.

Both Equality and Quality Impact Assessment were undertaken, reviewed and approved through the ULHT's Quality Committee, attended by members of the ICB, and subsequently been reviewed and ratified by the ICB Director of Nursing. The ICB Executive were in full agreement to support the proposal and agreed to the proposals to be presented to the ICB Board for approval, subject to the ULHT Boards support for the change which took place in November 2023.

# Working with our neighbouring ICSs

Lincolnshire ICB Executives, service specialists and members of the ICB Involvement Team have supported our neighbouring ICBs and ICSs with some of their engagement and consultation programmes.

We have been able to share our learning from our own experiences and programmes, offered support and shared opportunities for Lincolnshire's population to get involved to shape these services where it might impact them.

## Fertility review

The 5 ICB's in East Midlands are taking a collaborative approach to policy making around fertility services. The aim being to minimise inequity of access based on geography. Guidance will be launched in 2024 where it is expected that formal consultation will be required in some ICB areas.

## Nottingham University Hospital

The ICB in Nottingham have an opportunity to update and improve the hospitals run by Nottingham University Hospitals NHS Trust (NUH) 2030. They want to redevelop both the Queen's Medical Centre (QMC) and the City Hospital and it is part of the Government's New Hospital Programme (NHP), which is investing in buildings and equipment across the NHS, to ensure that the healthcare system and staff have the facilities they need for the future. Our teams have been involved in supporting their planning. For more information see [Tomorrow's NUH | NUH](#)

## Humber Acute Service Review

The public consultation for the Humber Acute Services Programme was supported by the Strategic Engagement lead for Lincolnshire ICB, as the proposed changes had an impact on Lincolnshire's patients. The consultation launched on 25<sup>th</sup> September and ran for 14 and a half weeks. [Better Hospitals – Humber Acute Services Programme \(betterhospitalshumber.nhs.uk\)](#)

# Our partners in ICB governance

## **Healthwatch sit on ICB Board as patient representative**

Healthwatch are key partners and act as a critical friend, as well as representing an independent view of the patient and public voice. Healthwatch are integral members of Lincolnshire's ICB Board and ICP Board as well as sit on various committees

## **Engaging with Health Overview and Scrutiny Committee**

We engage with HOSC on potential service changes, enabling them to consider whether it is a substantial and significant service change requiring consultation process. We work to assure them that healthcare is planned and delivered in ways that reflect needs and aspirations of local communities, plans for substantial service changes are reasonable and that everyone has equal access to services.

## **Public Health and Local Authority representatives at ICB board meetings**

Representatives sit alongside our involvement representative at every ICB board formally. [Meet the ICB Board](#)

## **Voluntary and Community Sector**

A representative of the Voluntary and Community Sector is also an integral member of Lincolnshire's ICB Board, an associate member on the ICP Board as well as sitting on various committees

## **Primary Care and Provider Organisations**

Our provider and primary care colleagues are part of our extended team and therefore are integral to the development and delivery of our shared strategic priorities

# Supporting each other by joined up working

Our day-to-day processes and systems have been established to work across involvement, participation and engagement teams within the ICB and NHS Provider Trusts across Lincolnshire.

Joint working enables us to collaborate and reduce duplication, leveraging the links we all have with our patient groups and memberships while supporting each other.

The involvement leads across the ICB and Provider Trusts meet on a fortnightly basis to share good practice, coordinate activities and resources and offer support to each other. We are also working across our communications and involvement teams to scope ideas of how we can join up even more of our work and activities going forwards.

## Sharing resources

We share survey software across all NHS organisations – this is called Qualtrics.

We have created an **Insight Database**, storing multiple examples of activities and feedback. This is available to all NHS organisations.

Working practices such as templates are shared.

## Training

Training across all involvement leads regularly takes place such as Qualtrics training, induction and refresh; co-production training; stakeholder mapping etc

## Joined-up approach

We join up our engagement activities with our partners to 'go out once' to local groups and communities to reduce consultation and engagement fatigue.

## Sharing good practice

The ICB involvement team co-ordinated the refresh of the equality monitoring questions and orchestrated the production of the health inclusion questions.

All involvement leads across the NHS worked together to decide on the final set of questions to be used across the county. Click [here](#) for more info.

# How insight and data have been used by the ICB to inform its work with people and communities

We recognise the differences in our communities from their health needs, ability to access services (both digitally and in person), and the ways they want to get involved.

All our commissioning and involvement activities will be built on a solid understanding of our population, service users, their experiences and the people that support them. We will utilise the knowledge, relationships, networks and strong links our partner organisations already have with our communities to ensure a fully holistic, system approach to involvement. We will use existing and tested opportunities to engage and communicate and seek to identify the best partner with the best relationship to lead the conversation. Working as partners will strengthen our collective messages and involvement activities. As well as joining up care, we will join up our engagement and experience work to capture and improve the patient journey and use this to empower joined up system working.



The involvement team supports programmes within the ICB to ensure that sufficient involvement activities have been undertaken to inform the following assessments:

- Equality Impact Assessments
- Quality Impact Assessments
- Health Inequality Impact Assessments (HEAT)

The involvement activities supports the programme / project teams to fully understand the impacts for people and communities by any proposed changes. The insights and diverse thinking of people and communities are essential to enabling Lincolnshire ICB to tackle health inequalities and the other challenges faced by health and care systems

As a commissioning organisation we have access to the Lincolnshire Health Intelligence Hub (LHIH) where the latest demographic information can be found including the Census data, Director of Public Health Annual report and Joint Strategic needs assessment.

[Click here to visit the LHIH website](#)



# How the ICB is insight led

When planning any engagement activities, we review the **JSNA data held on the Lincolnshire Health Intelligence Hub, our own insight database and information held by the project team** so that the involvement activities are appropriate.

We utilise our own stakeholder database to reach out to population e.g. connecting with some areas online, others via existing community groups, others via foodbanks etc

Healthwatch Lincolnshire provides the ICB a **monthly report of the information and insight** that has gathered by Healthwatch through engaging with individuals and communities. This information is widely circulated within the ICB and shared with colleagues in primary care.

For primary care, the feedback is reported into the countywide Primary Care Operational and Quality Assurance Group who look at service delivery, quality and standards.

Feedback is used to monitor quality of services and helps address any issues with the quality of primary care medical services. The ICB has carried out listening clinics and discussed with practices.

**Insight database.** In 2022-23, the ICB led the development and creation of an Insight Database by pulling together all the findings, data and information from engagement activities across the ICB and NHS partner organisations. This database provides a solid base of intelligence and experiences which are shared to inform programmes of work and decision making.



A central hub for collating and storing insight gathered across Lincolnshire health organisations, it is easily accessible to a wide variety of professionals to inform decision making. It will hold (non-sensitive) data as themes or topics, including the originator of the source of information. The system aims to provide a simple, user-friendly solution for identifying reports and has the potential to be accessed widely in the future to increase understanding and reduce system-wide duplication.

Our general aims are to:

- Support the use of a variety of methods for gathering insight, moving away from an over-reliance on surveys to methods that nurture and use existing relationships.
- Support collaboration between organisations around gathering insight by enabling links to be made between individuals/organisations who are working on the same area or are wanting the answers to the same questions. Maximising scarce resource.
- Collect and organise insight being gathered across the system to make it easily accessible and searchable.

# Strategy Development and Population Health Management

Population Health Management (PHM) is an approach which helps us understand people's health and care needs and how they are likely to change in the future. It aims to improve physical and mental health outcomes, reduce health inequalities and help us live our extra years in better health.

PHM uses historical and current data about people's health and how they are using health and care services to design new proactive models of care which will improve health and wellbeing today as well as in 20 years' time.

It involves the crucial role of communities and local people, the NHS and other public services including councils, schools, housing associations and social services working together to join up services for people by sharing information, resources and goals. This lets us tailor services to the needs of people in each area, improve people's health, prevent illnesses, and make better use of public resources.

Working with communities and partner organisations in Lincolnshire we are looking at the challenges we face and the opportunities we have to improve the physical and mental health outcomes and wellbeing of people living in Lincolnshire.

[Click here for more information on population health management](#)



Integral to all this work is the **communications and engagement with patients, the public, staff and stakeholders.**

Work is underway to embed this approach into our strategy development and management to provide a robust base of knowledge and insight to all our plans.

Engagement, patient experience and co-production will be embedded throughout the modelling for PHM and strategic planning to enable timely and meaningful involvement with our communities and ensure their voice is central to the ICB planning and service design.

Our legal duties and commitments are clear – people and communities need to be involved in all stages of service development, design, change and decision making. Our ambition to achieve this is illustrated well using the model from NHS Confederation's 'Building Common Purpose, Learning on engagement and communications in integrated care systems'.



# How the ICB listens and involves people and communities



On the following pages, the examples presented demonstrate how the ICB is delivering the involvement principles set out in our People's and Communities Strategy.

These involvement activities also demonstrate:

- How we have met our involvement duties
- How we are delivering on our people and communities strategy
- How we have proactively reached out into the community
- How we have worked with many partners across the sectors to encourage inclusive involvement
- How we have involved people and communities who face health inequalities
- How working with diverse communities can make a difference

# Our commitment to involving people and communities



Lincolnshire ICB has adopted the **ten principles of engagement** set out by NHS England in the ICS design framework – these have been developed from work with systems across the country and, when embedded effectively, will create a golden thread running throughout the ICS, whether involvement takes place within neighbourhoods, in places or across the whole of Lincolnshire.

Delivering the following principles demonstrates and evidences our commitment to involving our people and communities.



1. Put the voices of people and communities at the centre of decision-making and governance, at every level of the ICS



2. Start engagement early when developing plans and feed back to people and communities how their involvement has influenced activities and decisions.



3. Understand your community's needs, experience and aspirations for health and care, using engagement to find out if change is having the desired effect



4. Build relationships with excluded groups, especially those affected by inequalities



5. Work with Healthwatch and the voluntary, community and social enterprise (VCSE) sector as key partners



6. Provide clear and accessible public information about vision, plans and progress, to build understanding and trust



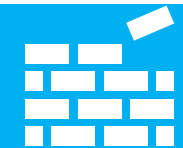
7. Use community development approaches that empower people and communities, making connection to social action



8. Use co-production, insight and engagement to achieve accountable health and care services.



9. Co-produce and redesign services and tackle system priorities in partnership with people and communities.



10. Learn from what works and building on the assets of all ICS partners – networks, relationships, activity in local places.

# Examples of how we listen and involve local people and communities

The ICB continues to work hard to ensure that our local people and their communities are aware of how to get involved and the variety of opportunities that are on offer with us directly and through the established relationships our partners have with their communities. Below are some of the examples:

## Commission partners

The ICS in Lincolnshire – Better Lives Lincolnshire has continued to commission Every-One to lead on the co-production for Better Lives Lincolnshire. Every-One is a charity in Lincolnshire and they were able to involve people with lived experience to help influence the strategy for Lincolnshire.

## Patient stories

Hearing a person's story and experience is a powerful way of capturing those journeys that our patients undergo.

It is a personalised way of capturing how the treatment was received and those areas where improvement is required.

These stories help shape those decisions when commissioning services.

## Building relationships

We have a number of community partners that we work closely with. The Storehouse, in the seaside town of Skegness, is very keen for us to visit to hear the views of people that live on the coast and hear about the challenges they face when accessing health services. We have visited many support groups in this venue to influence projects like our NHS Joint Forward Plan and MSK.

## Involvement champions

Our Involvement Champions are advocates for the groups and communities they represent. They will work with us to test our plans and strategies, monitor progress and evaluate outcomes. They support our engagement with local people and communities by sharing messages and gathering feedback to create a two-way communication process between the ICB and their communities.

## Community Development

Reaching out into the community to work with people from different places, different cultures and nationalities, different ages and genders. By visiting people within their own villages and towns we get to hear what matters to them and their communities, we can meet and connect with a vast range of people who are willing to share their experiences and get involved.

## Involvement bulletin

We publish an involvement bulletin that is distributed to over 9,500 people every two weeks highlighting all the events, surveys and other opportunities there is for people to get involved with the NHS. Also, included are any partner and community groups events we can share on their behalf. Through the ICB and NHS partners we can engage and communicate directly with nearly 30,000 patients and staff.

## Joint Working

The ICB together with partners were successful in bidding for £100,000 to look into increasing diverse participation in research in the county.

The ICB worked closely with Lincolnshire Voluntary Engagement Team, Every-One, University of Lincoln, Lincolnshire ICB and support from Healthwatch Lincolnshire, Lincolnshire YMCA and NIHR CRN East Midlands to understand why people want to get involved in research and the reasons that they don't.

## Encouraging continued participation

We encourage everyone we meet to be involved in future activities. This could mean receiving our involvement bulletin, sitting on a group discussion, being a part of PPG or being on our distribution list for surveys and questionnaires. Our database has over 9,500 contacts willing to take part in a range of activities and we welcome anyone who to be a part of that.

## Patient Participation Groups

Patient Participation Groups (PPGs) are designed to give patients and practice staff the opportunity to meet and discuss issues and opportunities and supporting their wider practice population to get involved and increase understanding in their healthcare services. PPG representatives come together as a Lincolnshire Patient Council where they feed the views of their practice patients into the ICB and are involved in programmes and projects.

## Networks and partners

By working with partners, people and communities we are able to reach more people through their own network and community contact than if we tried to reach them on our own. Trusted community leaders and champions are vital to reaching those pockets of communities that don't. By sending the information to one community leader it has the potential to reach hundreds of people.

# Involving people and communities to tackle health inequalities

The involvement team has supported various programmes and projects in our efforts to help tackle health inequalities. All of the engagement has been driven by data such as the **Joint Strategic Needs Assessment** and the 2021 census data.

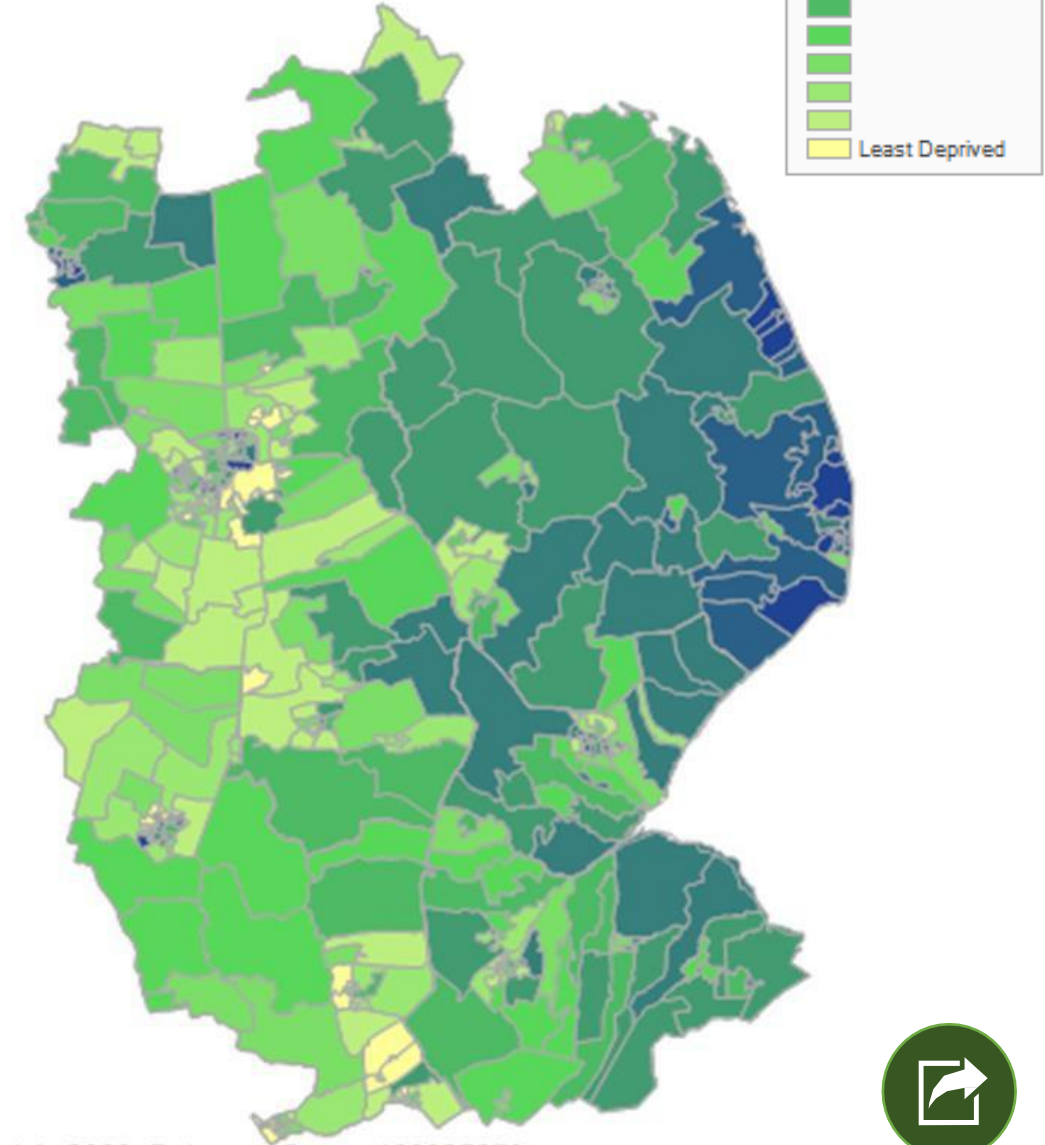
In Lincolnshire we have high levels of deprivation along the coast and we are working together with our partners to level out these differences when accessing health services.

