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NHS ENGLAND – BOARD PAPER

Title:

Strengthening patient and public participation in NHS England - update and revised policy

Lead Director:

Lord Victor Adebowale, Non-Executive Director and Jane Cummings, Chief Nursing Officer

Purpose of Paper:

- To report on delivery of the ten point action plan on Patient and Public Participation.
- To present a revised NHS England Patient and Public Participation Policy for Board approval.

The Board is invited to:

- i. Note and comment on the ten point action plan.
- ii. To approve the revised policy.

Strengthening patient and public participation in NHS England: update and revised policy

Purpose

1. The purpose of this paper is to report on delivery of the ten point action plan on patient and public participation, and to present to the Board for approval a revised NHS England Patient and Public Participation Policy.

Background

- 2. In November 2015 the Board approved the Patient and Public Participation Policy and accompanying Statement of Arrangements and Guidance on Involving Patients and the Public in Commissioning, together with a ten point action plan designed to support implementation. The policy is a public facing document, providing a strategic statement of intent for putting patients and the public at the heart of NHS England's work. The arrangements set out more specifically how NHS England meets its legal duty to involve the public in commissioning under section 13Q of the NHS Act 2006 (as amended by the Health and Social Care Act 2012).
- 3. Implementation of the action plan has been managed through the Patient and Public Participation Oversight Group with escalation to Corporate Executive and the Executive Risk Management Group as appropriate.
- 4. A commitment was made in the November 2015 Board paper to bring a report to the Board before the end of March 2017, to evaluate the implementation and impact of the policy, arrangements and action plan. In advance of this, an interim progress report was made to the Empowering People and Communities Taskforce chaired by Lord Victor Adebowale in September 2016. This report was noted.

Delivery against the ten point action plan to strengthen patient and public participation

- 5. The key elements of the ten point action plan have been successfully delivered.
- 6. The plan was agreed prior to the development of Sustainability and Transformation Plans (STPs). Supporting STPs has required a change in focus in some areas which has necessarily diverted resource from some of the areas of the action plan originally agreed. However, good progress has been made in strengthening participation in the work of NHS England since November 2015 in line with the new policy, and outstanding actions and risks are being actively managed.
- 7. Further detail on the delivery of the individual elements of the ten point action plan is summarised in Table 1 below.

Table 1: Delivery against the ten point action plan

No	Action	Delivery
1	 Develop capacity and capability to support participation in commissioning i. Agree and document the necessary skills, attributes, resources and potential partnership opportunities for commissioners to practice good participation ii. Finalise evaluation of current capacity and capability; identify any new resource requirements within the business planning process. iii. Develop a framework of specialist support 	 i. Achieved ii. Achieved for 2016/17. Risks for 2017/18 highlighted. iii. Outstanding – new target date for delivery is September 2017. The delay has been due to capacity constraints and increasing the scope of this task. Progress towards the new target date is on track. The development of capacity and capability will require on- going action. Action (i) developed into a major mapping exercise undertaken with all regional teams and at national level. The results of the exercise and the essential requirements of the new policy were reported to the Nursing Directorate Senior Management Team, the Patient and Public Participation Oversight Group and also to Regional Directors at the Operations and Information Directorate Senior Management Team meeting on 19.07.16.
2	Create opportunities for dialogue between NHS England and patients and the public, embedding the 'NHS Citizen' programme and approach throughout the business Continue to develop, build and roll out a fully-fledged model that facilitates and supports participation and dialogue between citizens and staff across all parts of NHS England, including at Board level.	Largely achieved. NHS England co-ordinates a number of successful patient and public networks (e.g. the NHS Youth Forum, the NHS Older People's Sounding Board, the CCG lay members' network), and has positive partnerships with other organisations at various levels. A Citizens Assembly was held in November 2015 involving over 300 members of the public and the Board of NHS England. This Assembly concluded the pilot phase of development of NHS Citizen. During 2016 a learning review and evaluation was undertaken, which resulted in the re-development of the NHS Citizen approach, as reported to the Board in September 2016. An Advisory Group has been established, and a plan for phase 2 is in development.
3	Empower staff and the public through training and development - under the 'Participation Academy' element of NHS Citizen, introduce a range of training and development/support for NHS England staff and for patients and the public.	Achieved. This action point has been successfully delivered largely through the launch of the online element of the 'Participation Academy' (now called the 'Involvement Hub' in response to feedback). This attracted over 30,000 unique page views in its first three months. In addition, a series of workshops has been held throughout the country with regional teams to raise awareness of the requirements of the new policy and arrangements. A patient and public participation knowledge and skills framework has been developed and this is being delivered, including enhanced induction for Patient and Public Voice partners. A dedicated training manager has been recruited and the training, development and support offer has been significantly expanded; over 100 members of staff have received training in the last six months. A dedicated advice and support service for public participation was launched in December 2015 and responds to approximately 30 requests for guidance per month from within NHS England and beyond.

