

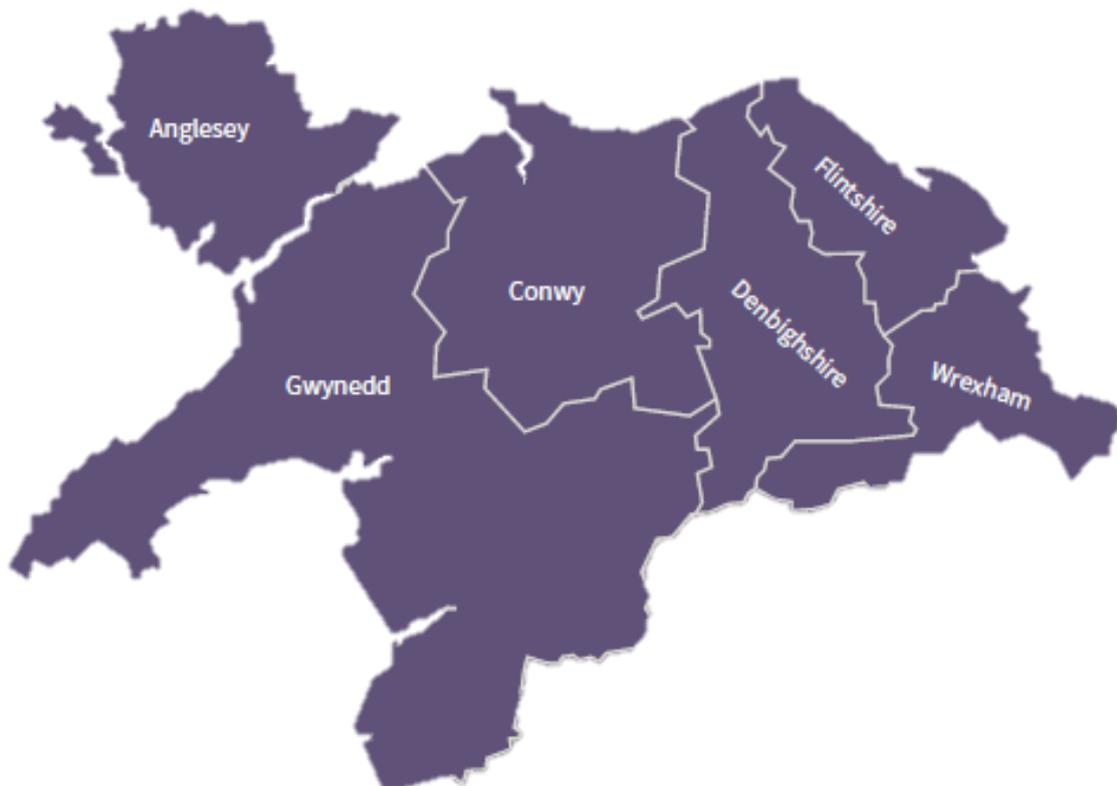


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NORTH WALES SOCIAL CARE AND WELL-BEING
SERVICES IMPROVEMENT COLLABORATIVE

North Wales Engagement Report

How the voices of individuals and carers are heard in North Wales



December 2018



**GIG
CYMRU
NHS
WALES**

Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board



**CYNGOR SIR
YNYS MÔN
ISLE OF ANGLESEY
COUNTY COUNCIL**



CONWY
CYNGOR BWRDEISTREF SIROL
COUNTY BOROUGH COUNCIL



**sir ddinbych
denbighshire**
County Council



**CYNGOR
Sir y Fflint
Flintshire**
COUNTY COUNCIL



wrexham
COUNTY BOROUGH COUNCIL
CYNGOR BWRDEISTREF SIROL
wrecsam

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Introduction

This report aims to summarise the different ways that individuals and carers can have their say about care and support services in North Wales. It was written by the [North Wales Regional Partnership Board](#) to inform Social Care Wales research into: *Care and Support at Home: How do regions in Wales hear individual and care voices?*

For more information about how to get involved in engagement activities across North Wales please see the regional website or contact your local authority or health board.

Strategies and policies

The principles of engagement across North Wales are set out in the:

North Wales Regional Citizen Engagement Policy (2016)

The aim of the policy is to outline the North Wales local authorities' principles and approach to citizen engagement.

North Wales Learning Disabilities Partnership Participation Strategy (2015)

The strategy sets out a framework for involving people with learning disabilities in the work of the Learning Disability Partnership. The Learning Disability Partnership includes service managers from each of the six councils and the health board and aims to improve learning disability services across the region by working together.

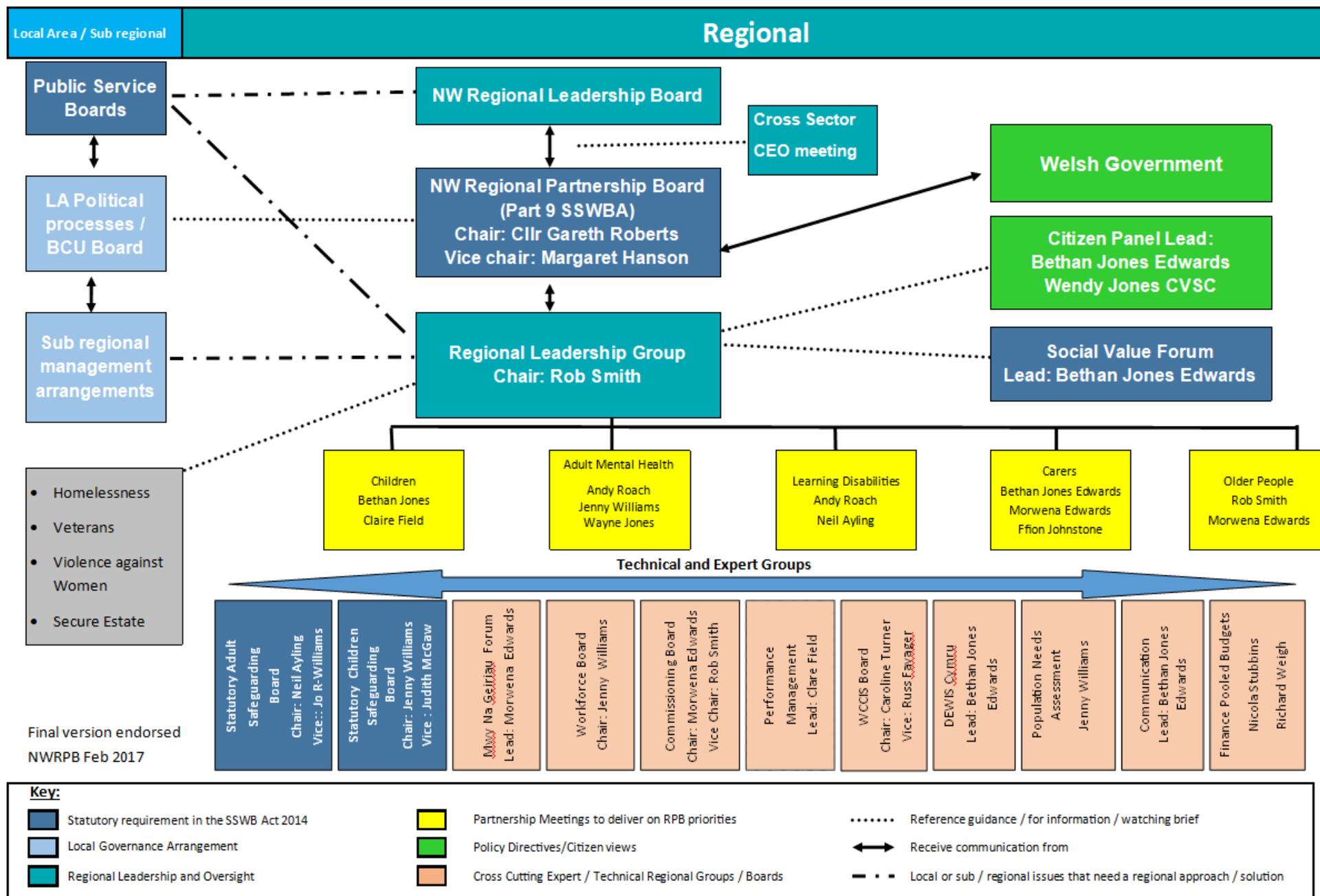
Regional engagement

The two diagrams below show the regional engagement structures.

