### Consultation on the revised Health and Wellbeing Strategy 2014

Healthwatch West Berkshire has been asked to lead the consultation on the revised strategy. Although they will lead the process, this will be with the full participation of the other Health and Wellbeing Board partners, namely the Council, CCG and Empowering West Berkshire.

The consultation on the revised strategy is due to take place between 29th September and 27th October. Given this tight timescale it will be important to have as much of the arrangements in place in advance, as possible.

The Health and Wellbeing Strategy covers a large amount of ground, from developments in the health and social care economy through to the variety of social determinants of health and the interrelations between them. This will need to be presented to make it as accessible as possible, but there is still likely to be only a minority of people who will want or be able to engage with it in its totality. There are likely to be more, however, who have a specialist interest in a particular aspect, for instance related to a particular client group or condition (e.g. mental health users, carers, young children, people with different sorts of disabilities or long term conditions). While ensuring the consultation is open to everyone, it will be easiest to reach the latter group (those with a 'specialist interest') through organised groupings, which includes both third sector organisations and statutory bodies. The consultation therefore needs to include the following elements:

- Consultation open to all, making it easy for anyone, anywhere to contribute
- Targeted consultation aiming to reach those with particular knowledge and interests particularly including those suffering the worst health and wellbeing and in most need of support. This should also include those with an interest in, and able to promote, positive health, such as sports and activity related organisations.
- Engagement with those who have, or could be enabled to have, a good overview of the strategy as a whole

Inevitably there will be some overlap between the categories, but they suggest the following sorts of activity:

#### Consultation open to all:

- The opportunity to contribute online via a website Healthwatch can offer specific website page carrying information and tailored surveys.
   Healthwatch to provide links to the page for embedding in the websites of partners. Provision of information about the strategy and issues via e-bulletins, social media (Facebook and Twitter) that can be re-sent through partner websites, partner newsletters. Local press, t.v. and radio can also be used to publicise information.
- A number of public meetings throughout the district of perhaps one and a half to two hours each. Given the time scale this could be two per week in the first two weeks [4 events in different locations] of the consultation

- period to allow a sufficient time for amalgamation of resulting data collection.
- Feedback through existing, regular activities e.g. Healthwatch outreach.

### **Targeted consultation:**

- Written invitation to groups and organisations to respond to the
  consultation. As well as the voluntary and community sector, this would
  include specific parts of health and local government (e.g. housing, leisure,
  environmental health, NHS trusts, public and private social care providers)
  as well as other sectors such as criminal justice and the business sector.
- Meetings with particular groups and individuals. Ideally these would use the opportunity when groups were already meeting, and would consist of a short presentation on the strategy followed by discussion.

## Informed engagement on the strategy as a whole:

• A longer session (maybe a half or full day) where a wide range of issues and the interrelationship between them can be explored before coming to a measured conclusion on the strategy as a whole. This could include a cross section of those with a specialist interest as well as a number of people who were not approaching it from any particular 'angle' such as representatives of patient participation groups or interested members of the general public. This might be best held in week three following the public meetings as online responses will have already been received and the public meeting responses will also be available.

Early agreement will be needed between the partners as to who will take responsibility for individual elements of the consultation process so that the process as a whole can be lead and co-ordinated by Healthwatch.

It is assumed that the Council will need to take the lead on the provision of information about the plan and decide whether there should be an 'easy read' summary. Healthwatch is however happy to take whatever initiative is required and can produce template/s for responses.

### **Draft Practical Operational Schedule**

## Sept 5<sup>th</sup> onwards:

- Healthwatch to book public venues for meetings at locations agreed by management board for Consultation open to All
- Set up web page for consultation information
- Set up social media FB and Twitter
- Prepare press releases
- Prepare information releases for all classes of potential participants
- Prepare database and setup contact with partners for forwarding information via their own databases

# September 25<sup>th</sup> onwards

- Set up online surveys
- Set up links and test same for partner websites
- Contact papers to arrange press releases on 29<sup>th</sup>
- Arrange attendees for radio interview

### September 29<sup>th</sup>

- issue press releases
- make sure radio interviews attended
- launch consultation page on website
- send out final e-bulletin information to all partners for onward transmission
- launch surveys

# Week beginning 6<sup>th</sup> October

- two public consultations Consultation Open to All
- Targeted consultations with interested groups
- Healthwatch Outreach and other partner outreach engagement

## Week beginning 13<sup>th</sup> October

- two public consultations Consultation Open to All
- Targeted consultations with interested groups
- Healthwatch Outreach and other partner outreach engagement

# 20<sup>th</sup> October – Informed engagement event

21<sup>st</sup> October – last day for submission by partners [to Healthwatch] of any reports for amalgamation into draft consultation documents.

 $22^{\text{nd}} - 26^{\text{th}}$  October amalgamation of data and information into reports by Healthwatch for L Wyman

October 27<sup>th</sup> – End of consultation and delivery of reports

- Nov 6th the final draft will be discussed again with the Management group
- November 18<sup>th</sup> Graphics to format the document
- November 18th for agreement at the November 27th Board