



Gloucestershire Hospitals
NHS Foundation Trust

Engagement and Involvement

Strategy 2020–2024

Vision

Our shared vision is to deliver the best care for everyone. It is this ambition that directs and shapes how we work. We want our colleagues, patients, carers, partners and our communities to experience meaningful participation in decision-making, in shaping health services and delivering person-centred care. By actively engaging local people and our colleagues we can improve the quality of care we deliver and enhance patient experience.

We are on a journey together and this strategy outlines our principles and approach for embedding engagement and involvement into how we deliver outstanding care.

Why is engagement and involvement important?

Our colleagues, patients and the public are at the heart of our ambition to deliver the best care for everyone. By actively engaging and listening to people who use and care about our services, we can understand what matters most in response to the diverse health and care needs.

All NHS organisations have a legal obligation to involve people, but we also have a moral one too. The white paper Equity and Excellence: Liberating the NHS was published in 2010 and at its core was the simple but clear principle of 'no decision about me without me'. This holds true today, for patients, carers, communities and staff, and by developing our engagement and improvement approach we aim to ensure everyone has an equal voice and are able to be actively involved in decision-making.

What will we do

We want to embed engagement and involvement as a cultural norm – a way of undertaking our work across our hospitals. There are already many positive examples of the difference this already makes across the Trust. We want to build upon our progress to date and spread this good practice.

Whenever we start any programme of work to improve or develop our services, we will begin by understanding what matters most to our patients, our colleagues, our partners, and the communities we serve.

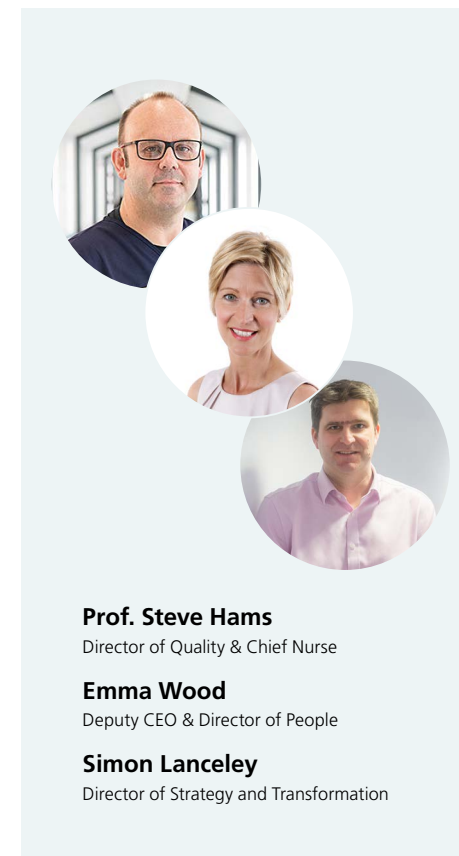
We will aim to ensure that the voices of patients, carers and colleagues are heard continually and shape our decisions as we work together to make this organisation a great place to work and receive care. It will mean creating wider opportunities for all stakeholders to shape our services for the present and the future so that we can be collectively proud of NHS services across Gloucestershire.

What will we achieve?

By working together, we can make better decisions and we will be able to:

- ▶ Improve the quality of care and services;
- ▶ Improve patient safety;
- ▶ Improve colleague and patient experiences;
- ▶ Shape services around what local communities tell us that matter most to them;
- ▶ Attract, recruit and retain the best staff to the Trust;
- ▶ Support and celebrate the diversity of local people in living healthier lives.

If we can involve people and embed the principles of engagement, reflecting our values of Caring, Excelling and Listening, then we stand the best opportunity of achieving our 10 strategic objectives and delivering our vision of the Best Care for Everyone.



Prof. Steve Hams
Director of Quality & Chief Nurse

Emma Wood
Deputy CEO & Director of People

Simon Lanceley
Director of Strategy and Transformation

Enabling pillars to deliver the strategy

Our engagement and involvement strategy has been developed and co-produced with a wide range of stakeholders. These stakeholder groups have been broadly segmented into four core areas and are our enabling pillars to delivering the strategy.

We are committed to embedding a compassionate culture where we listen and understand what matters most to people and to involve them in decision-making.

Engagement and involvement is a golden thread that runs through our 10 strategic objectives, set out in the overall Trust Strategy. At the heart of this is our ambition for 'Involved People'.

We will make sure that everyone can have a say in how we shape our services and to provide high quality services that are better for patients and colleagues.



Who are our stakeholders?

As one of the largest Acute Hospital Trusts in the country, serving a population of more than 650,000, we have a diverse range of stakeholders. Our stakeholders often overlap and this needs to be reflected in the way in which we engage and involve people.

A summary is illustrated below.

The diagram below shows our four core stakeholder groups. These align with our enabling pillars.



Our Service Users and Supporters

Patients, service users, carers and families are at the heart of all that we do. We need to continue to involve them as we strive to embed person-centred care across all our services.

We have approximately 20,000 Foundation Trust members of which 12,000 are members of the public and nearly 8,000 are staff. We want to create opportunities for our members to shape how services are delivered in the present and developed for the future.

Our Colleagues

We have a large workforce of some 8,000 people and staff are our biggest asset. We can only achieve our strategic vision and objectives with the full support and engagement of our staff. We equally value the work of our volunteers and are fortunate in having the skills, commitment, and contribution of more than 450 people who give us their time. Our staff and volunteers are people who mainly live in the areas served by the Trust, and they have an informed interest in the provision of health services for our communities. Governors play a key role in the governance of the Trust and are critical in developing our engagement and involvement work. They are valuable critical friends and provide both scrutiny and challenge. We recognise that engaging our colleagues effectively is a primary priority and will be pivotal to everything we seek to achieve as a Trust.

Our Partners

We are committed to working closely with our partners across the 'One Gloucestershire' Integrated Care System (ICS) and to join up health and care services for our population. This partnership aims to keep people healthy, support active communities and ensure high-quality, joined-up care when it's needed. This means we will work increasingly closely with other providers of health and care services in the county.

Our relationships with universities, colleges and schools are vital in extending our research impact as well as ensuring that we are able to attract and recruit the best talent to the Trust.

We are grateful that the work of the Hospitals Charity means that we have an even greater opportunity to improve the experience of the people using our services.

Our Places and Communities

Elected representatives play an important role in ensuring that the voice of patients and the public are instrumental in shaping how we work as a Trust. This includes continuous involvement with the Health and Care Overview and Scrutiny Committees and the Health and Wellbeing Board.

Our partnership with the Voluntary, Community and Social Enterprise Sector (VCSE and Healthwatch) helps provide vital insight and reach into groups with particular needs across our communities so that our services are accessible and responsive to all.

We will continue to engage positively with local media and social media so that we share our progress throughout our journey to outstanding with local people.