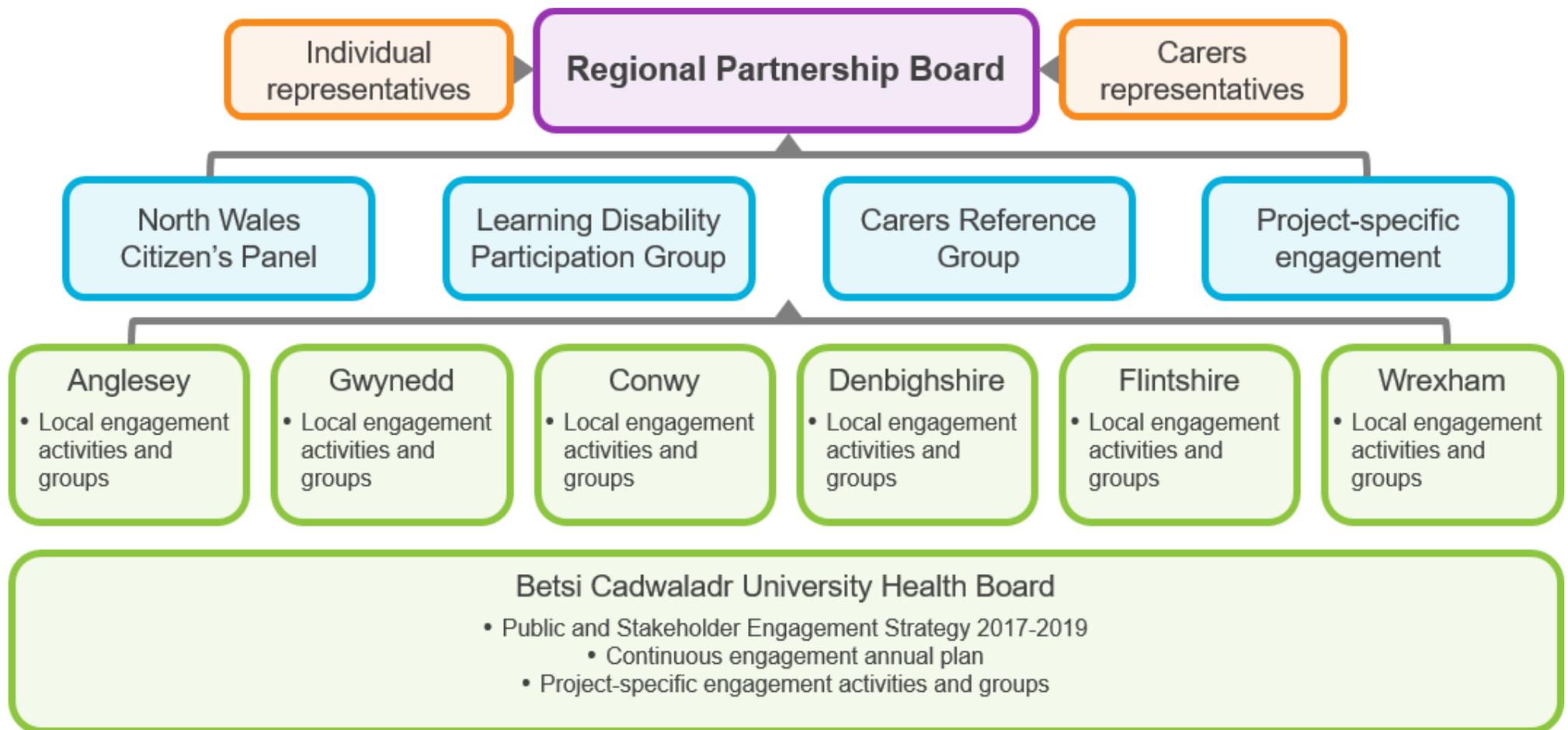
The **Delivering Transformation Regional Structure** shows the overall regional partnership structures (currently under review) and the **North Wales Engagement Structure** looks specifically at the processes in place to bring the voices of individuals and carers into regional decision making.

More detail is included in the case studies in Appendix 1.

Delivering Transformation Regional Structure



North Wales Engagement Structure



Regional Partnership Board

There are two seats for individual representatives and two for carers' representatives to sit on the Regional Partnership Board. The representatives' provide a service user or carer perspective to the business of the Regional Partnership Board (RPB). They contribute to discussions that take place during RPB meetings, based on their own experience as a service user or carer and provide a link between the RPB and other service users/carers as required.

North Wales Citizen's Panel

<https://www.llaisygogledd.wales/>

The North Wales Citizen's Panel gives people a chance to have their say on health and social care services. It is a virtual panel and people can take part in many different ways including phone call or face-to-face interviews, social media, online chat, online or paper surveys.

The panel have been involved in consultations including the Population Assessment, the North Wales Workforce Strategy, the Social Services and Well-being Information Leaflet and the North Wales Learning Disability Strategy.

North Wales Learning Disability Participation Group

Learning disability participation is coordinated across the six councils and each county has its own local participation network/forum supported by advocacy. The group includes up to two representatives from each group/local authority area. Local groups vote for their representatives based on their own rules and representatives must feedback to their local groups.

The aims and objectives of the group are:

- To give people with a learning disability in North Wales a bigger voice and make sure they are heard.
- To have a place to talk about important local issues and support each other.
- To make sure people with learning disabilities know their rights and are treated with respect and as equals.
- To tell the councils, health board and other organisations what we want.
- To work in partnership with other organisations and people across North Wales.
- To talk about issues like transport, independent living, benefits changes and feeling safe and campaign to make them better.

The group hold an annual conference in North Wales to promote their aims and objectives.

North Wales Carers Reference Group

The group provide a forum to ensure carers can offer expert knowledge, experience and understanding of the issues facing carers and the persons they care for.

Project-specific engagement

In addition to the formal engagement structures that feed into the Regional Partnership Board we there is a lot of engagement activity that takes place as part of specific projects, initiatives or work-streams. In [appendix 1](#) we have included the following examples.

- Engaging with Autistic individuals, their families and carers to develop the Integrated Autism Service.
- The work the North Wales Safeguarding Children and Adult's Boards have carried out around Child Sexual Exploitation and self-neglect.
- Co-producing quality characteristics in domiciliary care & support.
- Co-producing the North Wales Mental Health Strategy

Engaging with people with protected characteristics

We carry out an equalities impact assessment on all the projects developed by the Regional Partnership Board which includes consultation and engagement with people with protected characteristics. There is a North Wales Public Sector Equality Network that provides advice, guidance and templates to improve consistency across the region.

Local council and health board engagement

In addition to the regional structures each local council and the health board have a variety of ways for individuals and carers to have their say about care and support services. This engagement leads to changes in the way services are delivered locally but it also influences decisions made by the Regional Partnership Board. For example, much of the engagement carried out for the population assessment and regional plan was through local groups and engagement structures, such as:

- Looked After Children's (LAC) Forums
- Youth councils and school councils
- Young carers groups
- Older people's forums
- Equalities groups
- Disability focus groups

- Learning disability self-advocacy groups
- Caniad engagement with people with mental health needs
- Local engagement sessions with people with care and support needs and carers

We also included feedback from third sector, voluntary and community groups about the views of the people they work with. For more information see the [population assessment consultation report](#) and [regional plan consultation report](#).

The Regional Partnership Board's work-streams, including carers, learning disabilities and regional commissioning are also influenced by the findings of local engagement activities. The structures and relationships developed through local engagement work help the board to reach a wider range of individuals and carers when seeking views about specific topics.

Examples of the engagement processes and activities carried out in each local area are included below. These highlight the wide range of activities that take place which are changing and developing all the time. There is likely to be more happening than we've been able to include here.

