



**Western Health
and Social Care Trust**

Personal and Public Involvement (PPI) Strategy and Action Plan

1 April 2015 – 31 March 2017

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Foreword

Further to the Western Health and Social Care Trust's first Personal and Public Involvement (PPI) Strategy and Action Plan 2012-2015. We are delighted to present the Trust's PPI Strategy and Action Plan 2015- 2017. It has been developed in partnership with the Trust, service users, carers and local community/voluntary groups.

PPI is about giving local people a say in how services are planned, delivered and evaluated. This means that we must fully consult on all plans that are proposed and developed by the Trust and it is important that everyone that we help and support feels that we have listened to them, as we plan and deliver health and social care services. The Trust is committed to ensuring that everyone who needs to and wishes to be involved in the planning, development and evaluation of our services can do so.

The implementation of the Action Plan will ensure service users, patients, communities and the wider public remain at the heart of everything we do and that our services are effective, innovative and centred on addressing the needs of all our community within the Western Trust area.

Finally, we would like to thank all those who use our services, to community/voluntary groups, and to all who have contributed so fully to the development of this Strategy and Action Plan.



Mr Gerard Guckian
Chairman
Western Health and Social Care Trust Board

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Introduction

The Western Health and Social Care Trust recognises the need and right of service users and stakeholders to be effectively and meaningfully involved in all aspects of health and social care service development and delivery.

This Strategic Action Plan 2015-2017 will work to further embed Personal and Public Involvement (PPI) into the culture and practice of Western Health and Social Care Trust services.

It sets out how the Trust will continue to work to enhance the involvement of service users, patients, communities, other stakeholders and partners in the planning, development, delivery and evaluation of its services. Its implementation will ensure service users, patients, communities and the wider public remain at the heart of everything we do and that our services are effective, innovative and centred on addressing the needs of all our service users and stakeholders within the Western Trust area.

What is Personal and Public Involvement (PPI)?

Personal and Public Involvement (PPI) is also known as service user involvement and can be described as:

“how service users; patients, clients and carers (including the public) can have their say about care and treatment, and the way services are planned and delivered”.

PPI places a statutory responsibility to involve people in the planning and delivery of health and social care services. Sections 19 & 20 of the Health & Social Care (Reform) Act Northern Ireland 2009 require that service users and carers are involved in and consulted on:

1. the planning of the provision of care;
2. the development and consideration of proposals for changes in the way that care is provided;
3. decisions that affect the provision of care.

PPI includes a wide range of activities, for example:

- Service user/carers and public involvement in service planning and evaluation;
- Community assessment of health and social care needs;
- Community development principles and processes;
- Patient/client centred care and involvement in their care planning;
- Service user experience feedback;
- Complaints management; and
- Volunteering.

Rationale for PPI

The Department of Health, Social Services and Public Safety (DHSSPS) have identified three key benefits of effective PPI:

- Individual Benefit;
- Public Benefit;
- Organisation Benefit.

The impact of PPI has been demonstrated in a range of areas from:

- efficiency, and effectiveness, where services have been tailored to need;
- reducing wastage and duplication;
- improvements in quality and safety;
- increased levels of self-responsibility for one's health and wellbeing.

Western Trust PPI Aims

The Trust recognises that there is significant benefit and value in ensuring effective PPI as it seeks to provide a responsive, equitable and efficient service.

To ensure that the service is accessible and responsive

The Trust will work to ensure that is open to listening to the views, opinions, issues and concerns of individuals, groups and communities, based on the principles of integrity, equality and partnership.

To ensure PPI is central to all aspects of Trust activity, is genuine and not a token gesture

The Trust will ensure that the views and opinions of individuals, groups and communities are listened to, respected and considered in the decisions of the organisation. The Trust will ensure everyone who needs and wishes to be involved is facilitated to do so irrespective of culture, language, skills, knowledge and experience.

Ensure PPI is reflected in the Trust's corporate objectives and underlines our commitment to make sure the Trust delivers person-centred care

The Trust will ensure that the involvement of service users; patients, clients, carers and communities is a key priority for the organisation at the highest level and will have clear lines of accountability in place to reflect this.

To ensure service users/carers are informed about and involved in treatment and care

The Trust will provide meaningful, timely, accurate and appropriate information to service users; patients, clients, carers and communities and will ensure that communication is an effective two-way process.

