



# **Participation Strategy 2018- 2020 Sussex Partnership NHS Foundation Trust**

**A midterm review and refresh of  
WORKING TOGETHER  
Our involvement Approach - Listening learning and acting upon feedback to  
support our 2020 Vision**

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## **Introduction (what are we doing and why now?)**

In 2016 Sussex Partnership published its Involvement Strategy 'Working Together' for the following 4 years. This document described an approach to involvement covering 6 priorities and aligned with the Trust's 2020 vision to work with people with lived experience of mental illness to design, develop and improve services. The priorities were

- Engagement meetings,
- Feedback mechanisms and social media,
- Carers,
- Membership,
- Patient leadership
- Peer workers

Since publication we have made progress in these 6 areas and during this time there have also been significant developments elsewhere in the organisation. These include the creation of the Trust's Clinical Strategy and events such as the Hackathon and the Principled ways of working conference (PWOW). All have opened up new conversations about what meaningful participation and involvement should look like. As a result we are looking again at the strategy to make sure that it supports current thinking on participation and the aspirations of our service users and the organisation.

## **Background (or why is this important)**

Nationally the Five Year Forward View has set a high standard for the involvement of service users in shaping the future of mental health services

*Every person with a mental health problem should be able to say: I am confident that the services I may use have been designed in partnership with people who have relevant lived experience*

And

*Co-production with clinicians and experts by experience should also be at the heart of commissioning and service design and involve working in partnership with voluntary and community sector organisations*

Locally we have accepted this challenge in the Clinical Strategy which states our ambition to

- Ensure that service users and carers are central to our thinking and part of everything we do
- Embed full participation and partnership into our daily work
- Create new opportunities for service users and carers to meaningfully influence how services are developed and to review how our services are performing

- Ensure that all parties are supported to work effectively with each other, in full partnership, using the 4Pi
- Give people the opportunity to be involved in a way that suits them and provides opportunities for further training and employment

This refreshed Participation strategy sets out our priorities between now and 2020 so that we are able to achieve these national and local ambitions.

### **Guiding principles (or how does this fit?)**

The Trusts 2020 vision states that we will use **recovery** as a guiding principle, inspiring hope and supporting people to achieve their goals and live meaningful lives.

The **Wellbeing approach to involvement** developed and championed by Together and NSUN makes a powerful case that involvement and participation activity should explicitly support an individual's recovery. It states that every participation opportunity should enhance a person's wellbeing, that training and support to become involved should be accompanied by a range of opportunities – voluntary and paid and that these should build towards further education and employment if desired. To do this well there need to be clear roles for services users, equality of access to them and training and support to undertake them. This model also seeks to influence the culture of an organisation moving it towards one where the voice of service users is loud and influential in their own care, the delivery of current services and the design of those for the future. We are using this model to develop participation work at SPFT

**Co-production** is a central tenet of the recovery approach – it is a process in which experts by experience and experts by training work together as equal partners. Everyone involved, whatever the source of their expertise is valued, trusted and held accountable. Coproduction can be used at all levels; to plan an individual's care or to design, commission and deliver mental health services. This focus on process as well as outcomes maximizes the chance that the experience of service users really will bring about improvement and change in service delivery and culture of the organisation– and that positive change in the organisation is also mirrored by positive change in service user's lives. The **4Pi's** are a set of standards for involvement focusing on principles, purpose, presence, process and impact. The Trust has adopted this framework to promote high quality co-production and participation.

## Strategies (or how will we make sure this works?)

- **A dedicated People Participation team**  
This team works across the organisation with participation workers embedded in each of the adults CDS' and close links with the involvement leads in the Forensic Healthcare, Learning Disability and Children and Young people's services and the Clinical Strategy. We work with allies such as the Recovery College and our Equality and Diversity lead and support the priorities of the equalities reference groups on Sexual Orientation and Gender Identity, Race and Disability. We also link with the QI and Governance team (with responsibility for members and governors), Human Resources, the Heads on Charity, Chaplaincy, Research Department and the Carer lead in the organisation.
- **Governance**  
The Positive Experience subcommittee of the Quality Committee assures for all work around the experience of patients including that directly delivered by the People Participation team. This committee has Experts by Experience as permanent members.
- **National and local guidance and best practice**  
We will be guided by national and local best practice including the Principled Ways of Working Charter, NHSi Improving Patient Experience Improvement Framework and NICE Guidance. We will look for opportunities to share what we are learning and to learn from innovation and inspiration from any source that is working to promote excellent participation and patient experience
- **Working with the third sector as partners**  
We are clear that outstanding participation is not achieved through only looking inwards, it is also about seeking out opportunities to work in partnership with organisations locally and nationally who are experts in this area.
- **Working with staff as partners**  
Working closely and consistently with staff matters for two reasons - better staff experience has been closely linked with improved patient experience and it is our frontline staff that have the most contact with our service users. Without their innovation and goodwill we will not achieve our potential. Therefore it is essential that participation work aligns with what operational services are trying to achieve and is 'business as usual.'
- **Increasing resources**  
Resources are tight everywhere in the NHS, public services more broadly and the 3<sup>rd</sup> sector - participation is no exception. We are committed to increasing our chances of achieving our goals by offering student placements and volunteering opportunities and bringing in the expertise and funding from external organisations when appropriate and cost effective. In making a clear commitment to participation and its benefits for all through this strategy the trust can also held to account for how it prioritises its resources.