Isle of Anglesey

- Joint Engagement and Consultation Board (strategic): a partnership approach to changing the way Anglesey Council engages the public in its consultations and transforming services including Extra Care services and fair charging policies for day services for adults with learning disabilities. The board is set up to try and co-ordinate consultations to avoid duplication (asking people lots of times about lots of different issues) and to encourage joint working on developing engagement strategies to make best use of resources. This is then passed to the operational Third Sector Working Group (Heads of Service, County Voluntary Council representation).
- Citizen Panel: Established by Medrwn Môn to help to avoid duplication and over consulting with individuals in our communities. It provides a number of formats and opportunities for people to take part in the way that is most comfortable to them and through the themes that they are interested in. This encourages a more targeted response and ensures that people only receive notifications of engagement and consultation activities that interest them - for wider information on consultations we use Facebook and twitter to encourage people to respond.
- Place shaping programme in partnership with Medrwn Môn: people are encouraged to look at the assets in their community and how partnership working can make the best use of money, time and skills to create solutions to community based issues. This includes working with our Local Asset Co-ordinators (employed through a pooled budget between BCUHB, Anglesey Council, Anglesey GP clusters and Medrwn) to help individuals who are vulnerable or isolated to make their own

connections within their communities that will have a positive impact on their long term well-being. Piloted in the Seiriol ward and now being rolled out to every other electoral ward across Anglesey.

- Llais Ni: Anglesey Youth Council that represents young people between the ages of 11-25 who live, work or are in education on Anglesey, to enable young people to have more of a say about the decisions that affect them and to give services the information they need to plan differently for the future.
- Older People's Forum and Older People's Council facilitated by Age Cymru Gwynedd and Môn.
- Carers - carer support groups. Carers Week and Carers Rights Day is promoted and a host of activities and information provided.
- Dementia Friendly Communities – Dementia Friendly Communities (Community) Partnership groups working with local businesses and groups to gain dementia friendly status.
- Engagement with regulated services through regulated services provider forums – residential and domiciliary care.

Case Study: Working in partnership to build communities, the Seiriol Model

Anglesey Council is building on its successful record of joint working with the Third Sector and Town and Community Councils to create independent and resilient communities by engaging with residents in a different way.

In 2013, Anglesey Council began a process of transforming the delivery of Adult Social Services. Anglesey Council approached Medrwn Môn to work collaboratively on a pilot project for the Seiriol Ward. Seiriol is an electoral ward in the south east of the island, made up of one town and six rural villages, with a population of just over 6,000 residents.

The project began with 12 weeks of consultation including public meetings, mapping activities, discussion groups and informal chats with as many of the local residents, community groups and organisations as possible. We focussed on engaging the most difficult to reach so everyone had the opportunity to take part. Over 500 individuals were engaged and local and national consultations were built into the process to avoid over consulting or duplicating efforts.

We used the results to develop community based initiatives to address issues such as low levels of health and well-being, loneliness and social isolation using the Integrated Care Fund. We facilitated the setting up of a Seiriol Alliance to prioritise the issues identified. Some of this included task and finish projects such as creating new community groups and a community transport scheme, holding an audit of the work of the Community Councils in the area and creating an engagement process on the creation of a new Extra Care facility in the ward.

The local GP chairs the alliance, supported by Medrwn Môn and Anglesey Council. Current work includes establishing training and working with Wales

Co-operative to establish neighbourhood care co-operatives as an innovative way of using personal benefit payment to buy in tailored care packages for groups of local people. This will build on the sustainability of the local leisure centre as a social enterprise, as it will now become the trading arm of the alliance. This new way of engaging is ongoing and recent examples include using a mobile unit to reconnect with young people in the communities.

Collaboration and seeing the long-term benefits of meaningful engagement has allowed for more informed decision making and planning. This has led to more open and honest conversations between local services, communities and elected members. Residents feel that when they get involved in local planning they can see the results and understand the difficult decisions about where money is spent. Elected members now engage more effectively with local residents and have seen the benefits of asking different questions to inform their planning. They have also benefitted from using evidence gathered to apply for funding for community based projects.

The asset based approach also highlighted the wealth of skills, knowledge and activities already supporting the communities to become more connected. These skills have been used by Anglesey Council who now ask the communities how they want to engage before planning engagement processes.

While the Social Services Department bought in to the process from the very beginning, corporate buy in took slightly longer. However, we now have a Joint Engagement & Consultation Board corporately, which adopted the Building Communities Seiriol model as a good practice model for engagement. The council has also adopted the National Principles of Public Engagement, Participation Standards for Young People and Easy Read rules for public facing documents.

The model requires the time of public sector staff in the evening and weekends which has been a challenge, however recent meetings have seen attendance from front line staff and Heads of Service from different departments, which helped keep local residents engaged with the process.

This type of approach takes a long time to develop and has challenged communities who prefer to see actions developed quickly, although the communities have been able to complete some of the task and finish projects using external funding. We also found that challenging communities to think about 10 to 15 year visions for their communities was too challenging and that 3 to 5 year targets were more productive and engaging.

Having the freedom, flexibility and time to develop the Building Communities approach in Seiriol has been the most important factor in changing the way work is delivered across sectors. Enabling communities and services to look at addressing needs on a

preventative, asset based approach has definitely given a great insight into how collaboration can bring about long term, sustainable improvements.

The model is currently being adopted as an approach to create alliances in the other 10 electoral wards on the island and external partners are also interested in the approach. Anglesey Council's understanding of the importance of involving people in decision making has played a major part in keeping the momentum of the Seiriol Alliance going. The alliance has been able to deliver on the needs identified following the development of trust, confidence and clear communication between all partners.

Gwynedd

- Third Sector Review of Services – reviewing and remodelling our commissioned third sector services so that we can improve, modernise and transform services to meet our ongoing challenges over the coming years. Our intention is to look at opportunities to build on strengths within our communities to make it easier for people to live independently, and easier for families and children to thrive within their communities. As part of this review process we will be visiting the organisations to review the service or project, and we'll be doing engagement sessions which includes both the third sector services and local communities.
- Transforming home care services – Gwynedd Council and Betsi Cadwaladr University Health Board are working in partnership with organisations to be able to provide a home care model for people in Gwynedd who require support to be able to live well at home within specific localities built around GP practices and natural communities. To develop this model, there will be regular workshops, and engagement sessions with homecare providers, Betsi Cadwaladr and the communities.
- Older people's day care services – carry out research into older people's day care services. This will include informal interviews with service users at internal and external centres, carers and team leaders.
- Transforming day services for adults with a learning disability (internal council provision). Sessions have been held with individuals, their carers and the staff at the centres and these are ongoing while the transformation is undertaken.
- The team are in the process of producing a Children's Needs Assessment which will involve carrying out engagement sessions with users, providers and staff as well as members of the public. This is being carried out in conjunction with a Senior Manager of the Children's Team who is working on the Children's Strategy. The sessions will be carried out and completed within the next few months.
- As a whole organisation we recognise the need to work on a preventative basis and to collaborate with individuals and communities to find the best solutions to improve our resident's well-being. In terms of our duty to provide 'Information Advices an assistance' under the Act, we have developed resources such as Dewis Wales and

hope to establish local information hubs by developing 'community co-ordinators' and co-working collaboratively with third sector organisations and with the people of Gwynedd.

- The Community Connectors Scheme started in September 2017 and has placed individuals sponsored by a third sector agency within three of the TAF. They map services and groups within communities and link individuals requiring assistance with those services. It also identifies gaps in the service and promotes community enterprises.
- In the Llŷn area, a local partnership has been set up which focuses on developing well-being services and ensures effective collaboration across several boundaries. The community transportation agency "O Ddrws i Ddrws" has been critical to its development. Likewise, a project funded by the Big Lottery Fund called "Be wnawn ni heddiw" (What shall we do today). The Local Community Connector administrates meetings known as "Cydweithio er Lles Llŷn" (Collaborating for the benefit of Llŷn) and brings stakeholders and community champions together from as different walks of life as the vicar who runs the Food Bank to the community police officer.
- The purpose of the pioneering project 'Bridging the Generations' is to prevent loneliness between children, young people and older people by bringing them together for fun and interesting activities. The scheme is being developed with further education students at Coleg Meirion Dwyfor and will be evaluated by Masters Students from the Ageing & Dementia Research Centre, Bangor University. Following two successful six-week series of 'Bridging the Generations' in Bangor and Nefyn, the Well-being Unit has arranged activities between tenants of Sheltered Housing in Barmouth and children at Ysgol y Traeth. The Well-being Unit is also working with the Head of Grŵp Llandrillo Menai Site in Dolgellau on creating links between the students and older people, and it is anticipated that this could help with recruiting more young people to the social care field.
- Gwynedd and Mon Youth Justice Service raised awareness locally during International Restorative Justice Week. It was a special opportunity to celebrate and raise awareness of Restorative Justice, develop interest and encourage discussions by asking the public to think about what they would do if faced with the chance to meet someone who committed a crime against them. Restorative Justice brings together people harmed by crime or conflict with those responsible for the harm, to find a positive way forward.
- We are trialling 'Children's First' areas in the Maesgeirchen area of Bangor, to help create more integrated services to reduce the number of harmful experiences in childhood and to foster strength of character in our children and young people. Detailed mapping of the wellbeing needs of the area has been undertaken with children, young people and their families which will lead us to plan services more effectively in the area.

