



**Health and Social Care  
Strategic Commissioning Plan  
2023-2026**

**Statement of Engagement**

## Summary

This report is a summary of the engagement activities carried out across Angus to develop the Angus Integration Joint Board's (IJB) refreshed Strategic Commissioning Plan (SCP) for 2023-2026. This includes a description of the methodology used and feedback received in relation to engagement activities to review:

- the SCP 2019-2022.
- the draft SCP 2023-2026.

Feedback has been used to inform the final version of the SCP 2023-2026.

## Methodology

### Review of SCP 2019-2022

The engagement took place over 6 weeks commencing on 29 July 2022.

A number of methods were used to engage with stakeholders, these included:

- Online surveys.
- Online discussions.
- Distribution of paper copies.
- Preparation online and paper Easy Read versions of the questionnaire.

The survey was available in large print and different languages on request.

A survey was hosted on the AHSCP website. The link was shared via Social Media (reach 13,052) and emailed to the following groups who were all asked to share with their available networks:

- All HSCP staff.
- IJB members.
- Angus HSCP Strategic Planning Group.
- Angus HSCP Staff Partnership Group.
- Elected Members, MSPs, MPs.
- NHS Tayside and Angus Council.
- Voluntary Action Angus (VAA) - Third Sector Interface who shared with 1151 organisations many of which support individuals with protected characteristics.
- Independent Sector organisations.
- Angus Community Planning Partnership.
- Locality Improvement Groups.
- Angus Council Communities Team who shared with Community Councils.
- Local Churches.

Posters were also prepared and displayed in local Health Centres, Leisure Centres, Museums and mobile libraries.

People were asked for their views on:

- Vision.
- What matters in relation to health and social care.

- Good and bad experiences of health and social care.
- Asking the people of Angus to make a commitment to make a difference to their health and wellbeing, if they are able to do so.
- The Angus HSCP strategic priorities.

We also engaged with staff to clarify the values of Angus Health and Social Care Partnership (AHSCP).

## Results

231 responses were received from people who use or deliver health and social care and support across all four localities of Angus. This included easy read responses.

The majority of responders were white females and in the 45 – 64-year age group. 44% of responders told us that they had a physical or mental health condition or illness lasting, or expected to last 12 months or more.

### 1. Experience of health and social care services in Angus

We asked people to describe their experience of adult health and social care services within Angus? The top four responses were:

- I work in frontline health and social care as part of Angus HSCP (38%)
- I currently/have previously received supports or services (24%)
- I provide care to someone (18%)
- I do not have any close experience of social care or support but have an interest in health and social care (12%)

### 2. What matters to you in relation to supporting you and your family's health and social care needs?

The top three responses related to:

- Access to services (64%)
- Quality of care (21%)
- Empowering people (9%)

### 3. Good and bad experiences of health and social care

Examples of good experiences were described from a range of services for example, GPs, community physiotherapy, Out of Hours, stroke rehabilitation, Occupational Therapy "adaptations put in place quickly", community alarm and palliative care.

Examples of bad experiences focused on communication issues, delays in accessing services, information sharing between services.

### 4. Vision

We asked people what they thought of the current vision: Working together, developing communities that actively care, promoting wellbeing and creating the best possible health and social care across Angus. 43% of responders said they liked it. Feedback received suggested:

- "It lacks definition and they were not sure what it meant".

- “It was too woolly and needs to more specific”.

## **5. Joint Commitments**

We explained that Angus HSCP make a commitment to make a difference to people's health and wellbeing. We asked for views about asking the people of Angus to make a commitment to make a difference to their health and wellbeing if they were able to do so. 81% of responses suggested this was good idea.

## **6. Priorities**

We asked for feedback about the priorities in the plan.

Priority 1: Improving health, wellbeing and independence

Priority 2: Supporting care needs at home

Priority 3: Integrated Primary Care and community responses

Priority 4: Integrated pathways with acute and specialist providers for priorities in care.

Over 90% of responders told us that each of the priorities were important but the language used to describe the priorities required to be simplified.

## **7. Other priority areas:**

We asked if there were any other priority areas that people felt we should focus on. 42% felt there were other areas such as:

- GP surgery availability
- Workforce/recruitment
- Transparency of planning/implementation of change
- Make best use of the resources we have
- Communication
- Investment in services
- Community mental health services

## **Our response to what people said.**

We have read and listened to the feedback from people who use or deliver health and social care and support and amended the content of the First Draft of the SCP where appropriate by:

- Refreshing the Angus HSCP vision
- Simplifying the strategic priorities
- Making the language simpler and used illustrations to make information more easily accessible
- Ensured the new SCP maintains a focus on the areas that matter most to people for example, reducing inequalities, workforce, developing a series of joint commitments, mental health and wellbeing
- Providing examples of what has been achieved by Angus IJB.
- Including a short, visual summary of the plan on one page.