The following pages outline our health inequality projects that have been involving people and communities during 2023-24.

[Click here to visit the Lincolnshire JSNA](#)



Indices of Deprivation in Lincolnshire 2019



Source of data: Lincolnshire Research Observatory

# Tackling Health Inequalities

## Tobacco Dependency Service and E-Cigarette

The Tobacco Dependency service was launched in January 2023 via a phased approach to give advice, guidance and support for people wishing to improve their physical and mental health. Pregnant women and inpatients can now benefit from NHS Tobacco Dependency Services. The services also support NHS smoke-free policies.

As part of the service, our specialist Tobacco Dependency Advisors (TDAs) will:

- provide personalised treatment plans
- meet with the person on a regular basis to discuss progress
- provide behavioural support
- provide free stop smoking aid; including Nicotine Replacement Therapy (NRT) such as nicotine gum, patches, lozenges, and inhalators.

All pregnant women will have access to services for the treatment of tobacco dependency as part of their routine care. This will include:

- carbon monoxide reading at every contact
- smoking status recorded
- ongoing support and advice throughout your pregnancy.

All hospital inpatients who are identified as smokers will be offered:

- carbon monoxide reading at every contact
- smoking status recorded
- onward referral for support from [One You Lincolnshire](#) and community pharmacies upon discharge from NHS services.

The ICB are working in partnership with:

[United Lincolnshire Hospitals NHS Trust](#)  
[Lincolnshire Partnership NHS Foundation Trust](#)  
[Lincolnshire Community Health Services NHS Trust](#)  
[Lincolnshire County Council](#) & [One You Lincolnshire](#)



# Tackling Health Inequalities

## Tobacco Dependency Service engagement

### TACKLING HEALTH INEQUALITIES

#### Tobacco dependency service

#### Role of involvement

The involvement work on the tobacco dependency services started on 5<sup>th</sup> March through to 31<sup>st</sup> August. During this time, there was a pause in activity due to a pre-election period because of local elections and we extended our original engagement plans to compensate.

Both staff and members of the public were engaged, whether a smoker or a non-smoker, on tobacco services in Lincolnshire to develop the future Tobacco Dependency Service.

The key aims of the engagement activities were to:

- Understand what would help patients stop smoking or alternatively keep them motivated to continue to stop smoking
- Understand patient experiences if they have previously accessed a Tobacco Dependency Service
- Feedback and thoughts on the new dedicated NHS Lincolnshire Tobacco Dependency Service

The survey and flier were translated in to 6 European languages to ensure that we are gathering intelligence and feedback across our diverse communities

#### Outputs

- Produced a promotional flier and distributed an online survey
- Received 113 responses from members of the public; 8 responses from staff
- Held 19 face-to-face engagement events in the community. Targeted at those communities identified as most likely to smoke
- Visits planned to factory sites across the county in Boston and South Holland
- Survey and promotional material was translated into 6 different languages - Bulgarian, Lithuanian, Latvian, Romanian, Polish and Russian
- Positive patient stories have been gathered throughout and promoted to help encourage up-take and increase awareness of the Tobacco Dependency Programme.

#### Potential outcomes

- The feedback was presented to the Tobacco Dependency Project Team and Health Inequalities Programme Board.
- A patient experience survey has been developed and feedback is regularly monitored by Tobacco Dependency Service leads
- Regular communications are now being promoted, including awareness raising days such as No Smoking Days, Stoptober, Swap to Stop campaign. Smoking/vaping leaflets have been reviewed and up-dated. Worked with the ICB's readers panel to review, the "Vaping to Quit Smoking" leaflet.
- Lincolnshire County Council have recently undertaken engagement through "County Views" on vaping. The results of this are to be published shortly.

Principles delivered:



# Tobacco Dependency Service and E-Cigarette Patient Success Story



- ✓ Emilia quit smoking with the help of the STAAR team when she was 19 weeks pregnant with her first baby.
- ✓ Healthy baby Hristina was born by caesarean section on 11th July 2023 weighing 3.41kg.
- ✓ Emilia had tried to stop smoking before but said she found it easier with the support of the 'amazing' STAAR team and now never wants to smoke again!
- ✓ Emilia would recommend that anyone who is pregnant and smoking should access support from the STAAR team.

# Tackling Health Inequalities Bowel Cancer Screening

The Health Inequalities Bowel Screening Project aims to increase the uptake of bowel screening for the 20% most deprived populations, from the 7 most deprived GP Practices in Lincolnshire.

This project seeks to understand the challenges and barriers that prevent people in that population group from completing their bowel screening. In Lincolnshire:

- **68%** of the 20% **most deprived population** completes their two-yearly bowel screening, whereas
- **76%** of the 20% **least deprived population** completes their two-yearly bowel screening.

The 7 most deprived GP Practices according to Index of Multiple Deprivation (IMD) are:

- Marisco Medical Practice
- Beacon Medical Practice
- Hawthorn Medical Practice
- Caskgate Street Surgery
- Cleveland Surgery
- Abbey Medical Practice
- Lindum Medical Practice



# Tackling Health Inequalities Bowel Cancer Screening

Partnership working is at the heart of this project and the Health Inequalities Bowel Cancer project group meets every month. The project group includes representation from Health Inequalities Team, Cancer Team, McMillan Cancer, United Lincolnshire Hospitals NHS Trust, NHS England, Bowel Cancer Screening Hub, Lincolnshire Community Health Services, Neighbourhood Team Leads, the voluntary sector, Every-One, Data Analysts and the Primary Care Team, and is supported by the ICB Involvement Lead and Communications Lead.

Throughout the project, the importance of involving patients has been recognised. The project group is supported by an engagement sub-group and representation includes the ICB Involvement Lead, Health Inequalities Team representatives, Cancer Team, Every-One and the Health Inequalities Bowel Cancer Screening GP Registrar.

The work of the project team is also supported by colleagues from Primary Care Networks and Primary Care.

The findings from all the engagement activities is reported into the Health Inequalities Bowel Cancer Screening Group on a regular basis.

The Bowel Cancer Project commenced in June 2023 and will continue to run throughout 2024.

The project is being delivered over several stages:-

- **Stage 1 - data analysis:** analyse data to identify the groups of people to focus on
- **Stage 2 – engagement:** engage with people to understand the barriers and reasons preventing them from completing bowel screening
- **Stage 3 - co-production:** co-produce solutions with people to encourage and enable them to complete bowel screening
- **Stage 4 - implementation and evaluation:** implement and evaluate the solutions

# Tackling Health Inequalities

## Bowel Cancer Screening

### TACKLING HEALTH INEQUALITIES

#### Bowel Cancer Screening – Stage 1 pre-engagement (data analysis)

##### Role of involvement

During the initial stage of the project, the project team were working with data analysts to identify cohorts of the population in connection with this work. Prior to receiving the data, it was agreed that some initial engagement was needed to assist their thinking and understanding.

This engagement aimed to:

- Gather local intelligence and understand behaviours
- Signpost individuals to other services
- Ensure that communities and people living in some of the most deprived areas of Lincolnshire have been engaged and their voices heard
- Narrow the gap between the healthiest and least healthy populations
- Understand how best to incentivise our future engagement and coproduction work to reach our target cohorts.

This took place during August and September 2023.

##### Outputs

- Face-to-face engagement in 15 places/ venues across Lincoln, Gainsborough, Skegness, Mablethorpe
- Spoke to 45 people.

##### Potential outcomes

- Gathered feedback and insight from those who had taken a test and those who haven't.
- Combined with the data, the outputs from this engagement informed future engagement activities.

Principles delivered:



### TACKLING HEALTH INEQUALITIES

#### Bowel Cancer Screening – stage 2 engagement (online survey)

##### Role of involvement

When we had received the data, we focussed our engagement on:

- An online survey
- Face to face engagement through attending support groups and local venues in the community.
- Focussed drop-in sessions held in Skegness, Mablethorpe and Gainsborough. The survey was sent out via 4 GP practices (Caskgate, Marisco, Beacon and Hawthorn). A total of 13,833 text messages were sent out asking people to complete the survey or ring / text the involvement lead. The survey launched on 17<sup>th</sup> November 2023 and ran for 3 weeks.

##### Outputs

- 2403 responses were received via the online survey; 516 expressed they would like to get involved further
- 54 responses via phone / text
- Limited responses from people whose first language was not English and those with learning disability
- Analyse the feedback and responses
- Report produced
- 19 respondents expressed an interest that they would like to be involved further through co-production.

##### Potential outcomes

- Reported and considered by Health Inequalities Project Group
- Findings presented to the Health Inequalities programme board in 2024.
- Approach amended to include translated text messages, interpreter support and telephone calls with those with learning disabilities
- Each month the Project Group focusses on a topic of interest – findings from the report are used to inform discussions
- Findings from the survey shaped future engagement activities

Principles delivered:



# Tackling Health Inequalities Bowel Cancer Screening

## TACKLING HEALTH INEQUALITIES

### Bowel Cancer Screening – stage 2 engagement (Drop-in sessions)

#### Role of involvement

The Health Inequalities Project Team asked for additional engagement to the online survey where patients who had not completed the Bowel Cancer Screening Test, were invited to a drop-in session which were held at local venues in Gainsborough, Skegness and Mablethorpe during February 2024.

Patients received a text message from their GP practice to invite them to attend one of the sessions. Patients were also offered the opportunity to email / telephone or text the involvement lead to provide feedback.

The drop-in sessions were run and delivered by the ICB's Health Inequalities team, cancer team and a local GP (GP Fellow for bowel cancer screening).

#### Outputs

- Held events in the communities where people could speak to staff in person
- 51 people attended
- 71 telephone conversation and text messages; 88 conversations via email
- 37 signed up to be involved in the co-production group
- Able to educate people on the importance of bowel screening and encourage more people to complete bowel screening (FIT)

#### Potential outcomes

- Presented and considered at the Project Team in March
- First co-production group meeting will be held in May 2024.
- Fully engaged Project Team
- Results will be presented to the Health Inequalities Programme Board in 2024.

Principles delivered:



# Tackling Health Inequalities Bowel Cancer Screening

## TACKLING HEALTH INEQUALITIES

### Bowel Cancer Screening – stage 2 engagement (community visits)

#### Role of involvement

In conjunction with the online survey, members of the project team visited 8 community groups across Gainsborough, Skegness and Mablethorpe throughout 2024. Accompanied by the involvement lead from the ICB, the project team visited support groups, warm spaces, library and other venues to connect with the local population.

Together with the face-to-face conversations, the project team worked with local trusted community connectors who helped gather feedback.

The aim was to speak to patients of eligible age as another face-to-face engagement opportunity.

#### Outputs

- In total, we spoke to 61 people
- We were able to connect with local communities in areas of high deprivation.
- Encouraged more patients to complete bowel screening
- Registered more interest in the co-production group.

#### Potential outcomes

- The results were presented and considered at the Project Team meeting in March 2024.
- First co-production group will be held in May 2024.
- Fully engaged Project Team.
- Results will be presented to the Health Inequalities Programme Board.



Principles delivered:



# Tackling Health Inequalities

## How we understand peoples' experience of care

The ICB's equality forum is attended by all three provider trusts in Lincolnshire and works closely with the ICB's involvement team. As part of the work in the Forum's Equality and Diversity Action Plan it was identified that we needed to understand whether accessing NHS services was different for certain sectors of our communities, for example, those who identify as having a protected characteristic.

This resulted in a survey being created to explore the barriers and challenges of accessing an NHS service.



### PRIORITY: TACKLING HEALTH INEQUALITIES

#### Experiences of care engagement - survey

##### Role of involvement

The survey was launched in June 2022 and it was agreed that it will continue to run throughout 2023/24. Data and findings are analysed on a quarterly basis.

We continuing promote this survey through our website, social media, our involvement bulletin "The Contributor" and promote at our face-to-face events.

As we analyse the data and responses, we will aim to target those communities who we do not connect with very often and those who identify as having a protected characteristic.

##### Outputs

- During 2023/24 we had 139 responses
- Over 85 patients are happy to share their experiences through patient stories
- 80 patients have signed up to receive our involvement bulletin every fortnight
- Monthly reports are produced focussed on areas with high levels of deprivation and health inequalities
- Survey promoted through involvement bulletin

##### Outcomes

- Rolling programme of engagement
- Reported into relevant committees and workstreams, including into our Operational Quality Assurance Group.
- Feedback has informed the priorities for the NHS Joint Forward Plan 5 Year Strategy

### Principles delivered:



# Tackling Health Inequalities & equalities

## Knowing who we are reaching

The ICB currently collects information and data from individuals during activities such as surveys and face-to-face meetings asking people questions around their backgrounds and their lives. This information helps us to understand the needs of different people and communities and supports us to shape our services around those needs.

Over recent years these questions have focussed on information around equalities and protected characteristics and an opportunity to expand this data collection to include health inclusion information was recognised.

The ICB involvement team carried out a review of the current questions and worked in partnerships with other departments in the ICB, system wide NHS partners and some external organisations. Together, a set of robust questions have been co-produced and are now seen as best practice across the county.

### TACKLING HEALTH INEQUALITIES

#### Knowing who we are reaching

##### Role of involvement

The ICB involvement team co-ordinated the refresh of the equality monitoring questions and orchestrated the production of the health inclusion questions.

All involvement leads across the NHS worked together to decide on the final set of questions. It has been agreed that this set of questions should be used across all organisations.

This best practice version was shared with the system wide Equality Forum, system wide Involvement Leads, Health Inequalities Team, Health Inequalities Programme Board including Healthwatch, Public Health, Population Health Management. This has enabled a consistent approach across Lincolnshire.

##### Outputs

- Co-produced one set of monitoring questions for all NHS organisations & partners to use
- All surveys can be reported in the same way
- Ensures robust data monitoring
- Programme boards and workstream receive the same level of reporting

##### Potential outcomes

- Gain a higher level on insight for any specific health inclusion / equalities group.
- Helps to inform decision making
- Able to report on specific groups and highlight data
- Helps inform work programmes whether there is a need for additional engagement to be undertaken

##### Principles delivered:



# Click on the tiles to go to more examples of involvement within specific projects and programmes

NHS  
Lincolnshire  
Joint  
Forward  
Plan

Urgent  
Treatment  
Centres

Women's  
Health Hubs

Lincolnshire  
Young  
Voices

Speech and  
Language  
Therapy  
service



Risk  
Stratification



Pressure  
Ulcer &  
Tissue  
Viability  
services

Wheelchair  
services

ADHD  
services

Community  
Diagnostic  
Centres

CYP  
Asthma,  
Diabetes &  
Epilepsy

LIVES  
Emergency  
Falls  
Response

MSK Hip  
and Knee

NHS  
Waitless App



ICON

Primary care

Maternity  
and  
Neonatal



Community  
Development

A day in the  
life of ...

