



Healthcare
Improvement
Scotland

Community
Engagement

Learning from COVID-19

Planning and involving people in
change

13 October 2020

NHS
SCOTLAND

Responding to the situation

- Rapid reconfiguration
(Increasing capacity for unscheduled care/ICU)
- Services provided in new ways
(e.g. virtual appointments, virtual support)
- Focusing capacity
(Redeployment of staff to key areas)
- Maintaining essential services



Things we know are changing...

Service models and access

- Increased use of remote consultation (e.g. Near Me, telephone) and triage for face to face where appropriate (more blended model)
- Community hubs and assessment centres
- Increase capacity in urgent care with triage by Advanced Practitioners
- Review of patient pathways

Engagement

- How do we operate in this 'new world'?
- What we take from the 'traditional methods' and how can this be blended with the new methods?
- Practical examples where this is moving forward across the country.

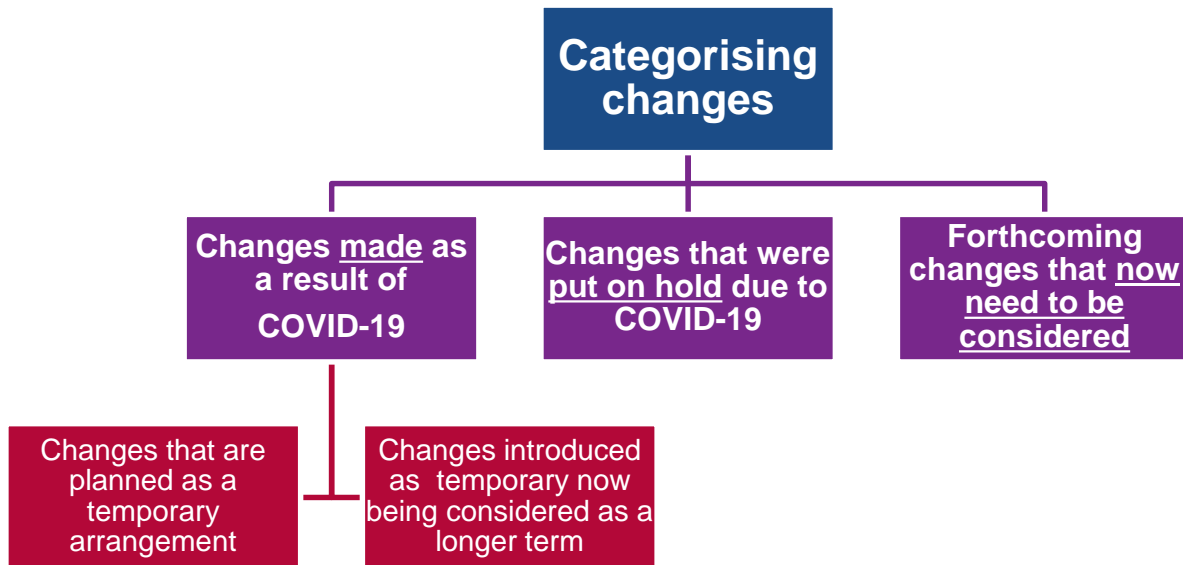
Categorising changes



“In many ways, health and care has been transformed during this crisis. There is a need to understand how these changes have affected people and communities, including vulnerable and marginalised groups, and ensure that all people’s views shape future service design and delivery”.

**Lynsey Cleland, Director of Community Engagement
Healthcare Improvement Scotland**

Categorising changes



Re-mobilise, Recover, Re-design

Re-mobilise, Recover, Re-design: The Framework for NHS Scotland

published on 31 May 2020 detailed three key renewal objectives:

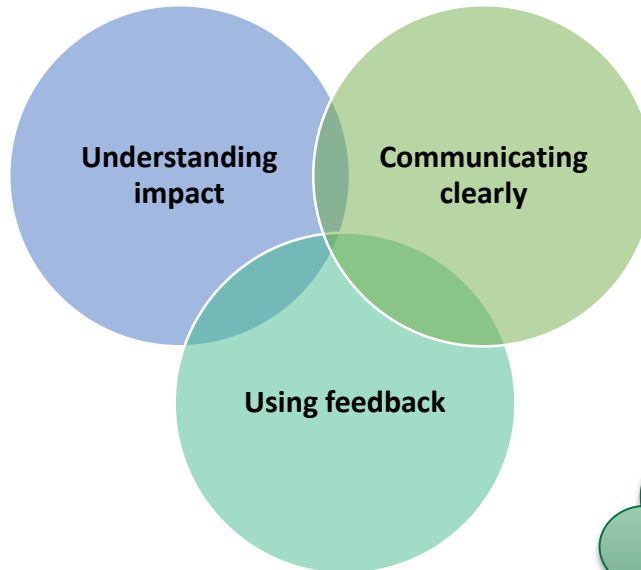
- Engage the people of Scotland to agree the basis of our future health and social care system
- Embed innovations, digital approaches and further integration, and;
- Ensure the health and social care support system is focused on reducing health inequalities



What needs to be considered..