The map of our stakeholders and interests is shown in appendix one.

Defining engagement and involvement

We want engagement and involvement to be integral to the way we work as an organisation. We want people’s voices to make a difference to everyone who uses our services and to the people who work here. Excelling in collaboration and partnership with our stakeholders will have a positive impact on how we work and what we can achieve together.

At Gloucestershire Hospitals NHS Foundation Trust, we have a wide range of stakeholders. Engagement and involvement can provide the opportunity to understand different experiences, to be innovative and to shape services directly with local people.

Ladder of Engagement

Adapted from Arnstein (1969), we use a ladder of engagement model to illustrate how we want to extend and embed engagement as a way of working. Our aspiration is to achieve and embed genuine co-production with stakeholders. We aspire to reach our aims where collaboration and co-production adds value to our staff, partners, patients and local communities.



Co-production and co-design

1

Co-production and co-design represents an equal and authentic partnership between all people working together. The partnership is built on an expressed commitment to work together to achieve an end goal that will benefit patients, the communities served by the Trust and the future health of the organisation.

Participation

2

The process of participation gives stakeholders authority to work as collaborators with leaders and staff to co-design services, improvements, or care pathways. Various mechanisms can be used to facilitate this collaboration and to allow people to work together on a specific project.

Involvement

3

Involvement is defined as a process that not only listens to stakeholder views and acts on them but includes stakeholders in designing proposals for change and empowers them to shape solutions and improvements.

Engagement

4

Effective stakeholder engagement identifies relevant stakeholders and their interests and engages them for a clear purpose to achieve agreed outcomes. This process is now commonly recognised as an important accountability mechanism that aims not only to communicate with stakeholders on strategic progress, performance and decisions, but seeks to involve stakeholders proactively and fully in the organisation’s strategic journey.

Consultation

5

Consultation is defined as a targeted process to seek advice from subject matter experts or to test an idea or a proposal with a target audience in order to understand different views, perspectives and the potential impact of the change proposed.

Formal consultation processes on proposals for service change are governed by law in England.

Communications

6

Communications are the processes and mechanisms through which information is shared between people and places. This can include signed, written and verbal information as well as messages shared through film, podcasts and other digital media.

The case for change

We are confident that there is a strong and compelling case for investing in our engagement and involvement work. Our eight-point case for change is as follows:

- 01** The experience of the people who use our services and our staff is central to what matters to us as an organisation. We are confident that we can be more innovative, systematic, and resourceful in how we engage stakeholders and mature our relationships with them. This will help us to improve experience for both patients and colleagues – our commitment to delivering this improvement lies at the heart of this strategy.
- 02** Achieving our vision of ‘best care for everyone’ and our 10 strategic objectives is only possible with the inclusive and effective involvement of our stakeholders and partners.
- 03** We are committed to being a learning organisation. Acute Trusts that have already achieved an outstanding rating from the CQC typically perform strongly in staff and patient engagement. Our progress in the responsive and well-led domains will be particularly significant to our overall rating and strengthening our engagement and involvement work will act as a strong foundation to how we improve and transform our hospitals.
- 04** We are committed to being a good partner in the One Gloucestershire Integrated Care system. This means extending partnership working across the organisation in pursuit of our shared goals – but importantly so that patients will benefit from care that is more joined up for them.
- 05** There is sufficient evidence to underline the benefits of engagement (particularly with staff and patients) to improved outcomes, quality, and sustainability in health services. We have an opportunity not only to excel in this arena, but to contribute to the evidence base through evaluating the impact of our own engagement activity.
- 06** The role of members and governors is set out in the Code of Governance for NHS Foundation Trusts and we must be more proactive in involving them in the strategic development of services and how we work as an organisation.
- 07** The reputation of our hospitals is significantly shaped by stakeholder views. Building and maintaining a positive reputation will be an important enabler in our Journey to Outstanding.
- 08** We have a legal obligation to comply with the relevant requirements of NHS organisations – the scale of our ambition for the transformation of local services must be supported by robust arrangements for engaging and consulting patients and the public. Even more important is our moral obligation and commitment to go significantly beyond compliance and to model true collaboration and co-production with our stakeholders in all aspects of our work.

We have reviewed the evidence for engagement and involvement and believe this strengthens the case for change. Stronger staff engagement (measured through motivation, involvement and advocacy) has been linked to better patient satisfaction and improved quality and performance.

Additionally, positive staff engagement has also been linked to reduced staff turnover and lower sickness absence. Trusts with more engaged staff have also shown higher levels of patient experience, with more patients reporting that they were treated with dignity and respect.

There is a compelling case for the benefits that engagement can offer as a way of ensuring our services are accessible and meaningful for all, and that we play our part in reducing health inequalities.

Where we are



Our regulator

Our hospitals are rated 'Good' overall by our regulator the CQC. Engagement is a key line of enquiry within the well-led domain which was also rated 'Good' by the inspection team although they emphasised the need to extend our engagement work, which we have begun to do.

Reputation

We don't yet have a method to evaluate organisational reputation. We are introducing new tools to develop this capability.



Our patients' feedback

We receive feedback from our patients and they rate us on average as 8.0/10 within our National Survey programmes and we benchmark as "about the same" as other Trusts in most sections and most questions.



Governors and members

We don't have a current mechanism to measure how well we do this. However, in the recent CQC inspection it was recognised that the Council of Governors had a positive impact on the way the Trust communicated with the local community. Further work was required on member engagement.



Our colleagues

Our NHS Staff Survey 2019 engagement score is 6.89/10 (best Trust score 7.85/10). Involving staff is a priority area for improvement.



Public satisfaction level

Our public satisfaction level for 2019/20 was 91%.



Our partners

The CQC recognised that communication systems were in place although we often only communicate with our partners on a need to know basis rather than more systematically.

Where we want to get to

Our colleagues

We want to improve our engagement score so that we are in the top 10% of Acute Hospital Trusts.



Our partners

We collaborate with partners and communicate proactively as we work together to achieve our shared goals.

Our stakeholder survey indicates positive progress in our partners' experience of partnership working.

Our regulator

We want the CQC to rate us as "Outstanding" overall when they next inspect us. In the Well Led Domain, we want engagement to be recognised as "Best in Class."



Public satisfaction level

Our public satisfaction level has improved.



Our patients' feedback

Through feedback we want to demonstrate that patient experience has improved through "Better" scores in our National Survey Programme scores. We want to demonstrate high levels of meaningful public involvement in how services are designed.



Governors and members

Governors have developed and implemented their own membership engagement strategy and can evidence strong engagement with the public.



Reputation

We will report a reputation score derived from media coverage of our work.



Equality

Our staff survey shows colleagues are treated fairly and unlawful discrimination is eliminated.