Digital  
Engagement

Living with  
Cancer



Click this symbol to  
return to this page

# Involving people and communities in developing our NHS Joint Forward Plan



Lincolnshire ICB's commitment to involvement is evident throughout the development of our Joint Forward Plan which we co-produced with patient representatives, stakeholders, clinicians, and staff, basing it on a strong foundation of insight and intelligence. Engagement was undertaken in three phases to allow consideration of feedback at each stage of development and review. It considered Lincolnshire's unique landscape and demographics, reaching out into various communities, groups as well as areas of deprivation and health inequalities.

- We embedded the patient voice in the development and decision-making process with patient representatives as key members of our Joint Forward Plan Steering Group, working alongside Healthwatch, Local Authority representation and leads from our provider trusts and primary care teams.
- Patient representatives attended clinical and organisational workshops to review outputs and ensure alignment of public engagement feedback with the emerging priorities.
- Working in partnership, Healthwatch Lincolnshire have supported the engagement, undertaking a public survey in the first phase of engagement to identify priorities and staff webinars to test these during the last phase.

- The ICB involvement team carried out extensive community engagement in the first phase to understand what was important to the population of Lincolnshire and this was considered by staff, partner organisations and patient representatives at the workshop to identify emerging priorities.
- Further community engagement was undertaken during the second phase of engagement to test these priorities with the public and gain an understanding of what outcomes could be achieved for our communities.
- Following publication of the document we built on this approach with a third phase of continual engagement, involving the wider Lincolnshire population and those under-represented in the earlier phases of engagement, on the document as a whole, the priorities and ongoing monitoring and evaluation of our work undertaken to achieve these. This has demonstrated our approach to ensure regular and transparent communications to everyone involved in the engagement and development of the Joint Forward Plan.

# NHS Joint Forward Plan engagement



Steering group established including patient representatives, Healthwatch, NHS organisations, Local Authority Partners

Insight led- Lincolnshire Joint Strategic Needs Assessment (JSNA), assessments of local communities; needs developed by providers; evidence from research and practice

## Phase 1 engagement - identify priorities

Healthwatch public survey	Involvement Team community conversations including with seldom heard groups	Primary Care Advisory Group (PCAG), Clinical & Care Directorate, ICB & NHS Provider Trusts
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## Collaborative review of engagement feedback

Workshop with patient reps, Healthwatch, clinical leads and partner organisations	Sub working group of patient reps to review engagement alignment with emerging priorities
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## Phase 2 engagement - refinement of priorities and identify desired outcomes

Healthwatch webinars for staff	Involvement Team community conversations including with seldom heard groups	Workshop with patient reps, Healthwatch, clinical leads and partner organisations	Engagement with Non-Exec Directors, Clinical Leads
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All engagement feedback to inform the JFP and priorities. Detailed feedback shared with priority leads to support development of delivery plans

## Phase 3 engagement - review of the JFP with the Lincolnshire population

Discussions with 13 community groups who were under-represented in previous phases of engagement	Public survey to test the five priorities	Public survey to test 'readability' of the JFP document
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# Urgent Treatment Centres Engagement



The ICB Urgent and Emergency Care Team undertook a review of UEC services within Lincolnshire and in particular our Urgent Treatment Centres. As well as looking at what services each of them delivered, how many people attended them at certain times of the day and whether patients were seen within certain timescales, patient experience was also considered to be an important element of the review.

The involvement team visited a number of the UTCs to hear peoples' experiences of their visit, understand the reasons for their attendance and how else they could have been supported by NHS services locally.

To accompany the visits at the UTCs we opened an online survey on 9<sup>th</sup> November 2023 and handed out leaflets to those sat waiting for triage and treatment

## URGENT TREATMENT CENTRES

### UTC visits and online survey

#### Role of involvement

In November 2023 we visited Boston, Lincoln and Grantham UTCs to talk to patient waiting for treatment, over a three-week period. We visited each UTC twice – once during the day and once in the evenings to try and capture as many people as possible.

We spoke to 75 patients during our visits (26 at Lincoln, 24 at Boston and 25 at Grantham). In January 2024, we visited both Spalding and Gainsborough's UTCs where we spoke to an additional 18 people (12 at Spalding; 6 at Gainsborough).

- Promotional poster in UTCs
- Handed out leaflets in UTCs
- Sent survey out to over 9,500 contacts on ICB database
- Shared on social media and Nextdoor
- Made visits at different times of the day

We opened an online survey on 9th November, the survey has remained open to capture further feedback.

Outputs	Outcomes
<ul style="list-style-type: none"> <li>• Spoke to 93 people in total</li> <li>• 326 responses to online survey</li> <li>• Involvement report produced (up to end of November 2023)</li> </ul>	<ul style="list-style-type: none"> <li>• Urgent and Emergency Care Team fully briefed and committed to future improvements</li> <li>• Report presented the Urgent and Emergency Care Board, Health Inequalities Team and UTC project groups and partners</li> <li>• Informed Review of UTCs</li> </ul>

### Principles delivered:



# Women's Health Hubs Engagement



## Introduction

In July 2023, the Women's Health Strategy for England set out the 10-year ambitions for boosting the health and wellbeing of women and girls, and for improving how the health and care system listens to women by using a life course approach.

The strategy encourages the expansion of women's health hubs across the country to improve access to services and health outcomes. These hubs will bring together healthcare professionals and existing services to provide integrated women's health services in the community, centred on meeting women's needs across the life course. Hub models aim to improve access to and experiences of care, improve health outcomes for women, and reduce health inequalities.

In Lincolnshire, the integrated care system (ICS) will work together to provide these services by establishing Women's Health Hubs.

We intend to involve women and girls throughout the whole of the process to ensure we set up the services in the right way that meets their needs in a rural county.



# Women's Health Hubs Engagement



The national strategy sets out the priority areas related to specific conditions or areas of health where issues or opportunities were highlighted.

These are:

- Menstrual health and gynaecological conditions
- Fertility, pregnancy, pregnancy loss and postnatal support
- Menopause
- Mental health and wellbeing
- Cancers
- Health impacts of violence against women and girls
- Healthy ageing and long-term conditions
- Implementation and monitoring progress

The ICB's involvement team are supporting the Women's Health Hubs' project team to have access to a range of information and feedback from Women in Lincolnshire. The engagement plans and activities will develop during 2024/25 as the project progresses.

Click here to see the national Women's Health strategy



## WOMEN'S HEALTH HUBS

### Role of involvement

The ICB will support the development of women's health hubs by encouraging women from all ages to get involved via a number of different routes.

The aims of involvement include:

- Understanding what we can offer in the Hub and whether this meets the needs for the women in Lincolnshire
- Identify what impact the Health Hubs will have on women and girls
- Identify any health inequalities which might exist or be widened due to the introduction of Health Hubs
- Identify possible mitigations for all impacts
- Invite patients to play a more active role in future developments of the service
- Continue the dialogue to help shape and co-produce the future service delivery model

### Outputs

- Engagement plan produced
- Recruited to co-production group and first meeting held in March 2024
- Wide population survey drafted

### Outcomes

- First meeting held in March 2024
- Announcement of the Women's Health Hubs in Lincolnshire has created a lot of interest.

## Principles delivered:



# Lincolnshire Young Voices



Lincolnshire Young Voices is a group of young people with Special Educational Needs and/ or Disability and who are Experts by Experience. This group has been developed for children and young people with Special Educational needs and disability (SEND) - aged 16-25 - to share their voice and is part of the widening participation strategy. They are line managed by the Widening Participation Team from Lincolnshire County Council who are in turn supported by a SEND Locality Team Lead from the Local Authority and the ICB Designated Clinical Officer and the NHS Marketing and Communication Manager.

Lincolnshire Young Voices is now widely recognised nationally.

The focus of the activity in 2023 has been the development of an e-learning resource designed to help professionals across the system to improve communication with CYP with SEND called 'A Rough Guide to Not Putting Your Foot in it' which was co-produced by the LYV members.

[Lincolnshire Young Voices - Online Training Programme Launch 'A rough guide to not putting your foot in it!' - YouTube](#)

The aim of Lincolnshire Young Voices is:

'To provide Lincolnshire local area with a strategic group of young people who **'have a lot to say,'** about improving services for children and young people (aged 0-25yrs) with special educational needs and disability (SEND) and their families in Lincolnshire'.

Lincolnshire Young Voices is now widely recognised nationally.

The work of LYV has continued during 2023 and they will continue to meet in the coming year.





# Lincolnshire Young Voices - achievements



Members of Lincolnshire Young Voices at the launch of 'A Rough Guide to Not Putting Your Foot in It'  
Photograph: Lincolnshire County Council

The Designated Clinical Officer (DCO) team for SEND in Lincolnshire will continue to develop and refine the role and function that supports Children and Young People with Special Educational Needs and Disability in the county whilst sharing and developing best practice regionally and nationally. This will be through a continual process of challenge, monitoring and engagement and by coordinating services and agencies and developing networks.

This is to provide assurance that the ICB is meeting its statutory responsibilities and to ensure that the Children and Young People with SEND in Lincolnshire can access the support they need in their early years, at school and in further education and lead happy, healthy, and fulfilled lives with choice and control over their support.

**Russell Outen-Coe**  
Designated Clinical Officer for  
CYP with SEND

# Children's Speech and Language Therapy Services

## Temporary changes



Across the country, the number of referrals into Children's Speech and Language Therapy (SaLT) has risen sharply.

Lincolnshire Community Health Services NHS Trust's Children's Speech and Language Therapy Service have also seen an increase in the demand for services which has resulted in growing waiting times for assessment and interventions.

To protect and maintain services for children and young people who need it most, LCHS have reviewed the way they carry out assessments and accept referrals into the service.

The aim of this engagement was to gather views on the temporary changes to Children's Speech and Language Therapy Services in Lincolnshire and understand the impacts and explore possible mitigations to these.

### CHILDREN'S SPEECH AND THERAPY SERVICES

#### Role of involvement

##### PATIENT AND PUBLIC

Engaging with service users and the public to understand what impact the temporary changes to the Children's Speech and Language Therapy services might have. A survey to engage with patients was launched on 10 January 2023 and was available for 6 weeks.

##### STAKEHOLDER

Staff/stakeholder survey to understand the different perspectives of people from different organisations and gather views and suggestions for how we might be able to work collaboratively to deliver great care for all children and young people. A survey to engage with staff and stakeholders was launched on 10 December 2023 and was available for 6 weeks.

#### Outputs

##### PATIENT SURVEY

- The survey received 83 responses
- 23 people volunteered to play a more active role within the programme of work

##### STAFF AND STAKEHOLDER SURVEY

- 2 members of staff/stakeholders across different organisations completed the survey

#### Outcomes

- Shared with LCHS service teams, NHS Lincolnshire ICB strategic teams and with Lincolnshire County Council as part of their wider review
- Informed review of services and will shape future services

### Principles delivered:

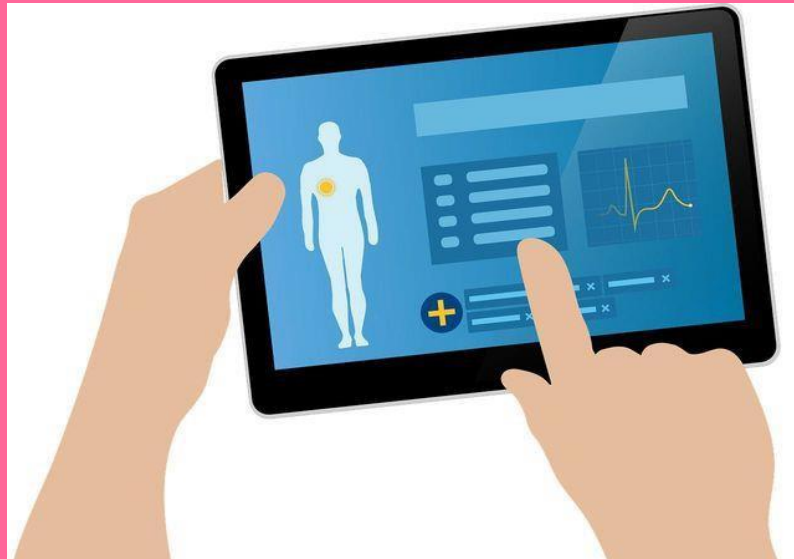




# Risk Stratification engagement

Lincolnshire Medicine Optimisation Team made an application to the Confidentiality Advisory Group to renew the risk stratification tool. Within the application the Optimisation Team needed to demonstrate that they had taken into account patient feedback.

An on-line survey was created to gather public feedback on risk stratification in the NHS.



## RISK STRATIFICATION

### Role of involvement

The Risk Stratification engagement was launched on 1 November 2023 and closed on 13 December 2023 to understand the public's understanding on risk stratification.

The engagement was promoted via patient participation groups in Lincolnshire, NHS Lincolnshire Citizen Panel, Involvement Champions, social media channels, ICB website, and through our extensive stakeholder database.

### Outputs

- Online survey was produced and promoted
- Received 99 responses
- A report was produced

### Outcomes

- The Lincolnshire Integrated Care Board considered the findings
- Informed the work around the ICB risk stratification certificate (renewal).
- The feedback be used to develop a communications plan to fresh communication materials for patients

Principles delivered:





# Pressure Ulcer and Tissue Viability services

Prevention of pressure damage and improving healing of pressure ulcers is a common element in care and is delivered in a range of settings such as in hospital, care homes and patients own homes. Without care, pressure ulcers can become very serious. Some patients can develop an early pressure ulcer and not realise they have one. Once a person has had a pressure ulcer, they are at further risk of developing them again in the future. They may cause pain or mean a longer stay in hospital. Severe pressure ulcers can badly damage the muscle or bone underneath the skin and can take a very long time to heal which could lead to deconditioning and loss of a person's independence and quality of life.

The System Quality Group in Lincolnshire is committed to improving the experience for people who have been affected by pressure ulcers and those who care for them, as well as improving their quality of life. Pressure damage is the highest reported patient safety incident and is a top priority of Lincolnshire Safeguarding Adults Board.

## PRESSURE ULCER AND TISSUE VIABILITY

### Role of involvement

#### PATIENT AND PUBLIC SURVEY

A survey to engage with patients was launched on 12 December 2023 and was available for 8 weeks. The aim of this engagement was to understand the experiences of patients/family members and carers who have been affected by or received care for pressure ulcers in Lincolnshire, as well as exploring how we might improve service delivery in the future.

#### STAFF AND STAKEHOLDER SURVEY

A survey to engage with staff and stakeholders was launched on 12 December 2023 and was available for 7 weeks. The aim of this engagement was to understand the experiences of various staff and stakeholders from different organisations when delivering or supporting care for those affected by pressure ulcers in Lincolnshire, as well as exploring how we might focus or improve service delivery in the future.

Outputs	Outcomes
<b>PATIENT SURVEY</b> The survey received 17 responses 8 people volunteered to play a more active role within the programme of work	<ul style="list-style-type: none"> <li>The feedback informed the pressure ulcer and tissue viability steering group alongside the results of the separate service user and public survey</li> <li>Stakeholder results flagged with ULHT regarding the inequalities of care, staffing and lack of services to make meaningful improvements</li> <li>Project and workstreams leads have been asked to consider what areas co-production can be used to help shape the service going forward.</li> <li>Co-production group will be formed in 2024/25.</li> </ul>
<b>STAFF AND STAKEHOLDER SURVEY</b> 56 members of staff/stakeholders across different organisations completed the survey	

## Principles delivered:





# Wheelchair Services in Lincolnshire

Some people will have short or long term conditions that requires them to use a wheelchair.

The aim of this engagement was to gather views and understand the experiences of service users/family members or carers who have recently used the Wheelchair Service in Lincolnshire and find out what is important to them to shape and monitor the service going forward with a new provider organisation.



## WHEELCHAIR SERVICES IN LINCOLNSHIRE

### Role of involvement

A patient and public survey was carried out inviting the views and experiences of the current service provision for the Wheelchair services in Lincolnshire. We wanted to understand what is important to the service users as we continue to deliver the service going forward and to help us continually develop and improve provision across Lincolnshire.

