

Meeting: Highland Health and Social Care Committee

Meeting date: 1 November 2023

Title: Engagement Framework update

Responsible Executive/Non-Executive: Gareth Adkins, Director of People and Culture

Report Author: Marie McIlwraith, Community Engagement Manager

1 Purpose

This is presented to the Board for:

- Assurance
- Awareness

This report relates to a:

- 5 Year Strategy, Together We Care, with you, for you.
- Legal requirement

This report will align to the following NHSScotland quality ambition(s):

Safe, Effective and Person Centred

This report relates to the following Strategic Outcome(s)

Start Well	Thrive Well	x	Stay Well		Anchor Well	x
Grow Well	Listen Well	x	Nurture Well		Plan Well	x
Care Well	Live Well	x	Respond Well		Treat Well	
Journey Well	Age Well		End Well		Value Well	x
Perform well	Progress well					

2 Report summary

2.1 Situation

Over the last 12 months, we have been further developing and implementing the ambitions within the Communications and Engagement Strategy, specifically relating to the creation and development an Engagement Framework.

This report provides an overview of the progress made over the last 12 months, for implementing the ambitions of the Engagement Framework.

It highlights:

- Progress of the implementation plan,
- progress with initial indicators,
- main themes from colleague and stakeholder feedback,
- next steps and future focus.

2.2 Background

NHS Highland has a statutory duty to involve and engage people in decisions and outcomes that affect them.

<https://www.legislation.gov.uk/ukpga/1978/29/contents>

The [Communication and Engagement Strategy](#) set out a three-year plan for NHS Highland, including developing comprehensive engagement framework stating;

'We will put in place a community engagement framework that supports colleagues to engage proactively, ensuring we not only meet legal requirements for engagement, equalities, and accessibility, but also encourage ongoing engagement and relationship building. The framework will include training, templates and examples, and a governance structure that will both enable colleagues to reach relevant audiences and quality-check engagement projects.'

In November 2022, NHS Highland Board approved the [Engagement Framework](#), a vision and set of tools, templates, and training, to support a new way for NHS Highland to plan and deliver its statutory duties as set out in Scottish Government Guidance. <https://www.gov.scot/publications/planning-people-community-engagement-participation-guidance/>

2.3 Assessment

2.3.1 Progress of the implementation plan

Achieved	Working on	Planning
<ul style="list-style-type: none"> • Framework Approved by NHS Highland Board • Templates and flowcharts live on staff intranet • Request for communications and engagement support process live and operating • Care Opinion test sites live and operating • Framework values, methods test sites identified and mentoring approach live • Sharing practice and learning with peers live and ongoing • Programme of engagement training and awareness sessions delivered • Baseline data collected, to support first year and subsequent reporting 	<ul style="list-style-type: none"> • Developing governance and reporting structures in partnership • Testing engagement processes & protocols within ADP structures • Analysing baseline data to inform next steps with training and development • Procuring Engagement Management Platform • Developing networks and Forums - Highland 100 Panel • Supporting development of plain language uniform reporting templates • Ensuring equalities and related programmes and agendas, are cohesively linked • Working with colleagues, Chairs and representatives on meaningful involvement 	<ul style="list-style-type: none"> • Evaluate test areas to inform improvements • Identify and arrange next level training, supporting co-design approach • Use Engagement Management Platform to create external engagement channels and internal peer support structures • Run baseline survey with Highland 100 Panel and create a rolling programme • Develop equalities networks to support non digital engagement (no one left behind) • Test and launch governance and reporting structures • Show how feedback and lived experience informs policy and improvements • Raise colleague awareness and confidence in communication and engagement • Embed engagement in existing processes

As part of the implementation of NHS Highland's Engagement Framework, a small number of teams and project leads are trying new approaches, alongside well-established methods for engaging with people, listening to concerns, and identifying where we can make improvements.

Case study: Mental health and learning disability review

The [mental health and learning disability review](#) used conversation cafés, to capture people's lived experience of services, which is directly informing the development of the draft strategy for future services. These took place both in person, at various locations across the Highlands, as well as online. So far over 1000 people have taken part in this work. These include people who need services, carers, families, communities, our staff, and partners.

The Scottish Recovery Network has been a key partner, supporting the development of the conversation café approach and the overall engagement process for this work, hosting many of the conversations. Many other trusted partners also shared their experience and expertise, some hosting their own conversation cafes with the people they work with and support, including Lochaber Hope, Mickey's line, in Inverness and The Caithness Drug and Alcohol Forum, online.

A stakeholder group has recently been established to support ongoing conversations and future engagement, as the draft strategy begins to take shape.

2.3.1i Highland 100 Panel

To support our corporate communication and engagement channels we have recently launched our [Highland 100 Panel](#) recruitment drive and have 27 people signed up so far.

The Highland 100 panel will be held virtually and made up of a diverse range of people, who live across the Highlands and who are happy to share their views once or twice a year on key questions.

Questions will have set themes and will support NHS Highland with our understanding of people's perception and experiences of local services and will help support strategic planning and decisions. We aim for the Panel to be operational by December 2023.

2.3.1ii Care Opinion

Over the last few months, a small number of test sites based within our hospitals, and one Highland wide community service have been using [Care Opinion](#), as one of the main ways to hear people's experience. Care Opinion is available to all NHS Boards across Scotland and is funded by the Scottish Government.

Health and Social Care Partnerships and Integrated Joint Boards are not part of this arrangement and need to pay a subscription fee to use the platform.

Due to NHS Highlands Lead Agency Model and unique configuration, and we are currently working with Care Opinion to test a small number of areas that would be provided by IJBs (Integrated Joint Boards) in other areas, to test the viability of extending our current subscription to incorporate all Health and Social Care services across the Highland Council area.

Early findings from our test sites are positive; showing a steady increase in the number of stories received and responded to. (See Appendix 2 for summary reports).

2.3.1iii Support and training

We continue to develop our engagement approaches and supports to help us to better hear the voices of our communities and partners.

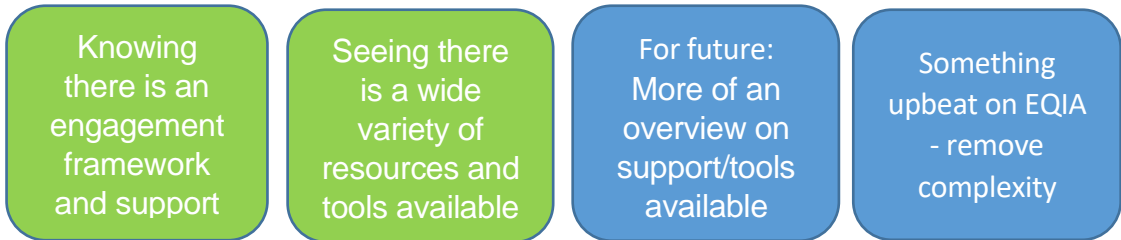
A range of tools, templates and online training sessions have been created and provided over the last 12 months, to support the implementation of the Engagement Framework and upskill staff to engage with people in a meaningful way. The majority of these are available on the [staff intranet page](#), for people to use when they need them.

We have supported the procurement of external additional resources to support several of our larger redesigns. For example, Morrison Media, who were commissioned to

support ongoing communication and engagement as part of the Locharber and Caithness Redesigns (contract now taken over by Streets UK).

A series of training and awareness sessions have been delivered by us and a range of partners in the last 12 months including:

- HIS (Healthcare Improvement Scotland) – Community Engagement Planning Effective Engagement
- HIS- Community Engagement, Duties and Principles of Engagement
- HIS-Community Engagement, Planning with People information session
- HIS – Community Engagement, development of Voices training for strategic representatives
- Ability Net – 2x Digital Inclusion sessions
- NHS Highland – 2x Introduction to the Engagement Framework (advertised open sessions via Teams)
- NHS Highland – EQIA (Equality Impact Assessment) training (delivered by Public Health Colleagues)
- NHS Highland –Introduction to engagement delivered at team meetings (numerous teams and workstreams)
- Care Opinion – various sessions, introduction, responder, and promotion sessions
- The Alliance –Introduction to [ALISS - A Local Information System for Scotland](#) sessions, (delivered in various locations online and in person)
- The Samaritans – Conversations with Vulnerable People



