

Involving people in temporary change

Background

Healthcare Improvement Scotland recognises the sustained financial and workforce pressures on health and social care services and that this may lead to the need to make some temporary changes in the immediate short-term to deliver care.

However, the statutory duty¹ to involve people is as important as ever. NHS Boards and Integration Joint Boards have a statutory duty to involve people and communities in the planning and development of care services, and in decisions that will significantly affect how services are run.

The Scottish Government and COSLA Community Engagement and Participation Guidance – Planning with People recognises that some changes are made on a long-term or permanent basis while others are provided on a temporary basis.

The advice below does not apply to planned service redesign. For these changes, please contact Healthcare Improvement Scotland to discuss the approach to engagement.

Current Context

We recognise the current and ongoing pressures and demands on health services due to the pandemic recovery, staffing requirements of the Health and Care (Staffing) (Scotland) Act 2019 and the significant and growing financial pressures on sustainability.

Some changes are made on a long-term or permanent basis, while others are provided on a temporary basis, due to the need to take immediate short-term action to deliver safe services, for example:

- Infection prevention and control measures (environmental concern, outbreak of infection/virus, either within a limited or confined space such as a ward or wider community outbreak)

¹ NHS Reform (Scotland) Act, 2004, <https://www.legislation.gov.uk/asp/2004/7/contents>

- Interim changes, as a result of staffing pressures that could have an impact on the configuration of services.
- Pilot projects where patients have an expectation that this is part of service (patients do not differentiate between pilot projects and day to day service delivery, they just see that a service has been withdrawn).

There may be times when services are reviewed and changed rapidly in response to operational demand. This may be at local, regional or national level. The urgency of the situation may limit the extent public bodies involve or engage people and communities and identify potential impacts.

To ensure people and communities are genuinely put at the heart of service planning and delivery, it is important NHS boards and Integration Joint Boards involve people early in discussions and decision-making.

Involvement of people who use the service informs better decision-making and provides an opportunity to understand the potential positive and negative impacts of change.

What is service change?

Healthcare Improvement Scotland considers [service change](#) to be a service development or change in the way in which patients and service users access services. This may include the enhancement of a service through increased access, new resources and technologies, or new build facilities. It may also include the reduction, relocation or withdrawal of a service or the centralisation of specialist services.

Healthcare Improvement Scotland has a legal duty to support, ensure and monitor the discharge of health bodies' duties in respect of public involvement, including quality assurance of engagement of the changes being made by Integration Joint Boards and in primary and community health services.

Defining temporary

'Planning with People' applies when decisions are being made about the planning or development of all care services, including temporary service change.

The guidance defines temporary as "including those that are time limited (temporary), or trialled through a pilot initiative, which will have an impact on the way in which people access or use services".

Proposed approach to engagement

It is essential that all planned service change or design, including temporary arrangements, are communicated clearly and at the earliest opportunity, to the people affected potentially by the service.

Temporary changes need to be implemented with due regard to 'Planning with People' and should take account of the following:

- **Understanding impact:** Identify those people who currently use, or could potentially use, the service(s) that will undergo temporary change and ask them about potential impacts and mitigations moving forward. This information will support understanding and response to unintended consequential impacts of change. Due regard should be given when making strategic decisions as to how NHS Boards and Integration Joint Boards can reduce inequalities as set out in the Fairer Scotland Duty guidance.
- **Communicating clearly:** Ensure that communications are clear, transparent, and accessible, and include information on how to access services and the support available to people remotely or in person. Communications should provide an indication of how the service is being evaluated and indicative timescales for the temporary arrangement being in place. It may be helpful to consider that communication can be undertaken with service users and their carers face-to-face when they interact with the service, as well as digitally or by post with others.
- **Using feedback:** Seek on-going feedback from people and communities on the temporary arrangements and consider how this can be used to inform current practice and future service design. Feedback may be gathered from people when using services, at the point of service delivery, through surveys (postal or digital) or via Care Opinion.
- **Agree the approach:** For those changes that were introduced on a temporary basis, NHS Boards or Integrated Joint Boards should contact Healthcare Improvement Scotland to discuss the approach to move forward in line with national guidance and policy on community engagement and participation. The period of temporary change may have enabled the collection of valuable service user experience and evidence to support a case for change. This feedback should be used to help planning for remobilisation of the service and to identify further areas for engagement.

Support

To discuss any information within this paper, or specific considerations regarding service change, please contact the team at: his.engageservicechange@nhs.scot

Healthcare Improvement Scotland can provide advice on the type of involvement it would expect to see for proposed engagement by health bodies. It can give views on similar work and best practice elsewhere, support meaningful engagement, and offer guidance on the evaluation process.

Healthcare Improvement Scotland has produced guidance to help NHS Boards and Integration Joint Boards to identify major service change, as well as a flowchart to support understanding of the service change process [Overview of the engagement and quality assurance process for service change | HIS Engage](#).

Further information on Healthcare Improvement Scotland can be found at: www.hisengage.scot