- **Technology**  
Technology can play a big role in increasing the reach and impact of participation. We are committed to using technology to enhance the effectiveness of our work and supporting our service users to get involved in this way too.
- **Leadership and culture**  
To be successful, leadership around participation and patient experience needs to be imbedded at all levels of the organisation. It is essential that alongside a clear message from the top of the organisation about the priority that we need to give to this area of quality, and the work and support of the central People Participation team, there is acknowledgement that seeking out, listening to and acting on the views of service users is everybody's business - whatever their role in the organisation.

### **Aims (or what we want to achieve)**

Our overall aim for 2018-2020 is to increase the number and diversity of the people participating in all aspects of the work of Sussex Partnership – in their own care, in operational and strategic developments and in clinical and non-clinical services.

We want people to feel connected and that their stories, however they chose to share them, are a powerful force in the organisation.

We will ensure that this participation is of a high quality and supports recovery and wellbeing and we will do this through promoting coproduction and partnership working and challenging stigma in everything we do.

#### **1. Increasing the number of people participating**

Lived experience is a huge largely untapped resource in the organisation and as importantly, high quality participation enhances the wellbeing of the people we work with. The more people we get involved the larger the benefit for all. To do this we will

- Expand our **Expert by Experience programme** of training and support for current and former service users to ensure that Experts by Experience and staff are confident and knowledgeable to work as partners
- Promote our **Working together groups** and work with other groups of current service users inside and outside the Trust to ensure their voices are heard and have an impact
- Mainstream the **Sussex Experience survey** as a real time reflection of patient experience
- Ensure that service users are routinely informed about and able to access **information about participation** in their own care, the organisation and beyond- and the changes that feedback has brought about
- Promote **digital participation** and **arts based participation** to increase the range of ways that people can make their voices heard
- **Celebrate and promote** lived experience as an asset

- **Increase the number of volunteers** in the Trust to the equivalent of one in every team

## 2. Diversity – increasing the diversity of people participating

The community that we serve is a rich mix of age, sexuality, gender, disability and faith. We must do much more to ensure that our participation reflects this diversity so that our mental health services are fit for all and we confidently and consistently challenge stigma. To do this we will

- **Use data** to improve by collecting and monitoring the protected characteristics of people who are participating
- **Actively reach out** to communities who are underrepresented to challenge stigma and create innovative partnership projects
- **Celebrate and raise awareness** of our diverse communities
- Develop participation in **older people and dementia services**

## 3. Co- production – increasing the amount of co-production

We will ensure that co-production is the way that the Trust does business at every level in the organisation - strategic, operational and in every individual interaction between staff and service users. To do this we will

- **Champion coproduction** and **QI** (Quality improvement method) and the value of lived experience **from ward to board**
- Ensure that people with lived experience **are present and influential** in the **Trust Clinical Strategy work streams**, strategic committees, operational planning and service improvement
- **Focus on** developing participation and co-production in nonclinical and **support services**
- Increase the numbers of service users who report they are actively involved in their own care through recovery focused **care planning**
- Achieve our target of having **peer** interaction/interventions in every team by 2020 - recognising the essential role of peers influencing co-production in individual care and the culture of the organisation
- Develop and support **projects** that promote locally and nationally defined **service user priorities** and which have the biggest impact on service user experience

### How will we know if we have been successful?

Ultimately the verdict on what we do stands or falls by what the people who use our services think and feel about it. The results of surveys and other qualitative and quantitative patient experience information and data sources will tell us the impact that participation work (among other work to improve patient experience) is having on how it feels to use Sussex Partnership services