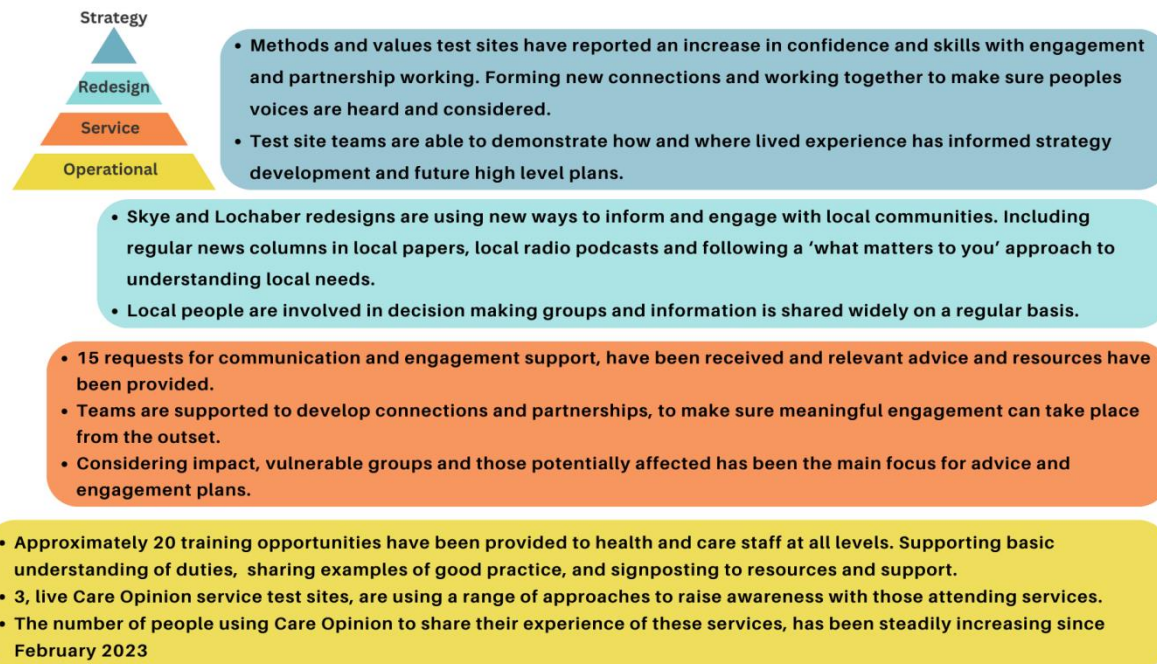
Feedback from the Introduction to the Engagement Framework Sessions

2.3.1iv Governance

Colleagues within Strategy and Transformation are currently working with us to support the development of the proposed governance structure. This will include the formation of an Oversight Group that will report to the Highland Health and Social Care Committee (HHSCC) and Clinical Governance Committee (CGC).

Discussions are in progress with the Chairs of these and other potentially relevant committees, to determine the setup and practical functions of the governance structure. This will ensure it is fit for purpose and appropriately connects and links in with existing and new structures, such as the Diversity and Inclusion (D&I) forum and the Audit, Finance, Resources & Performance and Staff Governance Committees.

2.3.2 Progress with Initial Indicators



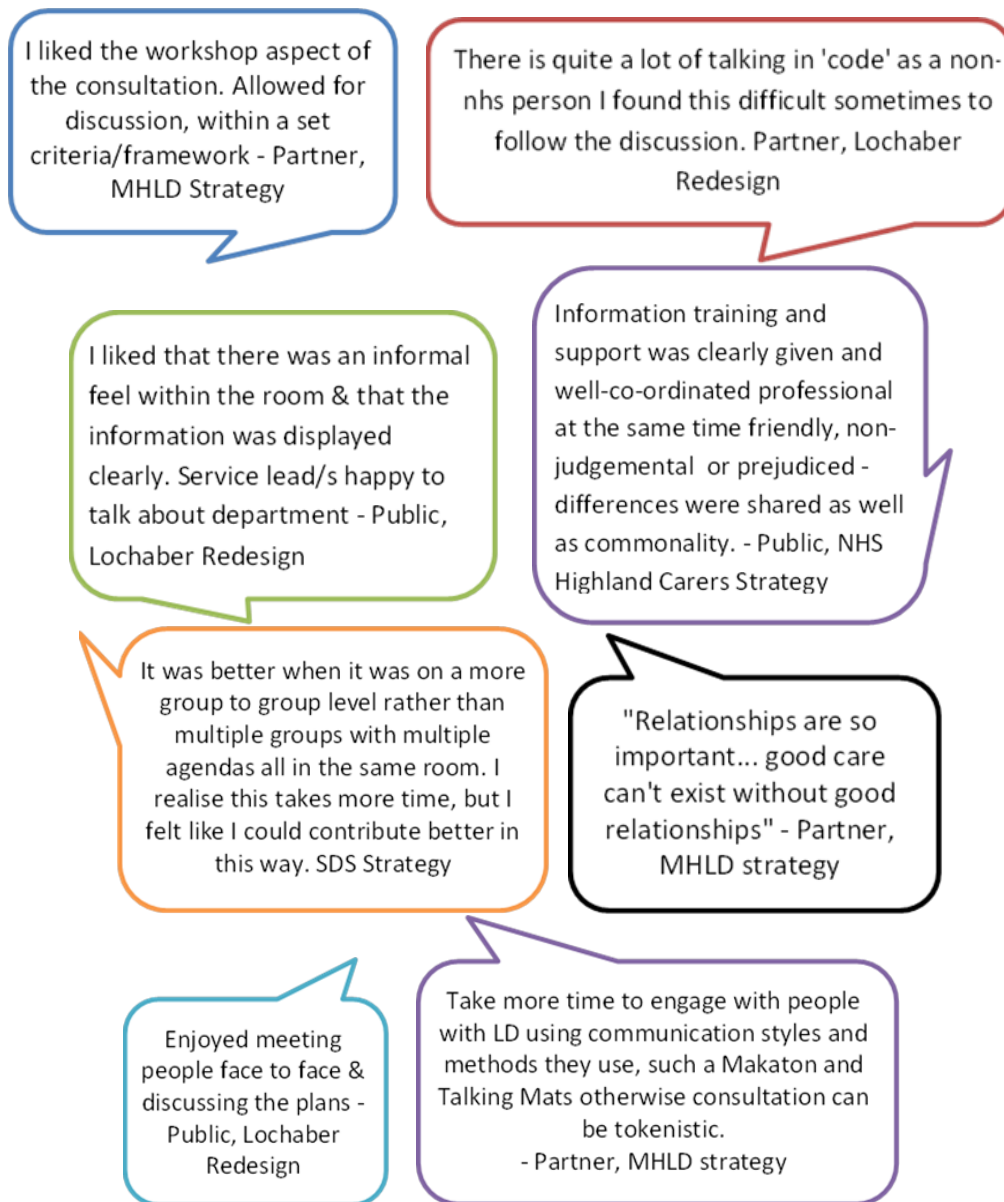
Full size diagram included in Appendix

2.3.3 Main themes from colleague and stakeholder feedback

During 2023 we collected feedback in a range of ways from the people we care for and work with, including;

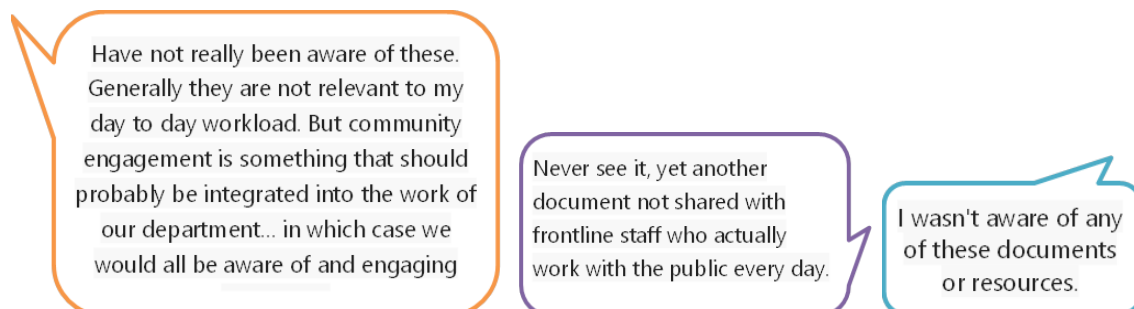
- Care Opinion stories (NHS Highland wide)
- Surveys (Chairs of Community Planning Partners and Public Representatives from a range of project and working groups)
- Feedback tree (public engagement event Lochaber June 2023)
- 'What Matters to You' leaflets & discussions (public engagement event Lochaber, June 2023 and Mental Health and Learning Disability engagement)
- Feedback from range of sources as part of Mental Health and Learning Disability Strategy development

The diagram below depicts how the 127 people, who shared their stories on Care Opinion, felt about the services they received.



2.3.3ii Workforce Survey and Feedback

We asked NHS Highland colleagues to complete a survey in June 2023, about their engagement experience, knowledge, and confidence. This showed that most of the colleagues who are aware of the Engagement Framework and resources, found them beneficial to their work. Most respondents were not aware of the Framework, however, so more work needs to be done to help them access this support.



