

JUNE 2021

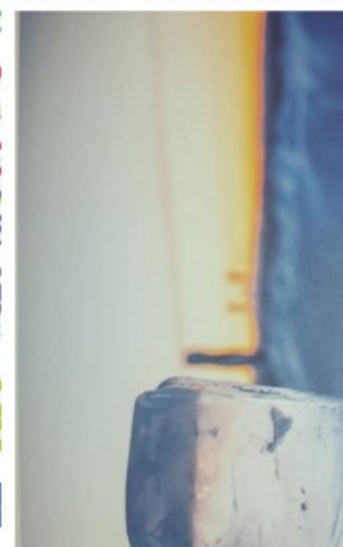
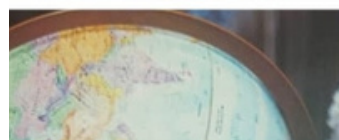
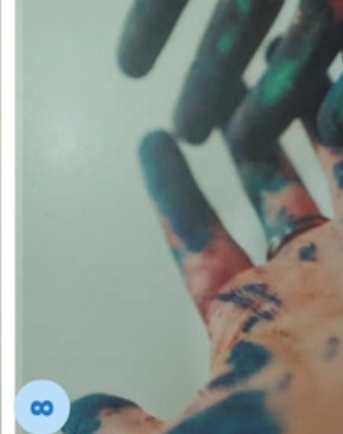
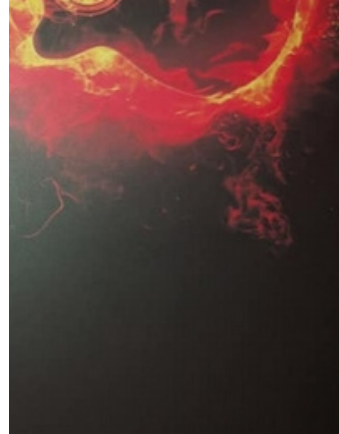
SHSC SERVICE USER ENGAGEMENT AND EXPERIENCE STRATEGY WORKSHOP 1

Workshop report

IN PARTNERSHIP WITH



**Sheffield Health and
Social Care**
NHS Foundation Trust



WORKSHOP BACKGROUND

Service User Engagement and Experience Strategy

This workshop was organised by Sheffield Flourish and run in partnership with Sheffield Health and Social Care NHS Trust (SHSC). This report includes the feedback from the first session exploring the development of the new Service User Engagement and Experience strategy. The strategy is part of SHSC's key organisational ambition to continuously improve their approach to working with people by learning from people's experience of using SHSC services.

This ambition applies to the full range of people accessing SHSC services that we work with and provide services for, including:

- adults and older people with mental health problems
- people with learning disabilities
- people with drug and alcohol dependence/addiction
- people living with long term neurological conditions
- people who access our primary care and community services

People who use our wide range of specialist services, such as :

- perinatal mental health services
- eating disorder services
- brain injury services
- gender services.



WORKSHOP PLAN



Platform: Zoom

18

Participants including people using SHSC services, former patients, family and carers, and people working in health care systems or the voluntary sector.

Workshop 1

In breakout rooms we explored the following themes that makes up the Service User Engagement and Experience Strategy:

Experts by experience

Communication and reach

Partnership working and innovation

An agent for quality improvement and change

Learning through digital

Every participant received the same 40 photos. We each chose a photo that represented: **where we are** and **where we would like to be** with each of these themes. Everyone shared their pictures, thoughts, and ideas.



THE REPORT

The report is split into sections to try and mirror the format of the workshop itself.

THEMES

It will first explain each theme within the Sheffield Health and Social Care NHS Service User Engagement and Experience Strategy and the strategic aims of these themes: Experts by experience, Communication and reach, Partnership working and innovation, An agent for quality improvement and change and Learning through digital. These are the themes we discussed and gained feedback on.

WHERE WE ARE

WHERE WE WOULD LIKE TO BE

Under each theme, the report shows quotes and pictures that came directly from the workshop relating to the questions 'where we are' and 'where we would like to be' with these themes. Please note that some of the feedback might sound like it is in note form but this is to avoid changing the language or meaning of the feedback received.