Towards Co-production and Co-design



Towards Co-production and Co-design: Our engagement and involvement approach

Co-production and co-design is a way of working that involves people who use health and care services, carers and communities in equal partnership; and which engages groups of people at the earliest stages of service design, development and evaluation. Co-production acknowledges that people with 'lived experience' of a particular condition are often best placed to advise on what support and services will make a positive difference to their lives.

Done well, co-production helps to understand what matters most to people and to ensure decision making.



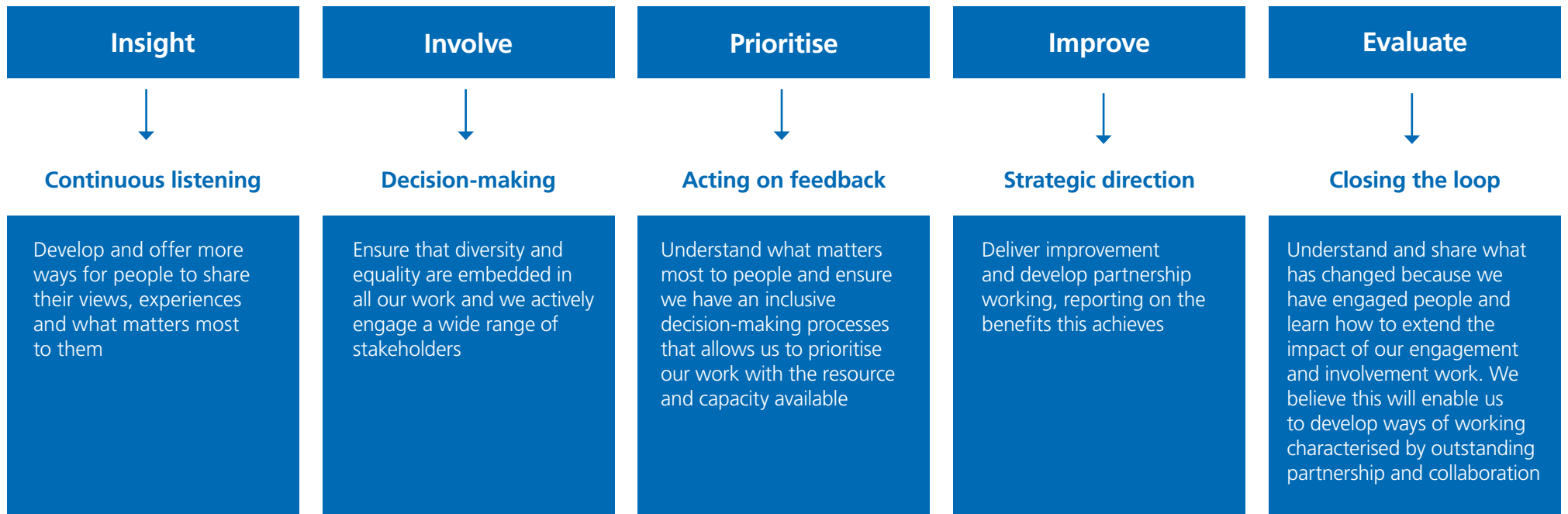
<https://coalitionforpersonalisedcare.org.uk/resources/a-co-production-model/>

Our guiding principles for engagement and involvement

1. Diversity and inclusion matters - it is vital that we hear, listen and respond to the full range of voices reflected in our wide range of stakeholders. We will ensure we have mechanisms to reach those less frequently heard and that engagement actively supports the way in which we meet our equality duties and objectives. It is not sufficient to be outstanding for some, we must be outstanding for all.
2. Our engagement and involvement work will be values led. All interactions we have will be characterised by our values of listening, caring and excelling.
3. Our work on developing our leaders and embedding compassionate leadership behaviours will underpin our approach to staff engagement and improving staff experience.
4. We will strive to understand what matters to patients and their carers and families so that care is person-centred and based on decision making.
5. Listening will lead to action and we will involve people in prioritising and designing the actions we take.
6. We will support, equip and inspire staff to embrace engagement and involvement as a way of working and will empower staff who can act as connectors and agents for change, regardless of role or seniority.
7. We will make ourselves accountable for reporting, sharing and disseminating the impact of our engagement and involvement work.
8. In honouring the NHS Constitutional commitment to put patients at the heart of everything we do, we will commit to working towards genuine co-production across our engagement and involvement activity.

Our approach: Engagement and Involvement Model

Compassionate leadership behaviours will shape a culture based on our Trust values, which will support the way in which we build engagement and involvement in everything we do.



Communications

We will underpin our work with clear and relevant communications. Messages will be more tailored and relevant to different stakeholders and a wide range of channels will be used to share information.

Values



Caring

We care for our patients and colleagues by showing respect and compassion.

Our ambition is to continue to develop how we recruit and retain colleagues who recognise the importance of caring, understanding the needs of others and responding to these with kindness, dignity and professionalism.



Listening

We listen actively to better meet the needs of our patients and colleagues.

We value diversity and aspire to be inclusive and recognise everyone's contributions. We believe we can do this by acknowledging one another, actively listening and responding appropriately and clearly.



Excelling

We are a learning organisation and we strive to excel. We encourage a culture of improvement in the Trust and we expect our colleagues to be and do the very best they can.

Our Journey to Outstanding will enable us to excel in our patient care and colleague services to fulfil our purpose to improve the health, wellbeing and experience of the people we serve.

All forms of engagement and involvement activity require equality, respect, communication, trust and collaboration. Our values underpin how we will all work together and how we engage and involve our patients, carers, our partner organisations and with members of the public. We will strengthen a values-based culture through investing in our leadership across the Trust and through the way in which we induct, support, train and develop our workforce.

Insights from our stakeholders

In formulating our engagement and involvement strategy, we have spoken to and gained insights from a wide range of our stakeholders. Our engagement and involvement must enable us to respect and treat everyone equally and understand what matters most to people. We have captured the key insights and themes gained through our stakeholder conversations in our Insights Report (see appendix 3).

The headlines are as follows:

Patient experience is fundamentally shaped by staff attitudes and behaviours – this needs to be consistent with our values. Patients are not always communicated with well – they need to be informed and involved throughout their care. Delays or changes to appointments are sometimes unavoidable, and the way in which these issues are communicated to patients matters. Relating to patients as equal partners in their care requires a significant step change in our mindset and approach.

Staff have consistently told us that they want to see internal communications improve. We employ a large and diverse workforce in significantly different roles across a large number of services. Ensuring that we can more effectively tailor communications to different staff groups, using a range of channels will help us engage staff in our journey. We also need to listen to staff experiences and actively engage colleagues in change.

Governors are committed to extending opportunities to engage with Foundation Trust members and local people. More work is needed to continually raise the profile of the Governors and to ensure that people can contact them easily.