2.3.4 Next steps and future focus

As highlighted in this report, there are many areas of improvement and good practice relating to community engagement within NHS Highland, particularly with the development of our strategies and high-level plans. Most of these are strongly linked to the development and implementation of the Engagement Framework. Feedback from those involved indicate that people welcome the partnership approach to working and strong relationships have, and continue to be built, to support ongoing dialogue and engagement.

We recognise that the scale of this progress is small, relatively speaking, often through targeted pockets within the organisation. We also recognise that there are examples of excellent practice within NHS Highland, out with the test sites and targeted areas, and there is much we could learn and share, to support the development and confidence of our workforce towards this new way of working. For example, the excellent work taking place in Caithness demonstrates established co-design approaches to service redesign that could be shared and used in other areas.

We plan to organically extend the progress made to other areas of NHS Highland, building on the good work that exists and supporting colleagues to build confidence and experience within communications and engagement, adopting inclusive and meaningful ways to involve people in all aspects of health and social care planning and delivery.

2.4 Proposed level of Assurance

This report proposes the following level of assurance:

Substantial	<input type="checkbox"/>	Moderate	<input checked="" type="checkbox"/>
Limited	<input type="checkbox"/>	None	<input type="checkbox"/>

Comment on the level of assurance

A working group is currently being formed to support the development of the required infrastructure within NHS Highland as part of our ongoing implementation and development. This will ensure effective and meaningful communication and engagement takes place at all levels across the organisation, as part of business as usual, strategic planning and redesign developments, in line with the ethos and values set out within the Engagement Framework.

An action plan and tracker will be developed to inform and track the continuation of this work. We will adopt a partnership approach to develop effective means to:

- Deliver targeted training and support for senior and service managers, relating to our duties and meaningful, timely communications and engagement.
- Deliver relevant training to teams and team leads to increase awareness and confidence with practice, for frontline colleagues.

- Raise awareness of available engagement resources and where to find them.
- Develop ways for colleagues to share practice and access peer support relating to engagement and associated areas, like equalities, accessibility, feedback, and complaints.
- Develop a fit for purpose, supportive, infrastructure, for our networks, processes, and governance arrangements, to support roll out of the framework and the consistent movement towards partnership working at all levels.

3 Impact Analysis

3.1 Quality/ Patient Care

It is too early to clearly demonstrate the impact of effective and inclusive engagement on patient care, within the timeframe of this first report.

However, feedback from the people we have worked with over the last 12 months suggests that there has been an improvement in how we involve people in planning, redesigning, and delivering services.

We plan to build on this progress, over the coming year, with the development of the Highland 100 Panel, the introduction of the Engagement Management Platform and the formation of the many networks that will support and inform the continued development of how we meaningfully involve people in the planning, designing, and delivering of local services.

The use of Care Opinion gives us the opportunity to hear patient and carers experience of the care they have received and understand where this has gone well and where improvements can be made. We are working with the Feedback and Complaints team to make full use of Care Opinion to hear people’s feedback at the point of accessing care to inform continuous improvement and person-centred care.

3.2 Workforce

It is too early to clearly demonstrate a significant impact to colleagues from the introduction of the Engagement Framework, due to the scale and short timeframe for this first report.

However, colleagues who have had direct support or advice have shared positive experiences of working with the team, using the resources, and following the ethos of the Engagement Framework.

From the information collected, there is still much to do with raising awareness of the Engagement Framework, its principles and values and the resources and tools that are available. More support is also needed to help increase colleagues' confidence and experience in delivering inclusive and meaningful engagement as part of our work.

This coming year we will be working on threading engagement ethos and values within key internal processes, to help embed good practice in a seamless and organic way from start to end.

3.3 Financial

A reoccurring budget of £20,000 has been allocated to support Community Engagement. This budget was previously allocated to Communications for printing purposes that is no longer required. From this budget we expect an annual spend in the region of £13,000, for engagement management software.

Required resources should be factored into project plans and budgets, from the start, to ensure meaningful and inclusive communication and engagement takes place at the appropriate times and levels, with those most affected.

3.4 Risk Assessment/Management

Engagement has been de-escalated as a corporate risk, due to the production of the Engagement Framework and its progressive implementation. The procurement of the Engagement HQ platform will support 'citizen' engagement that will better inform our plans, strategies, and services, helping us reach groups who are less likely to engage by other means, at a time and method that are best suited to their personal and lifestyle needs.

The platform will also provide us with ways to oversee, manage and measure the impact of engagement plans and activities across the organisation and help us to identify gaps and groups that need tailored and personalised engagement.

The development of the governance structure will ensure that we are meeting our statutory duties relating to engagement, with particular focus on health and societal inequalities. Once operational, it will help provide assurance of the quality and standards of engagement taking place.

3.5 Data Protection

Information provided within this report has been taken from a range of sources, including public and colleague feedback, observations, and surveys.

Where appropriate, consent was sought for data to be used to inform our practice and reporting.

3.6 Equality and Diversity, including health inequalities

The Engagement Framework was created in partnership with others and is based on current good practice and ethical approaches. Significant emphasis is placed on engaging with groups highlighted within the Equality 2010 Act and Fairer Scotland Duty.

Valuing lived experience and considering the impacts for those most affected by decisions, plans and developments is at the centre of the models within, as is engaging with people in ways best suited to their needs and wishes.

3.7 Other impacts

An impact assessment for the procurement of the Engagement Management Platform is currently being completed, along with DPIA (Data Protection Impact Assessment) and SSP (System Security Policy) risk assessments.

Mitigating actions will be taken, to ensure people are not excluded or adversely impacted by the introduction of the Engagement Management Platform.

EQIA along with other relevant impact assessments should be completed for each project, redesign, or strategy development, by project teams and relevant stakeholders. Subsequent communication and engagement should be informed by the findings and recommendations of the initial focused EQIA and project plans, which should be updated periodically, throughout the duration of the project or redesign process.

3.8 Communication, involvement, engagement, and consultation

The information in this report has been taken from various engagement and information sources, including:

- Mental Health and Learning Disability Strategy Engagement
- Lochaber Redesign Engagement Event 6th of June 2023
- Care Opinion Website
- Engagement Framework Training Feedback Survey 2023
- Stakeholder survey, 27th July - 28th August 2023
- Workforce survey, 13th July – 10th of August 2023
- Request for Support data, via MS Forms

3.9 Route to the Meeting

This report has not been previously considered but will be presented to Clinical Governance Committee on 2 November.

4 Recommendation

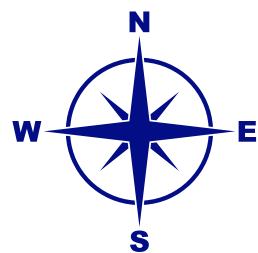
- **Assurance** – To give confidence of compliance with legislation, policy, and Board objectives. This report proposes the following level of assurance:

Substantial	<input type="checkbox"/>	Moderate	<input checked="" type="checkbox"/>
Limited	<input type="checkbox"/>	None	<input type="checkbox"/>

4.1 List of appendices

The following appendices are included with this report:

- Appendix 1: Implementation Progress Diagrams
- Appendix 2: Care Opinion Summary Report
- Appendix 3: Internal Survey Summary



Engagement Framework Implementation

Where are we now



Achieved

- Framework Approved by NHS Highland Board
- Templates and flowcharts live on staff intranet
- Request for communications and engagement support process live and operating
- Care Opinion test sites live and operating
- Framework values, methods test sites identified and mentoring approach live
- Sharing practice and learning with peers live and ongoing
- Programme of engagement training and awareness sessions delivered
- Baseline data collected, to support first year and subsequent reporting

Working on

- Developing governance and reporting structures in partnership
- Testing engagement processes & protocols within ADP structures
- Analysing baseline data to inform next steps with training and development
- Procuring Engagement Management Platform
- Developing networks and Forums - Highland 100 Panel
- Supporting development of plain language uniform reporting templates
- Ensuring equalities and related programmes and agendas, are cohesively linked
- Working with colleagues, Chairs and representatives on meaningful involvement

Planning

- Evaluate test areas to inform improvements
- Identify and arrange next level training, supporting co-design approach
- Use Engagement Management Platform to create external engagement channels and internal peer support structures
- Run baseline survey with Highland 100 Panel and create a rolling programme
- Develop equalities networks to support non digital engagement (no one left behind)
- Test and launch governance and reporting structures
- Show how feedback and lived experience informs policy and improvements
- Raise colleague awareness and confidence in communication and engagement
- Embed engagement in existing processes



- Methods and values test sites have reported an increase in confidence and skills with engagement and partnership working. Forming new connections and working together to make sure people's voices are heard and considered.
- Test site teams are able to demonstrate how and where lived experience has informed strategy development and future high level plans.