To build capacity and confidence with staff and service users in engagement and involvement activities

The Trust will, in partnership with the community and voluntary sector, actively seek to build the capacity and confidence of individuals to be involved through learning, opportunity and experience.

To help service users/carers develop a sense of ownership of the Trust with what happens now and in the future

The Trust will use a wide range of methods and approaches to involve people and will ensure that staff respect the views and opinions expressed and are skilled in the ways that they will engage with and involve individuals.

Western Trust Commitment to PPI

The Trust is committed to the development of PPI across five key levels:

Level	Examples of Involvement
Level 1 – Individual Level	Service users are directly involved in the planning, delivery and monitoring of their individual care or service either at home, in the hospital or in the wider community.
Level 2 – Service Level	Individuals, families, carers and the community are supported to influence and shape the provision of care and evaluate quality of services provided.
Level 3 – Issue Specific Level	Individuals, families, carers and the community are supported to influence and shape the planning, development, delivery and evaluation of services on specific issues or areas.
Level 4 – Directorate and Strategic Level	Service users, carers, and communities are actively involved in strategy development, including needs analysis, planning, commissioning, action and evaluation that will result in changes to significant areas of service development and provision.
Level 5 – Corporate and Wider Strategic Partnership Level	Communities, stakeholders and partner organisations are actively involved in shaping the corporate and organisational priorities and the overall direction of the Trust.
Feedback at all Levels	Feedback processes on how the Trust has responded to ideas and suggestions, concerns and issues will be

	developed. They will be appropriate to the requirements of the different levels. Each Trust service area will be required to evidence improvement made in response to service user/carer feedback and suggestions.
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PPI within the Western Trust

Key staff within the Trust with responsibility to drive, monitor and develop PPI across the Trust are:

- Director of Performance and Service Improvement – Executive Lead for PPI, providing overall direction and drive for PPI within the Western Trust.
- Trust Non-Executive Director – Chairs the PPI Forum which has responsibility for the on-going co-ordination, development and implementation of the Trust's PPI Action Plan.
- Head of Equality & Involvement – Operational Lead for PPI.
- The Chair of the Western Health and Social Care Trust – Chairs the Trust Governance Committee to which PPI reports are directed.

Western Trust PPI Forum

The purpose of the Trust's PPI Forum is:

- to ensure that service users/carers play a central role in influencing the development and delivery of health care across the Western Health and Social Care Trust;
- to support the Trust Governance Committee in providing assurance to Trust Board that the relevant health care standards relation to PPI are being met;
- to act as a source of expertise and reference point for the organisation on service user involvement related matters.

The Forum comprises senior staff from the Trust Directorates, representatives from Patient and Client Council, the community and voluntary sectors, service users and carer representation.

The PPI Forum has had, since its inception, an approved Terms of Reference (ToR) which is reviewed annually.

PPI Forum Subgroups

During 2014/2015 the following two subgroups were set up to assist the work of the PPI Forum:

1. Training Subgroup

The aim of the Training Subgroup is to establish and maintain an effective PPI training provision which allows all staff to deliver on their statutory PPI obligations.

2. Support & Involvement Subgroup

The aim of the Support & Involvement Subgroup is to provide clear and accessible opportunities for involvement at all levels, facilitating and supporting the involvement of service users, carers and the public.

Strategic Context

The Health and Social Services (Reform) (Northern Ireland) Order 2009 places a requirement on all health and social care bodies to effectively involve local people in plans and decisions about service provision in their area. The Public Health Agency through its regional PPI Forum has developed 5 PPI Standards that were approved by the DHSSPS and launched on 4 March 2015:

- 1. PPI Leadership;**
- 2. PPI Governance;**
- 3. Opportunities and Support for Involvement;**
- 4. Knowledge and Skills;**
- 5. Measuring Outcomes.**

This Strategic Action Plan details how the Trust complies with these Standards, building on the progress made previously to enhance Personal and Public Involvement (PPI) in the planning, delivery and evaluation of its services to support the Trust's new strategic direction in line with Transforming Your Care (TYC).