4	Produce further guidance and resources including revising and reissuing the <i>Transforming Participation</i> <i>in Health and Care</i> interactive online guidance	Achieved. This element of the plan has been a major focus for action, and has included the co-production of frameworks for participation in each area of direct commissioning:- primary care, specialised services, health in justice, health services for the armed forces, and some public health services. These complement the policy and provide practical resources for commissioners, outlining the best approaches to participation to meet the needs of different groups of service users. The completion of an equality and health inequalities analysis for the policy and all associated documents supports the complementary legal duties in these areas. The 'Transforming Participation in Health and Care' guidance for commissioners (NHS England and CCGs) has been revised and is due to be reissued this month.
5	Embed patient and public participation plans and arrangements in all business planning throughout NHS England	Achieved. The requirements in relation to participation were included in the corporate business planning template for the 2016/17 business planning round, and were enhanced the following year.
6	Enhance performance reporting (developing and using activity and impact indicators) i. Report to the Oversight Group ii. Annual Report iii. Introduce new indicators for the Board as part of the performance report	 i. Achieved. ii. Achieved. Participation information incorporated in the 2015-16 Annual Report and progress noted by the Secretary of State for Health as 'good'. There will be enhanced reporting within next year's Annual Report, in accordance with guidance published in July 2016 for NHS England and CCGs. iii. Partially achieved – progress reported to the Empowering People and Communities Taskforce. The Board receives regular reports on the performance of the Customer Contact Centre, which manages complaints and other feedback from patients and the public. Work is underway to develop patient and public participation indicators for NHS England, including the results of the first ever survey of our patient and public voice partners. In addition, in relation to CCGs, Key Lines of Enquiry have been included in the Technical Annex of the CCG Improvement and Assessment Framework (IAF) for 2016/17.
7	 Build patient and public voice into governance and assurance i. Recruit and support patient and public voice lay members ii. The People Bank will match interested members of the public to opportunities building an expectation of coproduction into our business iii. Review NHS England's policy on how to identify and manage actual or potential conflicts of interest in respect of Patient and Public Voice (PPV) activity, in line with broader work around Sunlight disclosures iv. Refresh and expand PPV membership of relevant NHS England Specialised Commissioning and other groups as appropriate. 	 i. Achieved – on-going action. ii. Not achieved despite significant efforts. Following successful delivery of a 'proof of concept' phase, it has been decided that People Bank will be part of a wider corporate ICT project to introduce a new corporate customer relations management system. Anticipated delivery – September 2017. Interim actions in place, as reported to the Corporate Executive. iii. On track for achievement by April 2017 – a comprehensive patient and public voice (PPV) partners policy is scheduled to be completed and approved in April 2017. This includes management of conflicts of interest ('Sunshine disclosures'). The Public Participation Team has undertaken a data collection exercise which showed that there were 844 PPV partners supporting NHS England's work as at the end of August 2016. iv. Achieved.