- Skye and Lochaber redesigns are using new ways to inform and engage with local communities. Including regular news columns in local papers, local radio podcasts and following a 'what matters to you' approach to understanding local needs.
- Local people are involved in decision making groups and information is shared widely on a regular basis.

- 15 requests for communication and engagement support, have been received and relevant advice and resources have been provided.
- Teams are supported to develop connections and partnerships, to make sure meaningful engagement can take place from the outset.
- Considering impact, vulnerable groups and those potentially affected has been the main focus for advice and engagement plans.

- Approximately 20 training opportunities have been provided to health and care staff at all levels. Supporting basic understanding of duties, sharing examples of good practice, and signposting to resources and support.
- 3, live Care Opinion service test sites, are using a range of approaches to raise awareness with those attending services.
- The number of people using Care Opinion to share their experience of these services, has been steadily increasing since February 2023

Lived and worked Experience



Resources



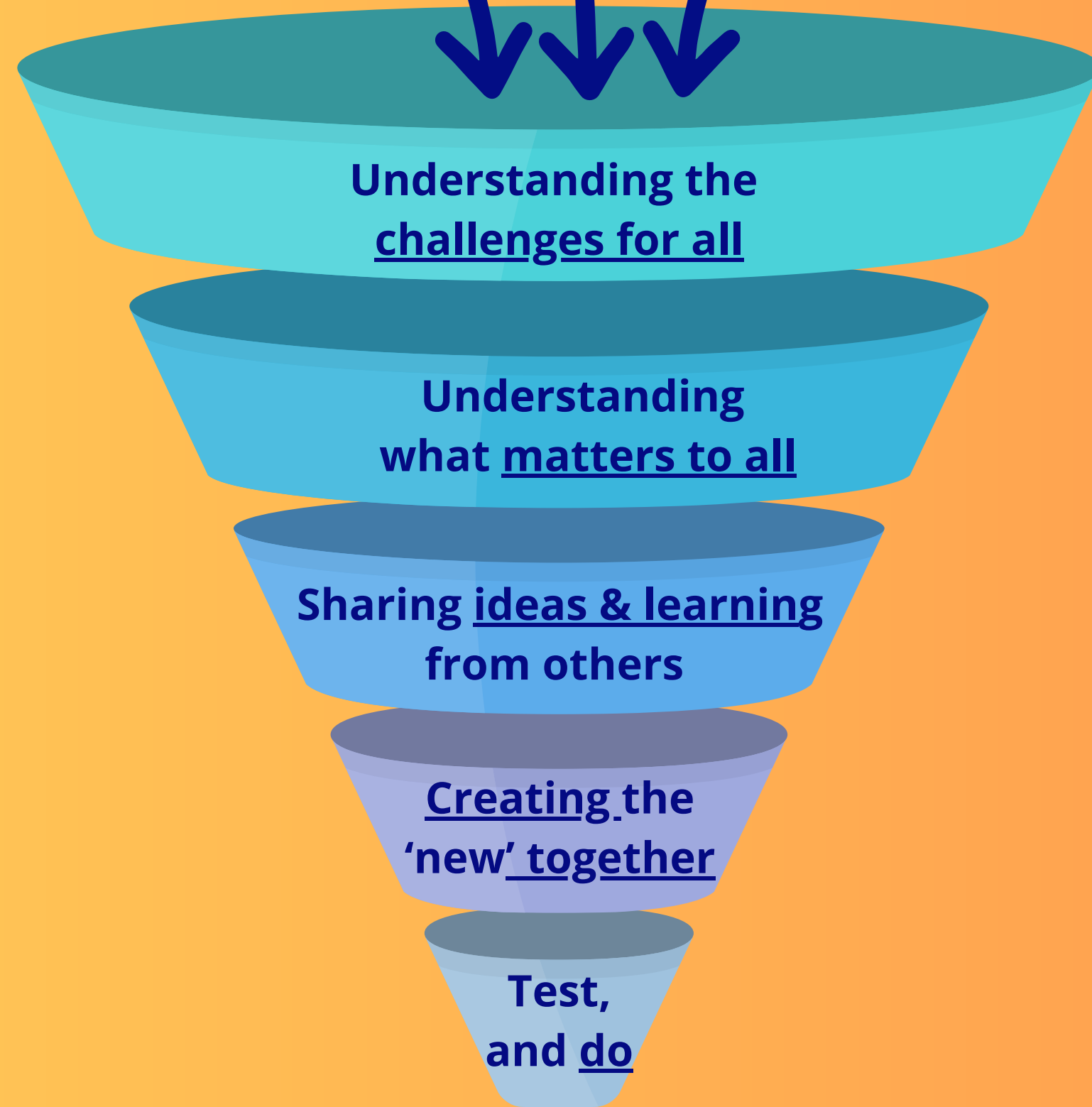
Needs



Moving to co-design and partnership working

Transforming services - Improving lives

Together



Better plans, better use of resources, better services, better health and care outcomes for people



Stories in summary

About this report

This report shows summary information about a selection of stories published on Care Opinion.

It was created on **18 September 2023**.

Which postings are included?

This report shows stories in the **NHS Highland** subscription, which includes all stories about NHS Highland (Health).

The report is also filtered to show only all stories submitted on or after 18/09/2022

Frequently asked questions

How is story criticality rated?

Story criticality is rated by our moderations at the time each story is moderated. It is a measure of how critical the most critical part of a story is, according to a criterion-based system. Criticality is rated in order to support our filtered email alerting system for staff, and is not intended for publication.

What do the story counts mean?

To the right of an organisation/service you will see a count. This tells you the number of stories listed in the report about that organisation or service (including any services run by that organisation/service).

What does "most popular" mean?

The most popular stories are those which have been read most often per day, since publication. This measure does produce a small bias towards more recent stories, but at least it is simple to understand.

Why might unexpected services appear in my report?

The services listed in the report depend on the stories that are included, and that depends on how you have filtered the report. So, for example, if you have filtered only according to where authors live, you may find they have used services some distance away.

Sharing and reuse

Contributors to Care Opinion want their stories to get to those who can use them to make a difference, so we encourage you to share this information with others.

Postings submitted via Care Opinion itself can be shared subject to a **Creative Commons** licence. You can copy, distribute and display postings, and use them in your own work, so long as you credit the source.

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About Care Opinion

Care Opinion is a not-for-profit social enterprise which enables people to share the story of their care, and perhaps help care services make changes.

For more information, contact us via: <https://www.careopinion.org.uk>

This report summarises **127** stories

To date, the stories in this report have been viewed on Care Opinion **10,666** times in all

These are the three most popular stories, out of all the stories included in this report

You can click the story title to see the story online

Every woman should have a single room - 579 views

Posted by **First time mum far from home** as the patient 6 months ago

I found out at my 20 weeks scan in Raigmore, Inverness, that there may be something wrong with the development of my baby's heart and was sent down to the QEUH, Glasgow, and seen very quickly within 2 days! A further scan there confirmed that my baby had a heart defect and would most likely require surgery immediately after being born, if he were to survive at all. The staff within the Fetal Medicine department couldn't have been any better in...

Maternity care and Induction - 528 views

Posted by **sculptorrc98** as the patient 9 months ago

I gave birth in October and the maternity care we received throughout the pregnancy and birth was amazing. The maternity team in Oban hospital were all brilliant. Kirsty was our main midwife and her help, advice and support she gave us was so appreciated and she was so friendly and made us feel super comfortable and relaxed the entire process. The rest of the team that we dealt with were also all so lovely and knowledgeable. (Rosie, Eva, Sheila,...