An online survey to engage with service users was launched on 6 December 2023 and was available for 9 weeks

Outputs	Outcomes
<ul style="list-style-type: none"> <li>Review carried out of previous insight and data received in relation to the wheelchair service</li> <li>101 people responded to the survey</li> <li>29 people volunteered to be more involved in the programme</li> <li>Analysed feedback and findings from the survey and report produced</li> </ul>	<ul style="list-style-type: none"> <li>The report was shared with LCHS service teams, NHS Lincolnshire ICB strategic teams and Lincolnshire County Council as part of the wider review.</li> <li>The project team will continue to monitor the new service from April 2024. Trends and themes will be utilised to measure future improvements</li> <li>Potential for future discussions to be held with wheelchair service users who have volunteered through the survey</li> </ul>

### Principles delivered:



# Lived experience of attention deficit and hyperactivity disorder (ADHD) services



A review was conducted about the care provided to adults with ADHD to enable meaningful improvements.

As part of the review, the project team were keen to learn about and understand the experience of people who have been referred for and undergone assessment and received treatment.

## ATTENTION DEFICIT AND HYPERACTIVITY DISORDER SERVICES

### Role of involvement

A survey was carried out to help us understand the experiences of people who have been referred for and undergone assessment and received treatment of ADHD services in Lincolnshire.

A public and patient survey was launched on 8th November and was available until 29th November 2023 (3 weeks).

### Outputs

- The survey received 146 responses
- 35 people volunteered to play a more active role within the project
- Development of patient expert reference group and workshops
- Report produced

### Outcomes

- Review of patient experience engagement findings and discussed at the ADHD Expert Reference Group workshop
- The feedback from the survey informed the review and development of ADHD services in Lincolnshire and recommendations were put forward to make improvements to the care pathway for adults with ADHD.

Principles delivered:



# Community Diagnostic Centres Patient Experience



Diagnostics are recognised as a priority in the NHS Long-Term Plan and is crucial in delivery of many key treatments. In Lincolnshire, we have developed Community Diagnostic Centres (CDCs) which will be crucial to ease these pressures and continue to diagnose patients quicker. CDCs provide a broad range of elective diagnostic services located away from the main acute hospitals, providing easier and quicker access to tests and greater convenience to patients, as well as relieving pressure on the main hospitals by reducing outpatient referrals and attendances.

There has been a robust process of involvement throughout this programme of work. Patients, public, staff and stakeholders have been involved with their views and feedback shaping the principles and future options for the development of CDCs in Lincolnshire.

The NHS in Lincolnshire successfully opened its first CDC in Grantham in April 2022. Since then it has undertaken over 59,000 diagnostic tests. As part of this we have established a patient experience survey to continually monitor the experiences of patients visiting the CDC. Work is continuing to develop other CDCs on sites across Lincolnshire.

## CDC PATIENT EXPERIENCE

### Role of involvement

We have an ongoing patient experience survey to monitor the experiences of diagnostic services across all sites in Lincolnshire and make improvements where necessary.

We started collecting patient experience data from April 2022 when the project started. Involvement team produced a set of questions to ask patients about their experience which covered from referral from GP, visit to centre e.g. parking, facilities, communication with staff and cleanliness etc – through to results and possible treatment.

There has been posters and leaflets in all the diagnostic centres in Lincolnshire to understand the difference in experiences from the new CDCs and the services in other sites like the hospitals.

The CDC project team continues to meet on a regular basis to advise the project and support the development of the new sites.

### Outputs

- 235 responses
- Patient experience posters and leaflets displayed within the CDC
- Feedback discussed on quarterly basis with the working group and programme leads to continuously monitor experiences and make necessary adjustments
- Review of patient experience engagement findings and action planning with the CDC co-production group

### Outcomes

- Following feedback via the patient experience survey we have installed additional/larger signage outside Grantham CDC to make the entrance more visible for patients
- Trees/hedges cut back to ensure signs are visible

## Principles delivered:



# Community Diagnostic Centres Experience based design study



The Experience Based Design (EBD) approach is a method of designing better experiences for patients, staff and carers. The approach captures the experiences of those using and delivering health care services.

It involves looking at the care journey and in addition the emotional journey people experience when they come into contact with a particular pathway or part of the service.

Staff work together with patients and carers to firstly understand these experiences and then to improve the service they deliver.

As per NHS England requirements, we undertook an EBD study at Grantham CDC during the early part of 2024.

The findings of this engagement informed the application to NHS England to bid for funding to improve patient experiences. The bid was successful.

## CDC EXPERIENCE BASED DESIGN STUDY

### Role of involvement

The aim of this approach is to understand how patients 'felt' at each stage of their journey and to identify areas for improvement to improve the patient experience. Patients experience questionnaires were completed by 50 users of the Community Diagnostic Centre, by either the patient or a representative.

The ICB involvement team conducted face to face patient engagement at Grantham CDC with both visiting patients and staff.

We received mainly very positive feedback: friendly/welcoming staff, good communication/clean facilities, patients overall very happy

Areas for improvement include: more signage directing to the CDC, maps to be included with letter and possible refreshments e.g. drinking water station and installing TVs in waiting room

### Outputs

- 50 responses to patient survey
- 8 responses to staff survey
- The survey received 146 responses
- Report written and presented to programme leads

### Outcomes

- Feedback discussed and considered by programme leads with the aim of making meaningful patient experience improvements at Grantham CDC
- Successfully bid for £12,200 from NHS England to deliver improvements identified through the patient and staff engagement
- Improvements being made based on patient feedback include:
  - Installing TVs in waiting rooms
  - Drinking water stations
  - Orthopaedic chairs in waiting rooms for frail/elderly patients
  - Clearer signage across the site
  - Artwork to brighten up the waiting rooms

**Principles  
delivered:**



# Children and Younger People Asthma, Diabetes and Epilepsy



There are 1.7 million children and young people in England with long-term conditions such as asthma, diabetes and epilepsy.

The NHS Long Term Plan sets out clear plans to reform community care for long-term conditions, leading to better care and a reduction in the pressure on emergency hospital services.

Based on this ambition, the project was implemented to understand experiences of accessing asthma, diabetes and epilepsy services and experiences of care and outcomes. This piece of work was led by the ICB's dedicated Children and Younger People Lead.

The Asthma, Diabetes and Epilepsy engagement for the Children and Younger People services was launched on 24 May 2023 and closed on 31 August 2023.

## CHILDREN AND YOUNG PEOPLE – Asthma, diabetes and epilepsy

### Role of involvement

The aim of the engagement was to gain feedback from children and families who use Asthma, Diabetes and Epilepsy Services in Lincolnshire, in particular capturing views on:

- Access to services
  - Experiences of care and outcomes
  - What is working well and suggestions on what improvements could be made
- The survey was promoted through a variety of engagement channels, and we worked with organisations to help promote the survey. These included children's centres, children's hospital wards, Lincolnshire County Council Youth Forum, Better Births and Neonatal Teams, Lincolnshire schools, Lincolnshire Parent Carer Forums, Holiday Clubs, University's, Colleges.

Outputs	Outcomes
<ul style="list-style-type: none"> <li>• Received 75 responses to the survey from both a mixture of parents/carers and children and younger people.</li> <li>• We visited 18 places and 1 clinic to promote the survey and speak to families that use the services</li> <li>• 23 people expressed they would like to be involved further by sharing their stories; 14 of these are now involved in the diabetes project</li> <li>• Report produced to explain the findings of the survey</li> </ul>	<ul style="list-style-type: none"> <li>• The report presented to the Children and Young People Transformation Board and the clinical teams within secondary care</li> <li>• Review of the transition of young people to adult services</li> <li>• <b>Asthma</b> - new treatment guidance has been created; steps to increase access to spirometry testing; ways to increase asthma reviews in the community; Asthma Friendly School accreditation guidance written.</li> <li>• <b>Diabetes</b> – implementation of social groups for children and young people; attending events to create diabetes awareness. Plans for psychology service.</li> <li>• <b>Epilepsy</b>- Business case to increase the children and young people epilepsy service at ULHT</li> </ul>

### Principles delivered:



# Urgent and Emergency Care

## LIVES Emergency Falls Response



Emergency Falls Response is provided by trained and experienced community first responders with additional enhanced training in moving and handling patients and emergency care, including advanced pain relief. In Lincolnshire this is provided by LIVES.

The purpose is to provide a timely response to people who have fallen in their homes or the community, and predominantly do not require hospital attendance. Increasingly, the LIVES Falls Response teams are dispatched to people with injury of varying severity, and they can provide rapid assessment, prompt pain relief and escalate cases within the 999 system. This reduces the burden on NHS services, streamlines patient care and reduces complications arising from a prolonged ambulance delay.

In addition, the LIVES Falls Response service provides a response to immediate life-threatening emergencies in the community, including category 1 cardiac arrests. The teams work closely with Community Emergency Medicines clinicians to provide enhanced medical and trauma care in the community.

The project was set up to look at expanding operational hours for the Falls Response service to enable the team to provide increased coverage across Lincolnshire.

### LIVES Emergency Falls Response

#### Role of involvement

A survey was carried out with the public was launched on 14 September 2023 and was available for 6 weeks.

The survey was promoted through several channels including the fortnightly involvement bulletin. The ICB involvement team worked with partners, such as the Lincolnshire Resilience Forum, to share the survey across networks, partnerships and social media channels.

#### Outputs

- Worked with partners to engage with members of the public
- Worked with staff and stakeholders
- Received 181 responses to the survey

#### Outcomes

- The report was shared with contracting colleagues and senior managers within Urgent Care for consideration
- The feedback from the survey informed the development of the LIVES Falls Response Service, including overnight provision.
- Feedback played a key role in considerations for the 2024-25 contract

### Principles delivered:



# Urgent and Emergency Care NHS Waitless App



The NHS in Lincolnshire launched an app for mobile phones which shows where to access urgent and emergency care services across Lincolnshire.

The app shows users the nearest urgent treatment centres (UTCs) to their location and all available pharmacies where people can seek alternative treatment.

Users are able to see current waiting times, queue numbers and travel-time so people can make an informed decision about where to seek the fastest treatment for minor illness and injuries.

We invited members of the public to give us feedback on the App but were also interested in promoting it to those who had not hear of the WaitLess App for Lincolnshire.

## NHS WAITLESS APP

### Role of involvement

A survey was carried out to gather feedback from members of the public who have heard of the NHS WaitLess app or had used it in Lincolnshire.

The survey was launched on 09 August 2023 and was available for 6 weeks.

Views were sought on:

- Using the app – such as how useful and easy to use it is
- Whether users followed the app's suggestions, and how to improve the app going forward

The survey was promoted through several channels including the fortnightly involvement bulletin. The ICB involvement team worked with partners, such as the Lincolnshire Resilience Forum, to share the survey across networks, partnerships and social media channels.

### Outputs

- We worked with partners to engage with members of the public
- We worked with staff and stakeholders
- Received 109 responses to the survey
- Survey analysis completed and report produced

### Outcomes

- The report was shared and considered by Deputy Head of System Coordination Centre and Operational Improvement Manager for future service improvements

**Principles delivered:**



# Musculoskeletal (MSK) Hip and Knee Programme



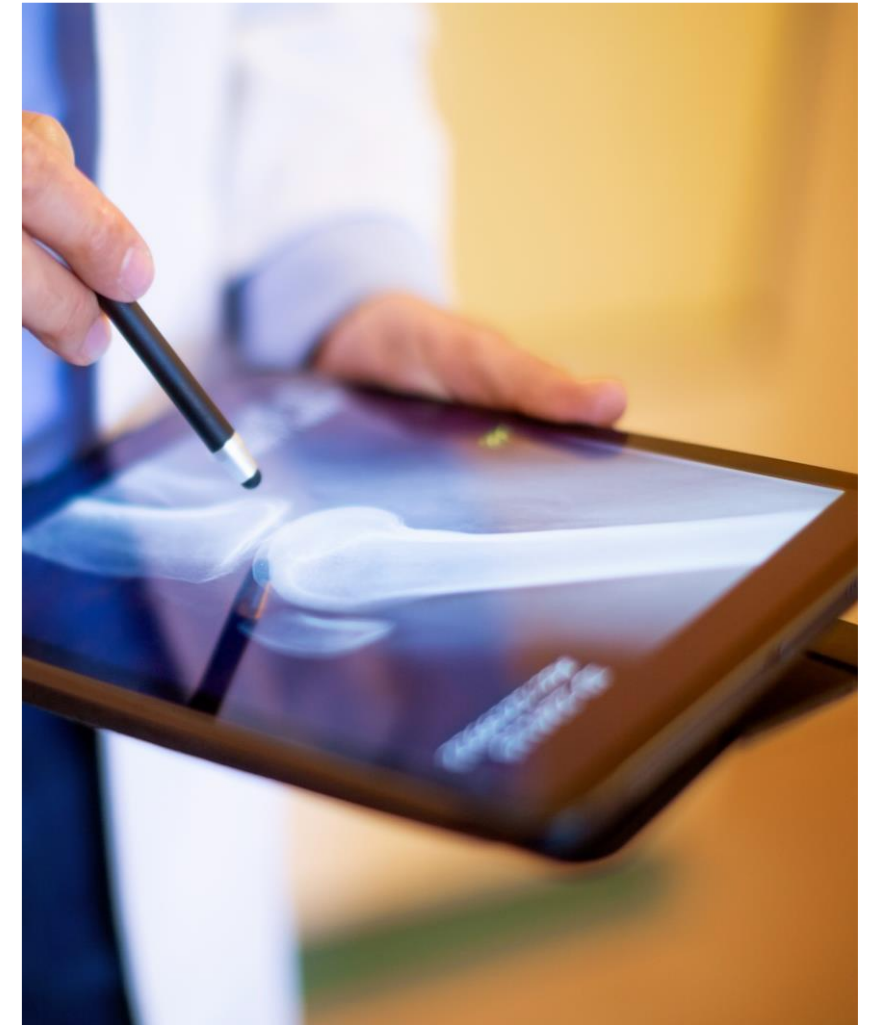
A review of Lincolnshire's Musculoskeletal (MSK) services offered opportunities for improvement for both patients and staff. This focused on supporting patients to achieve better outcomes, care, and experience, while helping the multidisciplinary teams to work better together across different organisations through better care co-ordination and simplifying processes.

Patients, the public and staff have previously been involved through a robust engagement approach and clinicians have now re-designed the elective hip and knee joint replacement care pathway to support a single MSK service working across primary care, community, acute and social care services. Improved and personalised care for people is at the heart of this, promoting shared decision-making and self-management through early health promotion and prevention.

A co-production group has also been established in 2023 and has been meeting regularly to support the programme of work. This is led by Every-One a local charity, ensuring that those with lived experience are able to share their continued experiences and recommendations across each stage of the pathway.

Patient experience feedback has been captured during the last 12 months along each stage of the new pathway. This feedback has been shared with the co-production group to help drive service improvements.

Self management opportunities and techniques have been promoted publicly throughout 2023 / 2024.



# Musculoskeletal (MSK) Hip and Knee Programme Engagement activities



## MUSCULOSKELETAL (MSK) HIP AND KNEE PROGRAMME

Co-production group & Patient Experience Survey

### Role of involvement

Following the engagement undertaken during 2022 with patients, carers and representatives to understand their experiences of the MSK service and the proposed new care pathway, a MSK Co-production Group was established and has continued to run throughout 2023.

The co-production group is attended by 10 patient representatives who have lived experience, along with staff from ULHT, LCHS, including First Contact Practitioners. The group meets monthly.

Patients who had been identified with an MSK issue were asked to complete the online / paper copy survey. This may have been through Grantham Hospital or First contact practitioner.

