

Adult Health and Social Care Involvement Delivery Plan

Living the life you want to live: Sheffield's ASC Strategy 2022- 2030

Adult Health and Social Care: Involvement Delivery Plan 2023 - 2025

Our Vision and Ambitions for people of Sheffield

Our vision is that 'everyone in Sheffield lives in a place they can call home, in communities that care, doing things that matter to them, celebrated for who they are - and when they need it, they receive care and support that prioritises independence, choice, and recovery.

The vision is centred around delivery of five outcomes and six commitments. The commitments and outcomes are the guiding principles we will follow and how we deliver the strategy. They show how we'll achieve our outcomes and highlight what we want to do better. These commitments are:

1. Support people to live a fulfilling life at home, connected to the community and resources around them, and provide care and support where needed.
2. Provide temporary assistance to help people regain some stability and control in their life following ill health or crisis
3. Provide care and support with accommodation where this is needed in

a safe and supportive environment that can be called home.

4. Make sure support is led by 'what matters to you', with helpful information and easier to understand steps.
5. Recognise and value unpaid carers and the social care workforce, and the contribution they make to our city.
6. Make sure there is a good choice of affordable care and support available, with a focus on people's experiences and improving quality.

Our Commitment to Involvement

Our commitment to involving people is featured in several places throughout the strategy:

Commitment 1 - What we will do:

- We will provide a partnership of care and support, **designed and delivered with communities**

Commitment 4 - What we will do:

- We will make sure **everyone can be involved as an equal partner in designing the support and services they receive** across the whole system.

Commitment 6 - What we will do:

- We will embed **open and transparent decision-making alongside our plans and priorities for adult social care, created with the people of Sheffield.**

How we will do this

We want to involve people:

- In creating their individual support plans
- In shaping and improving services
- By supporting our providers to offer participation opportunities to the people they support
- Through working with other local groups, both in our formal partnerships and through advocacy and support networks.

The Adult Social Care Strategy Delivery Plan includes a range of key activities across these areas:

Commitment 1 and 4:

- Co-design and build the new information, advice and guidance offer year 1

Commitment 3:

- Co-produce specialist support to 150 people facing multiple disadvantages years 1 and 2 (Changing Futures)

- Co-produce Adults with disabilities framework year 1

Commitment 4:

- Learning Disabilities and Autism strategies for Sheffield year 1

- Develop provider standards

Commitment 6:

- Embed a coproduction approach and standards year 1-3
- Expand ongoing engagement and coproduction mechanisms with existing and new structures, including involvement in governance structures year 1-2
- Jointly identify and resolve gaps in citizen and partner voice year 1-10

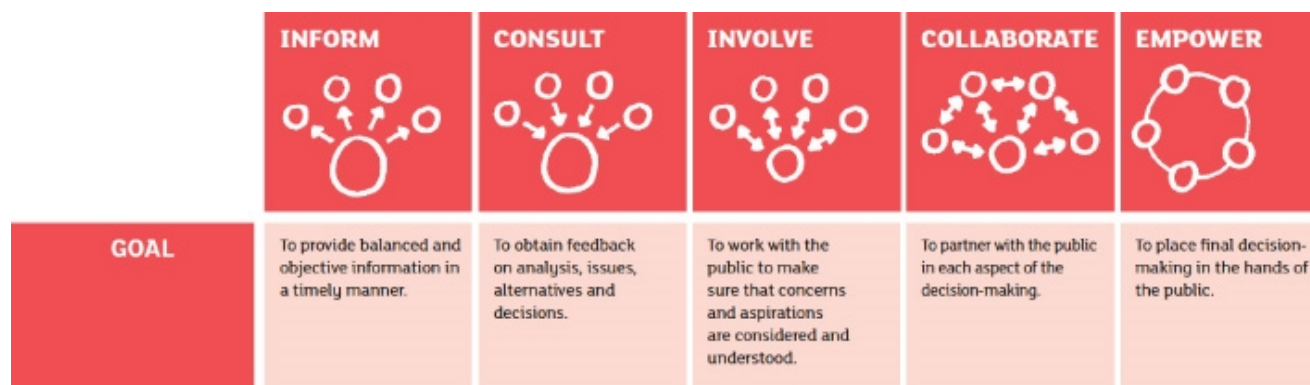
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This Delivery Plan has a **particular focus on the commitment 6 activities** (which will also support progress on the other commitments) and sets out how these actions are being progressed.

- People who may need support either now or in the near future
- Unpaid carers and family members of people who use services

These opportunities span a spectrum of participation levels (also known as the ladder of participation/involvement) with different degrees of involvement, as shown in this diagram. Collaborative ways of working are also known as coproduction¹.

Image: International Association of Public Participation spectrum of participation <https://www.iap2.org/>



¹ There are various interpretations of the participation model such as TLAP's ladder of coproduction: <https://www.thinklocalactpersonal.org.uk/Latest/Co-production-The-ladder-of-co-production/>

What do we mean by involvement?

In the context of this delivery plan, we mean involvement opportunities to help shape and improve our services, open to:

- People who use or have recently used an adult social care service

Our current involvement mechanisms include:

- Three forums for people with lived experience:
 - o Safeguarding Adults Customer Forum
 - o Carers Voice Group
 - o Service Improvement Forum
- Five boards/delivery groups with community representatives:
 - o Autism Partnership Board
 - o Learning Disabilities Partnership Board
 - o Direct Payments Improvement Programme
 - o Carers Strategy Implementation Group
 - o Changing Futures Board
- Project-based involvement offers from AHSC services or teams for example: the statutory ASCOF survey, engagement on the autism and carer strategies, input on the development of the home care pilot and the projects featured in the strategy commitments above.