We will use the following measures

- The Trust adopted the **4pi involvement standards** in its strategic objectives 17/18 to act as measures of the quality of the service user participation in the organisation. These standards provide a frame work against which we will monitor the quality of participation activity on an ongoing basis and through an annual review in Q3.
- **Annual Staff survey Key Indicator 32** on the collection, use and impact of patient experience data. We will continue to improve our rating.
- **Friends and Family Test (FFT)** we will improve response and ratings levels to the national average for Mental Health Trusts in 18/19 and exceed it in 2019/20.
- **National Mental Health Community Survey** results. We will improve our rating year on year.
- **Sussex Experience Survey** (incorporating FFT) indicators around CQC key lines of enquiry we will improve our results year on year.
- **Qualitative feedback and stories** from our service users including but not limited to complaints compliments, SI's, Care Opinion, NHS Choices ,social media and arts based projects

We will report regularly on progress against our aims and these measures to the Trust's Quality Committee and produce an annual report.

### **Tell us what you think?**

To let us know your views on this strategy or for further information about participation at Sussex Partnership please contact [participation@sussexpartnership.nhs.uk](mailto:participation@sussexpartnership.nhs.uk) or call Rachael Kenny, Acting Associate Director for People Participation 07738 757565

### **Selected contextual documents**

#### **4 Pi's**

<https://www.nsun.org.uk/Pages/FAQs/Category/our-projects-and-research>

#### **Nice Quality Standard Service user experience in mental health services**

<https://www.nice.org.uk/guidance/qs14>

#### **CQC Brief guide to Recovery Orientated Practice**



20171227\_briefguide  
-recovery\_orientated

#### **NHSi National Patient Experience Improvement Framework**

[https://improvement.nhs.uk/documents/2885/Patient\\_experience\\_improvement\\_framework\\_full\\_publication.pdf](https://improvement.nhs.uk/documents/2885/Patient_experience_improvement_framework_full_publication.pdf)

Appendix 1

Implementation plan 2018-19

Aim 1 Increasing the number of people participating

<b>Objective</b>	<b>Who</b>	<b>How will we know we are meeting the objective</b>
Increase the number of people on the participation data base	PPT	100 new members
Increase knowledge and use of data base by trust staff for recruitment and other participation activities	PPT	100% increase on 17/18 baseline
Increase the numbers of Experts by Experience participating in strategic work including Quality Committees and Clinical Strategy work streams	PPT and work stream leads	50% of committees and work streams by end Q2 75% by end Q4. 100% Quality and Safety reviews.
Deliver regular Introduction to Participation workshops across the Trust	PPT	12 in 2018/19, 2 in partnership with Southdown
Extend Expert by Experience training offer to include Co-production and Quality improvement workshops	PPT and QI lead	40 service users trained. 4 Co-production workshops
Hold quarterly supervision group for EBE involved in strategic work	PPT	4 in 2018/19
Review the trust service user and carer payment policy	PPT	Revised policy in place Q3
Maintain Working together groups (WTG) in areas where there are no local alternative for current service users	CDS and PPT	Clear mapping in place across adult services with comprehensive detail of how current service users are being heard and links with the third sector
Work closely with already established fora such as Patient Councils and opportunities for feedback such as Feedback Fridays to avoid duplication		
Identify alternatives to WTGs in communities in which it has been difficult to establish them and for people who do not want to or cannot come to a group.		
Increase number of Service user audits using Sussex Experience Survey	PPT	100 surveys/ month achieved by Service users volunteers
Develop Patient Experience officer role	PPT	Pilot in place Q3

Introduce patient experience real time information onto screens in public areas of the organisation	IT PPT	Subject to project implementation plan held by IT
Monitor progress and promote best practice in collecting Sussex Experience survey ( incorporating FFT) in line with national guidance	PPT CDS	Achievement of national average for rating and response levels by end Q4
Provide regular information about participation and its impact across a range of media	PPT Comms/ PPT CDS PPT Accessible Information lead	Monthly Participation News Trust Website YSWD boards Accessible Participation information by end Q3
Ensure information about participation at individual operational and strategic levels is routinely offered	CDS PPT	Quick guide to Participation by end Q2 Routinely offered to service users - audit Q4
Collaborate with Make your Mark to explore new opportunities for participation	PPT Make your Mark	Scoping Q2. Projects in place subject to implementation plan help by Make your mark
Celebrate the contribution that people with lived experience make to the trust	PPT	Summer celebration June 2018
Increase number of volunteers in placements in the trust	Volunteer manager CDS	100 by end Q4 ( from 40 Q117/18)
Increase staff knowledge of benefits of volunteering	Volunteer manager CDS	Relaunch Volunteer week 2018. Increased number of registered volunteers to 100
Commence innovation project in partnership with other NHS volunteer services	Volunteer manager	Sign up to iwill Q2. Project commences Q3.

