## Paper 2

# NQB stakeholder engagement proposals

## **Purpose**

 To set out proposals as to how the NQB could engage with its key stakeholder groups on both an ongoing basis and on specific elements of its work programme.

## **Background**

2. The NQB's terms of reference set out that:

The NQB members will engage proactively with patients, the public and lay representatives, clinical and non-clinical experts, commissioners and providers through a dedicated stakeholder forum which it is establishing. It will also involve stakeholders in its individual workstreams through any working groups it establishes, and citizen members of the stakeholder forum will attend NQB meetings.

- 3. The NQB asked the secretariat to consider how it might take forward this engagement. For the purposes of this paper, it is helpful to consider the NQB's need for engagement in two respects:
  - a. on an on-going basis, to guide its strategy and work programme
  - b. on specific elements of its work programme

#### **Ongoing engagement**

- 4. The NQB is keen that it can have a meaningful and proactive dialogue with its key stakeholder groups on an ongoing basis. The purposes of this will be twofold:
  - To ensure that the NQB understands the real quality issues and challenges at every level in the system, from the commissioner, provider, professional and patient perspective
  - b. To guide the development of the NQB's strategy and work programme, ensuring that it is addressing the real quality issues and challenges facing the system.

5. To secure this engagement, we propose that the NQB establishes a Stakeholder Forum, and that citizen members of this forum attend NQB meetings.

#### Stakeholder Forum

- 6. The purpose of the Stakeholder Forum should be to bring together the key constituencies of stakeholders that are vital to the delivery of quality, and to closing the 'quality gap'. The NQB should seek to work in partnership with the Stakeholder Forum to co-design its work programme, and shape its quality strategy. It should take input and steers from the Stakeholder Forum to ensure that its work is reflective of the challenges and opportunities in respect of quality at every level in the system.
- 7. The Stakeholder Forum should be of a manageable size small enough to ensure the NQB can have relationships with individual members, yet large enough to provide the breadth of views the NQB will need to seek. We recommend that the Stakeholder Forum numbers in the region of 40 people.
- 8. The NQB should meet with this group at least twice a year, and ideally on a quarterly basis. NHS England is organising NHS Expo on 2 and 3 September, and there is the opportunity to run side events around the edge of the conference. This could be an opportunity to host a first engagement session for the NQB with its Stakeholder Forum. This timing would give the NQB the chance to make further progress in shaping its quality strategy and work programme, which it could test with the Stakeholder Forum.
- Following a September session, the NQB could commit to meeting with the Stakeholder Forum around the end of 2015 / early 2016, with another two or three sessions in 2016.
- 10. There should be representatives from the following groups included in the membership. We have suggested how we might source these members against each constituency, and how many people might be included:

| Group                | How source members / suggested members            | No. of members |
|----------------------|---|----------------|
| Patients / citizens  | Recruitment exercise to select individual citizen | 3              |
| Tationis / Citizonis | members   |                |
|                      | Include key patient groups:                       |                |
|                      | National Voices                                   | 3              |
|                      | Patients Association                              |                |
|                      | Healthwatch England                               |                |
| Commissioners        | Nominations from NHS Clinical Commissioners       | 3              |
| Providers            | Nominations from NHS Providers                    | 3              |
| Professionals        | Representatives from:                             | 4              |
|                      | Academy of Medical Royal Colleges                 |                |
|                      | Royal College of GPs                              |                |
|                      | Royal College of Nursing                          |                |
|                      | Allied Health Professional                        |                |
| Think Tanks          | Kings Fund  | 3              |
| 1                    | Health Foundation                                 |                |
|                      | Nuffield Trust                                    | l.             |
| Local Government     | Nominations from the LGA for                      | 3              |
|                      | Director of Adult Social Care                     | 18/7           |
| /                    | Local Authority Chief Executive                   |                |
|                      | Director of Public Health                         |                |
| Public Health        | Nominations from PHE                              | 3              |
| Voluntary Sector     | Nominations from Richmond Group                   | 2              |
| 11.2                 | Nomination from Mental Health Policy Group        | 1              |
| AHSN                 | Nomination from AHSN Network                      | 1              |
| HSCIC                |   | 1              |
| HQIP                 | -//   | 1              |
| TOTAL                |   | 31             |

Does the NQB support the establishment of a Stakeholder Forum?

Is the NQB content with working towards a first session with its Stakeholder Forum in early September? How often does the NQB want to commit to meeting with its Stakeholder Forum thereafter?

Does it agree that the Forum should be around 40 people in size?

Are members comfortable with the suggested membership? Are there any others who should be included?

#### Citizen members on the NQB

- 11. At its last two meetings, the NQB has discussed and concluded that it is vital that citizen members from the Stakeholder Forum attend NQB meetings.
- 12. We propose that the NQB runs a formal recruitment exercise to appoint individual citizen members to its Stakeholder Forum. This exercise would take approximately two months, and so could be run over the summer with a view to members being in place from September.
- 13. Ideally the NQB should look to recruit 3 citizen members to the Stakeholder Forum, who would be invited to attend NQB meetings. This would ensure that their voice is sufficiently strong and that they have mutual support. It would also ensure that on average two citizen members are available to attend all NQB meetings.
- 14. In advance of the citizen members being appointed, we suggest that NHS England identifies a couple of lay members from existing committees / networks to attend the NQB meeting in July, and be involved in the development of its work programme. These individuals would then have the change to apply to be citizen members of the Stakeholder Forum should they wish to.

Are NQB members content with taking forward a recruitment exercise to appoint citizen members to the Stakeholder Forum?

Are there any volunteers for the recruitment panel?

In the interim, is the NQB content with NHS England identifying lay representatives to attend the July meeting and be involved in NQB work over the summer?

#### Specific input to work programme

- 15. It will be important that the NQB is able to draw on stakeholders and relevant expertise as part of taking forward the various workstreams within its work programme. It is likely that this would be through Sub-groups which would include NQB members, and stakeholder and expert members. There would be an assumption that an NQB member would chair each sub-group
- 16. The Stakeholder Forum will provide a source of stakeholder and expert members to support the work programme. It will also be important that the NQB can draw in other staff from member organisations to support and sit on sub-groups. In addition, the NQB may wish to look to other stakeholder organisation, and further

afield such as academia and industry to bring in the right knowledge and perspectives to support it work.

17. Once the NQB has agreed its work programme, and each work stream has been scoped at a high level, the secretariat will suggest membership for each subgroup, drawing on the Stakeholder Forum and more widely.

Is the NQB content with this approach to stakeholder and expert involvement in its work programme?

**NQB Secretariat** 

27 May 2015