Patient experience survey		Co-production Group	
Outputs	Outcomes	Outputs	Outcomes
<ul style="list-style-type: none"> <li>• Patient experience survey carried out</li> <li>• 90 responses in total across the year</li> <li>• Survey open during 2023</li> </ul>	<ul style="list-style-type: none"> <li>• Findings to be shared with Clinical Reference group, once established</li> <li>• The findings of this survey have been reported to the Personalisation Task and Finish Group</li> <li>• Patient experience data used to inform co-production group agendas and work programme</li> </ul>	<ul style="list-style-type: none"> <li>• Developed a Frequently Asked Questions sheet for patients</li> <li>• Supported the Joint Aches and pains Hub event</li> <li>• Reviewed ULHT patient information which will continue to be ongoing throughout 2024</li> </ul>	<ul style="list-style-type: none"> <li>• The co-production group continues to be fully engaged</li> <li>• Example of good practice</li> <li>• Supported by NHS staff across system</li> </ul>

## Principles delivered:



# Musculoskeletal (MSK) Hip and Knee Programme

## Engagement activities



### MUSCULOSKELETAL (MSK) HIP AND KNEE PROGRAMME

Shared decision making

Role of involvement

Before promoting shared decision-making tools and personalised care approaches, the Personalisation Team developed a survey for MSK staff. The aim was to find out what confidence there was with personalised approaches and the decision support tools.

As well as gathering feedback from the staff survey, this was an opportunity to help encourage colleagues to try out tools in order to learn what works and what needs to improve. Visits have taken place with First Contact Practitioners (FCPs) at GP practices and Orthopaedic clinics to see how the tools really work in practice in ensure they are successful.

#### Outputs

- 33 responses to the survey from MSK staff.
- Feedback helped to identify learning and inform the work programme.
- Increased engagement with staff, First Contact Practitioners at GP practices and Orthopaedic Clinics.
- Shared decision-making training was held at Boston, Lincoln and Grantham.
- LCHS FCPs training on shared decision making was held with over 100 attendees

#### Outcomes

- Better informed programme of work
- Trial run to test decision support tools
- Training programme conducted



Principles delivered:



# Musculoskeletal (MSK) Hip and Knee Programme Engagement activities



## MUSCULOSKELETAL (MSK) HIP AND KNEE PROGRAMME

Grantham Joint Aches and Pains Hub

### Role of involvement

The Joint Aches and Pains Hub was the first of its kind to be co-ordinated by the Personalisation Team. It was designed to bring together many of the services that support people with musculoskeletal conditions such as joint aches or arthritis. There were representatives from GP surgeries, the hospital, One You, community physiotherapists, pain management service, Lincolnshire County Council, charity organisations, South Kesteven District Council, Citizen's Advice and lots more.

The event had two key purposes:-

- To provide a one-stop-shop to help people living with joint aches and pains.
- Unite the workforce so that colleagues know what is out there and what can be offered to the people they work with.

There was a range of organisations for members of the public to visit and some regular services were lifted out of their usual NHS settings and placed into spaces at the event. This included two physio bays and four wellbeing pods. The whole event ran without additional budget as partners re-located their usual working practices and activities.

There were plenty of opportunities to have informal discussions with services such as physiotherapists. Visitors could sign-up to weight-loss programmes, join talks to better understand pain and enrol on leisure activities such as Goodboost and Health Walks.

### Outputs

- Over 150 people attended; 69 completed the evaluation form
- 27 organisations attended; 23 completed evaluation form
- Video, podcast, new article and blog were created and shared

### Outcomes

- The feedback from the 2 survey's has been shared with the Personalisation Board and the Personalisation Task and Finish Groups.
- Created an opportunity for networking amongst organisations.
- Created easy access to services all in one place for patients
- There has been interest to replicate the same event across the county during 2024. Boston Primary Care Network have an event arranged on 16 July 2024, focussing on falls.
- Independent evaluation by ROC Research Consultancy – the evaluation recommendations will be in Spring 2024

## Principles delivered:



# Musculoskeletal (MSK) Hip and Knee Programme



Gemma Wright, Personalised Care Lead at K2 Primary Care Network, said; “We invited people to the event that were on a waiting list. We wanted them to know all the fantastic opportunities and services that are available to them in their neighbourhood. Through collaborative working we joined forces with a number of organisations that shared our ambition to meet the needs of people living with joint aches and pains.”

Early evidence suggests that people have already signed up to and began attending support groups following the day. A full evaluation of the event and the impact of it is underway in the hope that this way of working can be achieved for other health conditions. Matt added: “A truly integrated health system makes the most of all of the services and assets we have available to us; NHS, local authority and community based.”

Video of the event can be seen by clicking on the link:

<https://vimeo.com/910392793>



# Working with teams across the ICS ICON



ICON is a programme adopted by health and social care organisations in the UK to provide information about infant crying, including how to cope, support for parents/carers, how to reduce stress and prevent abusive head trauma in babies.

The evidence-based programme consists of a series of brief interventions that reinforce the simple message making up the ICON acronym:

- Infant crying is normal and it will stop
- **C**omfort methods can sometimes soothe the baby and the crying will stop
- **O**k to walk away for a few minutes if you have checked the baby is safe and the crying is getting to you
- **N**ever ever shake or hurt a baby

## ICON

### Role of involvement

The safeguarding team required support to promote ICON week which raises awareness of infant crying and how to cope to support parents/carers and prevent serious injury, illness and even death of young babies as a result of Abusive Head Trauma that happens when someone shakes a baby.

The activities included:

- Promotion of ICON week via social media
- Shared details of ICON week in the Bulletin and via Nextdoor
- Provided the safeguarding team with details of men's groups across the county to promote ICON
- Promoted to more information on website .... [Infant crying support - ICON Cope - Lincolnshire ICB](#)

### Outputs

- We worked with partner organisations to promote and spread the information
- We carried out communication campaign
- Promotion of information across the county

### Outcomes

- Enabled the safeguarding team and partners to reach out into communities
- Shared information

**Principles delivered:**



# Working with teams across the ICS ICON

Nurse, health visitor and founder of ICON, Dr Suzanne Smith, said:

“ICON is about sharing messages of support and advice to parents and carers who might be struggling to cope. We want to normalise the fact that babies do cry and some aren’t easily soothed and we want to share information far and wide about what to do in these situations and how to stay calm.

“By sharing these vitally important messages and coping techniques to carers, we are working towards reducing the risk of harm to babies and protecting them from abusive head trauma (AHT) which is utterly preventable”



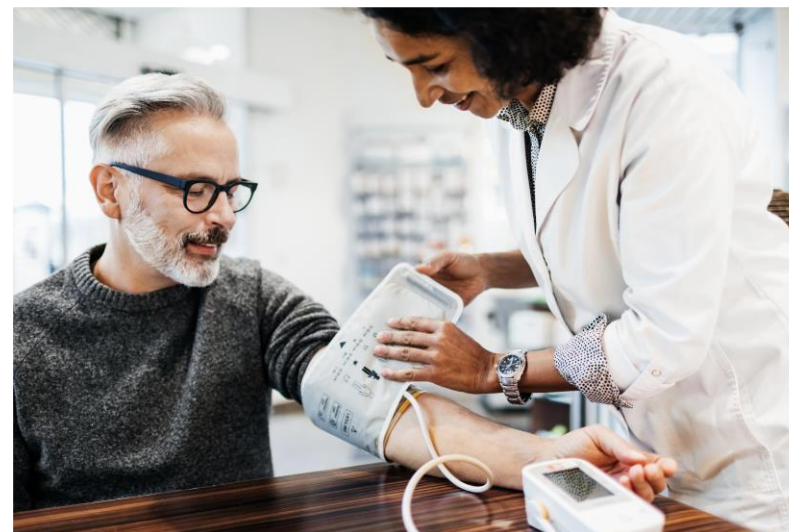
# Primary Care Engagement

Within the ICB, Primary Care has dedicated support from a Primary Care Communications and Involvement Team to ensure ring-fenced capacity to fully involve our patients in the development of services.

The team has supported service changes within Primary Care, ensuring meaningful engagement and consultation takes place with patients, carers and communities.

Examples of our work this year include:

- Listening to patients and communities by holding **listening clinics**
- Ensuring communities can have their say in **new developments**
- Involvement of patients in the proposed **change of GP premises**
- Setting up a **Primary Care co-production group**
- Public engagement on **Enhanced Access Hub**
- **Co-ordinated partners feedback** to ensure the patient's voice is heard
- Supported **Primary Care Networks** engagement
- Continued to support **Patient Participation Groups and Patient Council**





# Primary Care Listening clinics

Listening Clinics enable the ICB and partners to listen directly to patients using services. For primary care, these are patients registered at their GP practices.

By visiting a venue and talking to patients we can ask them about their experiences of healthcare.

Each Listening Clinic event is promoted widely to encourage as many patients as possible to attend and share their experiences of healthcare.

Patient stories and feedback are recorded and helps form part of information considered when looking in depth at a service or service provision.

The final report is shared with the relevant teams and organisations, which in turn develop actions to improve quality, service delivery and the patient experience.





# Primary Care Listening clinics

## PRIMARY CARE LISTENING CLINIC

### Kirton Medical Centre

#### Role of involvement

The ICB worked with Kirton Medical Centre to hold a listening clinic in December 2023 to understand the concerns and challenges their patients faced in accessing services. As well as holding a face-to-face clinic in the practice, we gave patients other opportunities to give feedback, so an online survey and telephone survey was also offered to them.

The Listening Clinic was advertised in several ways:

- A poster in the surgery advertising the date of clinic – together with information for the online survey and telephone number
- Kirton Parish Council displayed posters in the community
- The practice text patients to inform them of the listening clinic complete with a hyperlink to the survey

The Listening Clinic was supported by the ICB's Lead Quality Officer, Deputy Director of Nursing, Primary Care Involvement Manager and other ICB colleagues.

Outputs	Outcomes
<ul style="list-style-type: none"> <li>• Promotional poster produced to advertise the listening clinics</li> <li>• Practice text patients to advertise the event and survey</li> <li>• 37 attended the listening clinic</li> <li>• 945 responses to online survey</li> <li>• Initial feedback was reported to the practice on the day of the listening clinic and a full report was provided</li> </ul>	<ul style="list-style-type: none"> <li>• Practice fully engaged in the engagement activity</li> <li>• Feedback will be used to improve services within the practice</li> <li>• Public were able to speak to ICB staff about their concerns.</li> </ul>

### Principles delivered:



## PRIMARY CARE LISTENING CLINIC

### Sidings Medical Practice

#### Role of involvement

Engagement with the patient population for Sidings Medical Practice took place in August 2023 via a listening clinic and supplementary survey.

The Listening Clinic was undertaken at the Sidings Medical Practice and was supported by the ICB's Senior Lead Nurse for Quality and Safety, Lead Quality Officers, Primary Care Involvement Manager and other ICB colleagues. Two members of the PPG attended the Listening Clinic, PPG chair and secretary. The Listening Clinic was advertised in the surgery via posters which also included the link and QR code to the survey

In addition to the face-to-face listening clinic, an online / telephone survey was carried out and was open from 27<sup>th</sup> July 2023 for four weeks.. The Practice text the survey link to their patient list to those who had consented to receive text messages.

Outputs	Outcomes
<ul style="list-style-type: none"> <li>• 158 responses to the patient survey</li> <li>• Advertise the listening clinics</li> <li>• Practice able to promote the activities by texting patients to advertise the event and survey</li> <li>• 31 people attended the listening clinics</li> <li>• Report produced</li> </ul>	<ul style="list-style-type: none"> <li>• Report shared with Practice</li> <li>• Findings discussed at the East Locality Primary Care Operational and Quality Assurance Group</li> <li>• Fully engaged PPG</li> <li>• Public were able to voice their concerns to ICB</li> </ul>

### Principles delivered:





# Primary Care Listening clinics

## LISTENING CLINIC

### Louth Urgent Treatment Centre

#### Role of involvement

East Primary Care Quality Assurance Group reported a high number of attendance at the Urgent Treatment Centre (UTC) in Louth and wanted to undertake a Listening Clinic to understand why patients were presenting here. It was agreed that the ICB and LCHS should visit the UTC and speak to patients about why they had visited the UTC and whether they had tried to access health services somewhere else.

Patients were spoken to whilst sat in the waiting room prior to their appointments.

Outputs	Outcomes
<ul style="list-style-type: none"><li>Spoke to a total of 8 patients</li><li>Collated patient experiences</li><li>Report produced in January</li></ul>	<ul style="list-style-type: none"><li>Reported to the County Primary Care Operational and Quality Assurance group</li><li>Feedback reported to Urgent and Emergency Care Team</li><li>Informed the next stage of action and that further information was needed to fully understand the issues.</li></ul>



Principles delivered:

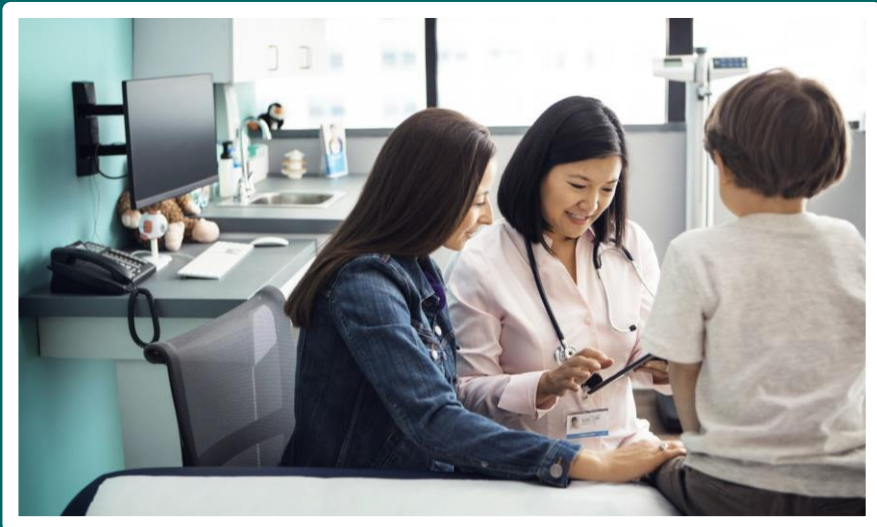




# Primary Care PE21 project

As part of a regeneration masterplan for Boston, the PE21 project includes a potential new development of an integrated health and care centre in the town centre.

This opens up potential opportunities for the local GP Practice, Liquorpond Surgery to move location and become part of the new health and care centre. Whilst it remains in the development phase, we were keen to involve patients and members of the public in the initial conversations.



## PRIMARY CARE PE21 Project

### Role of involvement

The ICB's Primary Care Involvement Team supported Liquorpond Surgery to ensure that members of the public and patients could share their feedback throughout this process.

Both the ICB and the surgery are keen to understand any potential impacts for patients if the practice moves and how it can mitigate any of these impacts early in the process.

An engagement strategy has been produced on behalf of Liquorpond Surgery which includes how the practice can have a continuous dialogue with their patients including a formal consultation, should the practice wish to move into the new health center.

The strategy also includes how both the ICB and Liquorpond Surgery can involve the wider population in Boston and surrounding villages regarding the proposed new development so will be carrying out further activities to hear feedback.

### Outputs

- An engagement strategy
- Formal consultation plan drafted
- Initial conversation with PPG happened in January 2024
- PPG to act as patient group for project

### Outcomes

- Rolling programme of engagement
- Continuous dialogue with patients and members of the public
- Commitment for feedback to develop the service

## Principles delivered:





# Primary Care

## Proposed Closure of Springcliffe Branch premises

Brant Road and Springcliffe Surgery made a proposal to the ICB to close the Springcliffe branch premises and develop the current provision out of the Brant Road site.

The proposed closure means that patients in the Springcliffe area would have to travel to the Brant Road site when a face-to-face appointment is required rather than having the choice of both sites.

Closing the Springcliffe site would allow the practice to continue with plans to develop the Brant Road site by diverting running costs. The practice have also secured some Section 106 funding for specific projects.

The practice plans include:

- Conversion of rooms into extra clinical rooms
- More rooms would mean extra appointments for patients previously accommodated at Springcliffe Surgery.
- Improved recreation and rest facilities for staff
- Development of the practice facilities for GP training
- Develop minor surgery service to use the skills of two new salaried GPs
- Increased use of practice premises for PCN staff such as Musculoskeletal Practitioners, Clinical Pharmacy staff and Mental Health Practitioners.

The ICB primary care team considered the application proposal through due diligence in September 2024, and the practice were asked to carry out a formal public engagement and consultation process before a final decision will be made by the ICB.