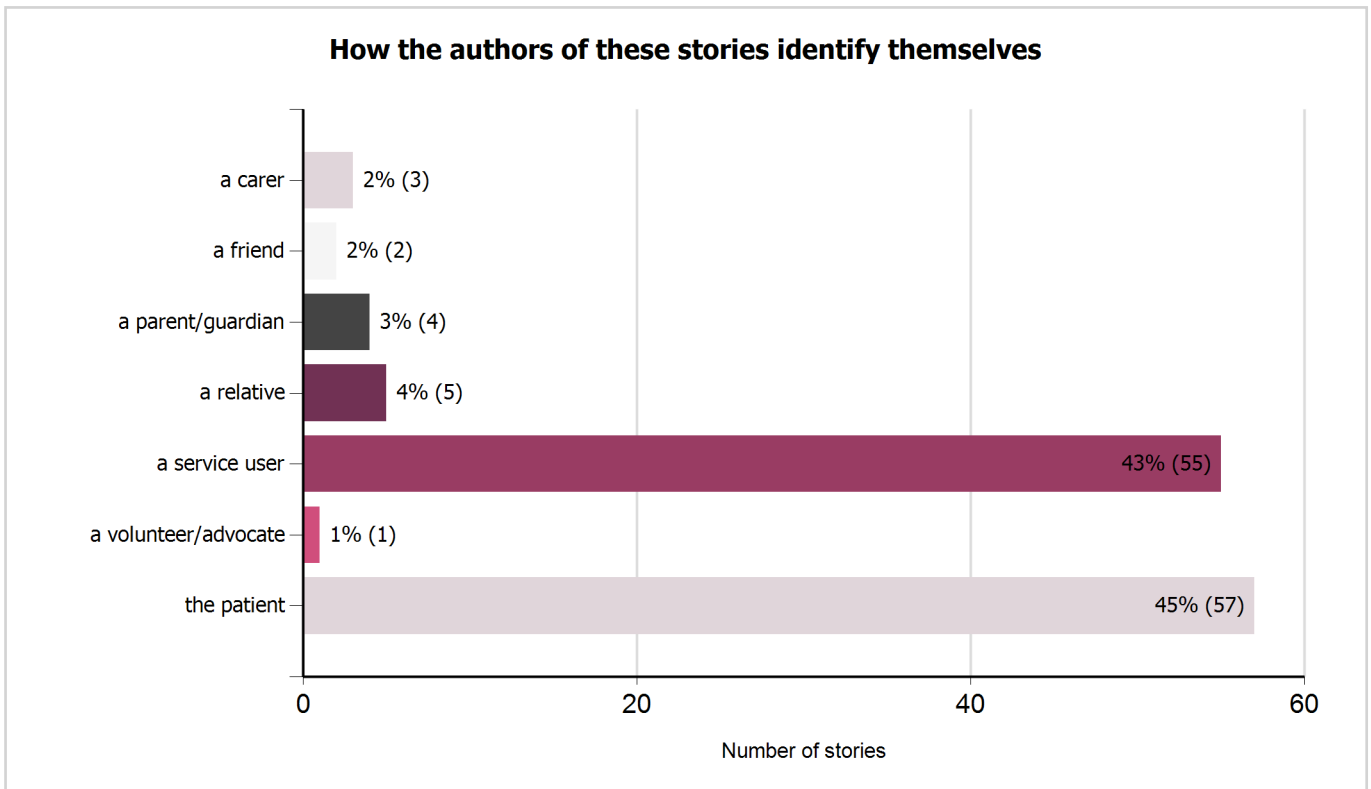
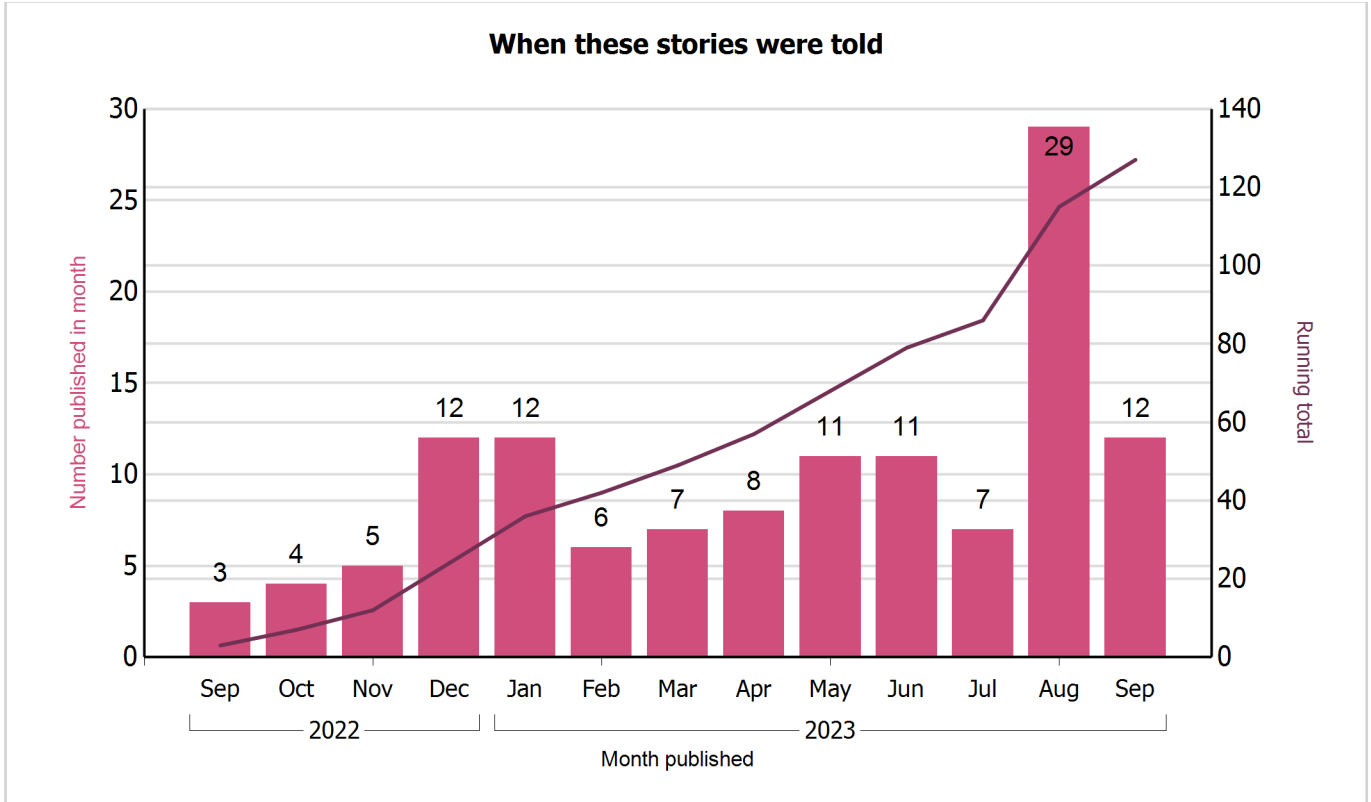
I would not be alive today if not for the care I received. - 422 views