When showing feedback on 'where we would like to be' the report includes the pictures that people chose in the workshop activity to go alongside their thoughts for that theme. For example:

1



1 Hands all united in helping one another in every aspect and helping to get to one goal working together/partnership/communities/inclusivity/diversity/accessibility

THEMES

Below is an explanation of each theme within the Service User Engagement and Experience Strategy, and some of the aims that are within the last strategy under each theme.

EXPERTS BY EXPERIENCE

'Ensuring SHSC is a great place to work as Paid Peer Support worker'

Examples of aims in the current SHSC Service User Engagement and Experience strategy:

- Experts by Experience (EbEs) workers/volunteers to be properly inducted, supervised and supported
- Teams are properly trained and briefed about the role and expertise of EbE workers
- Roles that are flexibly and imaginatively designed, and that job profiles are focused and clear



COMMUNICATION AND REACH

'Developing better and more diverse methods of communication and dialogue which meet the needs of people who use the services and carers.'

Examples of aims in the current SHSC Service User Engagement and Experience strategy:

- Striving to reach and communicate with groups who are underrepresented
- Increasing transparency about all aspects of SHSC business
- We will strive to "close the feedback loop" by ensuring that service user feedback and questions are followed up with actions and that outcomes are reported on



PARTNERSHIP WORKING AND INNOVATION

'Increase innovation, flexibility and responsiveness through great partnership working'

Examples of aims in the current SHSC Service User Engagement and Experience strategy:

- Increase dialogue and partnership work with a range of community/voluntary sector organisations especially smaller grassroots organisations
- To learn from good practice elsewhere
- To actively develop a culture of entrepreneurship and creativity in service user engagement within and outside the organisation



AN AGENT FOR QUALITY IMPROVEMENT AND CHANGE

'Proactively seeking out the experience of someone using a service in SHSC and using this to inform quality improvement'

Examples of aims in the current SHSC Service User Engagement and Experience strategy:

- Active encouragement of meaningful involvement of service users and carers in all quality improvement work in SHSC and in developments related to commissioning and transformational change programmes



LEARNING THROUGH DIGITAL

'The increase of existing and new methods to collate, monitor, analyse and learn from experiences and feedback in order to continually improve services.'

Examples of aims in the current SHSC Service User Engagement and Experience strategy:

- Information will be collected as a matter of routine, collated and presented to all levels of the organisation, including team, directorate and Board level.
- We will share digitally and via social media when service user and carer experience has influenced developments across the Trust.





KEY FEEDBACK:

- Still in the process of developing and understanding
- Barriers between Experts by Experience workers and other SHSC staff members
- Need more diverse representation

'Slightly old school and old fashioned'

'On a journey and starting to get our heads around it'

'Feels a bit confrontational - lived experience v clinical advice. Medical model v social model'

'In the process of getting our hands dirty...building!'

'Need more diverse representation and to be proactive about the recruitment of different backgrounds.'

'SHSC on one side of the railing and experts-by-experience on the other...



...we need to get rid of the middle bar and **walk up the steps together**'



KEY FEEDBACK:

- More diversity
- Embedding Experts by Experience at all levels
- Different opportunities



- 25 Bringing together clinician and lived experience
- 39 Different ideas, views, diversity and respectful of different opinions
- 18 'It's a continuous journey and should feel like we're done'
- 26 'Long straight road where we're clear where we're going'
Power imbalance – valuing experts by experience at all different levels and respecting the roots. 'We try to shoe-horn people into what we think experts by experience are'
- 4 Fun, interesting and something to be passionate about
- 13 'Odd shoes making a pair' –representation of different people e.g. LD, BAME
Different opportunities and inviting for people to want to get involved.

'Representation of different people'





KEY FEEDBACK:

- Outdated approaches
- Need more focus on language and accessibility
- Not enough reach e.g Minority groups

Hearing isn't listening! Part of it is about connecting and making these connections

An outdated approach to a lot of communication

Need to reach more minority groups. E.g veterans and dual diagnosis - mental health and alcohol/addiction

Communicating in an echo chamber

You said, we did - often focuses on strategies and service perspective, rather than focused on what it means to people.