Standard One - PPI Leadership

Key Objective	Key Deliverables	Timescales & Leads	Progress Update at 31 March 2016
<p><i>HSC Organisations will have in place clear leadership arrangements for PPI to provide assurances that PPI is embedded into policy and practice</i></p>	<p>Named Executive and Non-Executive PPI Lead at Board Level with clear role descriptions and objectives; identified designated PPI Operational Lead and appropriate PPI leadership structure throughout the organisation.</p>	<p>March 2016 Trust Board</p>	<p>Completed</p>
	<p>Review and up-date PPI Strategy and Action Plan in line with regional guidance.</p>	<p>March 2016 Trust Board</p>	<p>Final PPI Strategy and Action Plan submitted for approval</p>
	<p>Review and up-date Consultation Scheme in line with regional guidance.</p>	<p>September 2016 E&I Team</p>	<p>Regional PPI Leads Workshop August 2015 – PPI Leads to agree standard format. E&I Team feedback provided on 15 February 2016.</p>
	<p>The Trust will continue to consider how it ensures that PPI leadership in each Directorate is strengthened, in order to ensure that staff and teams are able to deliver against PPI responsibilities, both at an individual patient care level and also at a more generic service development/change level.</p>	<p>March 2016 All Directorates</p>	<p>In January 2016, E&I Team wrote to all Directors to ensure Directorate buy in. In addition, HSC “Setting the Standards” booklet and the Trust “Have Your Say!” leaflet provided. Will be reviewed annually.</p>
	<p>Consideration will be given to the resources that have been assigned to fulfil PPI responsibilities and the Statutory Duty of Involvement. * (Western Health and Social Care Trust (WHSCT) drafted – pending regional guidance)</p>	<p>March 2016 Trust Board</p>	<p>As noted in the findings of the Public Health Agency (PHA) Monitoring Report the WHSCT already has assigned from within existing resources:</p> <ul style="list-style-type: none"> • Named Executive and Non-Executive PPI Leads at Board level;

			<ul style="list-style-type: none">• A named PPI Operational Lead but this post is only partially allocated to PPI. <p>WHSCT have written to the PHA giving consideration to the resources required to fulfil PPI statutory requirements.</p>
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* Recommendation from PHA PPI Monitoring Report

Standard Two – PPI Governance

Key Objective	Key Deliverables	Timescales & Leads	Progress Update at 31 March 2016
<p><i>HSC Organisations will have in place clear corporate governance arrangements for PPI to provide assurances that PPI is embedded into policy and practice</i></p>	<p>Develop an annual action plan 2015-2017 with defined outcomes that demonstrate the positive impact of PPI.</p>	<p>March 2016 E&I Team</p>	<p>Corporate Management Team (CMT) approval 11 February 2016. PPI Forum 26 February 2016 Final draft to be approved at Trust Governance 30 March 2016 and subsequently Trust Board 4 April 2016.</p>
	<p>Explore development of combined action plan and reporting template for PPI/PCE and Quality Improvement.</p>	<p>December 2016 Medical Directorate, Nursing Governance</p>	
	<p>Produce an Annual Report on PPI demonstrating evidence of compliance with Trust's PPI responsibility and work undertaken to address challenges in this area.</p>	<p>June 2016 E&I Team</p>	<p>PPI Reports discussed at PPI Forum/Annual Report</p>
	<p>The Trust will continue to consider how it can ensure that PPI is regularly placed on Executive and Board meeting agendas. Having PPI as a standing item on the agenda as it pertains to the on-going and daily business of the Trust, will help ensure that it is embedded into the culture and practice of the organisation. *</p>	<p>On-going Trust Board All Directorates E&I Team</p>	<p>Evidence -Trust Governance Committee quarterly meetings - agenda and minutes. Trust Board. Directorates. Senior Management Teams.</p>
	<p>Review and formally record the mechanisms that operate in each Directorate, to ensure clear and transparent arrangements for involvement of service users and carers. Mechanisms and processes for involvement will be checked out with service users and carers to ensure that they are accessible, purposeful and encouraging for service users and carers. *</p>	<p>On-going Trust Board All Directorates E&I Team</p>	<p>PPI section of Directorate Plans. At present a current baseline of all service users groups is being carried out.</p>

