



HOME FIRST PROGRAMME



Working together to stay well at home

**Communication, engagement
and participation framework
& action plan**

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Reader information box

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1. Introduction to Home First

Home First is a strategic priority of the Moray Integration Joint Board aiming to avoid hospital admissions and attendances where appropriate and minimise hospital delayed discharge.

Operation Home 1st is the next phase in the health and social care response to COVID-19 across Grampian to create the capacity and pathways required to sustain care delivery through winter, including any further waves of COVID-19.

Home First principles include:

- Building on the initial response
- Maintaining agile thinking and decision making
- Retaining our ability to respond to COVID-19 related demand, and winter surges in demand
- Using a home first approach for all care where that is safe to do so
- Utilising available technology to widen and ease access to services
- Avoidance of admission
- Removing delays for discharge from hospital
- Maintaining safe services for those shielding
- Removing barriers between primary and secondary care, with as much care as possible in communities

Work is being co-ordinated and driven at pace by the 3 health and social care partnerships and acute services.

The Moray programme of work sits within the Grampian framework, supported by local clinicians, practitioners and managers. Together with the Dr Gray's Hospital Transformation Programme it also makes up the Moray Transformation Programme.

2. The Moray programme approach

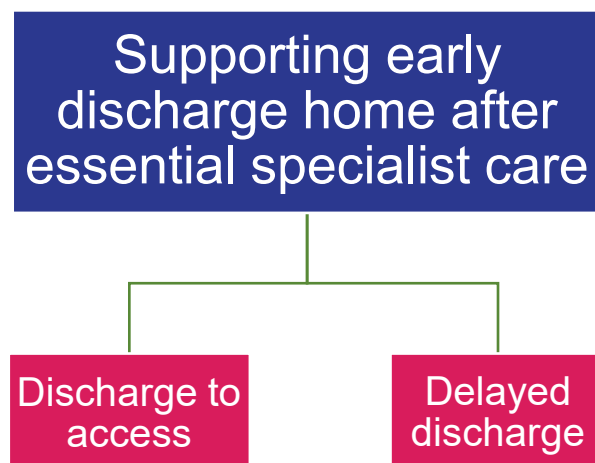
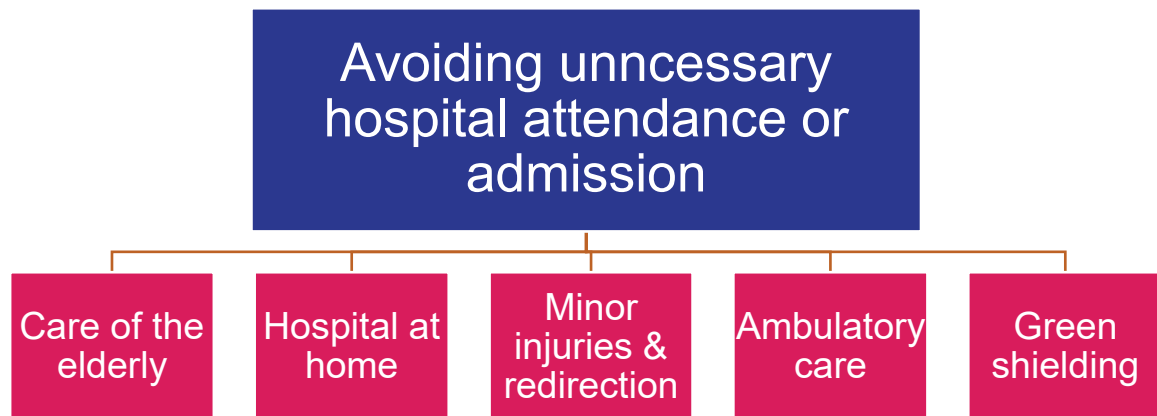
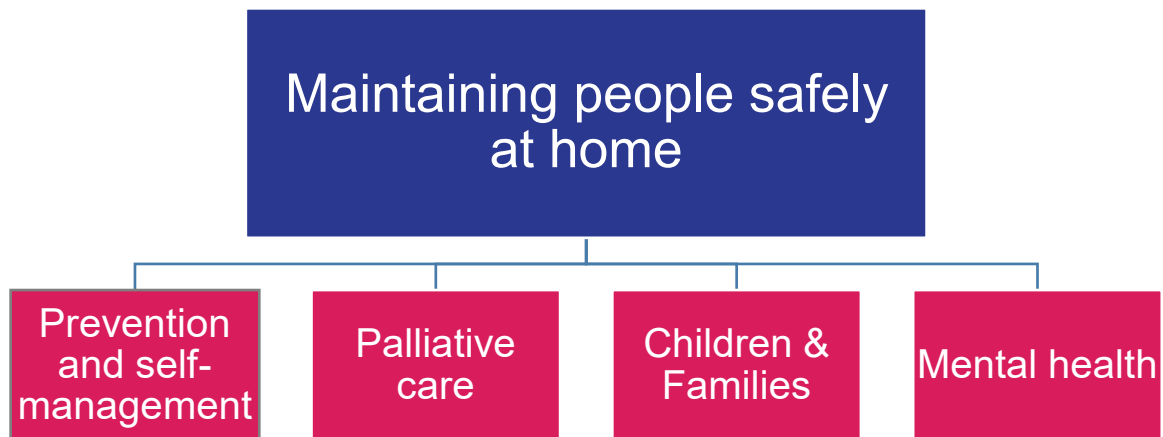
The 3 key priorities for the Moray Home First programme are:

1. Maintaining people safely at home

2. Avoiding unnecessary hospital attendance or admission

3. Supporting early discharge home after essential specialist care

11 work streams were identified during the design phase of the programme. Lead officers report to the Delivery Group on the action of the working groups.



3. Purpose of the framework

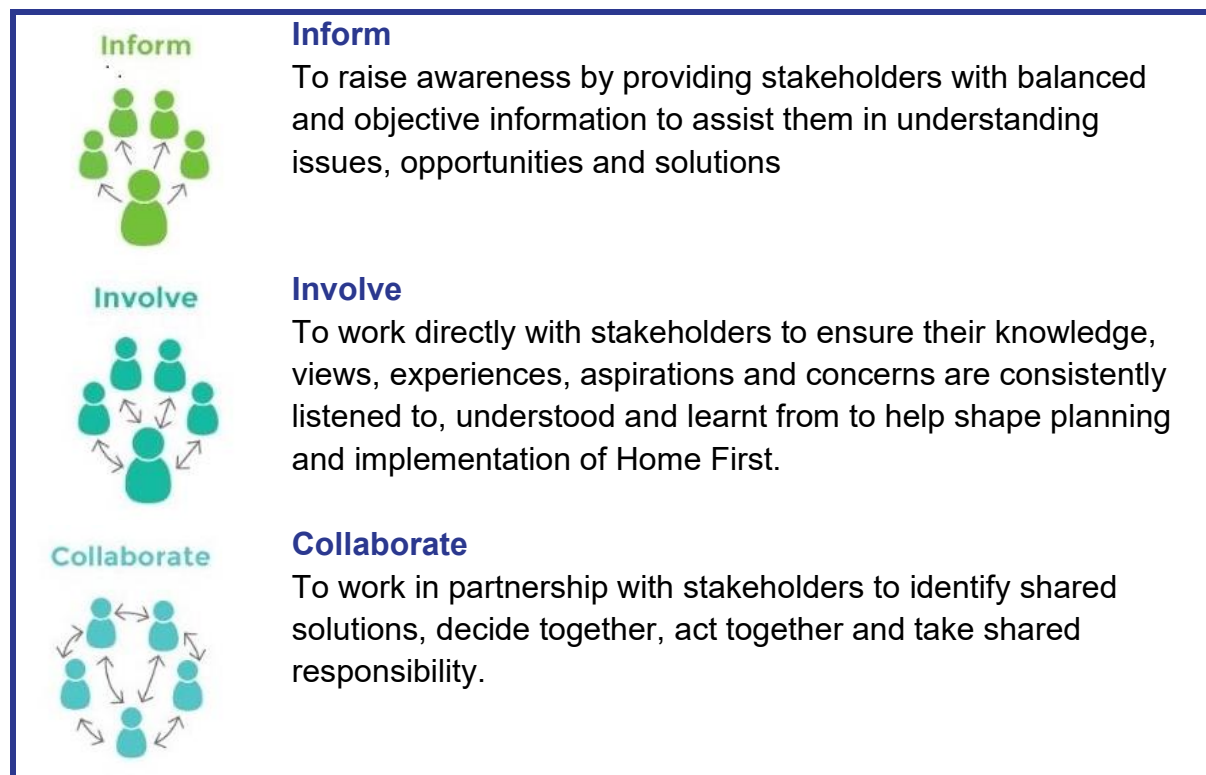
This framework sets out the approach to communicating the Home First programme across Moray and engaging in an open and honest manner with patients, service users, staff and stakeholders to inform its implementation.