Insights from our stakeholders

Partners have valued the acceleration of collaboration between clinical leaders across the One Gloucestershire system during the Covid-19 pandemic. We will place clinical collaboration at the centre of our partnership arrangements moving forward. We have heard from partners how important it is that we invest time in building relationships so that we can support each other more effectively in delivering improvement across all health and care services.

Voluntary, community and social enterprise organisations (VCSE) have shared their insights and expertise as to what makes engagement effective with specific groups of people that they work with. Using their infrastructure and expertise to reach all parts of our communities will help our engagement work to be truly inclusive and diverse and we have explored with them how we can extend these community conversations into a continuous dialogue through our VCSE Involvement Network.

Our regulator (the Care Quality Commission) has told us that we need to ensure that tools to improve care for patients who may be vulnerable are consistently used and that our services and sites are more responsive and accessible for people with additional needs. Improving regular communications with staff will also help us to ensure they are involved in and informed about changes and improvement, have the support systems they need to work effectively and that their learning and development needs are addressed.

Tools that support our engagement and involvement work

Stakeholder Mapping

A tool to identify and map the range of stakeholders including our diverse communities and protected characteristic. This tool will help us to segment our stakeholder groups so that we have a more detailed understanding of their interests and needs and can engage and communicate with them in a meaningful way.

Focus Group

A facilitated conversation between around 6-10 people to explore experience, perspectives and ideas on a specific theme, process or service.

Citizens' Jury

A method of deliberation between a group of people who are representative of the demographics of an area, with debate focused on a specific question.

Patient/Carer volunteer role

A role that enables a patient or carer to participate as a member of a project group (for example a QI group) or governance group for a specified period.

Patient and public representatives

A process used for appointing patient/carers representatives for a designated term to contribute patient/carers voice into debate and decision-making.

Staff councils

A mechanism for decision-making across staff so that change and improvement is led by, shaped by and owned by staff.

Listening walk arounds

Leaders proactively engage with staff across all areas of the Trust by listening as they connect with staff and teams through a planned programme of visits and drop-ins.

VCSE Involvement Network

A network through which we invite VCSE organisations to participate in an ongoing programme of partnership development. This collaboration will help to extend our reach into all sections of our communities, particularly people with protected characteristics or groups who experience health inequalities.

Foundation Trust membership events

An annual programme of member events covering a range of different interests and topics to be held in a variety of locations across the county.

Experience based co-design projects

Experience based co-design is a method for service improvement that utilises the experiences of patients, carers and staff, captured through discussion, observation and filmed interviews.

Formal consultation

Adoption of the formal process for consulting patients and the public on substantial service changes – usually in collaboration with system partners.

My experience stories

Patient stories, shared in person or via other mechanisms, that inform our key governance forums at divisional and corporate level.

15 Step Challenge

A suite of tools that explore different healthcare settings through the eyes of patients and relatives.

Good Line Management

Line managers are supported to engage colleagues to share information and use their collective experience, skills and leadership to drive forward transformational change where it is needed most.

Walking the patient journey

An interactive workshop in which staff and patients share their experiences of a pathway of care and work together to identify prioritise and implement improvements.

Pathway to Excellence

This international programme provides a framework to support health organisations in creating a positive environment that empowers and engages colleagues, enhancing practice, patient care and staff experience.

Evaluating the impact of our engagement and involvement work

Pillars	Goals	Measure in 2024
<p>Our service users and supporters</p> <p>This includes Foundation Trust members, the people who use our services, and people who advocate for patients (carers, family members, friends)</p>	<ul style="list-style-type: none"> ▷ Our membership strategy will ensure we extend communications and involvement of Foundation Trust members ▷ Patients and carers will be consistently involved in plans for service change, development and improvement ▷ Patient experience data will drive improvement priorities and we will engage patients and carers routinely in Quality Improvement (QI) projects ▷ We will improve person-centred care and our work to achieve this will be shaped by conversations with our communities 	<ul style="list-style-type: none"> ▷ Evidence on how member engagement will impact decision-making via an Engagement and Involvement Tracker ▷ We will achieve higher scores in the NHS Staff Survey, specifically Question 22c – ‘feedback from patients/service users is used to make informed decisions within my directorate/department’. We will exceed the average for acute trusts and work towards achieving a 10% improvement on our 2019 score of 54.5% ▷ We will achieve a 10% increase of ‘better’ scores in the comparator dimension of the CQC national patient surveys ▷ We will achieve an improved CQC rating for the ‘responsive’ domain – at least two core services to be ‘outstanding’ and underpinned by person centred care
<p>Our colleagues</p> <p>This includes employees, governors, volunteers, leaders and managers and staff representatives who provide a voice for employees in decision-making</p>	<ul style="list-style-type: none"> ▷ A framework will guide our approach to increasing staff engagement and involvement across the Trust ▷ A shared governance model that amplifies the involvement of staff in decision-making through staff councils will be incrementally introduced ▷ Leadership development will be built on compassionate leadership behaviours and will support improved staff and volunteer experience ▷ The role of governors and arrangements for contacting them will continue to be promoted and communicated 	<ul style="list-style-type: none"> ▷ We will achieve higher staff engagement scores in the NHS staff survey, 7.6/10. We will focus particularly on improving the scores relating to the opportunity staff have to contribute to improvements and their willingness to recommend the Trust ▷ We will achieve improved scores in the ‘my immediate manager’ questions in the NHS Staff Survey relating to support, feedback, and involvement in decision-making, 7.6/10. We will particularly seek to influence Q8d ‘my manager asks for my opinion before making decisions that affect my work and Q4c I am involved in deciding on changes introduced that affect my work area/team/department. We will work to achieve at least a 10% improvement

Evaluating the impact of our engagement and involvement work

Pillars	Goals	Measure in 2024
<p>Our partners</p> <p>This includes our partners in the 'One Gloucestershire' Integrated Care System, our academic and education partners, the clinical networks and alliances we belong to and the Integrated Locality Partnerships</p>	<ul style="list-style-type: none"> ▷ We will extend collaboration with system partners on the development of clinical pathways ▷ We will manage service and system changes in partnership with our One Gloucestershire colleagues ▷ We will contribute to an 'asset based' locality approach ▷ We will build further research and education opportunities through our relationship with universities 	<ul style="list-style-type: none"> ▷ Clinical pathway improvements delivered with our partners will be monitored through our Engagement and Involvement tracker and reported in our annual impact report
<p>Our places and communities</p> <p>This includes our partners in the Voluntary, Community and Social Enterprise Sector, User and Advocacy groups for those less frequently heard, public representatives, Healthwatch and the media</p>	<ul style="list-style-type: none"> ▷ We will build partnerships with Voluntary, Community and Social Enterprise organisations to extend our reach and our understanding of the different communities served by the Trust ▷ We will actively welcome constructive feedback and challenge from our community partners on current service delivery as well as plans for the future. Strong relationships and ongoing dialogue will mean that insights can provide 'early warning signs' if necessary ▷ The strengths and expertise of the VCSE sector will enable us to secure improvement in access and responsiveness across our services ▷ Our external reputation will be stronger 	<ul style="list-style-type: none"> ▷ We have an improved reputation score - measured through industry recognised tool based on traditional and social media, including feedback on NHS Choices. Tool is new so baseline needs to be established ▷ We will use a bespoke Equality Diversity and Inclusion measure for assessing inclusion and diversity across our stakeholder engagement and involvement work ▷ We will evidence how conversations with our communities and community partners shapes person-centred care

Engagement and involvement - a learning journey

As we seek to make progress towards embedding engagement and involvement, we will identify best practice and share this learning.