8	 Develop levers and incentives i. Strengthen assurance of participation in commissioning including specific testing of compliance with the s.13Q legal duty to involve the public in commissioning. ii. Explore potential use of financial levers to incentivise higher standards of participation. 	i. ii.	Partial achievement. PPV partner representation has been increased in all areas of direct commissioning, and there is some evidence of a more systematic approach to assurance of participation in line with policy requirements. However, this is not yet consistent across the organisation, the risks of which have been highlighted to commissioners. In relation to public participation, this action is dependent on action (i) above being achieved and is also linked to the broader action on development of other public participation activity and impact indicators under item 6.
9	 Share learning and best practice i. Establish a professional network to strengthen connections within NHS England ii. Ensure that networks are developed at local level to maximise the potential of partnerships with CCGs, local authorities and others, building a place-based approach to participation that supports devolution and delegation of commissioning to neighbourhood level 	i. ii.	Achieved – a patient and public participation learning and sharing network has been established between the national Public Participation team, other central teams, regional colleagues with responsibility for the participation function, and other interested colleagues. Achieved – local networks featured as part of the review of the capacity and capability exercise (see action1). Regions have been allocated a total of £60k in 2016/17 to develop networks at regional level. Local partnership working will be further strengthened in the development and delivery of STPs.
10	 Celebrate success and champion participation throughout the NHS i. Publicise good news stories and relevant research findings on the benefits of participation through various communication channels ii. Promote participation as a key aspect of relevant health and care award programmes, liaising with partners as appropriate 	i. ii.	On-going achievement in this area, for example through 'In Touch', the electronic newsletter for patients and the public. Partial achievement. The Celebration Participation in Healthcare Grant Awards in 2015 showcased examples of outstanding practice by voluntary organisations involving patients and the public in health services. Staff leading participation work nominated for and achieved awards internally and externally.

Revised policy

- 9. A commitment was made to the Board in November 2015 to review the NHS England policy and arrangements before the end of March 2017, to take into account feedback from patients and the public, partner organisations and staff about its first year of implementation. Comments were invited online via the Consultation Hub on the NHS England website and 106 responses were received. Feedback was also given at various meetings and at training sessions. All feedback has been carefully considered and incorporated as appropriate.
- 10. Key messages from the feedback were:
 - a. Update to connect with the Frameworks for Participation
 - b. Reduce in length and simplify, being clear about what needs to be done
 - c. Make it relevant to new and emerging commissioning arrangements.
- 11. The revised policy is attached at Appendix A. The Statement of Arrangements and Guidance document no longer exists, as the Arrangements content has now been incorporated into the policy and the Guidance element now features in the refreshed statutory guidance on patient and public participation for commissioners (due for publication by the end of March 2017). This refreshed guidance replaces the public

participation element of the original 'Transforming Participation in Health and Care' guidance published in 2013, and applies both to NHS England and CCGs.

Implications

<u>Risks</u>

12. NHS England has a policy and associated guidance, which should be followed wherever appropriate to avoid the risk of legal challenge. In addition, the corporate risk in relation to People Bank has been highlighted to the Corporate Executive and mitigating actions are in place.

Legal/Regulatory

13. NHS England has a legal duty to involve the public in commissioning under Section 13Q of the NHS Act 2006 (as amended by the Health and Social Care Act 2012). Implementation of the revised policy and on-going action to strengthen participation will enable NHS England to meet its legal duty.

Resources required

14. NHS England commissioning teams are required to make resources available to embed patient and public participation as part of the core commissioning function. The policy and guidance indicates that a fair and proportionate approach should be taken appropriate to the circumstances.

Conclusion and next steps

- 15. NHS England is in a much stronger position to reap the benefits of patient and public participation, and to meet its legal duties, following the implementation of the new policy from November 2015. A great deal of work has happened at national and regional level, with much strengthened connections, to embed participation into NHS England's work. It is proposed that the policy is reviewed again in two years, and that the responsibility for on-going monitoring of progress on implementing the policy rests with Oversight Groups.
- 16. Over the next period we will focus on implementation and practice, reaching out to STP Leadership, to embed public participation as an integral element of the system and culture transformation that is set out in the Five Year Forward View.

Recommendations

- 17. The Board is asked to:
 - i. Note and comment on delivery of the ten point action plan; and
 - ii. Approve the revised policy.