It is directed by the principles and approaches set out in the Moray Integration Joint Board's Communication, Engagement and Participation Framework 2019-2022 and will align to the Moray Transformation Board's Communication and Engagement Strategy to ensure consistency of approach with the DGH Transformation Programme and maximise opportunities for whole system working.

4. Communication and engagement objectives

Effective communication, engagement and active participation is essential to ensure our health and social care services are fit for purpose and lead to better outcomes for people.

Our objectives are:



Our action plan provides an outline of activities to achieve the objectives. This is a live document and its development will be on-going to reflect the delivery of the programme.

5. Narrative and key messages



It is crucial that all those involved in delivering the transformation required by Home First are able to clearly articulate why change is needed, what this will mean for stakeholders and how they can contribute.

A central narrative will help to achieve this.

The key messages of Home First are:

- Health & Social Care Moray is committed to delivering sustainable services that provide the best care and support for people in Moray
- We need to think differently about how we deliver services to meet the changing needs of our population and the challenges of the COVID-19 pandemic
- By taking a whole system approach we can plan our services to deliver the maximum benefits to residents
- We are committed to helping people stay safe and well at home and not need to attend or stay in hospital if they can be treated at home. When they do need to be admitted we will support them to leave hospital as soon as they are clinically ready for discharge
- Home First will drive the changes we need to continue the shift of health and social care systems to offer more person-centred alternatives to hospital
- Resources will require to follow the patient
- Home First will be the default position to reduce unnecessary hospital attendance, admissions and delayed discharges.

6. Our stakeholders

We have a range of audiences to communicate and engage with and recognise that their requirements will be different. We need to use different ways to communicate with and involve them. This will help us increase the impact of our work. We will continue to develop our understanding of the “asks” or expectations of our stakeholders.



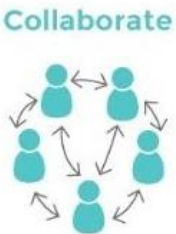
For the purposes of this document, broad stakeholder groups can be defined as:

- **Service users, patients and unpaid carers** – These are people who currently use services and those who directly support them
- **Health & Social Care Moray staff** – all partnership staff working in services delegated to the Moray Integration Joint Board

- **Other health and care professionals** – colleagues working in primary care and acute care and in the wider system across Grampian
- **Service providers** – Providers of health and social care services and support in the Third and Independent Care Sectors which may or may not be commissioned
- **Community** – Voluntary groups and organisations which support people in their localities to achieve improved health and wellbeing outcomes
- **Special interest groups** – This includes people whose circumstances mean they meet one or more of the protected characteristics of the Equality Act 2010 or could find it harder than the general population to access services
- **General public** – People who could potentially use health and social care services in the future
- **IJB members** – Voting members, professional advisors and stakeholder advisors representing patients, service users, carers, the third sector and the workforce.
- **Elected representatives** – community councillors, councillors, MSPs and MP
- **Media** – Local, regional and national media (both online and offline) that help us to tell our story and communicate with the wider public.

7. How should we communicate and engage?

We will use a variety of methods to help us meet our objectives.

OBJECTIVE			
PLEDGE	“Here’s what’s happening.”	“Here’s the issue – what ideas do you have?”	“Let’s work together to help shape and improve our services and achieve positive change.”
EXAMPLE METHODS	<ul style="list-style-type: none"> • Web site • Social media • Newsletters, briefings • Media releases • Video messages 	<ul style="list-style-type: none"> • Meetings • Focus groups • Workshops • Surveys & questionnaires • Webinar 	<ul style="list-style-type: none"> • Delivery groups • Staff forums • Public forums • Community forums • Provider forums

8. Framework delivery plan

The delivery plan is attached as Appendix 2.

9. Budget and resource

Communication and engagement activity for Home First will require to be met from within current resources.