Best in class

We will continue to look at Acute NHS Trusts that have already been rated outstanding and identify what we can learn from their engagement and involvement work and the contribution it has made to their strategic success.

For example, Western Sussex Hospitals NHS Foundation Trust is rated 'Outstanding' in each of the CQC domains and they have invested significantly in their engagement work. We will use peer review and learning to translate best practice from other Trusts into our local context.

Practice leadership, research and development

Practice leadership and development will be supported by a 'virtual team' of experts drawn from different teams and functions across our Trust, and led by the Director of Involvement, Engagement and Communications.

We will undertake regular research reviews to identify what we can learn from research as well as participate in wider professional networks to inform our practice development, utilising learning both from the NHS and other sectors.

Exemplars within the Trust – spread of good practice

We have dedicated and skilled professionals across our organisation who are already leading and inspiring progress across the engagement and involvement agenda. We are producing case studies of these exemplars to share across the Trust so that we can spread good practice internally and learn from one another.

We anticipate that this will be an ongoing process of learning and development. We will ensure we capture and report the impact of our engagement and involvement initiatives.

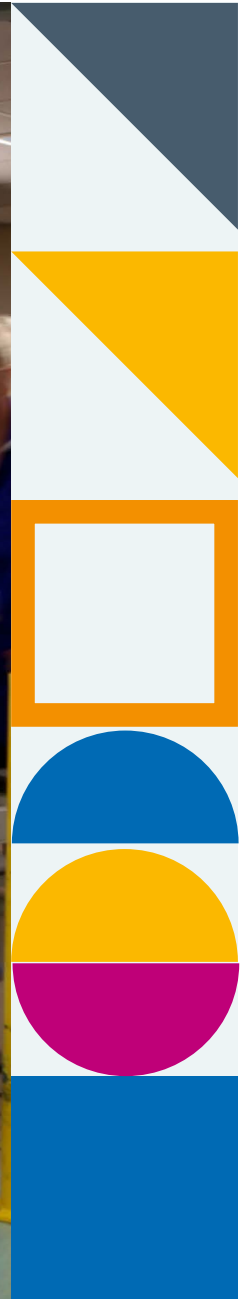
Engagement toolkit

We will develop and launch an engagement toolkit to support any member of staff in the Trust to engage with stakeholders and involve them in all aspects of our work.



Enabling pillar:

Involving and engaging the people who use our services



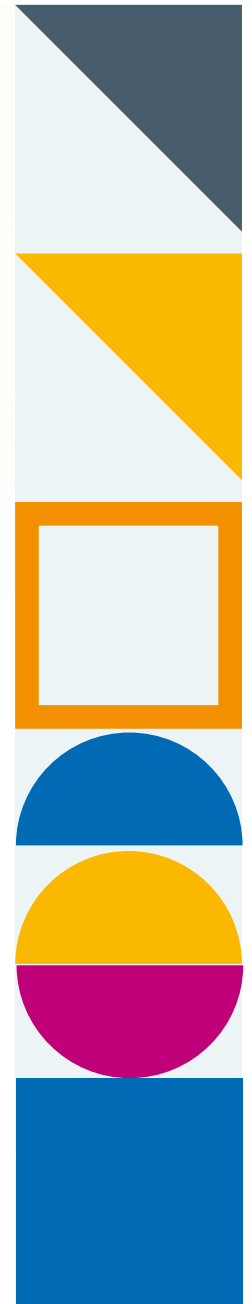
Enabling pillar: Involving and engaging the people who use our services

Framework Initiative	Year 1-2 Milestones	Year 3-4 Milestones
<p>Patient and carer involvement in service delivery, and service improvement and development</p>	<ul style="list-style-type: none"> ▷ Establish a framework for involvement and engagement to support stakeholders and staff ▷ Plan stakeholder engagement across all Journey to Outstanding enabling strategies ▷ Establish Engagement and Involvement tracker to monitor the activity and impact across services and programmes within the Trust ▷ Establish annual impact report covering all engagement and involvement work ▷ Develop person-centred care charters with involvement of patients/carers ▷ Embed use of patient and staff experience stories in divisional governance 	<ul style="list-style-type: none"> ▷ Evaluate quality of divisional decision-making and governance to assess how feedback from patients and service users has been captured and used ▷ Generate evidence on how engagement and involvement supports greater equality and inclusion for patients and colleagues ▷ Patients and carers are involved in strategic planning, governance and in evaluating the Trust’s performance and strategic progress ▷ Increase feedback and response to surveys
<p>Foundation Trust Membership Strategy</p>	<ul style="list-style-type: none"> ▷ Develop new membership strategy and improve communication and engagement with Members ▷ Maintain an accurate membership database which supports greater digital communication ▷ Promote the work of the Trust and Governors, encouraging greater attendance at Governor meetings and the Annual Members Meeting ▷ Develop active two-way engagement between Members and Governors 	<ul style="list-style-type: none"> ▷ Increase number of active members ▷ Evaluate quality of member engagement ▷ Ensure the Trust membership is representative of the communities it serves in terms of disability, age, gender and ethnicity



Enabling pillar:

Involving and engaging our colleagues



Enabling pillar: Involving and engaging our colleagues

Framework Initiative	Year 1-2 Milestones	Year 3-4 Milestones
<p>Employee, volunteer and Governor engagement at all levels in the Trust</p>	<ul style="list-style-type: none"> ▷ Establish an ongoing 'continuous listening' programme involving leaders at all levels ▷ Ensure listening to staff and acting on feedback is reflected in divisional governance and is aligned to the staff related equality objectives ▷ Undertake co-design programme to improve internal communications, establishing more tailored messaging and wider range of communication channels ▷ Establish strategic programme for medical engagement, with programme support and co-ordination in place ▷ Strengthen use of real-time experience data to influence priorities and action 	<ul style="list-style-type: none"> ▷ Strengthen pool of potential governor candidates - enhancing diversity and increase election turnout ▷ Routinely triangulate all elements of organisational intelligence on colleague experience identify areas of the Trust where more intensive support is required from People and OD team and resource to improve engagement and experience ▷ Evaluate volunteer and governor experience through bespoke surveys and apply findings to support and development priorities ▷ Closure of the gaps outlined in the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES) - in line with the People and OD Strategy ▷ Be recognised as a Top 100 Employer for LGBT inclusion within the Stonewall Workplace Equality Index