Conwy

- Conwy Youth Council – young people (up to 25) nominated by various young people's groups across Conwy including schools, youth services and college. We do yearly projects focusing on different subjects that are important to young people. The group also take part in various consultations. Members are and have been members of British Youth Parliament, Young Wales. Members have just put themselves forward for Welsh Youth Parliament.
- School councils including schools not in mainstream.
- Conwy looked after children's forum (Loud voices) – Children from 5 to 15 who are looked after in the county of Conwy come together every 4 weeks to have their say about and being consulted through play.
- Conwy care leavers' forum (Shaping futures). This is a group of young people 16 to 24 who are in the process of leaving care. They meet every six weeks to discuss various topics concerning those leaving care.
- Conwy Involvement Network (for those over 25). This group is primarily over 50 but younger citizens can attend. This group works with various service areas and areas of interest to individuals in the group. We also take on an annual project to highlight or aim to improve things within that particular group or service area.
- Conwy Youth Council and the Involvement Network work together intergenerationally on projects of mutual interest.
- Conwy carry out individual engagement projects within specific service areas which can include individual interviews. We have looked at various service areas including vulnerable families, telecare, learning disabilities, vulnerable adult's carers and older people. We have also interviewed people who receive services from our commissioned services to help with service review.
- Annual citizen's survey sent to all carers, all children and a sample of adults who receive care and support from Conwy.
- 'Hubbub forums' facilitated by Age connects for older citizens across at 5 towns across Conwy (Llandudno, Colwyn Bay, Llanfairfechan, Llanrwst and Abergele. These group get involved with local or national issues and have speakers from various organisations
- Conwy Connect for learning disabilities facilitate a forum - The engagement service is to work closely with our members by providing self- advocacy monthly meetings and supporting our elected representatives to attend and participate at local, regional and national level. We also get involved by working with volunteers within the projects of doing Conwy Connect Newsletter and its distribution; writing reports and attending consultations on things that influence the well-being and lifestyles of our present and future.
- Citizens Panel facilitated by CVSC - The North Wales Citizen Panel was

established in order to gather the thoughts and opinions of individuals living across North Wales in order to seek a consistent message to providers on what is required across all six local authorities. The panel aims to empower those harder to reach communities and individuals in order for them to feel further empowered to have their say within local service delivery and consultations. As the panel is virtual, people can get involved in any way they wish, email, phone, post, social media, the panel website and face to face so there are no limits to involvement. As members of the panel, we discuss what topics they are most interested in, in order to make sure appropriate and interesting consultations are sent to citizens.

- WCD Young Carers provides services for young carers and young adult carers in Wrexham, Conwy and Denbighshire and is a part of Credu (formerly Powys Carers Service). The service communicate Young Carers' views to local and national policy makers and play an active part in promoting Carers' rights.

Case Study: Family Support Model

We are using various methods to involve families, children and young people in the development of our Family Support Model in Conwy (early support and prevention services). The research with families was designed to gain an understanding from families' lived experiences and resulted in an analysis of common themes, and in family stories. Following the research, families who took part, as well as others, were invited to join a Project Advisory Group. This group works alongside the Project Manager and are involved in project developments, and in making decisions about the direction of the project.

We involved parents who have benefitted from our early intervention and prevention services (such as Team Around the Family, Llanrwst Family Centre, parenting courses and Domestic Abuse Services). We have also consulted with parents, and grandparents more widely through talking with people outside school gates. We have consulted with children and young people through schools. We have now included young people on the ongoing Project Advisory Group.

Providing various ways for people to be involved has worked well. For some, they were happy to take part in a one-off interview to share their story, or in a conversation outside the school gates. For others, they are keen to be involved on a more ongoing basis through the Advisory Group. All of the research and consultation results have been analysed, written up, and used to develop the project. It is an ongoing challenge to find a way of bringing the parents and young people's advisory groups together – it is difficult to find a time to suit everyone.

Currently they are meeting as two separate groups. The consultation and the ongoing Advisory Group have steered the project developments. The model is based on the results of the research, as well as stakeholder engagement. The involvement of families has been an integral part of the development of the project and service.

Denbighshire

- Annual 'Have your say' survey with a sample of citizens who accessed social services through the year.
- We have a corporate project ensuring all carers in Denbighshire are well supported. The project is aligned with the requirements and ethos of the Social Services and Wellbeing (Wales) Act 2014 and the project is underpinned by the principles of co-production. The project covers carers of all ages including parent carers and young carers. The priorities of the plan have been directly derived from a county conversation exercise and consultation with partners.
- We will be promoting the county conversation portal to ensure that citizens interested in issues affecting them are kept up to date and involved in shaping the action plan.
- We also celebrate Carers Week (June), Carers Rights Day (Nov) and Young Carers (January), promoting events in connection with our partners including a Carers week survey with adult carers
- Hubbub Forums: contract with Age Connects to hold forums with older citizens at venues across Denbighshire.
- Waen Outreach group
- Engagement within regulated services (Care Homes, Shared Lives, Community Living, Re-ablement, Extra Care)
- The learning disability strategic planning group meets bi-monthly with adults with learning disabilities, who are supported by a Self-Advocacy Officer (funded by Community Support Services).
- We fund a self-advocacy service, which provides monthly meetings in Prestatyn, St Asaph and Denbigh (looking at establishing in Ruthin) so as to enable adults with learning disabilities to have a voice.
- We fund a Learning Disability Forum to help support engagement with parent carers – they meet every two months. This service is currently provided via DVSC.
- Complex Disability Team occasionally engage with people in relation to specific pieces of work, for example, we are about to review the work opportunity services.
- We co-produced our Annual Homelessness Prevention Event with citizens and other interested parties. Feedback from citizens is used in a variety of ways within Homelessness Prevention & Supporting People.
- Citizens are involved in the recruitment process whenever possible.
- KIC Club – forum for Denbighshire's looked after young people aged 8 to 15 who live with foster carers and meet each other every half term to share their experiences, say what is going well and what they would like to change. The young

people themselves came up with the logo and the club's name and on an annual basis a newsletter of the activities they've done is produced and circulated to members in both Welsh and English.

- WCD Young Carers provides services for young carers and young adult carers in Wrexham, Conwy and Denbighshire and is a part of Credu (formerly Powys Carers Service). The service communicate Young Carers' views to local and national policy makers and play an active part in promoting Carers' rights.

Case Study: Person Centered Planning

One of the most effective ways of us finding out what really matters to the people being supported by the complex disabilities team is via the annual collation and analysis of the Person Centered Plan (PCP) reviews – we follow a process called 'working together for change' and we engage with a range of stakeholders as part of that process – including citizens, families, providers and other organisations, so as to co-produce an action plan. We use this to help inform what we do each year. These reviews have also been used regionally to inform the population assessment and the development of the North Wales Learning Disability Strategy.

Flintshire

- Flintshire Youth Forum via the Flintshire Integrated Youth Provision
- Children's Services' Looked After Children's Participation Group – Young Voices out Loud.
- School Council Network alongside Healthy Schools and Eco-schools within the Education and Youth Portfolio
- Autistic individuals are involved in the Strategic Board and Operational Group of the North Wales Integrated Autism Service. The service is also looking to establish a forum.
- Unllais are commissioned by mental health services to support individuals to feed in to the development of service plans, recruitment and processes.
- Learning Disability Planning Partnership includes four representatives from the learning disability day opportunity services. Advocates from North Wales Advice and Advocacy Association (NWAAA) also attend to support and represent the voices of others.
- HFT currently operate Flintshire County Council day opportunities services and a 'voices to be heard' forum for people to express their views.
- Carers Strategy Group has an open membership and includes carers, and ASNEW (Advocacy Services North East Wales) also represent the voices of others.
- Young Carers Forum via Barnardos

- Over 50s Groups in communities across Flintshire
- Dementia Friendly Communities Steering Groups
- 'Our Flintshire, Our Future' discussions with staff and citizens about the future budget challenges for the Local Authority.