10. Monitoring and evaluation

The Delivery Group will monitor delivery of the action plan in terms of:

- Planned and actual activity
- Feedback from stakeholders
- Media analysis (reach, tone, content)
- Website statistics
- Social media reach and feedback

Engagement activity will be continually evaluated to assess whether we are meeting our objectives, reaching all the people to need, developing our knowledge and gathering useful information.

We will continually monitor progress against the good practice principles of the National Standards for Community Engagement and act on lessons that emerge during the process.

11. Governance and risks

The Moray IJB and Moray Transformation Programme Board oversee the Home First Programme.

The Moray Home First Delivery Group will scrutinise delivery of this framework to ensure appropriate stakeholder communication and engagement is considered, planned, delivered and reviewed for all elements of the programme.

Communication and engagement risks will be held on the programme risk register.

APPENDIX 2 – Action log

Objective 1: Inform – to raise awareness of the programme by providing stakeholders with balanced and objective information to assist them in understanding issues, opportunities and solutions					
	What	How	Method	Timescale	Progress
1.1	Establish a single point for information	Create a HF section on HSCM website	Website	Oct	Completed
1.2	Develop HF brand	Develop communication toolkit - narrative, principles, FAQ, info graphics, logo	Digital pack	Oct-Dec	Logo and principles agreed at pan-Grampian level
1.3	Provide information to internal stakeholders	Produce regular HF updates Provide updates to Workforce Forum and Partnership Forum	Email - cascade	Aug-Dec	11 staff briefs issued to date.
1.4	Provide information to external stakeholders	Promote agreed narrative, including submission of articles to partner organisations	Social media Newsletters Media releases Video messages	Oct-Dec	Awaiting direction from Grampian programme
1.5	Provide information to decision makers	Produce regular HF briefings and updates for IJB, elected members	IJB reports Members briefings	Oct-Dec	HSCM CO weekly updates circulated
1.6	Develop a HF social media plan	Support workstream leads to engage with social media to boost penetration of HF messaging	Social media	Oct	Awaiting direction from Grampian programme
1.7	Celebrate success	Identify and share good news stories from all stakeholders	Website Social media Videos	Ongoing	
1.8	Keep stakeholders updated on the difference HF is making	Performance reporting	All channels		

APPENDIX 2 – Action log

Objective 2: Involve – to create understanding by engaging with stakeholders throughout the programme to ensure that issues, aspirations and concerns are consistently understood and considered

	What	How	Method	Timescale	Progress
2.1	IJB engagement	Provide presentation and Q&A at Board development session	TEAMS	Oct	Development session held on 10.09.20
2.2	Staff engagement	Develop a programme of HF engagement sessions	TEAMS sessions	Oct-Dec	2 sessions held in December. More to be planned
2.3	Third sector engagement	Identify opportunities in partnership with tsiMORAY to engage with Health & Wellbeing Forum	Virtual	Oct-Dec	Agenda item at Forum sessions
2.4	Unpaid carers engagement	Host virtual learning events in partnership with Quarriers	Virtual	Oct-Dec	Not yet progressed
2.5	Independent sector engagement	Host virtual learning events	Virtual	Oct-Dec	Not yet progressed
2.6	Community engagement	Seek opportunities to engage with existing community groups and communities of interest Host Facebook live discussion event Host virtual focus groups	Virtual	Oct-Dec	Not yet progressed
2.7	Primary Care engagement	Engage with Interface Group	Virtual	Oct-Dec	Presentations and discussions led by Project Manager

APPENDIX 2 – Action log

Objective 3: Collaborate - to work in partnership with stakeholders to identify shared solutions, decide together, act together and take shared responsibility.

	What	How	Method	Timescale	Progress
3.1	Review membership of Delivery Group	Support the recruitment of a Third Sector liaison to the Delivery Group Ensure workforce (NHS and Local Authority) representation		Oct-Dec	Third Sector liaisons contribute to the Delivery Group
3.2	Review work streams	Support the establishment of Third Sector Working Group reporting to the Delivery Group		Oct-Dec	Group established with support from Locality Manager
3.3	Review membership of work streams	Review and expand membership of work stream groups to reflect a wider range of stakeholders		Oct-Dec	Additional members recruited to the Prevention & Self-management workstream