Consider potential Impact and how adverse impacts could be mitigated

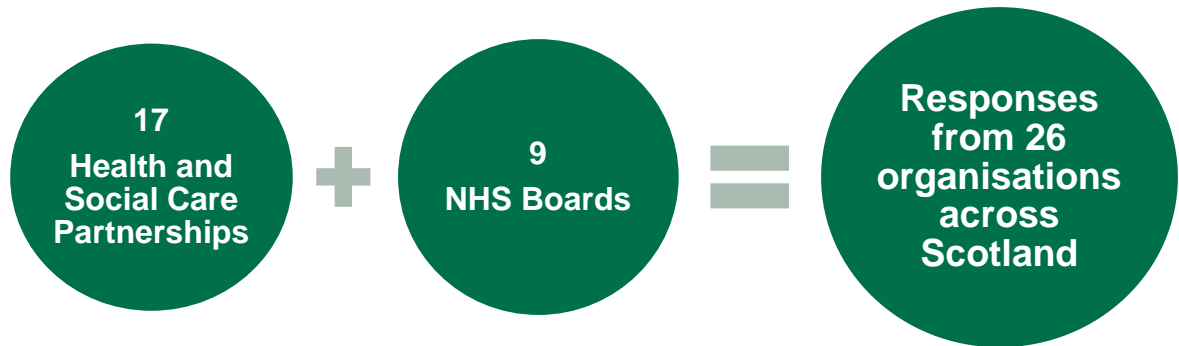
Clear, transparent communications



Gathering feedback to inform current practice and future planning

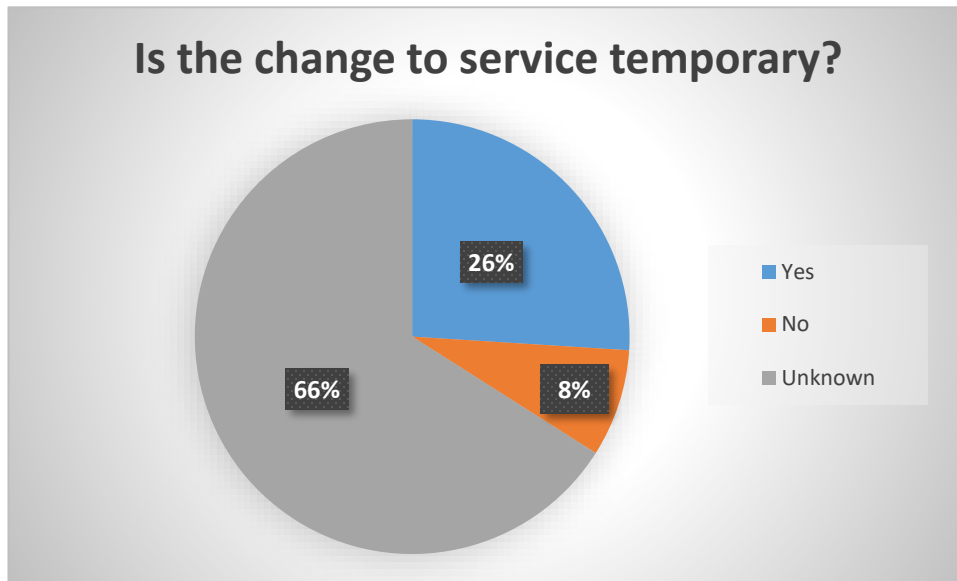


Survey responses and findings



(Responses received August/September 2020)

Is the change to service temporary?



"It is probably too early to say which service changes will become permanent, but it is reasonable to assume that all services will have experienced changes – some of which will not go back to the way they were, and will have evidence to show the benefits of the change."