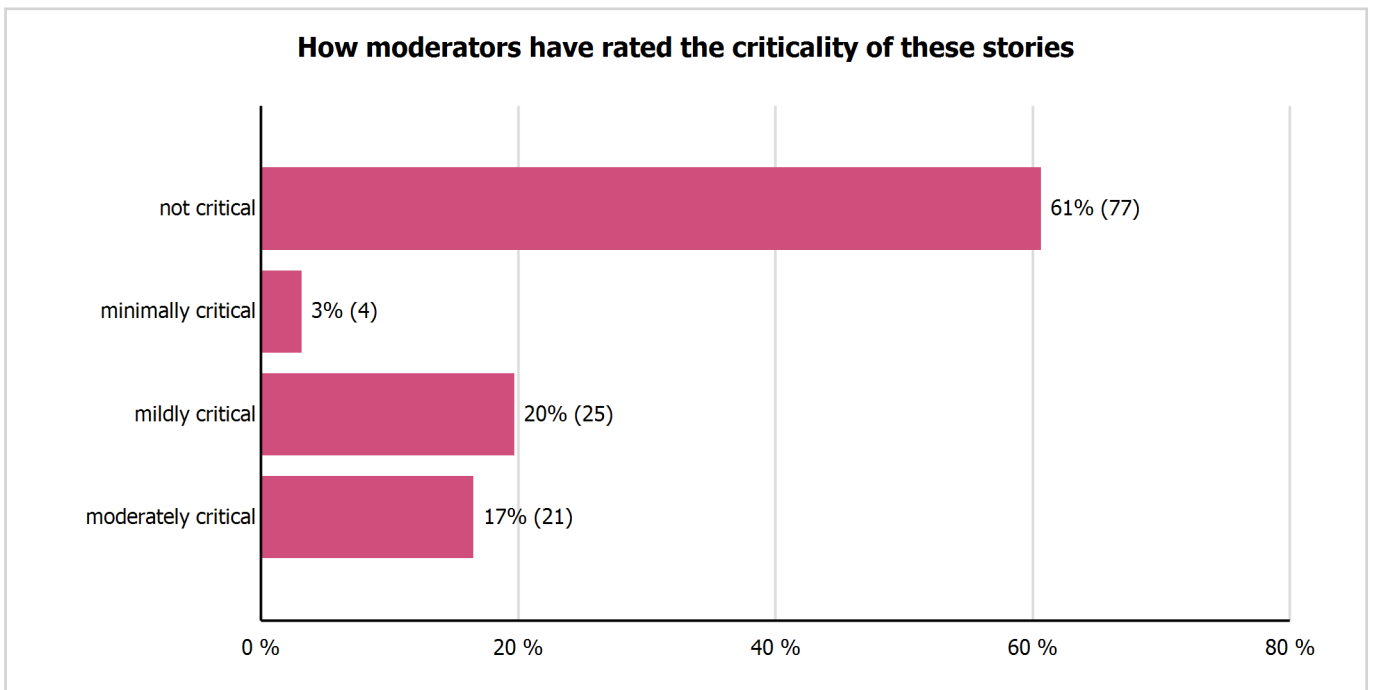
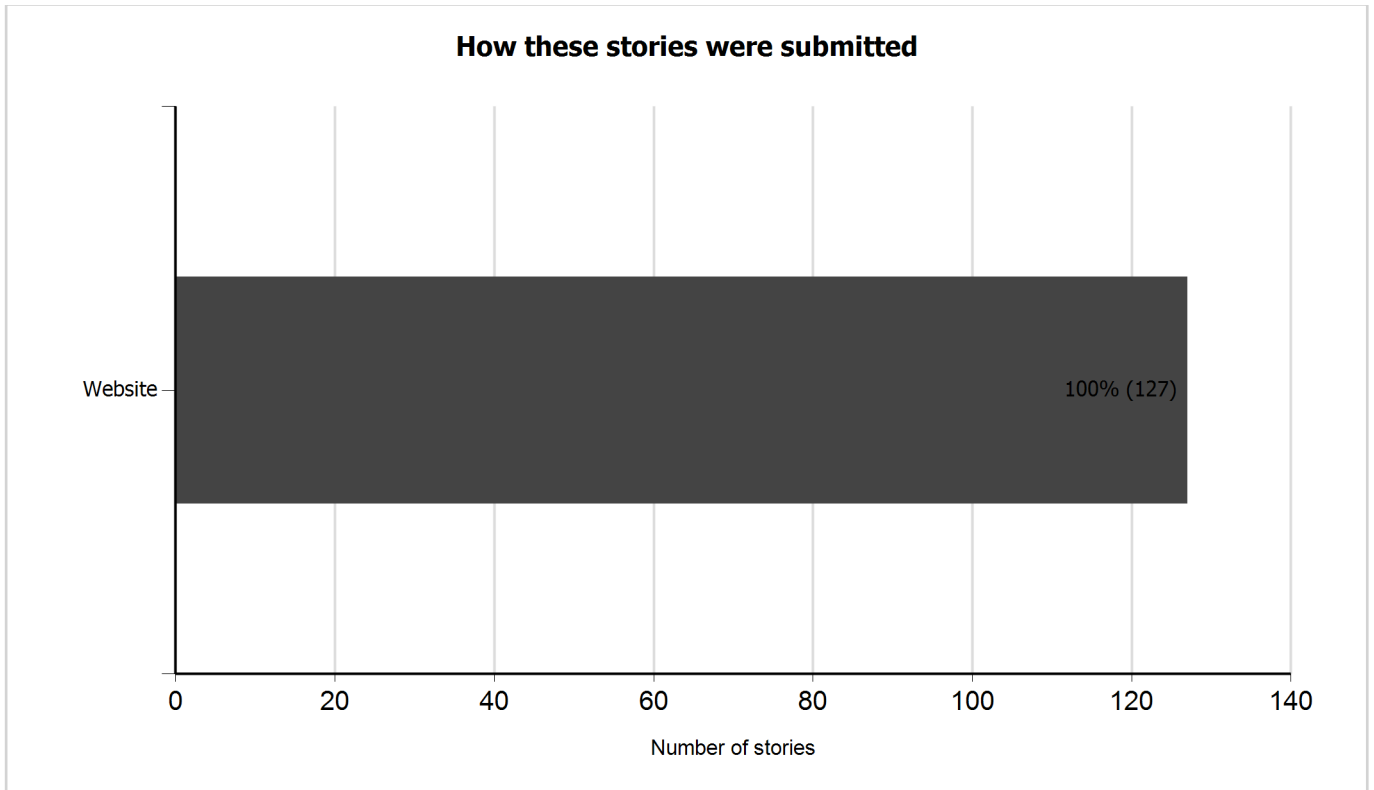
Posted by **COSTELLO** as the patient 10 months ago

My husband died in September 2022, 2 weeks later I was rushed into hospital with suspected Covid.

I was triaged, the next thing I was aware of was that I was being told I was in the Intensive Care Unit (ICU) and was hooked up to an oxygen supply. I was in and out of consciousness.

The Consultant told me I was very ill and that I might have to go on a ventilator I said that I didn't want to which they replied I may not have a choice (my...





NB: criticality scores are assigned by moderators (not the public) to stories to support our alerting service. They are assigned *per story* not *per service*, so may reflect criticism of services other than your own. We provide them here purely for information, with these caveats in mind.

Where these stories have come from

NHS Highland (Health)	101	
Unknown	19	
NHS Western Isles	2	
NHS Grampian	2	
NHS Tayside	1	
NHS Lothian	1	
NHS Forth Valley	1	

Most common tags added by authors to these stories

What's good?

staff	23
helpful	17
friendly	16
professional	16
Care	12
kindness	12
midwives	11
communication	10
advice	9
efficient	9

What could be improved?

communication	18
staff attitude	7
appointments	6
waiting time	6
information	5
doctor	4
waiting times	4
not listened to	3
advice	2
appointment	2
compassion	2
Directions	2
facilities	2
food	2
not treated	2
painful	2
spoken over	2
staff	2
staffing levels	2
support	2
travel	2
uncomfortable	2
understanding	2
waiting list	2

Feelings

grateful	19
supported	13
reassured	12
cared for	11
put at ease	11
comfortable	10
frustrated	10
relaxed	10
safe	9
upset	9

NHS Highland Internal Community Engagement Survey 2023

58

Responses

06:33

Average time to complete

Closed

Status

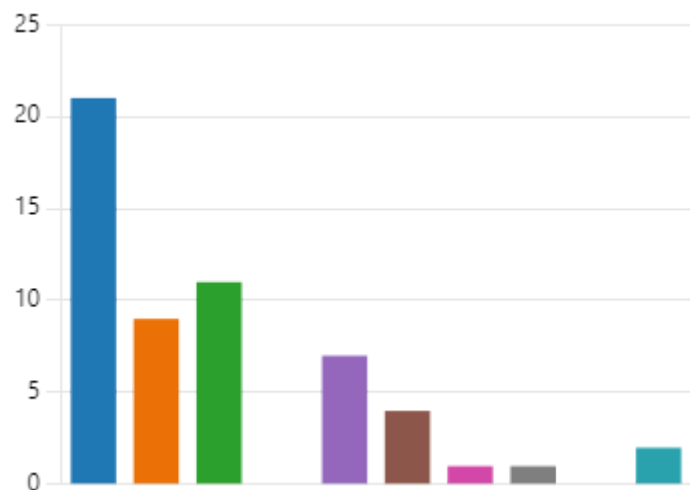
1. To continue, please indicate your consent below

● Yes, I consent	56
● No, I do not consent	2



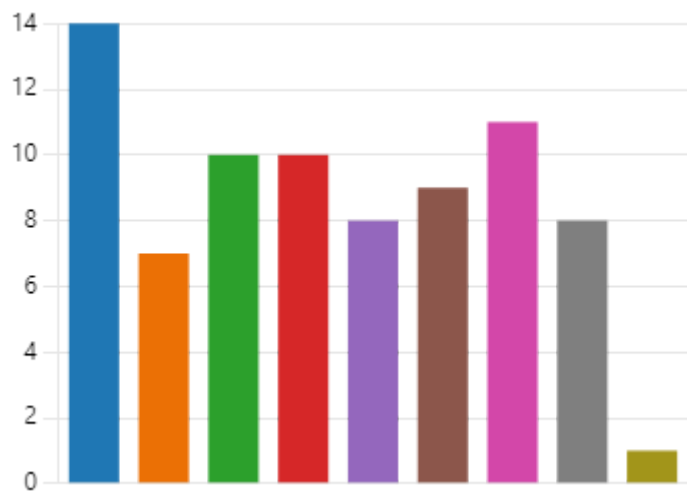
2. Which staff group to you represent?