### PRIMARY CARE

#### Closure of Springcliffe Branch premises

##### Role of involvement

The ICB's Primary Care Involvement Team supported Brant Road surgery with their public engagement and consultation process regarding the proposed closure of the branch premises at Springcliffe. Patients received direct communication from the surgery via text or letter – directing them to further information on their website. The ICB supported the practice staff at each of the events.

The activities consisted of:

- Patient survey (online and paper copies) - ran between 30/11/23 - 22/2/24
- 3 patient engagement events were held:
  - 14th December, 6pm-8pm at the Brant Road site.
  - 12th January, 2pm-4pm at the Springcliffe site.
  - 14th February, 10am-12pm at the Springcliffe site.

Outputs	Outcomes
<ul style="list-style-type: none"> <li>• Formal consultation plan</li> <li>• Online survey (paper copies available)</li> <li>• 3 events held open to patients</li> <li>• Fully engaged staff &amp; PPG</li> <li>• We spoke to 7 patients face-to-face</li> <li>• Received 235 responses to survey</li> </ul>	<ul style="list-style-type: none"> <li>• Fulfil statutory duties – public consultation</li> <li>• Full commitment for feedback to develop the service</li> <li>• Report presented to PCCC in March</li> <li>• PCCC approved the application to close branch site</li> </ul>

### Principles delivered:



# Primary Care Glebe Park Practice



Glebe Park Surgery is located in a bungalow in the middle of Glebe Park residential estate in Lincoln. It was opened over 40 years ago when the size of the estate was relatively small. In the last 20 years there has been significant growth in the area with the list size more than doubling from 2,695 patients in 1999 to 5,664 in 2023.

As services in Primary Care have also increased, the practice found themselves struggling to meet their patient demand. Glebe Park Surgery wanted to develop services and needed to create additional estate capacity.

Estate options were considered to relocate the surgery into larger premises which would have the capacity needed now but also the potential to expand in the future.

The ICB and practice commenced with an engagement process on 20<sup>th</sup> February which ran until 15<sup>th</sup> May 2023. The aim of this process was to seek the views of registered patients and other key stakeholders on the proposal to move.

All registered patients received direct communications via text message or letter. The letter and text communication invited registered patients to complete the survey and to attend engagement events, to raise any queries they may have.

The letter and text message were also translated into polish which was the second most common spoken language of patients registered at the practice.

## PRIMARY CARE

### Glebe Park Practice

#### Role of involvement

The ICB's Primary Care Involvement Team supported Glebe Park practice with their public consultation process regarding the proposed move to Carlton Centre.

The engagement / consultation consisted of:

- 12 week engagement period (20<sup>th</sup> February – 20<sup>th</sup> May 2023)
- Patient survey was conducted
- 2 patient engagement events were held at the practice and were run by the practice supported by ICB staff.

#### Outputs

- 27 patients attended the events
- 415 responses to the survey
- Responses and feedback analysed and we produced a report

#### Outcomes

- Fulfil statutory duties – public consultation
- Commitment for feedback to develop the service
- Full report presented to practice PCCC in March 2024
- PCCC approved the move

## Principles delivered:





# Primary Care Enhanced Access Hub – Meridian Medical PCN

The aim of this project was to seek the views of the Primary Care Network's (PCN) patients and other key stakeholders on the PCN's proposal to move the Enhanced Access Hub from Louth Hospital to the Greta Ross clinic at the East Lindsey Medical Group in Louth.

Enhanced Access is a service provided by GP practices where routine appointments are available outside of the practices core opening hours of Monday to Friday 8.00am - 6.30pm.

Meridian Medical PCN provided 50% of their Enhanced Access service from the Woldside building at County Hospital, Louth and the remaining 50% of appointments from each GP practice within Meridian Medical PCN.

The PCN proposed this move due to the associated lease costs of providing the service from the Woldside Clinic. The PCN believed it would bring positive benefits to patients as there will be increased PCN funding for patient care rather than estate.

## PRIMARY CARE

### Enhanced Access – Meridian Medical PCN

#### Role of involvement

The ICB's Primary Care Involvement Team supported the Meridian Medical Primary Care Network to inform and involve the patient population about the proposed changes to accessing the Enhanced Access Hub.

The activities ran from 3<sup>rd</sup> August until 10<sup>th</sup> September 2023. The information was shared amongst the community, stakeholders and across networks within the area. Patient groups such as the Patient Participation Group were asked to share the information and the ICB shared the survey information with stakeholders such as MPs, local councillors, Healthwatch Lincolnshire, local medical committee and the local press.

#### Outputs

- Promoted through PCN's members practices via posters, websites, social media and PPGs
- PCN PPG involved in distribution of posters in the community
- Survey promoted by ICB
- 165 completed survey
- Responses analysed and reported

#### Outcomes

- Fully engaged and committed PCN
- Collaborative working
- Engaged stakeholders
- Presented to Primary Care Commissioning Committee (PCCC) in September 2024 in public meeting
- PCCC did not approve the move after considering patient feedback and stayed in current location

## Principles delivered:





# Primary Care

## Primary Care Co-production group

The ICB presented the Primary Care System Level Access Improvement Plan to our Patient Council meeting and identified opportunities to work together to shape and refine this. Subsequently a co-production group was established to also strengthen collaboration with our patients and public to improve their access to digital tools and services.

The Primary Care Co-production group has been established to work with Patient Participation Groups (PPGs) to:

- develop a summary version explaining the Level Access Improvement plan
- explore whether a training campaign / programme is needed to improve access to digital tools, like the NHS app and other services for patients and the wider community
- support development of projects
- Improve primary care communications into communities.

### PRIMARY CARE Co-production group Role of involvement

The ICB's Primary Care Involvement Team is supporting patient involvement for the Primary Care System Level Improvement Plan. The co-production group first met in January 2024 where members of the groups agreed to help shape the summary version of the improvement plan.

The second meeting discussed access to NHS digital tools like the NHS app and individual practice online systems. The need to strengthen primary care communications into communities was also identified. The plan is to be able to empower and teach communities on how to use digital platforms to give them better access to services with PPGs helping to train people in the communities.

The work of the Primary Care Co-production group will continue throughout 2024 and 2025.

Outputs	Outcomes
<ul style="list-style-type: none"> <li>• Co-production group established</li> <li>• Programme of work for group agreed</li> <li>• Summary document drafted</li> <li>• Immediate improvements agreed</li> <li>• Able to access willing volunteers (PPGs)</li> <li>• ICB digital team to work with co-production group</li> </ul>	<ul style="list-style-type: none"> <li>• Engaged and committed project team</li> <li>• Agreed that feedback will develop the service</li> <li>• Will co-produce training plan for public digital services.</li> <li>• Full report presented to PCCC in March 2024</li> <li>• Potential to improve access to primary care</li> </ul>

### Principles delivered:





# Primary Care

## Primary Care Networks Engagement

The Primary Care team attended Primary Care Network (PCN) managers' meetings to discuss effective mechanisms for engaging and involving people and communities within Lincolnshire.

This also included how existing Patient Participation Groups (PPGs) could get involved.

Some good progress has been made across PCN areas and will continue in 2024-25.

### PRIMARY CARE

#### Co-production group

#### Role of involvement

The following PCNs have established patient groups:

- **Boston PCN**
  - Two PPG representatives and a Youth Ambassador who now attend their Strategic Partnership Board Meeting.
  - Set up a Youth PPG meeting
  - Intend to set up a Parent Carer PCN PPG meeting.
- **Meridian PCN**
  - Established a PPG meeting with member practice PPG reps.
  - The group are looking to establish their terms of reference and work plan for 2024/2025.
  - Supported by ICB Involvement manager
- **East Lindsey PCN**
  - Plans to get more patients involved
  - First meeting was attended by two PPG reps
- **South Lincolnshire Rural and Spalding PCNs**
  - South PPG cluster meeting held quarterly
  - Meets regularly and there is attendance from PCN managers.
  - The meeting is lead by Neighbourhood Team Lead South.
  - Supported by ICB Involvement manager

#### Outputs

- Reach new people and communities
- Look at issues at community level
- Supporting PCNs with engagement activities
- Areas of good practice
- ICB supporting PCNs

#### Outcomes

- Involving patients helps PCNs to meet their statutory duty to involve
- Patient groups will drive improvements across PCNs
- PCNs fully committed to listening to patients and members of the public

### Principles delivered:



# Primary Care Patient Participation Groups



Ongoing support has been provided to our GP Practices with their contractual requirement to have a Patient Participation Group (PPG). Audits have continued this year to understand which practices require further support to reinstate their groups or to encourage more attendance from different people to encourage representation of their practice population.

Support meetings and attendance at PPG meetings has taken place to support practices in their PPG requirements. This work has resulted in improved representation of PPGs at the ICB locality and County wide patient council meetings.

The Primary Care Involvement has supported PPGs with recruitment for new members including younger people. One PPG has now set up a young person's PPG.

The ICB has also continued to promote the ICB toolkit for PPGs to provide advice, support and templates for their groups and meetings to encourage best practice and innovation.

## **PPG Awareness Week - 31st May - 6th June, 2023**

The ICB showcased PPGs activities on social media during PPG awareness week. PPGs used awareness week to promote PPGs and as an opportunity to celebrate their work and increase membership.

[Join a Patient Participation Group \(PPG\) -  
Lincolnshire ICB](#)





# Primary Care

## Patient Participation Groups – achievements 2023/24

- ✓ PPGs undertook patient surveys to gather patient experience data for the practices.
- ✓ PPGs promoted the different roles within primary care to patients in the practices.
- ✓ They supported practices to reduce the number of DNAs.
- ✓ Some PPGs are working to train the community how to use digital offerings such as the NHS App, WaitlessApp.
- ✓ PPGs have networked to support each other and learn from best practice. The Deepings PPG have set up a PPG networking space on NHS Futures so that PPGs can share ideas and resources.
- ✓ PPGs in the South Locality have arranged a successful health and wellbeing event that took place on 26<sup>th</sup> September at Bourne College. 182 people attended. There were 30 stalls and 10 taster events, where you could join a choir, walk in football, dancing, move it or lose it. The Co-op supported the event by supplying teas and coffees. South Kesteven District Council provided the premises for free.
- ✓ Swineshead PPG have supported the PCN to arrange a Free Health and Wellbeing Check Up at Swineshead Methodist Church.
- ✓ Stickney PPG undertake well-being sessions on Monday mornings in the village hall.
- ✓ Beechfield, Gosberton and Lakeside PPGs have arranged community training such as CPR training and Diabetes and epilepsy awareness
- ✓ Lakeside Surgery have arranged Patient engagement sessions. These are held quarterly, and a clinician attends e.g. session on public defibrillators run by social prescribers
- ✓ Nettleham, Welton and Deepings PPGs are running effective community car schemes to improve access to services with excellent patient and community feedback.
- ✓ Moulton PPG successfully received Shine mental health funding for wellbeing events and money to develop social media.
- ✓ PPGs running APMs to support the role of PPGs and increase membership.
- ✓ Many PPGs undertook events as part of the PPG awareness week 2023 and recruited new members.
- ✓ PPG promotional video produced with South cluster (2 PCNs, South Lincs Rural and Spalding) with support from the ICB.
- ✓ PPGs have helped practices with covid and flu clinics and use the opportunity to promote the PPGs and engage with communities.
- ✓ PPGs have undertaken fund raising activities to support practices

# Primary Care Patient Council



The voices of the PPGs and the patients they represent are heard within the ICB through our bi-monthly Patient Council meetings. The meetings rotate every two months between the three Locality Patient Council meetings and the County wide meeting.

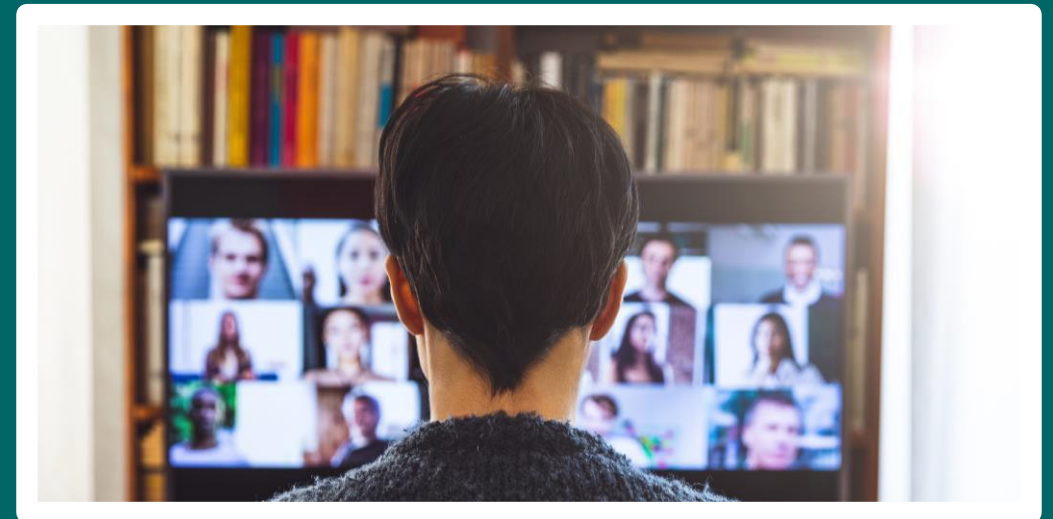
The Locality Patient Council meetings focus on feedback received from PPGs within their locality. These meetings are attended by PPG representatives in each locality, the Primary Care Involvement Manager and ICB Locality Quality Leads.

At the County wide meeting, the ICB share opportunities for involvement and to influence local discussions. These are attended by members of the ICB's Involvement Team and Associate Director of Nursing and Quality and are usually conducted online.

Feedback from these meeting are reported into the ICB Operational Quality Assurance Group meetings, and Primary Care Quality Assurance Group and Oversight meetings, with any issues escalated to the System Quality and Patient Experience Committee and Lincolnshire ICB Board.

These locality and County wide meetings have a dual purpose:

1. To hear feedback from the PPGs on any concerns their practice patients have about local NHS funded services as well as sharing the work and successes of their groups
2. To enable the ICB to share information with the PPGs on current programmes and campaigns to share widely and provide opportunities for discussion and involvement in any engagement activities.



# Lincolnshire's Patient Council



## **During these meetings our PPGs have:**

- ✓ Raised concerns over access to dental services; receiving medication when discharged from hospital
- ✓ Capacity issues at their GP practices
- ✓ Large waiting lists; patient transport; locality of vaccinations and having to travel further
- ✓ Wanted more information on LCHS services and covid vaccinations
- ✓ Concerns about pharmacies and availability of medicine
- ✓ Want consistency of engagement across PCNs
- ✓ Wanted peer support to increase diversity in PPGs
- ✓ Sharing tips on recruiting for PPGs

## **The ICB have shared with and involved PPGs in:**

- ✓ ICB WaitLess phone App
- ✓ Patient Council Term of Reference
- ✓ PPG awareness week 2023
- ✓ New Commissioning Arrangements of Primary Care: Pharmaceutical Services, Primary Ophthalmic Services and Primary and Community Dental Services
- ✓ Primary Care, Care Navigation
- ✓ Primary Care System Level Access Improvement Plan
- ✓ Improving Access to NHS Digital Services and Community Training / Involvement
- ✓ The Pharmacy First Scheme
- ✓ Updates on the Lincolnshire NHS Joint Forward Plan
- ✓ Our regular Involvement Bulletin, the Contributor

# Maternity and Neonatal Programme

The Lincolnshire ICB Maternity and Neonatal programme team works with partners to improve equity and equality in maternity and neonatal care.

Our aim is to provide safe, personalised, compassionate, professional, and family-friendly services. What happens in pregnancy and early childhood impacts on physical and emotional health all the way through to adulthood. This highlights the importance of ensuring a collaborative approach to improving the chances of healthy pregnancy.

The Maternity and Neonatal programme team in Lincolnshire are dedicated to ensuring women have the necessary information to make informed decisions and provide support tailored to their needs.