	<p>In respect of the PPI Forum the Trust will consider how the advised mechanism to refresh membership could be made more robust, to ensure that service users and carers from across the Trust area of operations are recruited onto the Forum to share good practice and to ensure consistency of approach to meaningful involvement in service developments, etc.</p>	<p>On-going PPI Forum</p>	<p>Terms of Reference – reviewed annually. 1 carer and 3 service users added in 2015/2016 year.</p>
	<p>Consider how to strengthen the influence of the Forum in the work of the Trust Governance Committee, including representation, agenda setting etc. *</p>	<p>On-going Trust Governance representative on PPI Forum. Non-Executive Director Chair.</p>	<p>Governance Lead sits on PPI Forum. PPI Forum is part of the Trust governance structure.</p>

* Recommendation from PHA PPI Monitoring Report

Standard Three – Opportunities and Support for Involvement

Key Objective	Key Deliverables	Timescales & Leads	Progress Update at 31 March 2016
<p><i>HSC organisations will provide clear and accessible opportunities for involvement at all levels, facilitating and supporting the involvement of service users, carers and the public in the planning, delivery and evaluating of services</i></p>	<p>Maintain an up-to-date register of existing and future opportunities for involvement at all levels across the organisation that is accessible by the public.</p>	<p>June 2016 All Directorates E&I Team</p>	<p>Individual Directorates hold information at source on groups relating to their own particular area.</p> <p>A scoping exercise to be completed in each Directorate to scope/update register of all service user groups in WHSCT.</p> <p>Trust to explore online registration on Trust website.</p>
	<p>Support the involvement of service users carers and the public to include:</p> <ul style="list-style-type: none"> • provision of clarity on roles/responsibilities for those participating; • provision of training/support, including advocacy, if required; • use of accessible communications; • good meeting etiquette; • application of HSC Reimbursement Guidelines. 	<p>March 2017 E&I Team</p>	<p>Reimbursement Guidelines have been issued to staff. Available on Trust intranet and internet, and in alternative formats on request.</p> <p>New PPI Forum members undergo induction with Equality & Involvement staff.</p> <p>PPI “Have Your Say!” leaflet widely distributed WHSCT area. Available on Trust intranet and internet, and in alternative formats on request.</p>

			PPI Standards available on intranet.
	Named points of contact for each individual engagement exercise.	March 2017 All Directorates	Pending outcome of scoping exercise of service user groups - named contacts will be identified
	Provision of feedback to those involved on each engagement as standard practice.	On-going All Directorates	At present no way of assessing whether or not staff did provide feedback to those they engaged with. Pending final draft of PPI consultation scheme. Feedback forms provided and with all Directorates.
	Identify any barriers to involvement and develop actions to overcome these.	On-going All Directorates PPI Forum E&I Team	WHSCCT have written to the PHA giving consideration to the resources required to fulfil PPI statutory requirements.
	The Trust will develop a central register of opportunities for involvement which is updated across all Directorates and readily accessible by the public. *	June 2016 Directors E&I Team	A central register of opportunities for involvement across all Directorates will be developed once scoping exercise of all service user groups is completed
	Consider how to most effectively communicate and make accessible the range of its current training materials/resources which support the active involvement of service users/carers. *	On-going PPI Forum	Resources are available in alternative formats. Video Conferencing. Staff awareness of PPI.

	<p>Ensure there is appropriate level of materials and support made available directly to service users and carers who may wish to become involved, be that at an individual level, or in respect of service developments. This could include things such as information on the standards service users can expect from services, how to become involved, what your role could be, etc.</p>	<p>On-going Trust Board PPI Forum Directorates E&I</p>	<p>PHA Training</p> <p>Trust “Have Your Say!” PPI leaflet developed.</p> <p>Material and support available on Trust intranet and website</p> <p>PPI ‘Engage’ Event planned Friday 11 March 2016. Promoted widely across WHSCT via email, intranet etc.</p>
	<p>Feedback to be embedded as standard practice at all levels across the organisation. The Trust needs to consider how it can ascertain if this is being done and to a satisfactory level. *</p>	<p>March 2016 Directorates</p>	<p>Feedback form developed HSC PPI Standards sent to Directors January 2016. Available to all staff on intranet.</p>