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Developing a culture of involvement

AHSC has ambitions to develop its involvement offer for local people. We

propose to create new ways to empower citizens to inform, have influence, and to hold AHSC to account across its services; and to lead AHSC's approach to co-production and other forms of involvement.

We aim to increase and broaden the range of people we reach, to better reflect the diversity of the city and tackle inequalities in social care provision.

The goal is to create a sustainable model that embeds community involvement throughout adult social care.

Designing a new approach:

In the first half of 2023, we will run a 'citizens involvement project' to co-produce this new model with local people, Voluntary and Community Organisations and Adult Health and Social Care, supported by expert external facilitation.

The new mechanism will enhance AHSC's existing special interest boards and forums by coordinating intelligence from this network and other sources of lived experience and providing a link to the AHSC Policy Committee.

The new model will offer an invaluable platform for AHSC to listen to the people of Sheffield, draw from real-time evidence and enjoy increased confidence in its decision-making. It will bring lived experience into

the heart of AHSC's governance structure, enabling local people to scrutinise service provision, challenge poor performance and crucially, support staff to make improvements.

To do this, the new body will also champion and facilitate opportunities for local people to be involved in service design, quality assurance/evaluation and improvement drives. Opportunities will span the participation spectrum (as illustrated in the diagram above) but we will aspire to co-production whenever appropriate. The new mechanism will create a space for supporting participation elements across all areas of AHSC's work.

Its ultimate name, function and approach will be decided by the co-production project participants.

The body will be designed to offer local people a range of opportunities to participate in its activities, supporting people to contribute on their own terms, according to their interests and lived experience. It could take the structure of a forum, network or other mechanism/method, encompassing a range of roles such as community researchers, consultees, design teams, secret shoppers, and advisory presenters at committee.

Training, support and access mechanisms for members will be designed into the new

structure and a reward and recognition scheme will also be consolidated.

Shared principles and standards

The initiative will also provide an opportunity to review the AHSC Coproduction Charter originally developed with the Service Improvement Forum and to refresh it to better reflect the full spectrum of involvement offers. A set of standards will be developed from the charter to monitor, quality assure and assess AHSC progress in this area.

As part of our commitment to involving people, we will also sign up to the Think Local Act Personal 'Making It Real' framework² for personalised care and support. As part of our reporting activities, we will share progress with Making It Real network members on our co-production activities linked to the framework's principles.

Resolving gaps in citizen and partner voices

A programme of engagement activities will run in tandem with the project, with members of the community AHSC has had little or no contact with to date, for example the Yemeni community, the Deaf community, and older people such as those living with dementia or in extra care housing. These outreach activities will

develop mutual understanding, interest and trust, to build confidence in the involvement opportunities emerging from the design project.

A review of existing AHSC involvement forums and boards will also be completed over the next 12 months, and improved community representation and communication lines developed with other local groups. Exploratory work is already underway. For example, a proposal to establish an election process for Learning Disability Partnership Board community representatives will be considered by attendees of the new monthly We Speak You Listen forums run by Sheffield Voices at Disability Sheffield in January.

Communications

The newly launched AHSC community involvement newsletter³ will provide a key vehicle to promote the new offers and a dedicated AHSC Hub (section) on the new Engagement HQ platform 'Have Your Say Sheffield', launching January 2023 will provide a range of online survey and participation tools and spaces (in place of Citizen Space) to complement and support activities.

Follow-on activities will include:

- implementing and embedding the new approach
- an internal communications campaign
- establishment of ongoing support to the new mechanisms
- development of an involvement toolbox for use across the service.

² [Making it Real - Think Local Act Personal](#)

³ [NEW: Health & Social Care Community Involvement Newsletter #1 \(govdelivery.com\)](#)

Involvement Delivery Plan

Ambition: Devise new involvement opportunities in adult social care through the Citizens Involvement Project

Context: AHSC Strategy Delivery Plan – commitment 6

Accountable Officer: Director Adult Health and Social Care

Accountable Committee/ Board: ?

Milestone/action	By when	Lead	RAG
Recruit external facilitator	Dec 22	Involvement Coordinator	
Launch “Engagement HQ” Adult Health and Social Care Hub	Jan 2023	Involvement Coordinator	
Deliver citizens involvement project to identify and design new involvement mechanisms for people with lived experience of support (or need for it)	June 2023	Involvement Coordinator	
Complete sign up to Making It Real	June 2023	Involvement Coordinator	
Identify and set up standards and performance metrics for involvement activities, including the Making it Real commitments.	Sept 2023	Involvement Coordinator	
Contribute to a service wide statement of intent, setting out what involvement is about at all levels, from being involved in developing people's own support plans through to involvement in projects	Dec 2023	Involvement Coordinator	
Implement/embed new involvement roles, structures and support mechanisms, including reward and recognition scheme	Dec 2023	Involvement Coordinator	
Review forums and boards and implement any new ways of working	Dec 2023	Group Chairs with Involvement Coordinator	
Internal communications campaign to support new culture of involvement	Dec 2023	Practice Development Team	
Carry out outreach/engagement activities through Voluntary and Community Organisations and partner agencies	ongoing	Involvement Coordinator	
Review new involvement mechanisms at performance clinic	June 2024	Head of Business Planning, Strategy and Implementation	
Develop involvement toolbox for AHSC teams	Dec 2024	Involvement Coordinator	
Participation audit	Mar 2025	Involvement Coordinator	
Risks	Other issues		

- *Lack of internal and external stakeholder engagement prevents successful implementation of new involvement opportunities*
- *Proposed activities are not viable*
- *Activities are not co-produced and participants lose faith in the process.*

- *Capacity – solutions need to be proportionate*