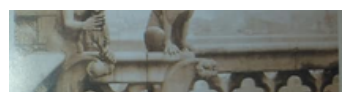
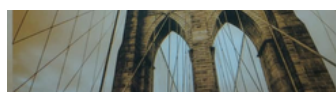
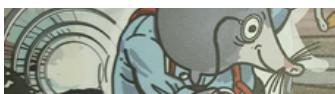
Lot's of feedback and opportunities for feedback, but no clear themes or feedback loops

Feels like it needs to get back to the drawing board

Still feels fraught. Tension between service users and staff

Services are wanting to communicate but not everyone is meeting in the middle

Not speaking the same language

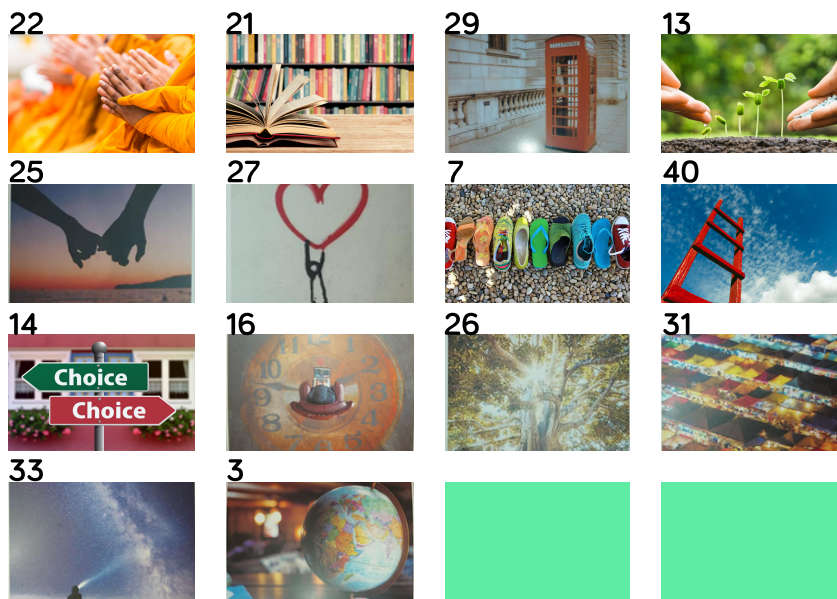


Pictures chosen from the breakout rooms



KEY FEEDBACK:

- A variety of different communication approaches and channels
- Accessibility and visibility
- Diversity of reach



- 22 Talk up and down the chain of command, be clear on the aim and make sure we know when we've achieved it.
- 21 Knowledge is power. Need to know more about what is going on around the city!
- 29 Remoteness people can feel – stranded but we need to find a way to get to you.
- 13 Constant growth and development
- 25 Togetherness – holding hands and finding harmony
- 27 Introduce more arts in health
- 7 Walk a mile in my shoes – put yourselves in each others shoes and walk alongside each other
- 40 Ladder of participation and sky is the limit
- 14 Making things visible and giving people the knowledge. To treat people as experts and not make decisions for people. Make choices visible
- 16 Represents all the time that has gone past. Letting us recognise that we have built things up (e.g technology) and not be afraid to move forward
- 26 Everyone from different walks of life (the roots) communicate to build and change services and become nourished (tree)
- 31 Varied offer – diverse offer and ways of reaching people
Ambition – tricky but needs planning and resources to build sustainable connections.
- 33 Outward looking and getting a much wider perspective
Ongoing reflection on how we're communicating and adapting - agile
- 3 Worldwide, diversity of reach with service users and staff
Need to ask people about how they want to communicate and engage.



KEY FEEDBACK:

- Barriers exist. E.g IT, innovation
- Wider partners need to be involved

'Embraced,
but still
messy'



'We need to
step back and
look at the
bigger
picture'

Wider partners need to be involved and barriers need to be let down
e.g IT barriers, cultural barriers

Innovation is messy. Uncomfortable for some but necessary

Need to step back and look at the whole picture

We all start off on this journey it's ok if it's going to be bumpy,
hopefully it ends smoother!

Some things that are not perfect last forever. Some things that are not
perfect don't last forever.



The bridge is even, even
though its rocky. You always
have people. The Trust is the
wood within this picture. It
represents strength even
though it is weak.