Enabling pillar: Involving and engaging our colleagues

Framework Initiative	Year 1-2 Milestones	Year 3-4 Milestones
<p>Developing and supporting leaders and managers working at team, service and operational levels</p>	<ul style="list-style-type: none"> ▷ Launch and deliver compassionate leadership training to strengthen the way in which leaders listen to and engage with colleagues ▷ Build competency in listening to, giving and responding to feedback through leadership and management development programmes ▷ Use triangulation of staff experience data and themes to prioritise leadership development ▷ Review arrangements for briefing and cascading information to staff within each division 	<ul style="list-style-type: none"> ▷ Develop regular reporting of staff experience data into divisional and corporate governance, and agree actions required from leaders and managers ▷ Review governance arrangements within the Trust to ensure strong staff and patient representation
<p>Decision-making</p>	<ul style="list-style-type: none"> ▷ Support leaders and managers to strengthen their approach to leading organisational change to better involve staff ▷ Work in collaboration with the Pathways Programme to establish staff councils, across professional disciplines 	<ul style="list-style-type: none"> ▷ Trust achieves accreditation for Pathways Programme ▷ Services have established staff Councils and achievements are widely shared



Enabling pillar:

Involving and engaging our partners

Enabling pillar: Involving and engaging our partners

Framework Initiative	Year 1-2 Milestones	Year 3-4 Milestones
<p>Integrated Care System and Integrated Locality Partnerships</p>	<ul style="list-style-type: none"> ▷ Develop programme to map system changes and plan joint approach to stakeholder engagement and ensuring consultation requirements are met ▷ Establish and embed shared best practice model for engagement, involvement and consultation ▷ Ensure system and service leaders understand legal obligations for involvement and engagement ▷ Engagement and Involvement Impact Report developed and shared with partners ▷ Stakeholder survey undertaken annually that invites partners to offer feedback on working with the Trust as a partner 	<ul style="list-style-type: none"> ▷ Improved partnership working and communications recognised by the CQC ▷ Further integrate system level strategic and operational planning of engagement, involvement and communications activities ▷ Ensure partnership approach to engaging stakeholders in reviewing/improving care pathways that span organisational boundaries ▷ Insights from patients and communities identify system as well as service priorities for improvement

Enabling pillar: Involving and engaging our partners

Framework Initiative	Year 1-2 Milestones	Year 3-4 Milestones
<p>Academic and Education Partners</p>	<ul style="list-style-type: none"> ▷ Ensure that we play a key role in the development of the Three Counties Medical school ▷ Ensure we have a strong voice in the development of Research4Gloucestershire as the research arm of the One Gloucestershire Integrated Care System ▷ Use engagement and involvement infrastructure to support increased patient and staff participation in research trials and the visibility and awareness of research activity across the organisation 	<ul style="list-style-type: none"> ▷ Ensure that engagement supports the further development of a system wide research strategy ▷ Increase the number of research collaborations with universities and commercial partners
<p>Clinical Networks, Alliances and Programme Groups</p>	<ul style="list-style-type: none"> ▷ Influence the development of the clinical networks across the South West and the Midlands 	<ul style="list-style-type: none"> ▷ Triangulation of system wide experience data and stakeholder insight and involvement shapes priorities for clinical collaboration and improvement across the One Gloucestershire Integrated Care System
<p>Hospitals Charity</p>	<ul style="list-style-type: none"> ▷ Support the Trust Charity in enhancing the visibility of the brand and increase fundraising 	<ul style="list-style-type: none"> ▷ Support further market and stakeholder research work to inform plans to increase fundraising



THANK YOU

Enabling pillar:

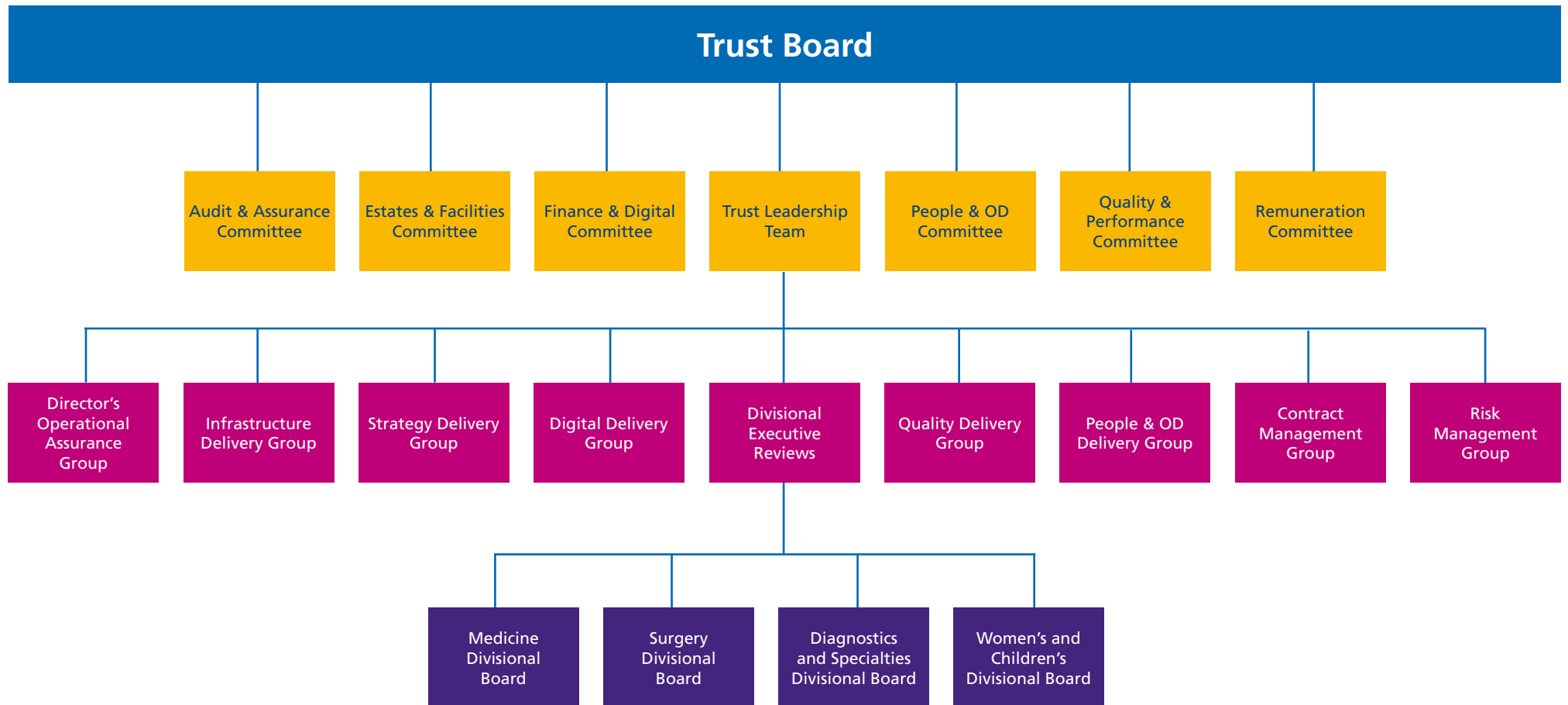
Involving and engaging our communities



Enabling pillar: Involving and engaging our communities

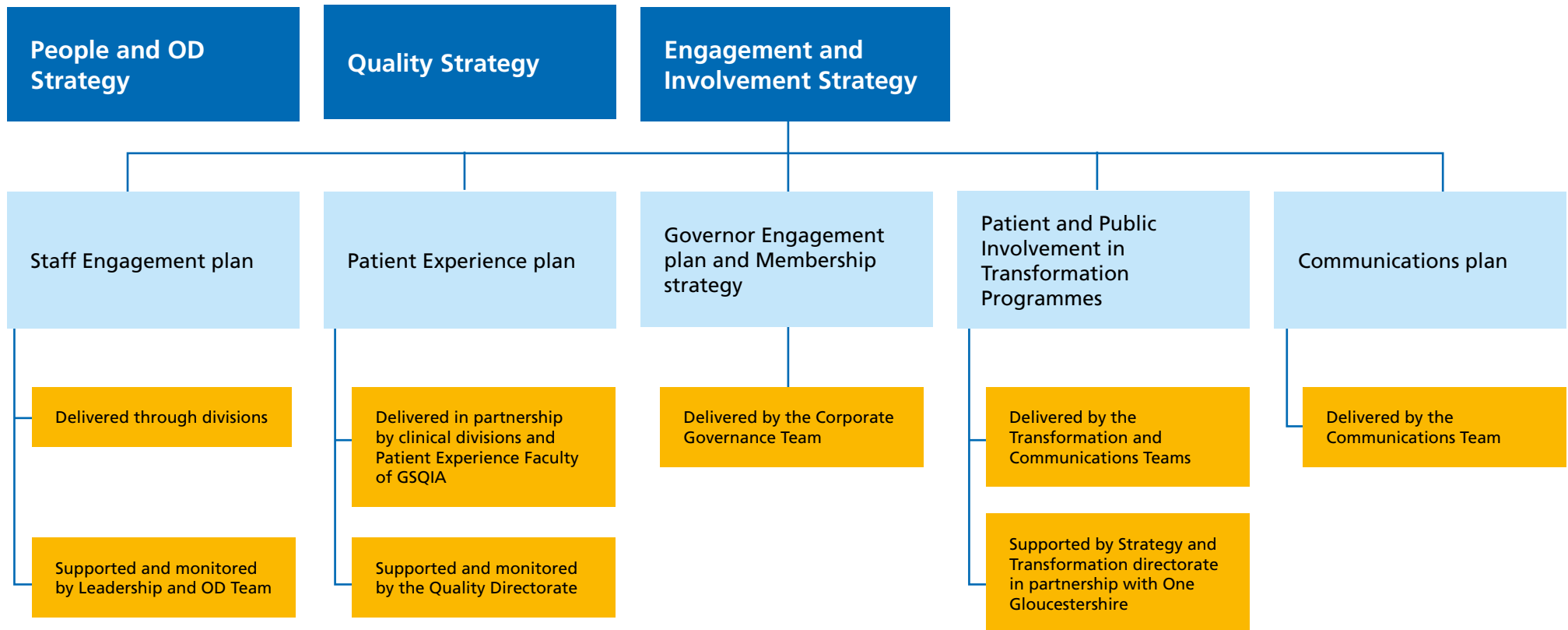
Framework Initiative	Year 1-2 Milestones	Year 3-4 Milestones
<p>Healthwatch Gloucestershire</p>	<ul style="list-style-type: none"> ▷ Develop proactive briefing programme whereby key stakeholders are kept informed on strategic programmes and developments ▷ Develop arrangements for joint projects on specific themes where strategic priorities are shared across the partnership 	
<p>Voluntary, Community and Social Enterprise Sector Involvement Network</p>	<ul style="list-style-type: none"> ▷ Establish Involvement Network and regular programme of meetings, conversations and events ▷ Map out our population and the communities we serve that we want to reach ▷ Share annual impact report of Engagement and Involvement work ▷ Agree role of the network in supporting the development of person-centred care 	<ul style="list-style-type: none"> ▷ Share feedback and equality data routinely to prioritise where improvement is needed most in quality, access or experience for different groups or communities ▷ Collaborate on capacity building for engagement, involvement and improvement ▷ Evaluate impact of the network to inform further development ▷ Real-time experience and insight data is used to shape priorities for collaboration

Trust Delivery and Assurance Structure - August 2020



Supporting governance for strategy implementation

The detailed plans to implement this strategy will be developed through the following framework:



Organisational Resources for Strategy Delivery



Appendix One: Stakeholder Map

Our service users and supporters

	Interests
<ul style="list-style-type: none"> ➤ People who use our services ➤ People who advocate for patients - including carers, family and friends ➤ Foundation Trust members ➤ Regulators who act in the interests of patients and the public 	<ul style="list-style-type: none"> ➤ Person-centred care and responsive services ➤ Patient and carer experience ➤ Accessible services, buildings and information ➤ Quality improvement

Our colleagues

	Interests
<ul style="list-style-type: none"> ➤ Employees ➤ Governors ➤ Volunteers ➤ Leaders and managers ➤ Staff representatives 	<ul style="list-style-type: none"> ➤ Motivation and enjoyment at work ➤ Contributing to the 'Journey of Outstanding' ➤ Involvement in decision making ➤ Internal communications ➤ Staff and governor voice ➤ Providing the best care for everyone ➤ Tackling the climate emergency

Our partners

	Interests
<ul style="list-style-type: none"> ➤ 'One Gloucestershire' partners ➤ Academic and education partners ➤ Clinical networks, alliances and programme groups ➤ Integrated Locality Partnerships ➤ Cheltenham and Gloucester Hospitals Charity 	<ul style="list-style-type: none"> ➤ Designing new pathways of care ➤ Expanding research ➤ Extending learning and training opportunities for healthcare staff ➤ Getting the most out of shared resources ➤ Improving outcomes for people in Gloucestershire

Our places and communities

	Interests
<ul style="list-style-type: none"> ➤ Voluntary and Community Sector partners ➤ User and advocacy groups for those less frequently heard ➤ Public voice and elected representatives ➤ Healthwatch Gloucestershire ➤ Media 	<ul style="list-style-type: none"> ➤ Service delivery ➤ Making the most of both hospital and community 'assets' ➤ Involvement in service change ➤ Sharing feedback and resources ➤ Compliance with involvement duties

Appendix Two: The case for change

The Involved People objective is one of ten strategic objectives agreed by Gloucestershire Hospitals NHS Foundation Trust to deliver its vision of 'Best Care for Everyone'.