***Recommendation from PHA PPI Monitoring Report**

Standard 4 Knowledge and Skills

Key Objective	Key Deliverables	Timescales & Leads	Progress Update at 31 March 2016
<p><i>HSC organisations will provide PPI awareness and training opportunities as appropriate to need, to enable all staff to deliver on their statutory PPI obligations¹</i></p> <p>¹ <i>HSC Reform Act 2009, HSC Guidance on strengthening personal and public involvement in health and social care 09/2007, HSC Guidance for HSC organisations on arrangements for implementing effective personal and public involvement in the HSC 09/2012</i></p>	<p>Ensure basic PPI awareness raising is built into induction arrangements for new staff.</p> <ul style="list-style-type: none"> Continue to provide PPI Awareness training to staff teams on request. Continue to provide PPI Awareness training to student social workers at core induction programme. 	<p>March 2016 Line Managers E&I Team</p>	<p>PHA to deliver E-Learning module developed regionally. Launched 22 February 2016. WHSCT staff have access to training module via E-learning. Email sent out to all staff via E&I Team.</p>
	<p>Ensure compliance with any annually agreed regional targets for the provision of/access to PPI training.</p>	<p>On-going E&I Team PHA</p>	<p>Discussion to be had with PHA post 22 February 2016 about how training will be delivered</p>
	<p>Ensure mechanism is in place to capture up-take of PPI training.</p>	<p>On-going PHA E&I Team</p>	<p>Can capture uptake of face-to-face training but do not have mechanism in place to capture uptake of e-learning training</p>
	<p>Demonstrate service user and carer involvement in the design, delivery or evaluation of PPI training.</p>	<p>On-going PHA</p>	<p>Regional input</p>
	<p>The Trust will ensure that in individual job inductions staff are aware of what PPI is and what their responsibilities are at a general level. This will support and enhance the information provided at the Corporate Induction and also provide an opportunity to direct to further sources of information and training available. *</p>	<p>March 2016 Trust Directorates PPI Lead</p>	<p>Issue PPI leaflets at Induction</p>

	<p>The Trust will build PPI into future job descriptions as a key responsibility and also into staff development plans and appraisals as appropriate to their role. *</p>	<p>September 2016 Human Resources</p>	<p>Plans to be put in place to discuss with Human Resources.</p> <p>PPI to be built into all new job descriptions as a key responsibility.</p>
	<p>The Trust will consider how it plans to take forward the dissemination and roll out of the Regional PPI training programme (once available) across its organisation and how it intends to record up-take. *</p>	<p>March 2016 PHA PPI Forum</p>	<p>In order to roll out the Regional PPI training programme across the organisation and record up-take WHSCT would require either:</p> <ul style="list-style-type: none"> • additional resource from PHA, or • PHA to provide or commission an organisation to deliver the programme regionally. <p>It has been highlighted to PHA recording of information relating to staff who attend the face-to-face training will be undertaken however not possible to record uptake of the E-learning module as access is online and not all linked to e.g. HRPTS.</p> <p>This will be discussed further Monday 22 February 2016.</p>

* Recommendation from PHA PPI Monitoring Report

Standard 5 - Measuring Outcomes

Key Objective	Key Deliverables	Timescales & Leads	Progress Update at 31 March 2016
<i>HSC organisations will measure the impact and evaluate the outcome of PPI activity</i>	Ensure service user and carer involvement in the monitoring and evaluation of PPI activity.	March 2016 PPI Forum	PPI Forum will review Action Plan on a quarterly basis. PPI Forum will input to the annual report
	Demonstrate through the PPI Annual Report: <ul style="list-style-type: none"> • how the needs and values of individuals and their families have been taken into account in the development and delivery of care; • the outcomes/impact (positive/neutral/negative) achieved by using PPI approaches in respect of policy, investments, decisions and service delivery across the organisation. 	June 2016 Directorates E&I Team	On-going
	Ensure that the mechanisms that the Trust employs to record and capture evidence of PPI in practice across the organisation, includes the use of PPI indicators, helping to ensure that good practice is recognised and lessons transferred if appropriate. It should also highlight areas for possible improvement. *	March 2016 Trust Board E&I Team	Reporting template for PPI activity currently being reviewed by E&I Team
	The Trust has in place a PPI monitoring template. Consideration will be given to the mechanism to ensure this process includes a verification element from the recipients of services. This should help to make sure that the perspective of the service user/carer and public feedback is fully integrated. *	On-going PHA PPI Forum	Reporting template for PPI activity currently being reviewed by E&I Team. Annual Verification visit by PHA.
	Senior Management Staff will regularly reinforce the need for PPI considerations to be regarded an integral element of the responsibilities of staff and the organisation, whether operating at the individual care or strategic planning level.*	On-going Managers	Senior Management representatives for each Directorate on PPI Forum. Each Directorate will have PPI in their Directorate Plans.

