

Engagement Workshop

More than 20 patient, carers, community organisations and communications specialists attended a workshop in Bristol on 19th November 2018. There were representatives from across Bristol, North Somerset and South Gloucestershire. The focus was on ways to engage with people to support their own care and to develop services. The summary presented here reports themes in people's feedback. It does not necessarily represent the opinions of every person or group involved, or the CCG's views.

Using the words provided by participants, suggestions about how to engage people appropriately at an individual level about their health included:

- It is important to listen to the patient and their carer as the expert about their health.
- Patients should be able to find information about services through a variety of means, not solely the internet.
- Information should be in plain English and consideration given to those who do not have English as a first language including British Sign Language.
- The workforce should have good communication skills.
- Patients should be kept informed about what is happening and why.
- Co-morbidity should be considered and treated.
- Patients should have a choice over where they are treated.
- It is important to be aware of the stigma attached to some health conditions.
- The workforce should not expect everyone to be assertive in their care.

Using the words provided by participants, suggestions about how to engage people about service development or wider issues included:

- It can work well to work with those with lived experience to reach patients.
- It is important to produce a 'you said, we did' document after any engagement with patients, carers and the public.
- Use a number of mechanisms for involving people such as surveys, focus groups, events and so on.
- Equalities should be taken into account when engaging with patients and carers. Involvement means different things to each community.
- Be aware of disabilities when engaging with people, including mental health issues and learning disabilities.
- Have a reimbursement policy in place for paying patients and carers for their time and expertise.
- Promote involvement by demonstrating its importance to the organisation.



- Plan engagement events properly so that the location is near to where people live and the time is convenient.
- Ensure capacity within the organisation to support involvement.
- Involvement events need to be varied to reflect the diverse population.
- Use genuine co-production to develop services and monitor them.
- Involve a wide range of people, not just the same small group.
- Take sufficient time to engage with patients and carers.
- Take into account the caring responsibilities that carers have when asking them to get involved.
- Use local employers to reach people.

People said that it was essential to engage with patients, carers and the public in ways that are appropriate to the community within which they are based. It was acknowledged that localities have different requirements and may require tailored methods of engagement. Rural areas of North Somerset for example may require different communication methods compared to a densely populated area of Bristol.

It was felt to be important to involve patients and the public at all stages of service delivery. Consensus was that involving certain groups or communities and then not following up encourages a feeling of tokenism. It was emphasised that information should be accessible for all (e.g. brail facilities, translations) and that service providers need to allow for negative feedback.