APPENDIX A



Patient and Public Participation Policy

Information Reader Box (IRB) to be inserted on inside front cover for documents of 6 pages and over, with Publications Gateway Reference number assigned after it has been cleared by the Publications Gateway Team. <u>Publications Gateway guidance</u> <u>and the IRB</u> can be found on the Intranet.

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NHS England Patient and Public Participation Policy

Version number: 2

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Prepared by: Head of Programme Delivery, Public Participation Team

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request. Please contact the Public Participation team on 0113 825 0861.

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Promoting equality and addressing health inequalities are at the heart of NHS England's values. Throughout the development of the policies and processes cited in this document, we have:

- given due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it; and
- given regard to the need to reduce inequalities between patients in access to, and outcomes from healthcare services and to ensure services are provided in an integrated way where this might reduce health inequalities.

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1 Policy statement

This policy is for patients and the public, and for NHS England staff. It sets out NHS England's ambition of strengthening patient and public participation in all of its work, and how it intends to achieve this.

The term 'patients and the public' includes everyone who uses services or may do so in the future, including carers and families. People who use health and care services may be referred to as 'experts by experience'. NHS England recognises and values what they can contribute to its work as a result of their lived experience.

Participation (sometimes referred to as engagement or involvement) can take place in a variety of ways, for example through social media, voluntary community and social enterprise (VCSE) organisations, elected representatives, formal consultations and meetings. NHS England is committed to taking an approach that is appropriate to the situation and the needs of the people it is seeking to engage.

Patients and the public are at the heart of everything NHS England does, in line with the <u>NHS Constitution</u>. NHS England believes that by listening to people who use and care about services, it can understand their diverse health needs better, and focus on and respond to what matters to them. NHS England will work in partnership with patients and the public, to improve patient safety, patient experience and health outcomes; supporting people to live healthier lives. By prioritising the needs of those who experience the poorest health outcomes, NHS England has more power to improve access to services, reduce health inequalities in communities and make better use of resources.

The <u>Five Year Forward View</u> sets out a vision for a shift in power to patients and the public, which NHS England is working towards:

"One of the great strengths of this country is that we have an NHS that – at its best – is 'of the people, by the people and for the people...we need to engage with communities and citizens in new ways, involving them directly in decisions about the future of health and care services."

A significant element of NHS England's work involves commissioning (the process of planning, buying and monitoring services), and in this regard there are specific legal requirements. NHS England has a legal duty under section 13Q of the National Health Service Act 2006 (as amended by the Health and Social Care Act 2012) to properly involve patients and the public in its commissioning processes and decisions.

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2 Introduction

NHS England's approach to patient and public participation is constantly evolving and is based on the following principles, which have been developed based on a review of research, best practice and the views of stakeholders.

- 1. Reach out to people rather than expecting them to come to you and ask them how they want to be involved, avoiding assumptions.
- 2. Promote equality and diversity, and encourage and respect different beliefs and opinions.
- 3. Proactively seek participation from people who experience health inequalities and poor health outcomes.
- 4. Value people's lived experience and use all the strengths and talents that people bring to the table, working towards shared goals and aiming for constructive and productive conversations.
- 5. Provide clear and easy to understand information and seek to facilitate involvement by all, recognising that everyone has different needs. This includes working with advocacy services and other partners where necessary.
- 6. Take time to plan and budget for participation and start involving people as early as possible.
- 7. Be open, honest and transparent in the way you work; tell people about the evidence base for decisions, and be clear about resource limitations and other relevant constraints. Where information has to be kept confidential, explain why.
- 8. Invest in partnerships, have an ongoing dialogue and avoid tokenism, provide information, support, training and the right kind of leadership so that everyone can work, learn and improve together.
- 9. Review experience (positive and negative) and learn from it to continuously improve how people are involved.
- 10. Recognise, record and celebrate people's contributions and give feedback on the results of involvement; show people how they are valued.

3 Scope

This policy applies throughout NHS England i.e. to all national and regional teams and across all of its business functions, including hosted organisations such as the <u>clinical senates</u> and <u>strategic clinical networks</u>.

