Results of Engagement Survey
Thank you to those providers who contributed to the recent Engagement Survey. We received 55 responses and have summarised the key findings below.

There was a good representative spread of respondents in terms of locality and service delivery.

Bulletin
89% of respondents receive the Provider Bulletin and of those 94% said it was useful and 96% felt it was in an appropriate format. While the majority of provider felt it is ok comments for future editions included:

- It could be used to advertise particular needs
- It could be broken down into set headings to make it easier to navigate
- It needs to continue to be brief and to the point.

Providers told us that key topics of interest for future editions include:

- Legislation and changes in regulations
- Practice, processes and procedure updates
- Commissioning intentions
- Training

Engagement
In relation to engagement events, the majority of respondents felt that events should be structured by service type. 75% felt this should be client type (providers could indicate responses in both categories).

Providers told us that key topics of interest for future events include:

- Care Act (96%)
- HAS Practice (97%)
- Trading Standards updates (67%)
- CQC Updates (91%)
- Training (98%)

This indicates that the recent sessions, and planned November sessions, have included topics which are of interest to providers.

Other proposals for future topics put forward by respondents include:

- Sector led improvement
- Safeguarding and DOLs
- Commissioning opportunities

Participation
Almost all respondents would like to see joint engagement events to include CQC, CCGs, ICG, Care & Support and Skills for Care.
We explored the reasons which impact on providers’ ability to attend engagement events. Respondents told us the key factors were:
- Time away from the service (77%)
- Location of events (79%)
- Relevance of topics/speakers (73%) (this needs to be explored further as it does not correlate with the comments in relation to topics of interest)
- Timeliness of information (56%)

Comments from providers included:
- Work based pressures
- Planned to attend but hadn’t booked, then the session was cancelled
- Earlier notification of the dates, agenda and more detailed description of topics.

In exploring future engagement methods respondents told us they wanted:
- Earlier notification of dates (87%)
- Different locations (81%)
- Shorter sessions (84%)
- More bulletins (55%)
- Webinars (55%)
- Smaller groups (84%)
- To still have drop in surgery (94%)

Comments included:
- I thought the session I attended was useful and I find it disappointing that colleagues cannot find the time to attend. Both the Selby sessions have been on Fridays which can be a difficult day so maybe something midweek might be more suitable.
- Run the events, sometimes people maybe are coming, they just haven't confirmed. I think so many have been cancelled now providers doubt they will go ahead and if run would build up over time as providers confidence in them grew and word spread, providers feeling they missed out not being there.
- I think the events need to be a morning OR afternoon session maximum. Going over lunch means too much time out of the office so 3 hours max is preferable. Try the alternatives eg webinars - it also means that if you miss the event you can watch at a later date.
- The addition of a provider request, so that we, the providers of the service can suggest agenda items for future sessions. Providers need information on topics which are covered by the bulletins and arranged sessions, but there are always topics which are of concern to providers but are not addressed.

**What we are doing:**
We have started to book venues for next year so that a full programme can be made available, which will allow providers to hold the date.

Initially the sessions will be held in main locations until we are able to better define what providers want in terms of accessibility to events.

Future sessions will be shorter and time allocated to cover areas of interest based on service type.

We will produce bulletins on a more regular basis, with areas of common interest and separate sections aimed at domiciliary care (including supported living), care homes, non-regulated and voluntary sector.

We are working with our colleagues in ICT to trial the use of webinars. This may be impacted by the connectivity of providers, however, we will test the model to identify whether providers feel it is of benefit.

We will continue to hold the surgery sessions. However, this will mean that the NYCC staff attending will not be taking part in the discussions sessions, subject to timing.

We will identify a more structured way for providers to raise topics and to be more actively involved in delivering sessions and owning the engagement agenda.

While we continue to progress this work we would welcome any additional ideas or comments from providers. If you would like to contribute further please email socialservices.contractingunit@northyorks.gov.uk using the heading Engagement.

The programme of November events is attached.

Thank you again for taking the time to contribute to the survey.