Putting local people at the heart of the Doncaster Health and Wellbeing Board

Introduction

The purpose of this updated report is to provide the Doncaster Health and Wellbeing Board with a set of proposals as to how the Board could put local people at the centre of its business and activity. The paper proposes a set of approaches, commitments and areas of focus to make this real.

Background

Engaging and empowering people is not only a goal for civic and democratic society but is a goal that supports improved health and wellbeing.

In 2012, when Health and Wellbeing Boards were first established the Doncaster Health and Wellbeing Board led the national early implementer network for patient and public engagement for health and wellbeing boards.¹ This provided a broad framework for the Board to act within. Since then, there have been a number of structural changes to health and care services as well as a move from technocratic approaches to health and wellbeing to more relational approaches. However, often the focus is on people already in receipt of, or soon to be in receipt of services and not on wider issues or on the views of future generations.

The members of the Health and Wellbeing Board have also developed new ways of working with local people ranging from Doncaster Talks, Doncaster Healthwatch commissions, coproduction approaches, adopting the Making it Real Statements, community led approaches including strengths based conversations, locality working, the Youth Council and young advisors.

Approaches

The Health and Wellbeing Board should use a range of approaches depending on the situation or issue. But wherever possible the Board should work with local people as opposed to doing things to or for them. Approaches include:

- Information Giving: Where local people are informed but have no influence i.e. a road closure due to an emergency
- Consultation: Where local people are consulted and their views influence the outcome, but they don't necessarily have the final say in decisions i.e. we want to know about the priorities in your community
- Co-Production: We do things together and it is jointly decided i.e. we want to develop a new strategy on social care and we agree this together with users and carers of services.

• Supporting Citizen Power: People lead and the Board stands back, supporting only when invited to do so e.g. a local community group wants to run the local park and the partners remove the barriers to making that happen

Commitments

Within each of those approaches the Board should commit to

- Listening and understanding
- Doncaster people will inform our policies and we will keep people informed
- Acting with purpose and inclusively

¹ https://silo.tips/download/patient-and-public-engagement-for-health-and-wellbeing-boards

• We will work with what already exists in communities, mobilising community assets and where possible increase community capacity

Areas of Focus

The following areas of focus are proposed

Area of Focus	Options	Proposal
Community Insight	 Review how to increase people/citizen voice in the Health and Wellbeing Board meeting itself local stories, public questions, check and challenge on any new strategy or approach presented at the board, public prioritisation of Board agendas, use of other venues, times or informal meetings Planning groups and boards that report to the Health and Wellbeing Board to be co-chaired with people with lived experience Continued focus on Making it real 'l' and 'We' statements Regular Health and Wellbeing related Doncaster Talks, Healthwatch and partner activity (localities) ICP Regular feedback and discussion with the Inclusion and Fairness forum and other associated groups e.g. minority partnership board Conduct Fairness and Wellbeing Commission 	 Public Questions at Health and Wellbeing Board either on notice, to allow more informed dialogue, or to act as a trigger for future agenda item(s). Maintain venue of Health and Wellbeing Board due to governance requirements. Wherever possible agenda items at Health and Wellbeing Board to be co- produced and co-presented with people with lived experience Review TOR of any groups directly reporting to the Health and Wellbeing Board to ensure co-chairing arrangements Develop forward plan to cover Making if Real Board, Healthwatch, and health and wellbeing related Doncaster Talks, Inclusion and Fairness forum and Minority Partnerhip Board activity. Schedule Fairness and Wellbeing Board feedback.
Active Communities Participation	 Continued focus on Asset Based Community development in the localities work Maximise the use of local buildings and assets Support the development of more peer led groups Identifying and engaging with community connectors Support Community Wealth Building Ensure partner participation 	 Schedule update on locality and community working Establish participation engagement
infrastructures	 Ensure participation infrastructure is understood and coordinated Share participation outputs and synthesise for Doncaster, locality and neighbourhoods 	 Establish participation engagement group – combining horizon scanning, sharing practice, ways of working and training – chair tbc

	Understand the SYICB approach as it develops	
Thriving Voluntary, Community and Social Enterprise sector	 Support the local infrastructure organisation Continue to develop investment approaches with the VCSE including the social isolation alliance Support volunteering Support the development of Community Anchor organisations-rooted in place 	 Ensure local infrastructure approach meets the needs of all stakeholders across Doncaster and in place Schedule report back on locality investment Consider enhanced approach to volunteering opportunities
Workforce Development	 Develop storytelling approaches and the use of broader arts and culture lens to highlight health and wellbeing challenges and hearing from people with different communication needs Community engagement toolkit Agreed reimbursement approach for coproduction Training for local people on asset based community development Training for staff in strengths based ways of working Mentoring and reverse mentoring Encourage involvement in research Agreeing a set of measures for good engagement 	 Agree a 'what good likes' for involving people in health and wellbeing, develop a minimum level of training across Doncaster and update toolkit Adopt Adults Health and Wellbeing coproduction reimbursement approach.
Embedded into core business	 Support and grow the social economy and community businesses Continue with alternative giving mechanisms, e.g. crowdsourcing 	 Embed social value in partner procurement processes Develop novel investment models

Recommendation

The members of the Health and Wellbeing Board are asked to comment and agree the proposals including whether public questions at the Health and Wellbeing Board should either be on notice to allow more informed dialogue or act as a trigger for future agenda item(s).

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