Wrexham

Children and young people: for more information see the Children's Social Care Department Engagement Strategy and the Children and Young People's UNCRC and Participation Strategy

- Young People's Care Council: The Young People's Care Council collects the views of all looked after children and care leavers in Wrexham. It ensures these views are listened to and acted upon by working with the staff of the Children's Social Care Department to support the improvements in looked after children and care leavers' lives. Projects include working on the issue of privacy which involved a drama workshop and creating a short video and booklet which will be used in training for foster carers and social workers.
- Senedd Yr Ifanc- The Senedd Yr Ifanc Wrecsam is Wrexham Youth Parliament. The Senedd is made up of Young People aged 11 to 25. The Senedd works on county wide issues that affect the young people of Wrexham. The Senedd meets monthly and we have a management group (task and finish) that meets weekly. The Senedd meetings are structured meetings with formal and informal sections. During a Senedd meeting professionals will come to speak to the Senedd to gather the views and opinions of specific issues. Senedd meetings can also include debates, issue based work groups, training. Every two years the Senedd has a ballot which young people are asked what are the top issues affecting young people in Wrexham. The next two years those issues are worked on by the young people from the Senedd. The Senedd work with decision makers to make change for young people in Wrexham such as Councillors, Heads of Services, the Public Service Boards, Public Health Wales and Children in Wales. The Senedd gives young people the chance to have their say and a voice on matters that affect them.
- WCD Young Carers provides services for young carers and young adult carers in Wrexham, Conwy and Denbighshire and is a part of Credu (formerly Powys Carers Service). The service communicate Young Carers' views to local and national policy makers and play an active part in promoting Carers' rights.

Adults

- Annual Quality of Life Questionnaires, with adult service users
- Annual Carers Survey with adult carers
- Contract monitoring/engagement within regulated services (Care Homes, Shared Lives, Community Living, Domiciliary Care, Reablement, Extra Care)

- Engagement sessions as needed as part of the development of commissioning strategies/ priorities
- SWS Group – engagement and action group for people with a learning disability
- Local Authority Your Voice consultation forum
- Wrexham Over 50s Forum

Case Study: Commissioning

Wrexham CBC engaged with service providers (supported living & home care support agencies and residential homes) and the people who are supported by them alongside their carers to discuss what 'good care and support' looks like from their different perspectives. The result will inform 'I statements' that will be used in commissioning and service monitoring across adult services in Wrexham.

Betsi Cadwaladr University Health Board (BCUHB)

For more information see the BCUHB Public and Stakeholder Engagement Strategy 2017-2019 and the latest Continuous Engagement Annual Plan

- Public perception survey to measure how continuous engagement is making a positive difference to the public in terms of:
 - Trust in their health board
 - The reputation of the health board
 - Their feeling that they are able to influence the health board
 - Their feeling that the health board listens to them
 - Their willingness to be advocates for the health board
- A base line survey was undertaken in 2017 and second survey was completed in November.
- Attend a wide range of community events, networks and forums such as Llangollen and Mold Food festivals, Denbighshire and Flint shows, Armed Forces Day, Flintshire Pride, 50+ Action Groups, Family Fun Days, Ruthin Livestock Auction and rural community groups to promote services and engage with communities.
- Support BCUHB services to engage the public and stakeholders on specific programmes and services improvements. Examples in 2018 include working with service users to improve our dementia pathway, hosting engagement sessions across North Wales for older people to tell their stories and experiences; and running Have your Say sessions in a number of GP practices and community hospitals.
- Developing engagement programmes to understand the health priorities of seldom heard groups. For example, improving engagement with Syrian refugees; linking

with the Modern Slavery Forum and Black History Month projects. We are also working with North Wales Gypsy Traveller strategy forum to improve services for the travelling community.

- BCUHB has engaged widely on the development of its Living Healthier Staying Well strategy. This included producing public information and promoting engagement opportunities through press releases, social media (Facebook and Twitter). A range of public and stakeholder engagement was delivered as part of this engagement programme. This included targeted engagement with groups such as older peoples groups, social housing providers, community groups and
- third sector forums and networks. Wider public engagement was undertaken at a number of high profile public events.
- Social media is used to promote services and provide another channel for people to engage with us. This has included opportunities to take part in surveys such as our recent questionnaire about outpatient appointments. The health board has a steady growth in followers on Twitter (over 10,000) and Facebook (over 13,000 likes).

Appendix 1: Regional engagement case studies

North Wales Citizen Panel

a) What was/is the process or activity?

The North Wales Citizen's Panel gives people a chance to have their say on health and social care services in a variety of different ways including phone, post and face to face as well as others.

b) What was it designed to do or support?

It was set up to provide feedback to the Regional Partnership Board about the view of citizen's in North Wales. It also provides a mechanism to engage with citizens from across North Wales and to gather the thoughts, opinions and views of those harder to reach citizens on consultations that influence policy.

c) Who has been involved?

It is a virtual panel and people can take part in many different ways including phone call or face-to-face interviews, social media, online chat, online or paper surveys.

There are currently over 200 citizens involved in the panel coming from a variety of backgrounds living across North Wales with a variety of levels of interests in their local service del

d) Why do you think it was/is successful?

The virtual panel reduces barriers to people getting involved and empowers those seldom heard individuals to have their say on service delivery and enables them to influence policy and practice change. It has also enabled communities to be involved in the consultation process from the beginning.

e) What did it change?

The panel have been involved in consultations including the Population Assessment, the North Wales Workforce Strategy, the Social Services and Well-being Information Leaflet and the North Wales Learning Disability Strategy. Within the Social Services and Wellbeing Information Leaflet, the panel had a great influence in changing the information and accessibility of the leaflet to enable citizens to greater benefit from the information within the leaflet. Additional information was also added to increase accessibility in the form of an appendices of more complicated or jargon words that may not be easy to understand and an explanation of what specific words mean.

This format has also been used once more in the Learning Disability Strategy Easy Read document.

North Wales Learning Disability Participation Group

a) What was/is the process or activity?

The North Wales Learning Disability Participation Group is a group of representatives from self-advocacy groups. They work closely with the Learning Disability Partnership Group which is a group of service managers from across North Wales.

b) What was it designed to do or support?

The group was formed to give the adults with learning disabilities in North Wales a stronger voice. To enable the groups in each county to choose topics which they would like to know more about what is happening across the region. To enable people to see what was working well in another area to give them a voice to tell managers what they think should be happening in their county. To try to influence change where service users think it is necessary.

The Learning Disability Regional Participation Group (LDRPG) was been supported by a Regional Participation Officer for two years, jointly funded by the six local authorities and health. The LDRPG reviewed the model of support during 2018 and agreed to employ a person with learning disabilities with support to co-ordinate the group. The co-ordinator will be based in a third/voluntary sector organisation.

c) Who has been involved?

It was planned that the project should work with the advocacy groups across the region. Some counties have stronger groups than others. Some people came to the big events but they didn't attend the advocacy groups. There is currently 1 or 2 members from self-advocacy groups in each of the six counties of North Wales who attend the group, supported by self-advocacy officers or advocacy officers.

Some of the group members are shown in the photo below holding an award for their work.



d) Why do you think it was/is successful?

The big event planned twice a year was always well attended. The photo to the right is from the 2018 regional event.

The event was planned, facilitated and presented by service users and advocates from each county and the group coordinator.



The group were recently awarded a certificate as part of the All Wales

People First Mirror Awards 2018 in recognition of their outstanding contribution to reflection and learning.

e) What hasn't worked well?

Some counties didn't engage as well as others and some advocacy groups were easier to work with than others, therefore some people in some counties were not able to engage to the same degree as others.

f) What did it change?