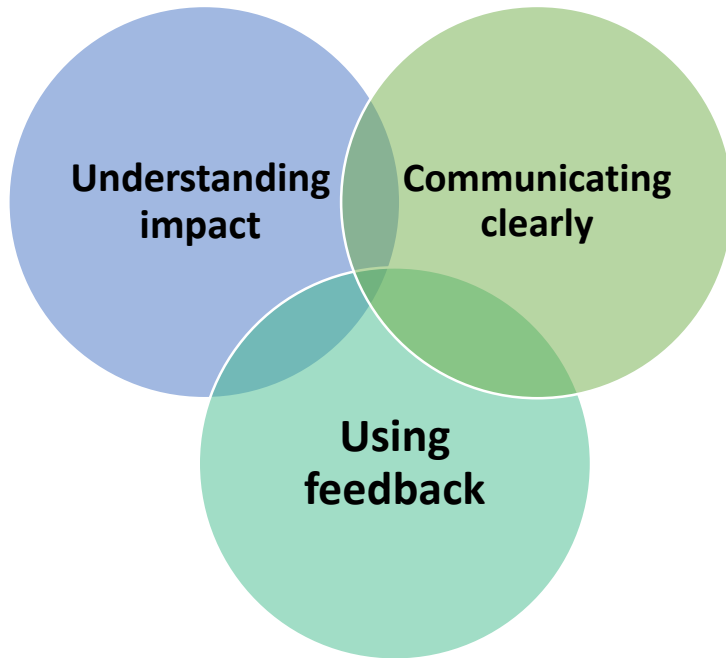
Priority areas that should be maintained

- *“All NHS Boards were placed on an emergency footing and asked to pause non-urgent services and prioritise **emergency, mental health, cancer, maternity services and urgent care** during the pandemic.”*
- *“**The overwhelming majority of services have changed to some extent** across the NHS Board area and the Health and Social Community Partnerships and GP and Primary Care Services.”*

Services changed or paused



Key considerations...



What opportunities does this present us with?

How do we take engagement forward despite the challenges?

Western Isles Experience

Communications Initial Response

Patient Panel



- CEO committed to delivering a visible presence on social media, Twitter and Facebook to provide regular updates on developments on testing and numbers of COVID-19 cases.
- *What a GREAT support system that you offer... it is much needed UNIVERSALLY...and I am sure very well appreciated!!!*
- Staff secondment to Communications Team allowed for an increased presence on social media and communications, ensuring that not all of the focus was COVID-19 related - people had ongoing health concerns and issues that required information.

Communications –Longer Term



NHS Western Isles-Coronavirus Information webpage (separate from the Board's website). www.coronavirus.wi.nhs.scot

Information contained in this includes:

Staff information

Patients and carers

Coping with isolation

Useful support

Community links

NHS Western Isles updates

Volunteering

Scottish Government films

'Our Islands' music video

NHSWI joined forces with local folk rock band Peat and Diesel to relaunch the music video, 'My Island', to feature key health messages on how to keep our islands safe during the coronavirus pandemic. This had a reach of 590,970 with 1.7K shares.

www.facebook.com/NHSWesternIsles/videos/738639066922975/

Patient Panel

- forum for Patient Peer Support Groups, Third Sector partners including mental health, carers, advocacy, chest heart & stroke and people with dementia.

Patient Panel



THEN

- The Patient Panel originally covered Lewis and Harris and Barra, Uist opted out as they felt their current engagement mechanisms met their needs.
- Meetings were in each geographic area and were quarterly in Lewis and Harris and six monthly in Barra.
- There were approx. 9 members participating in any panel at any one time covering issues such as mental health, continence care, disabled access , carers issues etc.

NOW

- MS Teams allowed us to organise a whole health board meeting.
- asked to increase the frequency of meeting from quarterly to monthly/ six weekly in the short term.
- The Patient Panel will now cover all 4 geographic island communities.
- Approx. 31 members who can attend link in via Teams
- Shared learning across the island chain and improved communication between patient groups and organisations.

More Gains from the Patient Panel



The following feedback from Patient Panel was shared with remobilisation groups:

- Access to health services during COVID-19
 - The impact of COVID-19 on decisions to access services
 - Impact on health conditions
 - How we could improve access within restrictions
 - Access to information
 - What has worked and should be retained post COVID-19
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- Feedback on the partnership of NHS, CNES, Third Sector and Volunteers.
 - Direct questions back to NHS WI services to ask for a response to feed back for the next Patient Panel.
 - Shared information on how many Third Sector agencies although impacted by COVID 19 have managed to utilise technology to extend the range and frequency of their service delivery and reach a wider geographic audience, this information is being shared with a wider audience.

Western Isles summary

Pre COVID-19

- Engagement was community based – island to island
- Resistance to using online
- Patient Panel members limited to 2 per Peer Network
- Limited services using near me and online services

Now and going forward

- Whole Island Patient Panel - sharing approaches and experience across health board area.
- Panel feedback used to shape remobilisation.
- Panel members now 31 and growing
- MS Teams used for accessing services and supporting engagement
- Third sector agencies utilising tech to extend reach of services.
- More approaches to starting engagement within services 20 + requests for support

Thank you

You can contact us at:

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Find out more about what we do and resources
we can offer at

www.hisengage.scot