4 Roles and responsibilities

NHS England staff all have a role to play in strengthening patient and public participation in our work, both individually and collectively. All staff are responsible for considering the need for patient and public participation in their work and undertaking this as appropriate.

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The following paragraphs set out specific responsibilities within NHS England. Hosted organisations are expected to have these responsibilities reflected within their own organisational structures.

The Board of NHS England is responsible for NHS England's performance in relation to all legal duties including the duty to make arrangements to involve the public in commissioning. The Chief Executive is accountable to the Board and all National Directors are responsible for patient and public participation within the work of their own directorates.

The Chairman and other Non-Executive Directors have responsibility for ensuring that the views of patients and other members of the public are appropriately considered by the Board.

The Chief Nursing Officer has responsibility for sponsoring the ongoing development and implementation of this policy. (S)he also oversees the team that supports the organisation in its duties and ambitions to strengthen patient and public participation.

Regional Directors are responsible for ensuring appropriate patient and public participation within the work of their own regions. Specialist advice and support (internal or external) may be required. This includes working with local partners, such as clinical commissioning groups (CCGs), local authorities and VCSE organisations.

All managers have the following responsibilities.

- Ensuring that the need for patient and public participation is considered and appropriate action is taken, for the work they are accountable for. Those responsible for commissioning should be aware of the organisation's statutory duty to involve the public in this area of work, and take action as appropriate.
- Contributing to the implementation of this policy and promoting an organisational culture in which patient and public participation is 'everyone's business'. This includes supporting formal and peer to peer learning, and celebrating success.
- Contributing to the monitoring, evaluation and reporting of implementation of this policy and the effectiveness of action to strengthen patient and public participation.

5 Our approach

NHS England will support staff with information, training and resources through its online <u>Involvement Hub</u>, intranet pages and by other means. This will enable staff to develop a proactive and effective dialogue with patients and the public and to utilise and respond to what they are told. NHS England has produced guidance on patient and public participation for all commissioners of health services, both within NHS England and CCGs. (LINK TO BE ADDED to 'Patient and public participation in commissioning health and care: statutory guidance for CCGs and NHS England' FOLLOWING APPROVAL by CORPORATE EXECUTIVE 23.03.17).

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There are five bespoke participation frameworks for each area of direct commissioning within NHS England. These frameworks set out the key partnerships and approaches to engagement with the different groups of stakeholders for each service area:

- <u>Framework for patient and public participation in primary care</u> <u>commissioning</u>
- Framework for patient and public participation in public health commissioning
- Framework for patient and public participation in armed forces commissioning
- Framework for patient and public participation in health and justice commissioning
- Framework for patient and public participation in specialised commissioning.

NHS England recognises the links between staff engagement and public engagement, and values the contribution that staff members can make, not only as employees, but also as users of NHS services and members of communities.

NHS England will support patients and members of the public to be involved as 'patient and public voice' (PPV) partners, through the Involvement Hub and other means. To facilitate participation, expenses will be paid in accordance with the policy: 'Working with our patient and public voice partners: reimbursing out of pocket expenses and involvement payments for patient and public voice.'

NHS England will build on existing resources and good practice:

- offer patients and the public a voice throughout the organisation by developing its governance arrangements to embed participation (including decision making and business planning processes). It will provide meaningful roles on relevant working groups to PPV partners.
- reach out to and work with a wide range of people, reflecting the diversity of communities, to have conversations about health, wellbeing, and services. It will strengthen its partnerships (and maximise shared engagement opportunities where appropriate) with organisations that can bring different perspectives. These include (but are not limited to) Healthwatch, health and wellbeing boards, CCGs, local authorities, VCSE organisations, in addition to direct engagement with patient and community groups, and advocacy organisations.
- use available information before considering new engagement, for example, complaints, surveys and the outcomes of any previous engagement exercise.
- identify and try different ways of having conversations and working with patients and the public, for example using social media.
- develop a more open, transparent and responsive culture and more inclusive and participative ways of working. For example, by including prompts for

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consideration of the views of patients and the public within planning and reporting templates and checklists.