That also varied across the counties some counties did introduce pieces of work done by the group such as, at the first event every county liked the friendship group run in Conwy. Most counties said they wanted to promote the use of the book that we created called How to help me.

The group supported the development of the North Wales Learning Disability Strategy and have been involved in writing the Easy Read version of the strategy in both English and Welsh. They have had a great influence in what is included in the strategy and will be involved in how the strategy will be implemented.

North Wales Carers Reference Group

a) What was/is the process or activity?

The North Wales Carers Reference Group is a group of carers from across North Wales that meet quarterly. They work closely with the regional carers strategic and operational groups to make sure carers' voices are heard in regional work.

When referring to carers, we mean unpaid carers of all ages (including young carers and young adult carers) and background who look after a relative or friend who is ill, frail or is a disabled person, who cannot manage to live at home without the carer's practical or emotional unpaid support.

b) What was it designed to do or support?

The act as a point of reference and early engagement with carers and undertake projects of work in line with the priorities identified by the North Wales Carers Strategy. The group provide advice and feedback to on the impact to carers of existing services and proposed service improvements. They ensure carer involvement is established when planning services or proposing service changes. It provides a forum to ensure carers can offer expert knowledge, experience and understanding of the issue facing carers and the persons they care for.

c) Who has been involved?

Membership is made up of carers from across North Wales, who care for people with a range of different conditions.

d) Why do you think it was/is successful?

Listening to carers and understanding the support they need. The feedback from carers has formed an integral part of the North Wales carers' strategy. We gathered interviewed a range of carers and collected their stories as videos, which worked well. It highlighted the challenges they face and issues that needed to be considered and incorporated into the strategy.

For example carers highlighted that the word 'assessment' in the term carers assessment can make them feel that they are being assessed and judged about the quality of care they provide. If we want to increase the take-up of carer's assessments to better support carers then we need to look at the language used to describe them. Carers also highlighted that their needs should be considered at the same time as the person cared for which is a key part of the carers strategy.

e) What hasn't worked well?

The carers' reference group includes around 30 people. There are challenges around refreshing membership and engagement with harder to reach carers, people who don't want to be on the group or labelled with a carer badge.

f) What did it change?

The way the strategy was written and the recommendations within it. Particularly the need to hear carers voices in the same way as the cared for.

Integrated Autism Service

a) What was/is the process or activity?

Engaging with Autistic Individuals, their families and carers as part of the development of the Integrated Autism Service.



b) What was it designed to do or support?

Many autistic individuals fall between eligibility for mental health and learning disability services and so cannot access emotional, behavioural, low level mental health and life skills support. In addition to this, many services lack the confidence to deliver services that can meet individual's needs. In response the Welsh Government has committed £13 million up to 2021 to develop an Integrated Autism Service across Wales. The IAS will provide new adult diagnostic services; lifelong support for autistic individuals (children and adults) their parents and carers; help with transition from child to adult provision and offer training for professionals.

www.ASDinfoWales.co.uk

The IAS will provide the following functions:

- Autism assessment of adults without a learning difficulties or with a mild learning difficulty who do not have a known moderate to severe mental health difficulty
- Information/advice/support following assessment, and consultation in relation to the diagnostic assessment and support of adults with a known moderate to severe mental health difficulty or moderate to severe learning difficulty
- Support for adults with autism without a learning difficulty or with a mild learning difficulty without a known moderate to severe mental health difficulty
- Information/advice/support following assessment for children with autism without a learning difficulty or with a mild learning difficulty without a known moderate to severe mental health difficulty
- Support for parents, partners and carers of individuals with ASD and the professionals they support.
- Advice/training and support for agencies linking with people with ASD.
- Joint working to encourage integration and engagement in services already established.

The service will not provide:

- Emergency / crisis intervention
- Respite care
- Rapid response

For those with more complex needs (where care plans or other services such as mental health support is needed), staff from the IAS will work in partnership with other professionals to ensure that they are able to provide appropriate Autism support.

Key to this work is ensuring that throughout the life of the project, autistic individuals, their families and carers are central to the development of the service. This engagement plan outlines the IAS' methods for engagement.

c) About the engagement and participation: who was involved, why it was successful, what hasn't worked well and what did it change

<p>Strategic and Operational Group</p> <p>The purpose of this group is to provide a strategic direction and make key decisions in the development of the new regional service, from planning and service design through to commencement. The Strategic Board will work on behalf of the Regional Partnership Board to facilitate the creation of the Integrated Autism Service across North Wales.</p> <p>The purpose of the Operational Group is to develop the operational elements of the service. The Operational Group will work on behalf of the Strategic Project Board to facilitate the creation of the Integrated Autism Service across North Wales.</p> <p>Neither group is quorum without the involvement of Lived Experience Advisors and decision making is shared. As a result of feedback from Advisors, the IAS has redeveloped and simplified their referral form.</p>
<p>Pathway Events</p> <p>2 pathway events have been held with stakeholders to determine the routes in to and through the service.</p>
<p>Recruitment Panels</p> <p>The recruitment process for all IAS staff has included Lived Experience Advisors. For many roles, this involved a joint panel of professionals and advisors, but for the Manger role, the Advisors held their own panel.</p>
<p>Conference Launch</p> <p>The IAS Launch Conference in June 2018 was jointly planned with autistic individuals where they advised on a number of issues including sensory considerations. As a result, the IAS purchased sunglasses and earplugs, provided yoga and a quiet space and sensory room to ensure individuals attending had other options than to stay in the main room for the whole event.</p>
<p>Three of the IAS Lived Experience Advisors made videos which were shown at the launch of the service in June 2018. These films share their experiences of Autism as well as their hopes for the IAS as it develops in the region.</p>

Volunteers

The IAS looking to develop our work with volunteers, particularly in co-presenting training.

The IAS supported an Autistic volunteer exhibit his photographic work at Theatr Clwyd, and later in reception at County Hall, Mold -

<https://www.flintshire.gov.uk/en/Resident/Council-Apps/NewsPortlet.aspx?id=1179>

Volunteers for the service also joined us at a visit from Vaughan Gething in October - Cabinet Secretary visits North Wales Integrated Autism Service

<https://www.flintshire.gov.uk/en/Resident/Council-Apps/NewsPortlet.aspx?id=1371>

Training

The IAS will soon be looking to develop their training programme, which they will be able to deliver to services across the region. Volunteers and Advisors will be able to co-present this training alongside IAS staff.

Drop Ins and Community Based Engagement Events

Across the six North Wales counties, the IAS will be holding drop-ins in venues within communities. The drop-ins provide an opportunity for autistic individuals, their families, carers or staff from services to meet with IAS staff to find out more about the service and the support available. The drop-in take place in job centres, libraries and other venues central to the heart of communities so that they are easily accessible.

Similarly, the Community Engagement Events take place in community venues, but offer a 'marketplace' of services available. The events are open to all as a way to showcase the support services available in the area and to link individuals with services that can help. There is also opportunity to hear from speakers and take part in workshops.

These events also provide an opportunity for share information with the IAS of gaps and issues with services which the team can be mindful of and seek positive solutions to by working together.

Online

The IAS have an online presence with a Facebook page and YouTube channel.

Facebook - <https://www.facebook.com/NW-Integrated-Autism-Service-Gwasanaeth-Awtistiaeth-Integredig-GC-1879852932047031/>

YouTube - <https://www.youtube.com/channel/UCZzMF0IFN7aDpDfXiS7ZmHQ>

Events

The IAS also engage with Autistic individuals through attendance at other events, such as the National Autism Conference and the North Wales Autism Conference.

North Wales Safeguarding Children's Board: Child Sexual Exploitation (CSE)

a) What was/is the process or activity?

Engagement with children and young people about how the key messages around the risks around Child Sexual Exploitation (CSE) could be shared with children and young people.

b) What was it designed to do or support?

One of the key priorities for the North Wales Safeguarding Children's Board has been around Child Sexual Exploitation.

In developing a Regional Strategy, the following key areas have been identified:

- Raise awareness of CSE with professionals and the wider communities of North Wales including children and young people.
- Monitor and evaluate the co-ordinated multi-agency and single agency response to CSE.
- Monitor and evaluate the support available for victims of CSE, so that there is help available to children experiencing child sexual exploitation.
- Seek assurance that agencies are disrupting potential perpetrators and CSE offenders are identified and dealt with.
- Ensure North Wales schools and other education providers are equipped to intervene with victims and potential perpetrators of CSE and are engaging with this CSE Strategy.

c) Who has been involved?