	<p>The Trust will ensure that PPI is clearly built in as a formal key step in respect of the planning and delivering of care for individuals and also for changes to service, with appropriate checks and balances built in to ensure compliance with the statutory responsibility.</p>	<p>On-going Trust Board</p>	<p>Evidence, e.g., Consultation Section on Equality Screening forms.</p>
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*** Recommendation from PHA PPI Monitoring Report**

APPENDIX 1

Glossary of Terms

- CMT** **Corporate Management Team**
The Western Trust Corporate Management Team is chaired by the Trust's Chief Executive and includes the ten Trust Directors. This Team has the responsibility for ensuring the overall delivery of high quality services, the achievement of financial and performance targets and the maintenance of appropriate clinical and social care governance standards.
- DHSSPS** **Department of Health, Social Services and Public Safety**
The Department of Health, Social Services and Public Safety is one of 12 Northern Ireland Departments created in 1999 as part of the Northern Ireland Executive by the Northern Ireland Act 1998 and the Departments (Northern Ireland) Order 1999.
- The Department has three main business responsibilities:
- Health and Social Care (HSC), which includes policy and legislation for hospitals, family practitioner services and community health and personal social services;
 - Public Health, which covers policy, legislation and administrative action to promote and protect the health and well-being of the population;
 - Public Safety, which covers policy and legislation for fire and rescue services.
- E&I** **Equality & Involvement**
The Western Trust has an established Equality & Involvement Team providing on-going support and training, etc. to staff on Equality, Human Rights, Diversity and Involvement.
- The Trust also has a Personal and Public Involvement (PPI) Forum which comprises senior staff from the Directorates, representatives from the community and voluntary sectors, service user and carer representation. This Forum ensures that patients, service users and carers have a central role in influencing the development and delivery of healthcare across the Trust. The Equality & Involvement Team monitor PPI progress throughout the Trust.
- HRPTS** **Human Resources, Payroll, Travel and Subsistence System**
HRPTS is the new on-line Human Resources, Payroll, Travel and Subsistence ICT system which all health and social care organisations in Northern Ireland have moved to. Staff training is also recorded on HRPTS.
- PHA** **Public Health Agency**
The Public Health Agency (PHA) was established in 2009 under a major reform of health structures in Northern Ireland.

It is a multi-disciplinary, multi-professional body with four key functions:

- health and social wellbeing improvement;
- health protection;
- public health support to commissioning and policy development;
- HSC research and development.

The PHA was set up to provide a renewed and enhanced focus on public health and wellbeing by bringing together a wide range of public health functions under one organisation. It is also required to create better inter-sectoral working, including enhanced partnership arrangements with local government, to tackle the underlying causes of poor health and reduce health inequalities.

PPI Personal and Public Involvement

Personal and Public Involvement (PPI) is also known as service user involvement and can be described as:

“how service users; patients, clients and carers (including the public) can have their say about care and treatment, and the way services are planned and delivered”.

PPI places a statutory responsibility to involve people in the planning and delivery of health and social care services.

Sections 19 & 20 of the Health & Social Care (Reform) Act Northern Ireland 2009

require that service users and carers are involved in and consulted on:

1. the planning of the provision of care;
2. the development and consideration of proposals for changes in the way that care is provided;
3. decisions that affect the provision of care.

ToR Terms of Reference

Terms of Reference describe the purpose, scope and authority of a group. The ToR is a written road map for the group and contains clear and specific information on how the group is organised, what it is aiming to achieve, who the members are, and operational arrangements for meetings. ToR is regularly reviewed.

TYC Transforming Your Care

Transforming Your Care (TYC) is the name given to the programme of work aimed at changing Northern Ireland's health and social care system so that it meets the population's needs now and well into the future.

Transforming Your Care is focused on improving the care provided for individuals and families across Northern Ireland. This means more

care at home and less care in hospitals. It means supporting people to live as independently and healthily as possible, for as long as possible.

WH SCT

Western Health and Social Care Trust

The Western Health and Social Care Trust provides health and social care services across five council areas of Limavady, Londonderry, Strabane, Omagh and Fermanagh.