- 'close the loop' whenever it seeks the views of patients and the public. It will do this by feeding back the results of any consultation or engagement exercise to participants and explaining how views have been considered and impacted on plans, and the rationale for decisions taken.
- celebrate success and learn from experience (positive and negative) by measuring the effectiveness of its patient and public participation activity (including outcome indicators). It will continue to develop new and improved measures to help assess progress and make improvements. NHS England will ask for the views of different people about their experiences of being involved in its work, in particular those who are 'seldom heard', for example, homeless people and those receiving healthcare in prison. NHS England wants people to have a positive experience of involvement in its work and feel that what they have done has made a difference.
- consider the need for staff and partners across the system to allow adequate time to undertake meaningful engagement with patients and the public as part of their plans.
- lead and champion patient and public participation throughout the NHS. In practical terms, this includes the provision of engagement guidance and support on <u>Sustainability and Transformation Plans (STP)</u> and <u>vanguards</u>.

6 Corporate arrangements for patient and public participation

NHS England is working to continuously strengthen its corporate arrangements for patient and public participation. Existing arrangements include, but are not limited to, those outlined in this section. You can also find further information on the <u>NHS</u> England website.

6.1 Public involvement in governance

6.1.1 Board meetings

Meetings of the Board of NHS England are held in public, which means that members of the public may attend to observe. They are broadcast live on <u>NHS</u> <u>England's website</u> and recorded for future viewing. Where there are confidential issues for discussion, for example involving personal identifiable or commercial sensitive or legally privileged information, the Board will go into closed session.

Copies of the agenda and other papers are published in advance of the Board meeting and the meeting minutes published afterwards.

Non-executive directors (NEDs) of the Board seek to ensure, through constructive challenge and in other ways, that the interests of patients, taxpayers and the public are represented at Board meetings. The skills, experience and knowledge to

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represent these interests are an explicit requirement of the NED role at NHS England. Development and support are provided to NEDs, as appropriate. Two way communication between NEDs and PPV partners on various committees, groups and programme boards is encouraged and facilitated where appropriate. These relationships enable PPV partners to have direct access to the Board and NEDs to have a 'line of sight' throughout the organisation. They provide a valuable source of insight and assurance about the way that the organisation is developing its ways of working and the impact of patient and public participation.

6.1.2 Annual general meeting

The annual general meeting (AGM) is open to members of the public. It is also broadcast live on NHS England's website and recorded so that it can be viewed at a later date.

6.1.3 Committees, working groups and programme boards

One of the ways that NHS England involves patients and the public is through representatives called PPV partners. NHS England has over 800 PPV partners who make a regular contribution to its work through various boards, committees and working groups. A new PPV partners policy is to be published in the spring of 2017 setting out how NHS England supports its PPV partners.

6.2 NHS Citizen

<u>NHS Citizen</u> is an approach to public participation that is designed to enable patients and the public and NHS England to have a dialogue about issues that matter to them. Through a process of dialogue, people can influence priorities and decision making, and can hold the organisation to account.

An NHS Citizen Advisory Group is in place to develop the approach more widely across the health and care system.

NHS Citizen involves working with citizens through a range of diverse and accessible methods including, but not exclusive to:

- online forums
- social media
- targeted events / focus groups
- open forums and deliberative events
- partner organisations including the VCSE sector
- emerging networks, with a particular focus on groups that find it hard to get their voice heard.

Underpinning the overall approach is ensuring that data and insight is available in ways that are accessible and understandable to the public. This includes analysis of online/social media conversations and survey data to understand current experiences and evidence.

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6.3 Reaching different communities and partnership working

As part of NHS Citizen, NHS England has a number of public involvement initiatives and partnerships in place to reach out to communities and service users from diverse backgrounds. These seek to ensure that participation approaches and activities are accessible and inclusive and that the views of groups who may be termed 'seldom heard' are heard. NHS England uses <u>The Equality Delivery System</u> (EDS2), which is designed to help all NHS organisations, in discussion with local partners (including patients, communities and the workforce) to review and improve their performance for people with characteristics protected by the Equality Act 2010. By using EDS2, NHS England will help to meet the Public Sector Equality Duty.