● Nurse/Carer/Frontline Worker	21
● Project/Programme Worker/Ma...	9
● Office Administrative like (com...	11
● Support Services non clinical lik...	0
● Clinical Support Services, (like R...	7
● Clinician/Consultant/GP	4
● District/Local Management	1
● Senior Management	1
● Board, Executive Management	0
● Other	2



3. What geographical area(s) do you cover?

● North, (Caithness, Sutherland)	14
● West, (Skye, Lochalsh, Wester R...	7
● Mid, (Mid Ross, East Ross)	10
● South, (Inverness, Nairn & Arder...	10
● Raigmore Hospital	8
● Argyll and Bute (Oban, Lorn & Is...	9
● Highland Wide (Including Argyll...	11
● Highland Council Area (except A...	8
● Other	1



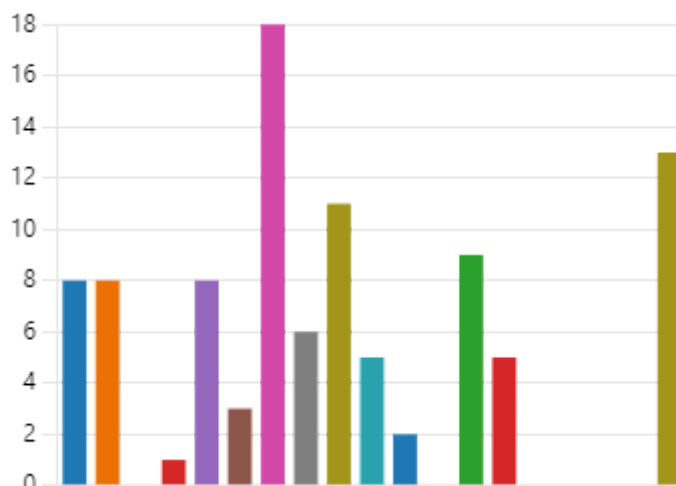
4. Do you have an established local network for sharing information and seeking feedback from people, *staff, people who need services, carers and members of the public?

● Yes we have a functioning local ...	10
● We are currently developing a l...	6
● We do not have a local network	10
● Not sure if we have or use a loc...	30



5. How do you currently communicate or seek feedback from patients or members of the public? Please tick all that apply to you.

● Community meetings	8
● Stakeholder group	8
● Patient Council	0
● Local Radio	1
● Newsletter	8
● Care Opinion	3
● Patient Survey	18
● Comments Cards	6
● Email	11
● Website	5
● Local newspapers/spotlight bro...	2
● WhatsApp	0
● Facebook	9
● Twitter	5
● Instagram	0
● Snapchat	0
● LinkedIn	0
● Tiktok	0
● Other	13



6. Please tell us how often this communication takes place for each of the choices you have made

40
Responses

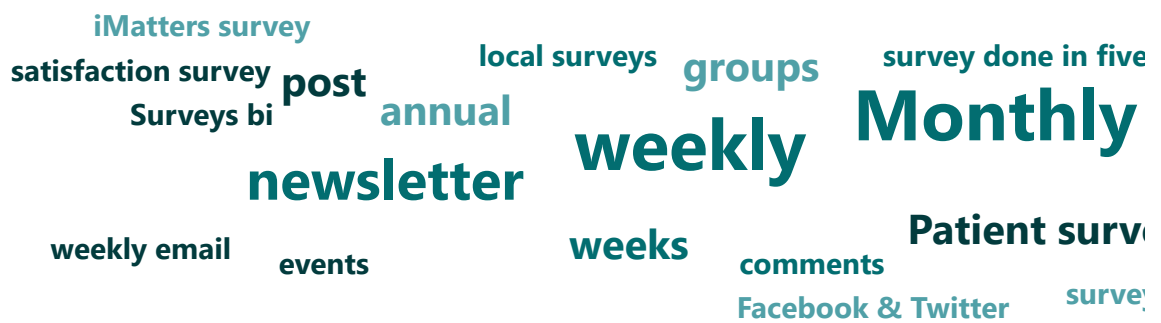
Latest Responses

"If relevant info comes in via email, for public info, it is forwa..."

"Frequently on a one-to-one basis."

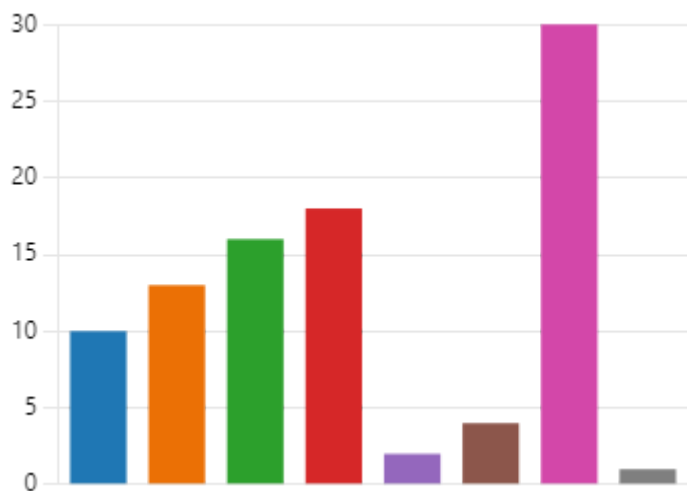
"Quarterly"

5 respondents (13%) answered **weekly** for this question.



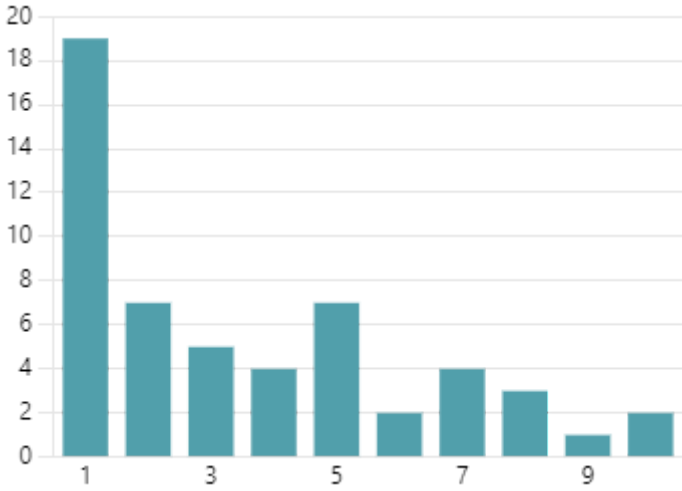
7. What experience of community engagement do you have?

- I have facilitated and chaired on... 10
- I have supported a colleague at ... 13
- I have attended community me... 16
- I have conducted patient survey... 18
- I have responded to a story on ... 2
- I have promoted Care Opinion a... 4
- I have not experienced any of th... 30
- Other 1



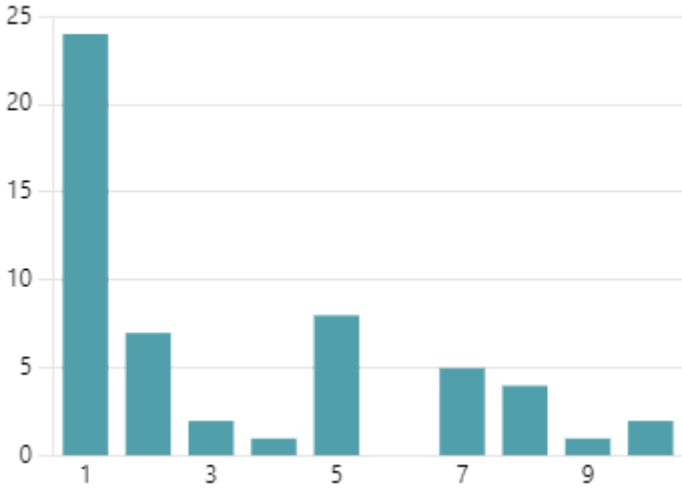
8. Following the Scottish Government Community Engagement Guidance - Planning with People.

3.56
Average Rating



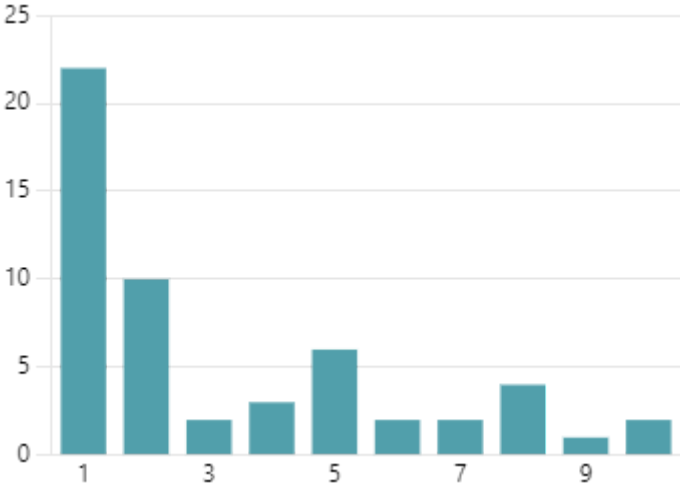
9. Carrying out a stakeholder analysis.