KEY FEEDBACK:

- Working with wider partners
- Accessibility of working together
- More diverse partners

- 20** Represents the quieter voice that doesn't get hurt, entice people in through different ways. Never forgetting why it is what we do
- 1** Making it personalised. The earliest art is handprints! Unify and identity Accessibility, diversity and working together
- 36** Journey together – partnerships – along together
- 25** Getting support in a new volunteer role has made me think about signposting. Important to know what is out there.



'Each tree is strong in it's own right and growing together'



KEY FEEDBACK:

- Complex - different teams working on different systems
- Barriers between services including internal and external
- More involvement with family and carers needed

This strategy is a good opportunity to look at how we can join services and other agencies

Keep doing the same thing over and over again and missing hard to reach groups.

Clinical professionals need to make a leap of faith from their safe point of view

All need to work together and improve communications.

Different teams working different ways. Can be confusing and overwhelming.

Links with community and voluntary services could be accessed and used more often

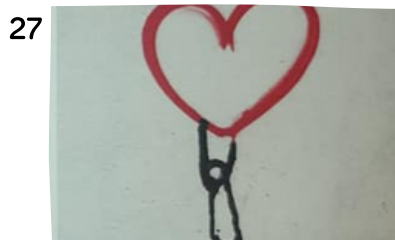


A throw of the dice depending on who you get and what care they offer, how they adapt to your needs etc eg. Some will work with your family and others won't.



KEY FEEDBACK:

- Improve communications
- Bridge the gap between the public sector and the voluntary sector



38 Used this to depict where we are and also moving to where want to be i.e. address the issues raised.

Bridge represents a good opportunity to look at how we can join up the dots on how we should work collaboratively in order to get to where we would like to be and not by the traditional paradigms.

27 Cohesion and working together. Encouraging and helping one another in every aspect.

1 Hands all united in helping one another in every aspect and helping to get to one goal working together/ partnership/ communities/ inclusivity/ diversity/ accessibility

22 Buddhists – can see hands placed together (resembled hope). Hands from different ethnicities and diverse backgrounds – depicts the same aspirations of hope from all communities and accounting for the needs of everyone, i.e. different needs, cultures and ethnic backgrounds



KEY FEEDBACK:

- Not currently accessible for all service user groups
- Broken down barriers for some people

Not all documents are produced in a compatible way to enable speech recognition for visually impaired

Digital difficult because of brain injuries (and will be for other people with other conditions)

Pandemic has forced learning and some have enjoyed learning about it but it does come with difficulties.

Digital platform has a lot of knowledge and order gone into, but is it really accessible to all all of the time...?

For some digital has broken down barriers or for others it has brought challenges – cost of IT equipment, learning skills etc



Lots of thought and knowledge



KEY FEEDBACK:

- Using a variety of communication channels including traditional ways e.g phone calls
- Accessibility e.g voice-enabled documents



(Didn't select a picture) Produce communication that is Easy Read, accessible and less jargon (still using a lot). Possibility of voice-enabled documents for the visually impaired. Give people a quick call – don't forget the quick traditional check-ins – means a lot to people. A simple thing such as 'check and chat' is invaluable to anyone who is alone.

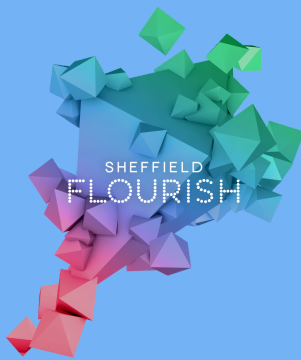
21, 31, 39 Used this to depict where we are and also moving to where want to be i.e. address the issues raised.

13 Seedlings starting small – represents the journey lots have been on over the last few months, adapting and breaking down barriers. Need to support and nurture each other and not lose sight of the traditional things as well as developing new. People develop at different rates and to different levels – like plants growing. A little investment makes a big difference.



Sheffield Health and Social Care NHS Foundation Trust provide a range of mental health, learning disability and substance misuse services to the people of Sheffield.

www.shsc.nhs.uk



Sheffield Flourish are a mental health charity that support people to use their skills, ideas and talent to build the lives they want.

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