# Think. Do. Share. Engagement Plan 2015-16

Engaging partner organisations and the public in the development and delivery of Dudley's health & wellbeing priorities



### **Engagement Plan 2015-16**

In developing and delivering health and wellbeing priorities for the borough, Dudley Health & Wellbeing Board members have a responsibility to engage people in their own organisations and sectors, and people who live, work and volunteer in the borough's communities. This engagement plan borrows LocalGov Digital's "Think. Do. Share." approach to create a simple easy to follow plan which can be implemented in 2015-16. Delivery of the plan will be driven by Dudley Health & Wellbeing Board's Development Group,

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"Best practice for professionals isn't spread like butter, it's grown like a garden. How can we enable this?"

Question recorded on a post-it note by a participant at Social Innovation Camp

This plan is informed by information and views shared during one-to-one conversations with 12 Dudley Health & Wellbeing Board members and 2 Development Group members undertaken between November 2013 and January 2014. The principles for engagement were subsequently agreed at a board meeting. A report from this work, *Engaging Together?* is available to view at <u>www.bit.ly/DHWBengagingtogether</u>

### 1. Think: engagement principles

Dudley Health and Wellbeing Board has already articulated seven principles which inform the delivery of the vision in Dudley's Health and Wellbeing Strategy. One is: we will work in empowering ways, appreciating the potential of individuals and their communities to maintain and sustain health and wellbeing and the contribution they can make to shaping and delivering services. This underpins our engagement activities, and the following four engagement principles guide us further.

1. Engagement is the business and responsibility of every Dudley Health & Wellbeing board member and the organisations they represent.

Collectively the board has responsibility to ensure effective engagement is embedded within partners' day-to-day business and is taking place through the commissioning and delivery of services.

Activity and issues will be routinely screened through Quality Assurance processes by the board in terms of board's capability (and the capability of individual partners) to involve local people, and local communities' interest and capability to be involved.

2. There will be different types and levels of appropriate engagement, depending on the situation.

The board needs a consistent and rigorous mechanism by which it can assess the form that engagement should take as each new issue arises, and to evaluate its success.

## 3. Engagement activities should be based on evidence of what works.

There are a variety of traditional and innovative ways to connect with staff and volunteers within organisations and with people in our local communities, including those people who may be from seldom heard groups.

Consideration should be given to the most appropriate methodology and medium for engaging the particular target group concerned. It is important that individuals and communities receive feedback on how engagement activities have influenced the development of board policy, priorities and actions.

#### 4. We will open ourselves to learning about the reach, impact and effectiveness of our engagement.

All engagement activity needs to be evaluated, and the learning collected used to plan and develop future engagement.

Any evaluation undertaken should actively involve people the engagement activity sought to involve.

### 2. Think: about ways people get involved

People might choose to engage in the development and delivery of Dudley's health and wellbeing priorities in any of these four ways: strategic, supportive, generative or responsive. Considering these from the perspective of the person getting involved we can develop ways to support them.

#### 1. Strategic involvement

**What I do:** I am involved at a strategic level, such as being a member of a board, or having responsibilities in relation to commissioning services.

**What I need:** To know what Dudley Health & Wellbeing Board expects of me and the board I am part of. To be given training and support to be effective in my role.

**Support could include:** Learning and development opportunities. Quality assurance information.

#### 2. Supportive involvement

What I do: I am involved through doing. I deliver services, activities or projects which are directly contributing to specific health and wellbeing priorities.

**What I need:** To know how to feed in to Dudley Health & Wellbeing Board (via other boards etc.) To be appreciated for my contribution to priorities. To be given necessary training and support to be effective in my role.

**Support could include:** Effective communication about Dudley Health & Wellbeing Board work. Learning and development opportunities.

#### 3. Generative involvement

What I do: I have seen that something is missing. I have set up a project, activity or scheme to fill the gap I have identified.

What I need: To know how to feed in to Dudley Health & Wellbeing Board (via other boards etc.) To be appreciated for my contribution to priorities. To be given necessary training and support to be effective in my role.

**Support could include:** Effective communication about Dudley Health & Wellbeing Board work. Learning and development opportunities.

#### 4. Responsive involvement

What I do: I attend meetings or events in relation to Dudley Health & Wellbeing Board's work. I respond to Dudley Health & Wellbeing Board communications. I am willing to make myself available to give my opinion.

What I need: To know what is going on. To be asked and encouraged. To know that what I say makes a difference.

**Support could include:** Effective communication about Dudley Health & Wellbeing Board work and engagement activities. Links to groups/forums e.g. Healthcare Forum, Patient Participation Groups, Community Forums etc.

Dudley Health & Wellbeing Board's Communication Plan will include audiences and channels for communications including a website area and use of social media. In 2014 an extensive list of user and community networks and staff communication mechanisms was compiled, with contributions from all Board partners. This will be used to inform activity in 2015-16.

### 3. Do: collective actions

There are three key actions Dudley Health & Wellbeing Board partners will undertake collectively around engagement in 2015-16: Quality Assurance, Development Training sessions for board members and an Annual Event for people from partner organisations and sectors.

#### **Quality Assurance**

Quality Assurance processes will be developed further in 2015-16 so that Dudley Health & Wellbeing Board can be assured that effective engagement is embedded within partners' day-to-day business and is taking place through the commissioning and delivery of services.

#### **Development Training sessions**

A number of Development Training sessions have been scheduled for board members throughout the year.

#### **Annual Event**

Dudley Health & Wellbeing Board hosts an Annual Event involving around 150 individuals from partner organisations and sectors.

The event in June 2015 will build on the launch of Dudley's Health and Wellbeing Strategy at the inaugural event in 2013, and the inspiration and energy generated at the event in 2014, The First Chapter (see <u>www.thefirstchapter2014.wordpress.com</u>).

### 4. Share: organisation and sector activity

Within their own organisations and sectors, Dudley Health & Wellbeing Board partners will undertake a multitude of engagement activities which relate to Dudley's health and wellbeing priorities. A goal in 2015-16 is to share beforehand to reduce duplication of effort and afterwards facilitate learning.

#### **Pipeline**

Dudley Health & Wellbeing Board members should use board meetings, development training sessions and inbetween meeting communications to flag up key engagement activities they are planning which relate to Dudley's health and wellbeing priorities.

An advantage to doing this should be finding others to collaborate with, as well as potentially reducing duplication of effort and creating engagement fatigue among staff, volunteers or in communities.

#### **Stories and learning**

Each month a different partner from Dudley Health & Wellbeing Board will be asked to submit a narrative around engagement activity they have led on.

A simple template will invite stories which have a clear link to one of more of Dudley's health and wellbeing priorities, an explanation of how the chosen engagement approach was arrived at, and the reach, impact and effectiveness of the engagement activity.

Stories of both engagement with staff and volunteers within organisations, and engagement with Dudley's communities and the general public will be sought.

#### Members of Dudley Health & Wellbeing Board's Development Group are:

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Karen Jackson	Dudley MBC Office of Public Health
Brendan Clifford	Dudley MBC Adult Social Care
Ian McGuff	Dudley MBC Children's Services
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