# Maternity and Neonatal Programme Community engagement

## What Matters To You

### Role of involvement

The “What Matters to You” series was held across the county visiting Grantham, Boston, Gainsborough, Lincoln in 2023 and Skegness in 2024. These events are targeted to families with children from 0-2 years old, pregnant women and those planning to have a baby. It is a great opportunity for them to meet with health care professionals and financial and voluntary services who can offer support to families.

The midwives and health visitors were able to offer breast feeding and birthing advice to mums, and mums took the opportunity to talk about health concerns and learn about the financial packages available from private and public services. As well as picking up resources from our food and clothes banks. Over the whole series of events, this has help to initiate over 170 conversations with families.

In August, LMNP also delivered a week of roadshows to celebrate World Breastfeeding week. Supported by midwives and Health visitors it was a fantastic week, talking to mums in shopping centres, market squares and other venues gathering information through surveys and one to one conversations, about their infant feeding experiences. This information has been used to inform and influence the Infant feeding strategy and the level of support mothers choosing to breastfeed will receive.

We have attended other events across the county, meeting and talking with families at the annual Beach in the Park festival in Boston, Children’s Centres, breastfeeding groups and mother and toddler groups, ensuring that we feed back information into the appropriate departments to help shape the services that families use.

### Outputs

- What Matters to You events reached 170 families
- Worked in partnership to deliver both the “What matters to you” series plus the World Breastfeeding roadshows
- Connected with families in the community
- Gathered intelligence for Infant feeding strategy

### Outcomes

- Able to utilise the insight and feedback gathered to influence Infant Feeding Strategy
- Insights gathered feed into appropriate departments/ organisations
- Better informed communities and families

## Principles delivered:



# Lincolnshire Military Maternity Services Engagement

## LINCOLNSHIRE MILITARY MATERNITY SERVICES

### Role of involvement

In 2023 the Lincolnshire Military Maternity Project (LMMP) won the Military and Civilian Health Partnership Award at the prestigious 2023 HSJ Awards. The project received recognition for the work they have done to support military, ex-military personnel and reservist living in the county, improving the maternity journey for mothers and their families and prevent discrimination caused by postings, separation from loved ones and deployment.

Staff at United Lincolnshire Hospitals Trust value the project and the impact it has had on families they care for as they have shared details of the project with other Trusts. Because of this, the Military Care Navigator for the LMMP has been contacted by staff at both Nottingham Queens Medical Centre and Leicester Hospital maternity & neonatal departments with requests for advice regarding military families.

In the last 12 months the Military Care Navigator for the LMMP has been working closely with 91 families/couples and together with the Lincolnshire Military Maternity Voice Partnership Lead they set up Toddler play sessions at RAF Digby and RAF Waddington.

The Buddy Scheme has also been widely welcomed by families across the armed forces bases. The aim of this initiative is to offer friendship and support to military families who have moved into the area and want to meet new people and have someone to help them settle into their new communities. Several members of the armed forces have offered to be buddies, and this has had a positive and warm response by new families.

### Outputs

- We engaged and spoke with 91 families/ individuals
- Worked with LMMP
- Set up Buddy Scheme
- Supported families to navigate the NHS in Lincolnshire

### Outcomes

- More military families understand the NHS in Lincolnshire and feel supported
- Able to utilise the insight and feedback gathered to work in partnership with ULHT
- Working with families the MCN can signpost to other services such as mental health, providing holistic support

## Principles delivered:



### Meet the Military Care Navigator,

#### Dave

Ex-RAF Medic, Dave, supports military families to ensure they receive appropriate maternity care and support before, during and after pregnancy. Dave supports serving military personnel, partners, ex-forces and reservists too!

Dave was born in Wales and joined the Royal Air Force as a Medic in 1986. He has served at numerous units in the UK and Germany and has been on operational tours in the Falkland's, Turkey, Iraq and Afghanistan. He worked predominantly in Primary Healthcare but has also worked in Aeromedical evacuation, Medical Policy and in the Military training environment for trainee RAF, Army, Royal Navy and Royal Marine medics.

He left the RAF in July 2022 when he saw the Military Care Navigator job advertised and felt it was the right time to leave the RAF and follow a new career path whilst remaining in the Care environment. Dave is married to Sally who is a Registrar of Births marriages and deaths and they have 2 children. Daniel is an RAF Regiment Gunner and Ellie is a Primary School teacher. They also have a granddaughter called Mila.

If you're a military family living in or moving to Lincolnshire and are

- trying to get pregnant
- pregnant
- or have a young family

then get in touch. Click the button below to email Dave or complete the contact form [here](#)



[david.james28@nhs.net](mailto:david.james28@nhs.net)



# Maternity and Neonatal Programme Digital Engagement

## DIGITAL ENGAGEMENT

### Role of involvement

A more targeted approach has been taken this year to the way we deliver information across our digital media platforms, an approach which has engaged more people on our social media pages. Our reach to peoples Facebook pages has gone up 22% and the number of people interacting on our Facebook posts have increased by 59%.

This was boosted by a campaign in December of the launch of our new webpages [www.betterbirthlincolnshire.co.uk](http://www.betterbirthlincolnshire.co.uk). This new resource provides families and those planning a pregnancy with the information and advice they need to support them through their pregnancy journey and beyond.

We have also been focussing on topics each month and one pregnant woman's story of her celebrating her success of stopping smoking through our STAAR programme (Stop Smoking support for pregnant women), caught the attention of the TV Regional News teams and BBC Radio. This provided a further opportunity to inform local families of the support and benefits to stop smoking.

The local media has been a great route for us to engage with families across Lincolnshire. Members of staff from midwifery and other health care professionals have been given time on air to talk about topics that relate to health care around pregnancy such as staying active during pregnancy and beyond, breastfeeding and NHS 75.

### Outputs

- Improved relationship with media / press
- Able to deliver more communications via social media
- Launched new webpages
- STAAR campaign reported in regional news

### Outcomes

- Used social media to reach more families
- Better Birth programme being recognised locally through media and press
- Information easier to find on new webpages

## Principles delivered:



# Lincolnshire wins Eric Watts Award Living with Cancer

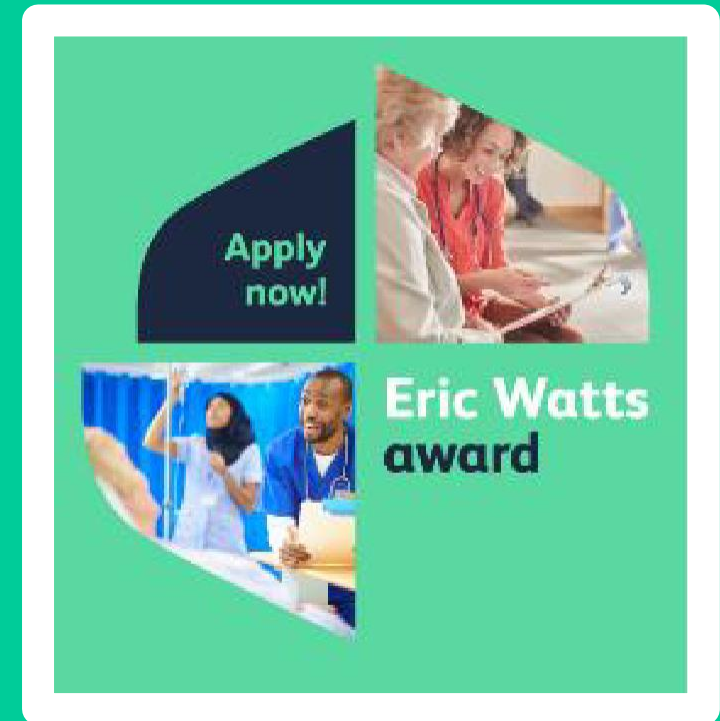


**Lincolnshire wins the Eric Watts Award for excellence in patient care and patient engagement!** This award recognises individual healthcare workers and teams who have made an extraordinary contribution to improving the patient experience.

The Lincolnshire Living with Cancer (LWC) Programme was established in 2016 to transform the way people living with cancer in the county are supported to improve patient experience and quality of life. The programme principles and values were developed, and the first of these is ‘Everything we do will place the person at the centre’, recognising that we couldn’t think about changing and improving our services if we didn’t involve the people who would be impacted by the change. We wanted to make lasting changes which were meaningful to people and communities and so we went to those who knew what the challenges were; people affected by cancer in Lincolnshire and those who care for them.

The programme has always been driven by patient engagement with experts by experience sitting on key meetings; co-production groups established; county wide engagement to understand the challenges around cancer care reviews in primary care; partnering with our Acute Trust to set up a Lincolnshire Cancer Expert Reference Group; launch of the ‘Shared Lives: Cancer’ website using patient stories gathered in research to support people affected by cancer; and more recently in 2023, further patient engagement to inform the Lincolnshire LWC Strategy 2023–2025 and to understand if the challenges after a cancer diagnosis had changed since 2017.

For more information on our approach to co-production please watch: [https://youtu.be/XQdEji\\_UN78](https://youtu.be/XQdEji_UN78)





# Community Development Involving younger people

We recognise the importance of proactively involving Lincolnshire's younger people in the work that we do, and the different ways we need to work to reach out to them. Their insight, innovative ideas and experiences are crucial to consider if we are going to develop services for the future.

We reach out to younger groups and communities through all our programmes of work, such as during development of Lincolnshire's Joint Forward Plan, where a sixth form debating society shared their thoughts and ideas on our emerging priorities. This developing partnership will enable more direct involvement with younger groups and students on future projects.

We spoke to 45 students from Kings School and Kesteven and Grantham Girl's School Debating Club where they discussed the five priorities for the Joint Forward Plan.

Our visit even featured in the school's magazine! – see opposite.



## Debating

### INTER-SCHOOL DEBATING

*The final term for the Kings and KGGS debate club closes on our first anniversary.*

The club's growing success over the last year has been heartening, with interest and engagement remaining high. We have said goodbye to our Year 13 and last month welcomed a new cohort of Year 10 from King's and KGGS. Our experienced Year 12s continue to steer and develop debating opportunities at school, leading lunchtime groups for younger pupils and being proactive about regional and national competitions they would like to participate in. Seeing so much collaboration, respectful discussion, and intelligence from the students has been an absolute pleasure.

In June, we welcomed Nikki and Diane from the NHS Lincolnshire Integrated Care Board for a healthcare-themed session centred around gathering young people's perspectives for the new NHS Lincolnshire Joint Forward Plan 2023-28. Nikki and Diane were "blown away" by students' enthusiasm and responses to the issues discussed, and we are pleased to report that the feedback they gathered has influenced and shaped the priorities of the Plan. Of the 40 community settings approached for engagement, King's debate club was the only school involved.

During the session, we heard many viewpoints on topics ranging from improving access to NHS services, living well and staying well, what young adults need to have a better relationship with the NHS and how NHS Lincolnshire can encourage more young people to follow a healthcare career. Among broad feedback, students spoke of the need for more work experience opportunities in healthcare, the pressures they face, including vaping and mental health issues, and poor access to orthodontic treatment. Seeing how engaged young people are when decision-makers ask them for their thoughts and opinions was brilliant.

We are delighted that our students are helping to shape the future of the NHS in Lincolnshire, and we hope to continue our relationship with the Integrated Care Board team.

Liz Tibbett - debating trainer and parent volunteer.

### IN CONVERSATION WITH ....



# Community Development Involving younger people



The ICB understands the need to reach all corners of society and speaking to young adults is one of the areas that we are keen to improve.

This year we took a more active approach to reach younger adults by visiting some of the colleges' Fresher's Fairs.

The team visited:

- Lincoln College - 6th and 7th September
- Boston College - 12th September
- Grantham College - 13th September
- Bishop Grosseteste - 22nd September

## Freshers Fairs

### Role of involvement

The aim of this engagement activity was to:

- Inform younger adults how they could get involved in local health services
- Sign up more under 25s to receive our involvement bulletin
- Advise how to provide any feedback regarding health services
- Provide information and signposted to local services available e.g. mental health support, how to register with GPs etc
- Promote health campaigns

### Outputs

- Networked with partner organisations at each event
- Over 100 students signed up to receive our fortnightly involvement bulletin

### Outcomes

- Improved our relationships with college staff
- Increased number of under 25s to our involvement database
- Increased the diversity and age range of our involvement database

**Principles delivered:**



# Community Development 999 Day in Skegness

The ICB involvement team ensure we spend time in communities reaching out to families to encourage involvement and participation, often speaking those who wouldn't normally get involved.

The 999 day in Skegness has been a successful way of meeting local residents and visitors to the area. It also gives the team chance to network with other emergency colleagues throughout the day.

The team attended the year before as part of the summer roadshow and we agreed that we should attend most years where possible. It gives us the opportunity to reach out into the community, and we are also able to represent the NHS at the Emergency Services Day.

## Role of involvement

The Involvement Team took our display material and patient information to chat with people in Skegness. Information included "Get involved" leaflet, information on current / live surveys, information on services like mental health services and primary care

Outputs	Outcomes
<ul style="list-style-type: none"> <li>New connections made within the community and families</li> <li>Signed people up to receive the involvement bulletin</li> <li>Able to signpost residents to services</li> <li>Handed out leaflets about getting involved in the NHS</li> <li>Able to assist individuals with queries around some NHS services such as Primary Care</li> </ul>	<ul style="list-style-type: none"> <li>Reached a number of people in the community who needs some direction or information.</li> <li>Networked with colleagues from across the county</li> <li>Talked through the importance of helping us to shape current and future NHS services</li> </ul>

## Principles delivered:



# Community Development “What matters to you” event



## COMMUNITY DEVELOPMENT

### “What matters to you” event

The ICB’s maternity team organised a community event to hear from families, carers, volunteers and professionals about what matters to them in terms of the care and services available throughout any aspect of their journey from pre-conception to reception. The events ran in Skegness, Boston and Gainsborough.

The aim was to bring together the services and organisations who may play a role along the pregnancy and into parenthood journey to showcase and promote what they do/offer.

### Role of involvement

We attended the event to reach this sector of our communities to promote how to get involved with engagement activities in the NHS and talk about the importance of hearing about the services that we provide.

We spoke to a number of families to promote the involvement bulletin and other surveys and opportunities that were available at the time

### Outputs

- We spoke to several new and expectant mums/families.
- Promoted the involvement bulletin and handed out involvement booklet.
- Promoted our work and engagement opportunities with other local organisations.

### Outcomes

- Able to reach families and parents

## Principles delivered:



# Community Development

## Incentivising Participation on the coast - Skegness

The ICB were successful in securing £2,000 of funding from East Midlands Academic Health Science Network (EMAHSN) to spend on incentivising participation on the East Coast.

Through previous engagement activities and the research for health inequalities we knew that communities in coastal areas can be under-represented in engagement / involvement activities such as consultations and surveys. By focusing the activities in these localities we knew we could improve participation rates and understand the challenges people face when accessing health services.

We hoped to improve our connections in these areas through existing relationships and increase our awareness of other activities that happen on the coast.

We ran two events, one in Skegness and one in Mablethorpe.

The event in Skegness was held in a popular venue, The Storehouse, where we offered a free hot drink and a slice of cake to encourage participation.

The morning was very successful as the team managed to speak to over 50 local residents.

Some of the topics are listed below:

- Signposted patients to Healthwatch and PALS
- Patient wanted information on dementia (followed up with an email)
- Passed patient details onto neighbourhood team
- Patient had concerns about getting an appointment – talked them through the econsult at Hawthorn Surgery
- Directed one patient through to the ICB complaints team
- One patient signed up to cancer co-production group

### Skegness Coastal Event

#### Role of involvement

The ICB involvement team organised and ran the event in the Storehouse. We were able to use our usual routes of distribution to promote the event such as our involvement bulletin, ICB stakeholder database and social media

4 members of the team attended on the day, giving us the chance to speak to lots of residents whilst offering a slice of cake and a hot drink.

#### Outputs

- New connections made within the community
- Spoke to over 60 residents
- Able to incentivise the participation
- Able to signpost residents to services.

#### Outcomes

- The ICB involvement team were able to test the method of incentivising participation.
- Confirmed that incentivisation works in small communities.
- Reached a number of people in the community who needs some direction or information.

Principles delivered:



# Community Development

## Incentivising Participation on the coast - Mablethorpe

The second event on the coast was held in Mablethorpe at the Coastal Centre.