Aim 2 Increasing the diversity of people participating

<b>Objective</b>	<b>Who</b>	<b>How will we know we are meeting the objective</b>
Promote benefits of providing information about protected characteristics	PPT E&D lead	Sustained improvement on Q1 baseline on Participation database and responses to Sussex Experience Survey
Prioritise participation work in CDS to address areas where data shows participation does not reflect local community	PPT E&D and CDS	Evidence of range of projects to address areas where diversity is weak
Support the priorities of the equalities reference groups on Sexual Orientation and Gender Identity, Race and Disability	PPT	Evidence of involvement in 18/19 work plan
Ensure active links to community groups and leaders in each adult CDS	PPT and CDS	Evidence of contacts and partnership working
Work in partnership with Forensic CAMHS and LD participation leads to extend the Expert by Experience programme, align participation strategies and share good practice	PPT and CDS	CAMHS EBE workshop and other evidence of partnership working
Develop a new range of participation opportunities in Dementia and older peoples services	PPT and CDS	EBE dementia carers course and increase in number of opportunities and participants in dementia and older peoples services
Develop Participation worker role in older people and dementia services	PPT	Business case Q2
Deliver an annual programme of awareness events celebrating the diversity of experience in our services and communities and to challenge stigma	PPT and E&D	Delivery of programme

### Aim 3 Promoting co-production in everything we do

<b>Objective</b>	<b>Who</b>	<b>How will we know we are meeting the objective</b>
Maintain service users stories at each Trust Board	PPT	Service user story at all board meetings
Introduce CDS participation workers	CDS	Introduction of local workers Q3
Champion local work and innovation around coproduction and QI	PPT CDS	Social media activity, monthly participation newsletter, Positive experience committee meetings. All PPT staff QI trained
Increase support and information for staff to work co-productively	PPT	Quick guide to Coproduction and 4Pi's end Q2. Annual Survey results Q3. Improvement in Staff survey results
Increase support for people with lived experience to work co-productively	PPT QI lead	40 service users trained in QI. Quarterly supervision group. Annual survey results Q3. Positive Feedback from Workshops
Host and promote central system for recruiting and supporting Experts by Experience	PPT	Target re number of requests tbc. Positive evaluation by users in survey Q3
Introduce evaluation of all EBE participation undertaken through the Participation Bank using the 4Pi Involvement Standards	PPT	Annual Survey in Q3
Create participation opportunities in nonclinical services	PPT	Evidence of range of projects including in recruitment induction, retention and appraisal, complaints and Communications
Collaborate in Trust QI Care plan projects	PPT CDS	Involvement in projects by PPT locally and at Trust level. Increase in numbers of service users reporting that they were involved in their own care plan through Sussex Experience Survey and Community mental health survey
Collaborate with Trust Leader Leader programme	PPT CDS	Evidence of projects and involvement in them by local participation leads
Continue to develop range of peer roles in the Trust including apprenticeships, fixed term and permanent peer support roles	CDS and Clinical	Peer interventions available to all service users by 2020 – sustained increase in

	strategy work stream leads and Peer Lead	number and range of peer roles across organisation 18/19 Peer apprenticeship Cohort 1 in roles, Cohort 2 recruited. Peer bank closed end Q2
Maintain and expand support for peers directly employed by the trust including supervision, professional development and career progression	Peer Lead CDS	Quarterly supervision group in East and West Sussex, promotion of CPD opportunities Quarterly Peer Advisory Group. B5 peer roles.
Continue to work in partnership with 3 <sup>rd</sup> sector organisations to increase the amount and variety of peer support available to service users in Sussex	PWOW implementation group and Peer Lead	Peer charter completed with implementation plan
Promote QI projects based on priorities expressed and led by local service users	CDS	Clear evidence of link between service user feedback (e.g. WTG/alternatives, FFT, complaints and SIs) and QI projects in each adult CDS. Projects led by QI trained service users in place in each CDS
Collaborate with improvement projects which have a significant impact on patient experience prioritising those that impact most on experience of most restricted service users	PPT CDS	Evidence of involvement in reducing restrictive practice, PICU and Place of safety improvement and Mental Health Act work plans