North Ayrshire Health and Social Care Partnership



Strategic Commissioning Plan 2022-2030

Development: Supporting Document

Engagement Report

North Ayrshire Strategic Plan Engagement survey feedback summary 2022-2030

Methodology

The main method used to engage with people to enable them to inform the strategic plan was via an online survey. The current covid-19 restrictions have meant there have been very limited opportunities for face-to-face engagement. The survey asked people their thoughts on; our proposed strategic and locality priorities; the actions that we should take to work towards addressing our priorities; and the values that they look for in their health and social care services. Additionally, we facilitated online sessions with our staff and the Care Improvement Network. The data collected via the consultation on the proposals for the National Care Service for Scotland will also inform the strategic plan.

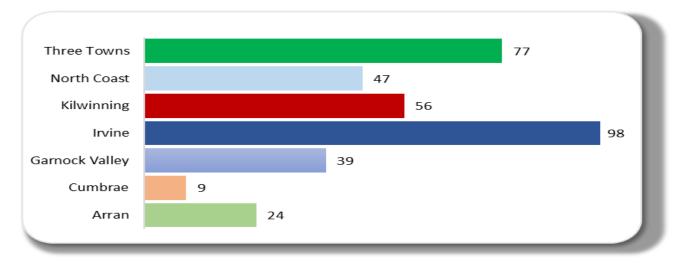
Who took part in the survey?

A total of 240 people completed the survey. The graphic below identifies the type of relationship people have to the HSCP.



Knowledge of localities

We asked people to identify which localities within North Ayrshire they felt they knew best. This was to acknowledge that people participating might not live-in certain localities but have a good knowledge of them.



Identifying local priorities

We asked people to identify their top 3 priorities for their local area. From the responses the top 3 priorities were:

- 1. Improving Mental Health and Wellbeing
- 2. Recovering from the Covid-19 'experience' and tackling the backlog/surge in demand for services
- 3. Reducing social isolation and loneliness

We asked people to tell us if there were health and social care priorities that we hadn't included as part of the list. Some examples include:

- "More access to up-to-date information on local support services, particularly around Self-Directed support and the 4 options available"
- "Ensuring that the people who use services and their carers are supported and empowered to make their own choices about how they will live their lives and what outcomes they want to achieve."
- "Ensuring those with a disability or additional support need are truly included within society and have access to the right support from services in Education, Health and social care."

Our strategic priorities

We asked people to state to what extent they agreed or disagreed with our proposed strategic priorities.

- IMPROVE MENTAL HEALTH & PHYSICAL HEALTH AND WELLBEING 87.3% of respondents strongly agree with this being a priority.
- PROVIDE EARLY & EFFECTIVE SUPPORT 88.9% of respondents strongly agreed or agreed with this priority.
- ENABLE COMMUNITIES
 82.9% of respondents strongly agreed with this being a priority.
- TACKLE INEQUALITIES

85.4% of people strongly agreed or agreed with this being a priority.

• DEVELOP AND SUPPORT OUR WORKFORCE 86.3% of people strongly agreed with this being a priority.

Additional Comments

"All are great priorities but if we enable the workforce, they are then more capable of providing better support to the local community."

"Social isolation is often associated with elderly people, however I work with many children and young people whose life's are impacted by isolation and loneliness."

"I think these are all generally good priorities but as they are quite broad, how they are implemented is more important especially with limited resources. For example, I think the idea of having more community-based services is great in theory but not if we lose capacity or create longer waiting times by de-centralising services."

Our partnership values

We asked participants to identify three values they look for in people who work in health and social care. The top three answers were:

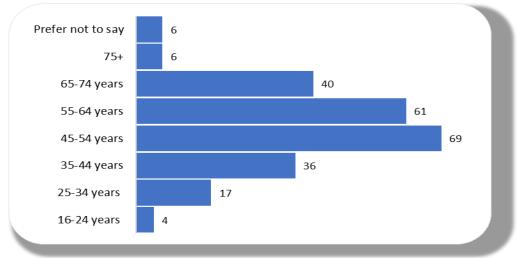
- Caring
- Empathy
- Respect

Who took part in the survey?

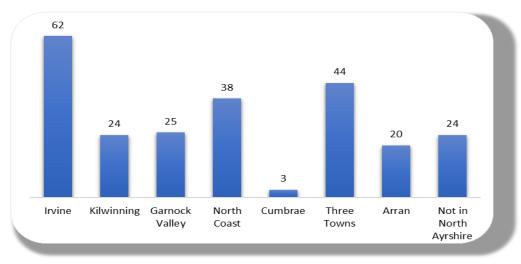
We asked people some personal questions because it is important for us to recognise the diversity of people in North Ayrshire. By providing this information, we can gain a better understanding of the needs and aspirations of diverse and often under-represented groups.



Response by age:



Respondents by locality:



Responses by Disability