3.41
Average Rating



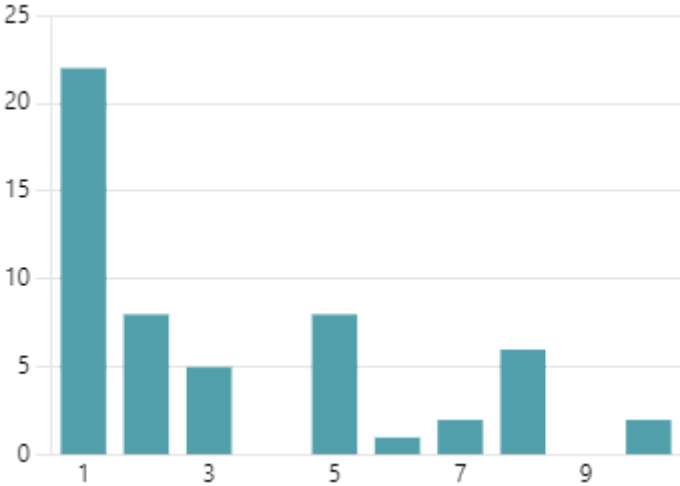
10. Completing an Equality Impact Assessment (EQIA).

3.28
Average Rating



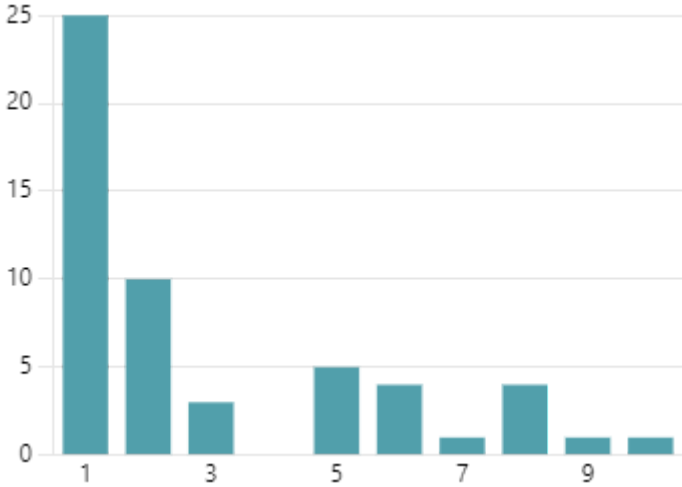
11. Creating a communications and engagement plan.

3.35
Average Rating



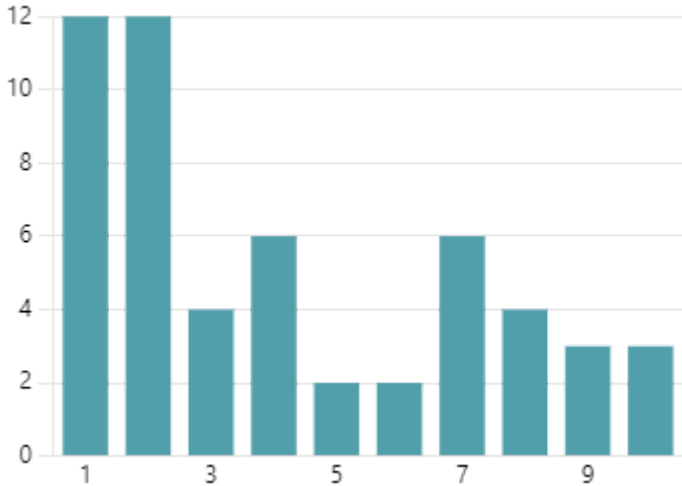
12. Following the statutory community engagement process for major service change.

2.98
Average Rating



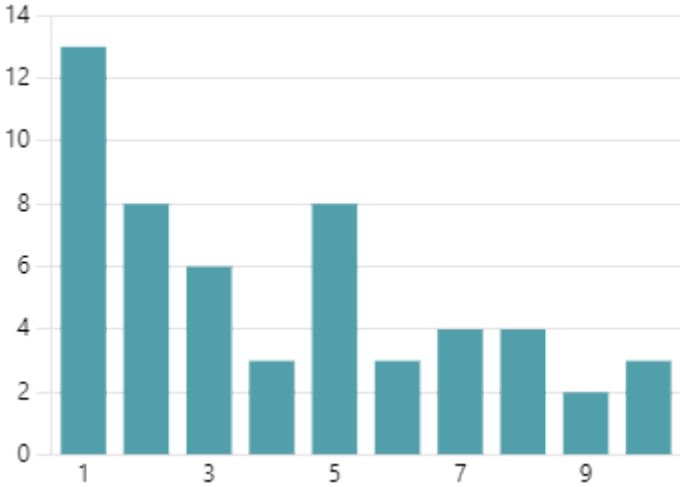
13. Communicating and engaging with relevant groups and communities, including vulnerable or less heard from groups.

4.17
Average Rating



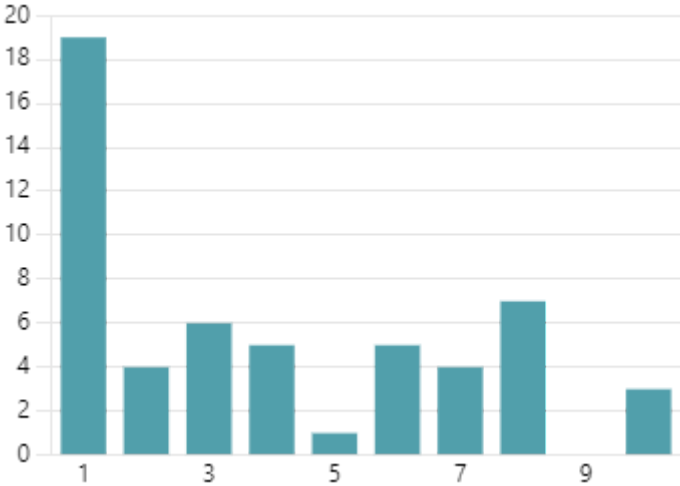
14. Using digital methods to meaningfully engage with people.

4.17
Average Rating



15. Managing difficult conversations or challenging behaviour with stakeholders.

3.96
Average Rating



16. Please tell us what would help build confidence in the areas that scored low on the scale.

29
Responses

Latest Responses
"On the job training"

10 respondents (34%) answered **training** for this question.



17. Have you read the NHS Highland Engagement Framework

● Yes	14
● No	38
● I don't know	3



18. Have you used elements of the Engagement Framework to support your work? Like the Engagement Cycle, Levels of Engagement and Engagement Values

● Yes	7
● No	40
● I don't know	7



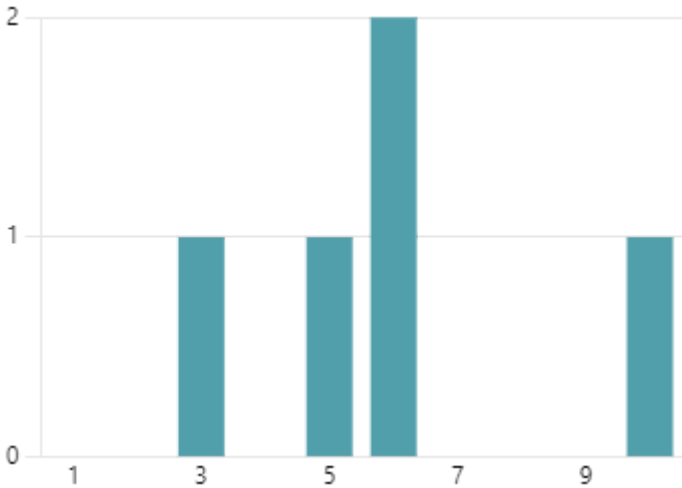
19. Have you used any of the templates or resources, like the Planning Tool or the 6 Tips to Improve Involving People Skills guide?

● Yes	4
● No	48
● I don't know	3



20. If you said yes to any of the answers above, please tell us how helpful was the Framework, training and resources are or were, in supporting your work.

6.00
Average Rating



21. Please use the space below to tell us more about this,

9
Responses

Latest Responses

"Not reached a point yet where I can apply the resources but ...

5 respondents (56%) answered **not aware** for this question.

Word cloud content:

- not aware
- work of our department
- actually work
- day workload
- day to day
- Clear guidance
- aware
- documents or resources
- probably be integrated
- resource
- work fr
- community

22. Overall, since the same time last year, how do you feel community engagement is being delivered by NHS Highland

- Better than this time last year 5
- About the same as this time last... 10
- Worse than this time last year 4
- I don't know 36



23. Have you received any advice or help from the Communications and Engagement Team in relation to engaging with patients, communities or staff?

- Yes 8
- No 39
- I don't know 7



24. How helpful was the support or advice you recieved

- Very helpful 6
- Somewhat helpful 3
- Neither helpful nor unhelpful 5
- Somewhat unhelpful 0
- Very unhelpful 0



25. Have you attended training or information sessions about engaging with people, using the framework or Equality Impact Assessment and Engagement?

- Yes 3
- No 51
- I don't know 1



26. Tell us more about your experience, what was good and what would be helpful for the future?

5
Responses

Latest Responses

2 respondents (40%) answered **training** for this question.

current role Comms 9
 tools past **training** Carbon
 positive experience helpful Footpri
 refresher

27.

6
Responses

Latest Responses