Whilst being framed as a strategic objective in its own right, the ability of the trust to engage and involve its stakeholders and develop meaningful and collaborative relationships with partners will be fundamental to the capability required by the Trust to achieve the other nine strategic objectives.

The strategic case summarises the absolute commitment for embedding engagement and involvement with all stakeholders as a fundamental part of the capability required by the Trust to achieve its 'Best Care for Everyone' vision and both an outstanding rating by the CQC and an outstanding reputation with our colleagues and communities.

The full summary report, **'From Compliance to Collaboration: the strategic case for Engagement and Involvement'** can be found on the Trust website:

www.gloshospitals.nhs.uk/about-us/reports-and-publications/

Appendix Three: Insights report

The Engagement and Involvement Strategy is one of the key enabling strategies underpinning the delivery of the Trust's overarching strategy, 'Journey to Outstanding' which spans the period 2019-2024.

Leaders across the organisation recognise how pivotal stakeholder engagement and relationships will be if the Trust's vision of 'best care for everyone' is to be realised.

The strategy seeks to ensure that the Trust develops and strengthens its engagement and involvement capability effectively, and that across the whole organisation there is a 'partnership mindset' that empowers the participation of stakeholders as we seek to embed co-production as our organisational approach.

The full report, '**Engagement and Involvement Strategy Development: Insights Report**' can be found on the Trust website:

www.gloshospitals.nhs.uk/about-us/reports-and-publications/

Gloucestershire Hospitals NHS Foundation Trust is grateful all the individuals, groups, teams, and organisations who contributed to the insights discovery process that has shaped the development of this strategy. This has included:

Voluntary, Community and Social Enterprise Organisations

Healthwatch Gloucestershire
 Gloucestershire Partnership Boards
 Gloucestershire Sight Loss Council
 Age UK Gloucestershire
 Gloucestershire Carers Hub
 Gloucestershire Voluntary Community Sector Alliance
 Gloucestershire Young Carers
 The Nelson Trust
 Kingfisher Treasure Seekers
 Inclusion Gloucestershire
 The Friendship Café
 LGBT+ Partnership: Cheltenham & Gloucestershire
 Gloucestershire Health Action Group
 Gloucestershire Deaf Association

Gloucestershire Hospitals NHS Foundation Trust

Patient Experience Team
 Divisional Directors of Nursing and Quality Group
 Leadership and OD Team
 Communications Team
 Transformation Team
 Equality, Diversity and Inclusion Steering Group
 Patient and Staff Experience Improvement Steering Group
 Staffside and Union Representatives
 Strategy and Transformation Delivery Group
 Quality Delivery Group
 GMS Staff Forum
 People and OD Divisional Team
 Trust Board
 Council of Governors
 Involvement Network

Partner Organisations

Gloucestershire CCG
 Gloucestershire County Council
 Gloucestershire Health and Care NHS Trust
 South West Ambulance Trust
 Cheltenham and Gloucester Hospitals Charity
 One Gloucestershire

Appendix 4: Achieving our Strategic Objectives through Co-production



Glossary

Acute Trust

NHS trust that provides secondary or specialist care, including emergency care, cancer treatment and surgery. Our acute Trust is Gloucestershire Hospitals NHS Foundation Trust with two hospital sites at Cheltenham General Hospital and Gloucester Royal Hospital.

BAME

Black, Asian and Minority Ethnic (BAME) people or communities.

Board

Directors and Non-Executive Directors that set strategic direction and monitor performance.

Care Quality Commission (CQC)

Independent watchdog and regulator of health and care in England. Enforces the rules on all healthcare and adult social care services.

Clinical Commissioning Groups (CCG)

Bring together GPs in their area to make commissioning decisions for their communities. Our CCG is NHS Gloucestershire CCG.

Clinical Senates

Bring together professionals and representatives of patients, volunteers and others to consider local health and care needs.

Commissioning

Process by which commissioners consider the needs of the people in an area and make arrangements to meet those need by buying services from providers.

Co-design

Using patient and staff experience to design better healthcare services

Co-production

An approach to decision-making and service design rather than a specific method. It stems from the recognition that if organisations are to deliver successful services, they must understand the needs of their users and engage them closely in the design and delivery of those services.

Engagement

Process by which we build, maintain and enhance continuous and meaningful interaction with our partners and the people we serve.

Health and Wellbeing Boards

NHS, local authority and community leaders working together to improve health and wellbeing of their population and reduce health inequalities. Each local authority that provides social services has its own health and wellbeing board.

Healthwatch

Bodies that represent the voice of health and care service users.

Health Overview and Scrutiny Committee (HOSC)

A body of local councillors that review the performance of health and care providers in their area.

Local Authority

Public body, usually a council, that provides services, including community, public health, education and social services. Our local authority partner is Gloucestershire County Council.

NHS Constitution

Formal document that sets out the principles and values that underpin the NHS and the rights and obligations of staff and patients.

NHS England and NHS Improvement

The two NHS bodies merged in 2019 and work together to support the NHS to deliver improved care for patients.

NHS 111

Online, app and telephone service for the public to access NHS health advice and guidance in England.

National Institute for Health & Care Excellence (NICE)

Provides national guidance and advice to improve health and social care.

PALS

Patient Advice and Liaison Service of each NHS provider that offers confidential advice, support and information on health-related matters.

Partners

Organisations that are working together to provide more joined-up services, including health, care, education, research and community.

People that use our services

Our patients, their families, relatives & informal carers.

People we serve

Our wider public, including the population Gloucestershire, and including people that might not access care.

Shared Decision-Making

Where all stakeholders work together to understand and decide what options are most suitable to improve the health and wellbeing of individuals, groups and communities.

Staffside

Bodies that speak collectively with management on behalf of staff, including trade unions and professional groups.

Stakeholders

Everyone that has an interest in and/or influence over our work and prospects.

Voluntary, Community and Social Enterprise (VCSE) sector

Area of social activity undertaken by organisations that are not part of the government but which can provide services for people, or speak on their behalf.



Gloucestershire Hospitals
NHS Foundation Trust

Engagement
and Involvement
Strategy

Nov. 2020