## **Engagement on the draft Strategic Commissioning Plan 2023 – 2016**

The engagement took place over 6 weeks commencing on 6 March 2023.

A number of methods were used to engage with stakeholders to inform the development of the new Plan. These included:

- Online surveys.
- Online discussions.
- Face to face meetings in supermarkets where we had conversations with approximately 120 people all of whom were either invited to complete the online survey or given a paper copy of the questionnaire.
- Distribution of paper copies.
- Preparation online and paper Easy Read versions of the questionnaire.

The survey was available in large print and different languages on request.

We also tested following the ANGUSalive mobile library on two routes and spoke to 20 people.

The survey was hosted on the HSCP website and the link shared via Social Media and emailed to the groups listed in the previous section.

The total reach of the Facebook posts was 11,072.

Poster were prepared and displayed in local Health Centres, Leisure Centres, Museums and mobile libraries.

## **Results**

124 responses were received from people who use or deliver health and social care and support across all four localities of Angus. This included easy read responses.

The majority of responders were white females and in the 45 – 64-year age group. 44% of responders told us that they had a physical or mental health condition or illness lasting, or expected to last 12 months or more.

### **1. Plan on a Page**

We asked people what they thought of the 'Plan on a Page'. The majority of people (65%) liked it.

Comments received included:

"I think it is an excellent overview of the plan, I particularly like the inclusion of the need for courageous and innovative working right at the start"

"I found the plan on the page more engaging and easier to follow than the pages of text so I found this helpful in understanding the plan"

"It looks and sounds good but we've heard it all before and nothing really happens. It's fine to talk the talk but actions speak far louder than words"

### **2. Vision**

We asked people what they thought of our refreshed vision. 73% of responders said they liked it. This is an increase of 30% compared to our previous vision. There were concerns as to how this would be achieved. For example:

"Although I like the vision, I do wonder how likely it is that it can be achieved"

"Resources need to be made available to allow staff to do this"

"I agree that this vision is fantastic but how will this be achieved"

### **3. Values**

We asked people for their feedback about our values: caring, compassionate, person-centred, honest and respectful.

81% of responders liked the values.

### **4. Joint Commitments**

73% of responders liked the infographic. Comments included:

"Excellent message in the expectations of the community, need to get the message out there."

"I love this."

"I think we have some fantastic facilities in Angus through ANGUSalive but the struggle is getting people to engage initially in the process. Hopefully with social prescribing this will be addressed."

"It's good to make people realised that they have a commitment (and control) to help themselves to help themselves where possible."

### **5. Angus Care Model**

73% of responders liked the refreshed Angus Care model infographic. Comments ranged from:

"This is a very busy image but I think it clearly shows the services that are available. However, some people may not know how to access some."

"Easy to interpret."

"Nothing to add but this highlights the multitude of services involved in delivering healthcare in Angus."

### **6. Priorities**

We asked for feedback on the refreshed priorities:

Priority 1: Prevention and Proactive Care

Priority 2: Care Closer to Home

Priority 3: Mental Health and Wellbeing & Substance Use Recovery

Priority 4: Equity of Access and Public Protection

The majority of people liked the refreshed priorities with only 3% indicating they did not like them.

### **7. Where we want to be by 2026**

71% of responders said they liked our descriptions of where we want to be by 2026.

Some responders were concerned as to whether the plan was achievable. "I hope and trust that this can be delivered in the timescale. In the unlikely event that it cannot or it starts to slip, let the people know, as open and direct communication will help."

"Very sensible."

"I think it is ambitious and hopeful, which is personally what I would like to see as a member of staff and as a citizen of Angus."

## **8. Actions**

63% of responders liked the actions.

## **9. General comments about the Plan**

We invited general comments about the SCP.

"This is an excellent plan which will hopefully allow the creation of a realistic delivery plan. The emphasis on honesty with the public is good. Effective involvement with people in Angus will be key to satisfaction and understanding of changes."

"Considering the current economic climate. I think you have done well to manage the limited resources to achieve the best possible outcome."

"They all sound commendable but are they realistic and can you deliver? That is the challenge within the current financial climate. Hard decisions need to be made, services streamlined whilst training and supporting staff to manage services."

### **Our response to what people said:**

We have read and listened to the feedback from people who use or deliver health and social care and support and amended the content of the First Draft of the SCP where appropriate by:

- Clarified the role of Voluntary Action Angus as the Third Sector Interface.
- We made changes to the Angus Care Model infographic based on feedback and we are in the process of adding links within this infographic so people can access more information about specific services.
- We have been asked to improve the range of training provided to staff. This action will be addressed through the Angus Workforce Plan 2022-2025.
- Angus Health and Social Care Partnership (HSCP) will continue the conversation with the people of Angus as we deliver the ambitions of the SCP.