6.3.1 VCSE sector

The VCSE sector makes an invaluable contribution to health and care in England. NHS England has a range of partnerships with different organisations at different levels to collaborate on shared priorities.

NHS England commissioners can access support through the VCSE Health and Wellbeing Alliance, run by NHS England, <u>Department of Health</u> and <u>Public Health</u> <u>England</u>. The aims of the Alliance are to:

- facilitate integrated working between the voluntary and statutory sectors to promote equality and reduce health inequalities
- continue to build on productive and transparent relationships between system partner organisations and the VCSE sector, bringing the sector's voice and expertise into national policy making.

6.3.2 Healthwatch

<u>Healthwatch</u> was set up to understand the needs, experiences and concerns of service users and to speak out on their behalf. The Health and Social Care Act 2012 established Healthwatch England and a network of local Healthwatch organisations throughout England.

Healthwatch England has statutory powers to provide NHS England (and other bodies) with information and advice on:

- the views of people who use health or social care services and of other members of the public on their needs for and experiences of health and social care services; and
- the views of local Healthwatch organisations and of individuals on the standard of health and social care services. Local Healthwatch organisations operate across England and work with commissioners and providers in their area, including through health and wellbeing boards.

NHS England works closely with Healthwatch England to ensure that it listens and responds to the views of people about the quality and availability of health and care services.

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6.3.3 CCG lay members

NHS England has established a <u>network for lay members</u> on CCG governing bodies to be involved directly and influence the work of NHS England. Through this network, lay members can amplify views and concerns from their local area.

6.3.4 NHS Youth Forum

NHS England has worked with partner organisations to develop a <u>Youth Forum</u> in recognition of the need to communicate directly with children and young people and hear their experiences, needs and wishes. The forum is made up of around 25 young people recruited from all over the country and linked in to a social media network of hundreds more young people. It works in partnership with NHS England, Public Health England and the Department of Health to improve services for children and young people.

6.3.5 Older People's Sounding Board

NHS England has established an Older People's Sounding Board, working with voluntary sector partners. A diverse group of older people meet throughout the year with policy leads and commissioners to shape and improve NHS England's programmes of work. The Sounding Board aims to reflect experiences of more seldom heard older people, including older carers, those from minority groups and those with complex health needs.

6.3.6 NHS England Learning Disability and Autism Forum

This network connects NHS England with people with a learning disability, autism or both, their families and carers, and supporting organisations. It does this through sharing of information and holding engagement events.

6.4 Communication with patients and the public

NHS England communicates regularly with patients and the public in a variety of ways.

6.4.1 Public newsletter

In Touch is an electronic newsletter for members of the public which enables people to be informed about the latest NHS England news. It also highlights opportunities to get involved in NHS England's work through events, consultations, representation on advisory groups and more.

6.4.2 The NHS England website

The <u>NHS England website</u> NHS England is a constantly updated source of news about plans, programmes of work and opportunities to get involved. People can comment directly on articles and blogs.

A wide range of public consultations and surveys, on both local and national issues, are regularly published on the <u>NHS England Consultation Hub</u>.

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6.4.3 Social media

NHS England's Twitter account (<u>@NHSEngland</u>) actively shares news about plans, programmes of work and opportunities to get involved, including the facilitation of real time tweet chats with stakeholders.

NHS England's <u>YouTube</u> channel gives access to videos that explain its work in an engaging way and showcase examples of participation.

6.4.4 Customer Contact Centre

NHS England publishes its telephone, email and postal addresses on <u>its website</u> so that the public can make contact, with their views, comments, concerns, or to make a formal complaint or enquiry. The way that an organisation handles complaints is a good indicator of how well they listen to and respect 'customer' views. The performance of the Customer Contact Centre is routinely monitored by the NHS England Board.

6.4.5 Freedom of information

NHS England is subject to the provisions of the Freedom of Information Act 2000, which promotes transparency and scrutiny by allowing members of the public to request information held. Under the Act, NHS England must provide any requested information it holds, subject to the requirements and exemptions set out within the legislation.

<u>NHS England's freedom of information publication scheme</u> signposts individuals to information which is proactively released as and when it becomes available.