This event was run differently to Skegness as we ran a Health and Wellbeing morning. As with the Skegness event, we were able to offer a free slice of cake and hot drink but this time we wanted to test the approach of a collaborative event by offering the chance to talk to more organisations than the NHS. 15 organisations joined the ICB to welcome local residents through the doors (details can be found the next page).

In total, we had 43 people visit the coastal centre and it was reported that many of the organisations were able to support the residents with their enquiries.

### Mablethorpe coastal event

#### Role of involvement

The ICB organised and ran the event, using our existing connections with community groups and local organisations to invite them to the event. The event was popular, and we soon filled the space with 8 organisations on the waiting list.

This event was another success as residents were coming to see the stallholders and organisations as well as the offer of cake being attractive. Many attendees said they had seen the event being advertised locally.

Outputs	Outcomes
<ul style="list-style-type: none"> <li>• New connections made within the community</li> <li>• Excellent networking throughout the morning</li> <li>• ICB supported 16 residents with enquiries</li> <li>• Able to incentivise the participation</li> <li>• Able to signpost residents to services.</li> </ul>	<ul style="list-style-type: none"> <li>• The ICB involvement team were able to test the method of incentivising participation.</li> <li>• Confirmed that incentivisation works in small communities.</li> <li>• Reached a number of people in the community who needed some direction or information.</li> <li>• Ran an event that benefitted other organisations across the county</li> </ul>

### Principles delivered:



## Talk to us about your local NHS

Join us on

**Thursday 22 February**

for a chat about your local NHS and to meet local health and wellbeing organisations



Come along for a free cuppa, slice of cake and a chat anytime between **10am and 1pm** at **The Coastal Centre Victoria Road Mablethorpe LN12 2AQ**

For more information contact us at [licb.involveus@nhs.net](mailto:licb.involveus@nhs.net)





# Community Development

## Incentivising Participation on the coast - Mablethorpe

### Stallholders at Mablethorpe event:

- Lincolnshire ICB - Skegness and Coastal Neighbourhood Team
- Lincoln City Foundation
- Parkinson's Group
- NHS Diabetes Prevention Programme
- Carers Service and Carers First
- Magna Vitae
- First Coastal PCN
- Connect Health - Community Pain Management Service
- ELDC - Home Energy Advice and Retrofit Team
- Bishop Grot - Sleep Well Programme
- Lincolnshire Talking Therapies
- Age UK Lindsey
- Shine Lincolnshire
- Connect to Support
- Anglian Water



### Some of the feedback from the stallholders:

- Age UK Lindsey** – *“We made some good valuable connections within the area which will be helpful moving forward for direction of clients locally.”*
- Connect to Support** – *“The event was fantastic! I really found the networking incredibly useful. The public interaction was great as a lot of people didn't know about us”*
- Talking Therapies (LPFT)** – *“Mainly people were discussing their mental health with us, and we spoke with them about our service, and discussed with professionals too about the service we offer”*
- Home Energy Team (ELDC)** – *“Spoke with a lovely older couple from Louth. They were quite anxious with their energy costs and insulation as they were currently living on their savings before they were eligible for their pensions. Talked through various insulation measures and completed an application with them for the ECO and GBIS grants right there with them.”*
- Shine Lincolnshire** – *“I found it incredibly useful for us as we had so many important conversations with the public who attended and other stall holders”*
- Magna Vitae** – *“Really useful day. We would be interested in attending in the future!”*
- Lincoln City Foundation** – *“I really enjoyed it and I know the Fighting Fit group did too, some didn't even know that things like that happened in Mablethorpe so definitely another event would go down well”*

# A day in the life of ... the ICB involvement team



**The role of an involvement officer for the ICB is varied and takes the team all over the county speaking to patients and communities. This is how we spent one of our days in early February 2024.**

“For most people the first of February is a sign that Spring is on its way, and we are over the worst of the winter but for some of the ICB’s involvement team, the 1st February was our first “Cake and Cuppa” event of the year; and this time we were visiting Skegness.

The aim of the day was to talk to people who lived on the coast in a relaxed way and listen to their stories and concerns about the NHS and with free cake and hot drinks on offer we hoped to tempt people to come over and see us. We were not disappointed!

The day started with some of the ICB’s involvement team – Lauren, Nikki, Rachael and Diane, arriving to set up in the Storehouse. The staff at the Storehouse were brilliant and directed us to our area of the café and immediately helped us to set out the drinks and cakes ready for the visitors that morning.

The people of Skegness turned up after seeing our posters and local social media and happily approached us to ask about the cakes which was a great ice breaker to start some conversations. Throughout the morning, we had a steady flow of people chatting with us and at one point we had a queue waiting to get their free hot drink and slice of cake but more importantly the chance to chat with us. The cakes were far too tempting, and we may have also had a small slice!

The day was an enormous success and we spoke to 60 people which is an amazing amount of people who wanted to spend time with us. Topics of conversations varied from visits to hospitals, getting appointments at the doctors, the availability of NHS dentists, dementia, cancer services, access to mental health services and much more. We were also able to help many people in signposting them to receive the care they needed and will take all the feedback we received into the ICB and share it with the project teams so they can hear the public’s experiences.

We managed to have a quick stroll on the sea front in the sunshine to debrief and enjoy the fresh air before we headed back to work. Wow, what a morning, thank you Skegness!”



# Digital Engagement with our local communities

The ICB supports the use of social media as a positive communication channel, to provide members of the public, partners and other stakeholders with information about what we do and the services we commission.

We use social media to provide opportunities for genuine, open, honest and transparent engagement with stakeholders; giving them a chance to participate and influence decision making. Through social media we are able to listen and have conversations with a wide and diverse range of people, especially with communities.

It not only allows us to make announcements such as health news, service information and upcoming events, it allows people to respond to whatever we post and encourage two-way conversation and feedback to improve the ongoing development of our services and to inform, engage, educate and inspire our local communities.

One of our key communication tools, which is often a first port of call for the public, is the ICB website. We are continually reviewing and developing our online presence to ensure that people can easily access information about the ICB, our system partners and programmes, latest news, events, engagement opportunities and the services available to them.



- Between the 1st July 2023 and 31st March 2024, we had 101K users/visitors and 355.7K page views on the website.
- The ICB gained 1,553 new followers across our social platforms.
- Our most engaging social media posts are those that are people-centred, stories and spotlights on our amazing teams working together to improve Lincolnshire's health and wellbeing.
- As part of our ongoing social media strategy, we will work on more people-centred content and grow our audience with the help of key stakeholders and influencers.

# Digital Engagement ICB Website Review



The Lincolnshire NHS Integrated Care Board’s website is a vital platform through which we communicate to our patients, staff, and other stakeholders. It provides a whole host of information ranging from the health services provided in the County, to how you can get involved in shaping the future of NHS Lincolnshire.

Feedback from patients and the public is important when we are reviewing things like our website to make sure it’s useful and relevant. The feedback tells us if the information we publish is right, current and user friendly, and if it makes sense. It is important that we know we are using the right words, in the right way to get our messages and information across clearly, and that our website is easy to use.

## ICB WEBSITE REVIEW

### Role of involvement

The review of the website was requested by the ICB’s Director of Communications and Engagement.

The ICB carried out a survey to find out how we can make the website accessible and work for everyone who uses it. We asked for feedback on useability and accessibility.

The involvement team worked closely with their communications and marketing colleagues during the review.

The survey was launched on 12<sup>th</sup> December and was available for 6 weeks.

Outputs	Outcomes
<ul style="list-style-type: none"><li>- 35 responses to the survey</li><li>- Recruited 2 volunteers to get more involved in the project</li><li>- Reported feedback to Director of Communications &amp; Engagement</li></ul>	<ul style="list-style-type: none"><li>- Results discussed and considered by the ICB’s Communication and Marketing Team leading on the website review.</li><li>- Feedback utilised by the involvement team to make improvements to the involvement hub area on the website.</li></ul>

### Principles delivered:



# ICB Website Involvement Hub refresh

For those who want to get involved digitally, we recognise how important it is to make this as easy as possible for people.

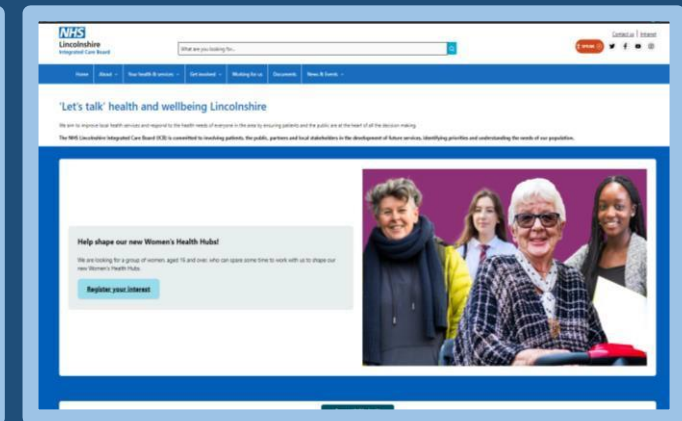
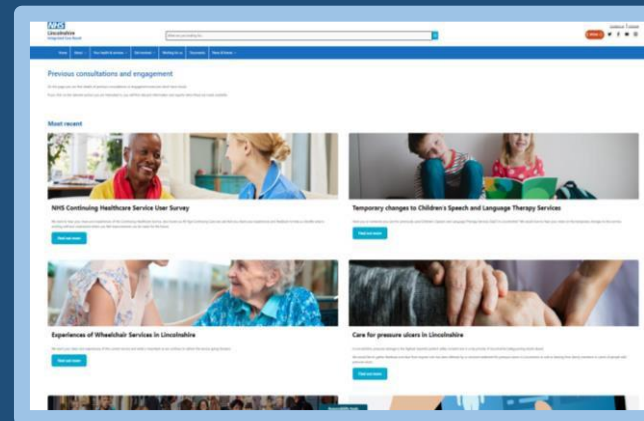
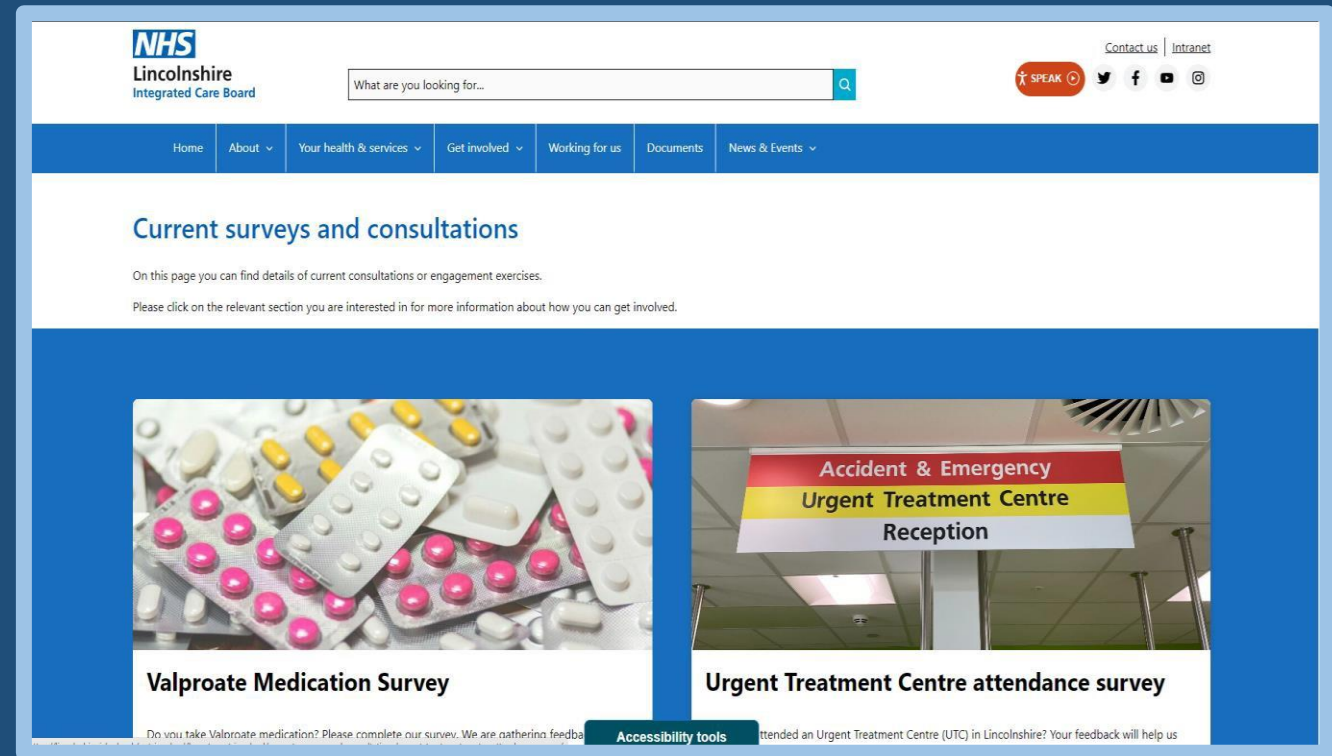
Following a website review survey across Lincolnshire, we were able to carry out some improvements to the Involvement hub making it even easier to use with clear and concise information.

When we visit communities, we direct people to the Involvement Hub via a QR code or website address for easy access to the “Get Involved” areas of our website

People can sign-up to our involvement bulletin, they can see current and live surveys, consultations and events but also see previous surveys, findings and outcomes and how they have made a difference.



Click here to see ICB's Involvement Hub



# Digital Engagement Nextdoor

In 2023-24 we have continued to use the social media application, Nextdoor, to help share information and engage with members of the public. During this year we have created 118 posts.

We have used this platform for:

- Publishing live surveys and questionnaires
- Sharing urgent health messages
- Promoted health campaigns
- Promoting GP Listening clinics and GP consultations
- Sharing details of flu and COVID vaccinations
- Highlighting bank holiday opening times for pharmacies
- Sharing public health messages and events

We have had 1,286,594 views with 533 reactions meaning that we are able to reach many more people than before using Nextdoor.

The app benefits from being able to target areas and 'neighbourhoods' to enable more direct communication which has been useful when posting about GP consultations and local events.

Click here to view our Nextdoor page



# nextdoor

nextdoor Sign in

NHS Lincolnshire Integrated Care Board is on Nextdoor, the neighbourhood hub. Sign up for Nextdoor

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Integrated Care Board

## NHS Lincolnshire Integrated Care Board

Lincolnshire.icb.nhs.uk  
More info...

Subscribe

Activity

**Easter Healthcare**  
NHS Lincolnshire Integrated Care Board Engagement Team from NHS Lincolnshire Integrated Care Board · 6 days ago

If you are staying at home or venturing away for a few days this Easter break the attached will help you access the right healthcare across Lincolnshire.

If you are going away our handy guide to healthcare services while away from home gives information about how to access healthcare while away including your own GP practice if needed. If you are staying at home our guide to healthcare services shows everything that is available including the WaitLess app which shows the closest Urgent Treatment Centre and the time given includes travel, wait and treatment – it also shows you how many people are already there.

So, keep well this Easter with these handy guides.

<https://play.google.com/store/apps/detail...>

6 days ago · Subscribers of NHS Lincolnshire Integrated Care Board in General

THANK | 1 REPLY

**Are you signed up to our engagement bulletin?**  
NHS Lincolnshire Integrated Care Board Engagement Team from NHS Lincolnshire Integrated Care Board · 26 Mar

Say hello to the latest opportunities to have your say and get involved with your local NHS.

We also share information about groups and organisations plus the latest in local NHS news.

For more information and to get signed up to receive our fortnightly newsletter please visit - <https://lincolnshire.icb.nhs.uk/get-invo...>



# Planned future involvement activities and continuous community development

Lincolnshire ICB will continue to provide engagement support to its priority programmes and projects and weave involvement through all of the work the ICB undertakes. Below are some of the activities already planned:

- **Community development** – identify community groups to involve and visit
- **Transgender and Non-Binary Inclusive Health care Policy Framework** – engagement planned to start late summer 2024
- **Co-production** – to support delivery of prevention element of **Frailty Strategy**
- **Co-production** – and further engagement for **Women's Health Hubs**