Work was undertaken with children and young people and the schools councils in deciding how we could ensure that key messages around the risks around Child Sexual Exploitation could be shared with children and young people.

The children and young people played a key role in developing a drama project to deliver key messages to Year 7/8 pupils across North Wales.

'Mirror Mirror' drama project was commissioned around educating young people on Child Sexual Exploitation, enabling children and young people to recognise and keep themselves and other safe from abuse. The project has been delivered in partnership with the children and young people and on behalf of North Wales Safeguarding Board.

It was designed by Collingwood Learning to a brief supplied by children and young people and the North Wales Safeguarding Board. It was aimed at Year 7 and Year 8 students.

d) Why do you think it was/is successful, what hasn't worked well and what did it change?

The core objectives of the project were:

- Explaining Child Sexual Exploitation and its consequences
- How CSE can work, including the grooming process
- The risk indicators that young people can recognise in themselves and others
- Promoting behaviours and practices that will keep them safe from harm
- Getting help

The programme included:

- A live theatre piece delivered by three actors
- Interactive workshop and post-performance discussion
- Pre and post evaluation
- Teaching resources including project introduction, IAG for teachers, and a follow up lesson plan

The outcomes achieved were:

- Students were better able to identify grooming practices as a result of the programme.
- Students were better able to recognise behavioural changes in people being groomed / exploited as a result of the programme.
- Students understood better that groomers can be anyone, any age and will often appear credible.
- Students awareness that CSE can happen to both boys and girls increased by 9.3%
- Students who recognised that using alcohol and drugs can affect your personal safety increased by 13.5%
- Students think they understand 'sexting' 30% more than they did before as a result of the programme
- Students who know who to go to for help about CSE increased by 30% as a result of the programme.
- 96.5% of students felt this was a good way to learn about Child Sexual Exploitation

North Wales Safeguarding Adult's Board: Self-neglect protocol

a) What was/is the process or activity?

Engagement of people at risk of harm in the development of a self-neglect protocol.

b) What was it designed to do or support?

From the initial learning from the first three Adult Practice Reviews (APR) in North Wales it was identified that self-neglect was a recurring theme in each of the reviews. It was clear that multi –agency staff had limited understanding around the issues of self-neglect.

A recommendation was made in an APR action plan for the development of a regional self-neglect protocol.

The initial work around the development of the protocol was to ensure that we had engagement from multi-agencies and from individuals at risk of harm to develop a protocol that was effective at supporting people who self-neglect.

c) Who has been involved?

As part of the development of the protocol, we asked a number of practitioners to see if individuals at risk of self-neglect would contribute to the protocol.

d) Why do you think it was/is successful and what hasn't worked well?

From the engagement exercise a number of key points were established.

- Respect the individual's ability to make informed / relevant decisions
- Provide information to the individual around support services
- To work with the individual to make change at the individuals "pace", threats to lose tenancy are not helpful.
- Access to an Independent Advocate if required
- The aim of the Self Neglect Protocol is to prevent serious injury or even death of individuals who appear to be self-neglecting by ensuring that:
- individuals are empowered as far as possible, to understand the implications of their actions
- there is a shared, multi-agency understanding and recognition of the issues involved in working with individuals who self-neglect
- there is effective multi-agency working and practice
- concerns receive appropriate prioritisation
- agencies and organisations uphold their duties of care
- There is a proportionate response to the level of risk to self and others.

This is achieved through:

- promoting a person-centred approach which supports the right of the individual to be treated with respect and dignity, and to be in control of, and as far as possible,

to lead an independent life

- aiding recognition of situations of self-neglect
- increasing knowledge and awareness of the different powers and duties provided by legislation and their relevance to the particular situation and individuals' needs, this includes the extent and limitations of the 'duty of care' of professionals
- promoting adherence to a standard of reasonable care whilst carrying out duties required within a professional role, in order to avoid foreseeable harm
- promoting a proportionate approach to risk assessment and management
- Clarifying different agency and practitioner responsibilities and in so doing, promoting transparency, accountability, evidence of decision-making processes, actions taken and promoting an appropriate level of intervention through a multi-agency approach.

f) What did it change?

This good practice example below highlights the change that was made as a result of involving individuals in the development of the self-neglect protocol.

The individual was living in an extremely dilapidated farm house. The Council issued Enforcement and Prohibition Notices on the property as he would not sell any of his 33 acres but this was being appealed.

It was evidenced that he had capacity make decisions independently around where he resides and environment health and housing were involved in trying to support and look at accommodation options with the individual without making him homeless.

Following hospital admission further concerns were raised and although the individual was adamant that he wanted to go home he was at risk of self-neglect and now had health care needs and would need input from a district nurse at home.

The action at this point was for the self-neglect protocol to be implemented and to try to safeguard by addressing the concerns about property that have been on-going for some time

A Multi-Disciplinary Team (MDT) meeting was arranged to look at what had been done, this included complete/update risk assessments and to look actions that had already been implemented and what else could be put in place to try and support this individual in these conditions.

He initially had health issues following hospital admission and was attending the GP surgery to re-dress wounds. The social worker and district nurse worked

closely together – the health board and Older People joint funded a small area within the property to be “cleaned up” in order for district nurses to be able them to re-dress his wound. However this was only a short term arrangement as the property was so bad this could not continue safely. A referral for advocacy was made and the individual was allocated an advocate for support during this process

The property did not have a useable toilet, there was only one plug, there was damp, the roof was caved in, the windows had glass missing from them. Actions were taken for care and repair to come in and undertake some work within the property but this again was a temporary solution.

After months of joint working and supporting this individual in difficult circumstances it was agreed that environment health and housing would purchase a caravan for him. This was placed on his land and individual was consenting to this being charged against his property/land at later date.

This was a complex case that had been on-going for some time, the situation became worse following hospital admission as he then had care/health needs that needed to be addressed.

All process were followed in an appropriate timescales and it demonstrates good multi-agency working in trying to work with the individual who was reluctant to move, their wishes and desired outcomes were kept central to the safeguarding process.

The outcome was not ideal but it did meet the individual’s needs and he was able to stay on his land. Ideally professionals would have supported the individual to find alternative accommodation but as he was adamant he did not want this, all other avenues were explored and one of the issues we wanted to avoid was the individual becoming homeless

The individual continues to live in caravan on his land and the concerns about his well-being and self-neglect have reduced significantly.

Commissioning

a) What was/is the process or activity?

Co-producing quality characteristics in domiciliary care & support.

b) What was it designed to do or support and who has been involved?

Commissioners in North Wales engaged with people receiving care and support at home, providers of care & support services and citizens who may require care and support in the future to develop a Quality Measurement Framework for 'what makes great homecare'?

c) What did it change?

This led to the development of contract standards (Quality & Safety in delivering outcomes: Quality characteristics)

Themes for delivering what matters in home care are:

I need:

- A reliable and flexible level of service that can give me more support when I need it and less when I don't
- Help with my overall wellbeing (not just personal care needs)
- I want:
- People who suit me, who I can establish a bond with; people who can help me with what I need help with, when I want that help (i.e. I want a fast response from people who have the delegated authority, confidence and knowledge to help me).
- A service that listens to and meets my individual needs
- To feel informed and in control of my service (by being told about any changes in advance; Carers want to be informed about their family member's health and care)

As a result of engagement, the following quality characteristics have been determined.

