

CHAIR'S REPORT 2023

As I reflect upon my association with the East of England Citizens' Senate (CS), its core principles in promoting the patients voice and making it count when decisions about health service provisions are being made, I am more energized about the future and our capacity to bring about equity in health service delivery in the East of England NHS. I am equally excited about the expansion of our core objectives:

Patients participating in the change process.

Simplification of Information.

Strategic council- value of the lived experience.

Representation at board level.

Networking.

Training.

I became a member of the CS well over 2 years ago now, after 27 successful years in Hospitality and Retail management. I joined as a community ambassador of the African Families in the UK (AfFUK) CIC, at the invitation of the previous CS manager Trevor. AFiUK is a community interest company, with the purpose to ensuring members of our community are equipped, resourced with the skills to navigate their third lived experience here in the United Kingdom. Representation of their lived experience to service providers was key in our advocacy duties for our people and it became quickly obvious that this aligned perfectly with the ethos of the CS and the patient's voice.

Health Service provision historically has not meant the same thing to everyone, this inequality cuts across all the divisions in society, such as race, age, ethnicity, gender religion or socio-economic positions. Sadly, the areas with the highest proportion of poor service, were race and ethnicity, hence the emergence of Community Interest Companies (CIC) with the specific mandate for these voices to be heard at the highest levels became urgent, so, becoming a member of the CS was a no brainer. It was a huge privilege to me and my community when Trevor asked me to be chair and admin support, affording me the opportunity to help frame the new direction with my suggestions to the new manager Kevin about future navigation. Trevor and Kevin are true advocates and their passion for this work comes from personal experience and a library of knowledge of how the process can be fitter for purpose. I am in an enviable position of learning as I work with both.

Many critical friendly groups have advocated for their communities at crisis level, so the CS in patients creating change, want to be actively involved in the co-production process, ensuring the patient is involved at the various critical stages of the entire process.

One of the areas where patients struggle is understanding the professional jargon and complex information and this affects their confidence in engaging with the service providers or making people accountable for previous decisions affecting patients. In our meetings we invite service providers to



come to the Senate to tell us about the service they provide and ask important questions regarding same. Recently we had Sharon Rodie (Suffolk & North East Essex SNEE ICS), Nick Pringle (Eastern AHSN) and most recently, Trevor introduced the Peer Leadership Development Programme (PLDP) to the Senate.

Building our capacity means networking with the right people, agencies, and interest groups to ensure we are the natural choice for the patient's voice and are strong enough to be influential in the conference of decision makers. Training of the CS membership has been a very important investment undertaking within the last 18 months, I mentioned the PLDP, but prior to that (under Trevor's tenure) members had a 6 week-long Leadership for Change training programme. The value of the course cannot be overemphasized, as it prepared many of us (for future engagement with policy makers) with the right communication skills, poise, and confidence to engage in unfamiliar environment. A topic (from that programme) that continues to resonate with me is "appreciative inquiry", this means understanding the position of others with different opinions. In representing the patient, we are expressing their experience with a service (or services) over a period, so, at the CS we are making sure that those vulnerable voices have value and are commensurately acknowledged, especially when the information is utilised for the benefit of making a service better for future generations of service users.

Going forward, I will be advocating (to Kevin's listening ear) that the following becomes a part of the agenda of the CS:

Recommending that Cultural Awareness training as part of continuous professional development of service providers.

Understanding the importance of intersectionality, when making co-production decisions about certain groups and this will be where lived experience (and not meaningless surveys) of the diverse people within a group. No group is homogeneous, why service users fail to recognize this is, frankly unacceptable.

Generational diverse membership of the CS, ensuring that we are more inclusive and this means we need to attract younger and more dynamic new community leaders.

Sponsorship is a very important aspect of our functionality and without funding, most of the great work we do will be near impossible. I'm glad that our manager Kevin is currently exploring all avenues possible to ensure that funding to continue expanding the patients voice is available. Kevin and I believe that having more than one source of income, will go a long way in guaranteeing our autonomy.

On a personal level, I am committed to my participation (within the allowance of my regular employment) to the Citizens Senate, holding on to the principles and supporting Kevin (our manager) in every way I can to accomplish his goals and aspirations for our course.

Many Thanks,

Onche Godwin Daudu

Chair/Admin Support.