6.5 Publications Gateway clearance

NHS England has a publications 'Gateway' clearance process to assure all national policies, strategies, consultations, publications and external publications to the NHS. Teams that intend to publish documents and information must confirm to the national Public Participation Team that patients and the public have been involved in the development of the work, where relevant. In addition, they must consider if any further involvement activity is needed.

6.6 Business planning

Each year, NHS England publishes a corporate business plan setting out its priorities for the year ahead. The business plan reflects the organisation's broad strategy (the <u>Five Year Forward View</u>) and particular areas of focus for each directorate. In addition, the <u>regions of NHS England</u> produce their own related work plans.

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The business planning process involves consideration of future programmes of work and future resources. All those responsible for business planning at corporate, directorate and regional level should:

- demonstrate how insight gathered from patient and public participation has influenced planning and priorities for the year ahead
- set out how the public will be involved and how this will be funded in relevant future programme(s) of work. If this is not done, programmes may not be approved or funded through the business planning process.

6.7 Reporting and assurance

In July each year, NHS England publishes an annual report on its work for the previous financial year. The annual report includes an assessment of how effectively NHS England has discharged its statutory duty to involve the public. This includes information on its related statutory duties to have regard to the need to reduce health inequalities and to continuously secure improvement in the quality of health services.

The oversight groups for each area of direct commissioning (primary care, armed forces, public health, health and justice and specialised services) are responsible for in-year monitoring of patient and public participation as a core element of commissioning processes. Reports will be made by commissioning teams to oversight groups and the Director of NHS Commissioning or Director of Specialised Commissioning, who will contribute to the annual assessment of how effectively the legal duty to involve has been met for the annual report.

Reporting on participation (covering both quantitative and qualitative indicators) is continuously being developed through the Patient and Public Participation Oversight Group.

7 Distribution and implementation

This policy is publicised and made available, together with supporting guidance and other resources, through the:

- <u>NHS England website;</u>
- NHS England intranet.

Please note the intranet is a NHS England staff resource and is not accessible externally.

Training is available for different groups of staff to help familiarise them with the policy, and other supporting documents, as appropriate to their job role. All new starters to NHS England will be made aware of the benefits of patient and public participation and their responsibilities in relation to this, as part of the corporate induction process.

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8 Monitoring

Implementation of this policy will be monitored. There will be ongoing engagement with staff and external stakeholders, including patients and the public, about how the policy is working in practice. The policy will be revised if necessary by April 2019.

9 Equality and health inequalities

This policy forms part of NHS England's commitment to create a positive culture of dignity and respect for all individuals including staff, patients, their families and carers as well as community partners. The intention is to identify, remove or minimise discriminatory practice with regard to the characteristics given protection by the Equality Act 2010, as well as to promote positive practice and value the diversity of all individuals and communities.

An Equality and Health Inequalities Impact Analysis [insert new link when available] has been completed for this policy. Effective patient and public participation will support NHS England in meeting the public sector equality duty and the duty to reduce health inequalities. This requires particular consideration to reaching a diverse range of people and supporting participation from groups that experience inequalities in health outcomes.

10 Associated documentation

Patient and public participation in commissioning health and care: statutory guidance (LINK TO BE ADDED FOLLOWING APPROVAL BY CORPORATE EXECUTIVE AND PUBLICATION – BEFORE 31 MARCH 2017).

Patient and public voice partners policy (LINK TO BE ADDED ONCE APPROVED – scheduled April 2017).

Working with our patient and public voice partners: reimbursing out of pocket expenses and involvement payments for patient and public voice.'

NHS England's guide <u>Engaging Local People</u> for areas developing Sustainability and Transformation Plans.

Participation frameworks for each area of direct commissioning:

- Health and justice
- Public health
- <u>Armed forces</u>
- Specialised commissioning
- Primary care

Planning, assuring and delivering service change for patients.

Staff may also wish to visit the <u>Public Participation pages on the NHS England</u> <u>intranet</u> for more information, support and details of relevant training. The NHS England <u>Involvement Hub</u> also contains a range of resources, good practice and information about patient and public participation.

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