Care and Support Providers are asked to establish their own baseline and set annual targets within their Quality Management activities:

Quality characteristic 1: Satisfaction with support received & outcomes achieved

Indicator 1 a) Evidence of satisfaction with quality of service, including satisfaction with the people that provided help, care & support

Measures:

- People able to receive information in a language & format of their choice
- People able to receive care and support in a language of their choice
- People reporting that their quality of life has improved as a result of the care and support they have received

Indicator 1 b) Continuity of staff (staff pay and conditions, retention rates, development opportunities & roster systems)

Measure: People reporting that they are satisfied with their care & support workers and have positive relationships with them

Indicator 1 c) Staff training & competence (qualification & skill levels)

Measures:

- Staff that have completed the Social Care Induction Framework
- Staff with required qualification level/s
- Staff undertaking additional training / qualifications over and above mandatory requirements
- Staff with Welsh language skills

Indicator 1 d) Unpaid Carers feel supported and engaged within support arrangements

Measures:

- Carers reporting that they are fully engaged in developing care and support plans
- Carers reporting that they are valued and supported as a co-provider

Quality characteristic 2: Co-production with people receiving support and / or their Carers

Indicator 2) Use of person centred processes such as 'Working Together for Change' or similar system that uses engagement with stakeholders to drive organisational an operational change based on what is working / not working from each stakeholders' perspective.

Measures:

- People reporting that their support plan:
- takes account of what is important to/for them, how and when they need support
- enables them to do the things that matter to them (including taking positive risks)

- People able to have some degree of choice regarding their support staff

Quality characteristic 3: Safeguarding people at risk

Indicator 3 a) Percentage of staff new to the sector, receiving safeguarding training within induction (6 months)

Indicator 3 b) Safeguarding referrals & actions, learning from incidents and accidents

Quality characteristic 4: Social value

Indicator 4 a) Reablement / enablement approach or other evidence based interventions that result in reducing the care and support input from managed services (e.g. through additional staff competences and/or co-working with the third sector to develop community connections / information support networks)

Measures:

- People are signposted (where appropriate) to services / schemes that could promote wellbeing; such as to GP, community nursing, therapy services, housing support / equipment & adaptations / handy person schemes
- People perceive that their ability to undertake a daily living function has improved since receiving the service, e.g. personal care, cooking, caring for their own home.
- People perceive that their confidence has improved since receiving the service,
- e.g. feeling happier and safer at home and undertaking daily living tasks with less support
- People whose care and support enables them to maintain existing relationships and/or make new connections in their community

Indicator 4 b) Positive employment practices

Measures:

- Workers are not charged for items which are necessary for them to perform their role e.g. uniforms, PPE
- Number of workers employed who were previously not in education, employment or training and/or whom were formerly claiming welfare support
- Number of workers working regularised hours moved from zero hours to regularised-hours contract
- Zero hours contract workers have paid induction and training and where qualifying paid holiday, SSP and access pension schemes

Indicator 4 c) Additional skills training provided (above social care induction / mandatory and vocational training) e.g. life skills, Welsh language training)

Indicator 4 d) Contributions to and impact on the local economy (e.g. ethical staff terms and conditions, training, qualifications and career development opportunities provided., especially for target groups such as long-term unemployed and or young people that are not in education, employment or training).

Quality characteristic 5: Environmental impact

Indicator 5) Arrangements to provide continuity of care workers, adequate travel time and minimise negative environmental impacts, such as waste and carbon emissions.

Mental health strategy development

a) What was/is the process or activity?

To develop a mental health strategy for BCUHB. When the Health Board was placed in special measures in 2015 areas requiring significant improvements included the need to reconnect with the public and to develop a mental health strategy.

b) What was it designed to do or support?

BCUHB's reputation for engaging with patients, carers and the wider public was not good and probably worse within the mental health division. During early discussions we were told that the health board's history was one of talking to people when it deemed it necessary; telling people what they intended to do; seeking views which were then ignored; going ahead with their proposed actions; and not providing feedback. There was a strong recognition that this must change, although significant cynicism that the health board was genuine in its attempts to engage.

c) Who has been involved?

Staff, the public, patients, service users, carers and the public. In 2016 we commissioned Caniad to support the development of service user involvement across mental health and substance misuse services. Caniad has supported people who use services, their carers and families to understand the opportunities for involvement, the support that they can expect and what responsibilities accompany involvement. This has been achieved through training and completing involvement plans, which are person centred and outcome focused.

d) Why do you think it was/is successful and what hasn't worked well?

Caniad employed people with a lived experience of using services to facilitate 5 workshops across North Wales and set up an online survey, engaging with a total of over 220 people. Following the engagement events they produced a report including feedback and recommendations for good practice. Facilitators were involved in giving a presentation at the Mental Health Summit. They attend the pathway groups and ensure that there is a flow of information to the network groups, allowing for meaningful engagement in the planning and design of services.

A rich picture developed from the engagement work.

"Looking back at the year, I can honestly say that I am proud to have achieved what I have. I have overcome a lot of barriers both personal and professional, and despite the barriers I have received good feedback from numerous professionals in several different agencies. My service user journey throughout Caniad was fantastic, and I saw first-hand the difference that being valued made to me, and I saw a wonderful example of how to be a good involvement co-ordinator shown by both Tony and Anna who co-ordinated the involvement that I participated with."



360 event – A perspective of ‘crisis’

A one day 360 consultation event to establish what happens in the space between (a) triggers to a short term mental health crisis and (b) the outcome positive or negative. The 360 process involved receiving information in one session and giving the same information back to a different group in the following session. They brought together a wide range of Service Users/Carers from diverse backgrounds who freely shared their experiences of being in crisis which was captured by the facilitators. The responsibility of the facilitators was to pull out 5 key themes with recommendations. The facilitators then fed this information back to a room full of professionals for a debate about solutions. The facilitators were all people with lived experience who had limited past experience of facilitation and had been given training and support prior to the event to build their confidence to undertake the role.

Recruitment and selection

Involving people who have a lived experience and their carers in the recruitment and selection process has been problematic. Caniad completed a full evaluation of traditional involvement method where service users and carers sat on a clinical based interview panel. They found that while some had a good experience others did not.

The main reason for involvement was so people could provide an opinion about whether the candidate was someone they could work with and relate too. Therefore Caniad adopted an innovative approach from an ‘employment interview’ model developed by the NSPCC. Value Based Interviewing is a service user led approach in which service users develop their own set of questions and deliver their own interview based on probing the candidate for ethical, moral and social values. Scores are then brought together with the separate clinical interview to finalise recruitment.

“My name is Debbie. I’m 37 years old. I was in active addiction on and off for 23 years, it took me to some dark places where inside I was dead, and my mind was

slowly dying with it. I was a service user on and off for the past 10 years. My addictions brought me to my knees, only then was I ready to accept help.

I have now been in recovery for over 6 months.

When I was approached by Caniad to be part of a "Value based interviews" panel, I wondered whether my input would have any impact at all, my reservations were quickly diminished. I thoroughly enjoyed the whole process, and to play an active role in helping choose the best candidate for the job role ... a person that I would feel I could connect with in my darkest times if I was still in active addiction. I feel privileged to of been asked to be a part of this extremely important part of the interview process. My hope is that this form of interviewing is rolled out across the board eventually. Service users deserve a voice, and now they are finally being heard. Thank you again for letting me be a part of this process, and I look forward to continuing on with my involvement within services, and making a difference."

f) What did it change?

Being listened to and having your views recognised and valued – even if they do not always lead to the precise outcome you would wish – are crucial stepping stones to building trust and confidence in services as a whole and not just the individuals who work in them. Mechanisms need to be in place where it is normal procedure to seek out opinions and experience since the best ideas come from involved people. As confidence grows, people will be more motivated to speak up at the first hint of something being not quite right, so that problems can be identified and dealt with before they escalate into more significant and challenging concerns.

This approach provides us with an opportunity to capture real experience and insight by people who truly understand the nature of the experience but in addition we are working in a way that truly supports individuals to develop new skill and confidence that aids their recovery.

"I can honestly say I have been inspired by everyone involved in the work of Caniad. I have personally seen people develop in a short space of time, people who in the past have been written off. Last year I attended the launch event of Caniad and listened to one person's story of her life and experience of services, she could barely speak due to her anxiety. Less than 6 months later that same person facilitated a group at the 360 event and presented back the outputs from her group to an audience of professionals, she was a different person confident and comfortable to be standing at the front"

This approach is not difficult but it does take commitment, patience and leadership. People with lived experience will be honest and they will hold a mirror up to us. We have to be prepared to listen, drop our barriers and not be defensive in our approach. We have proudly watched people grow and believe in themselves, achieve employment and develop mutual appreciation that we are all striving for the same thing, services that are safe, high quality and deliver the optimum experience for everyone that comes into contact with them.