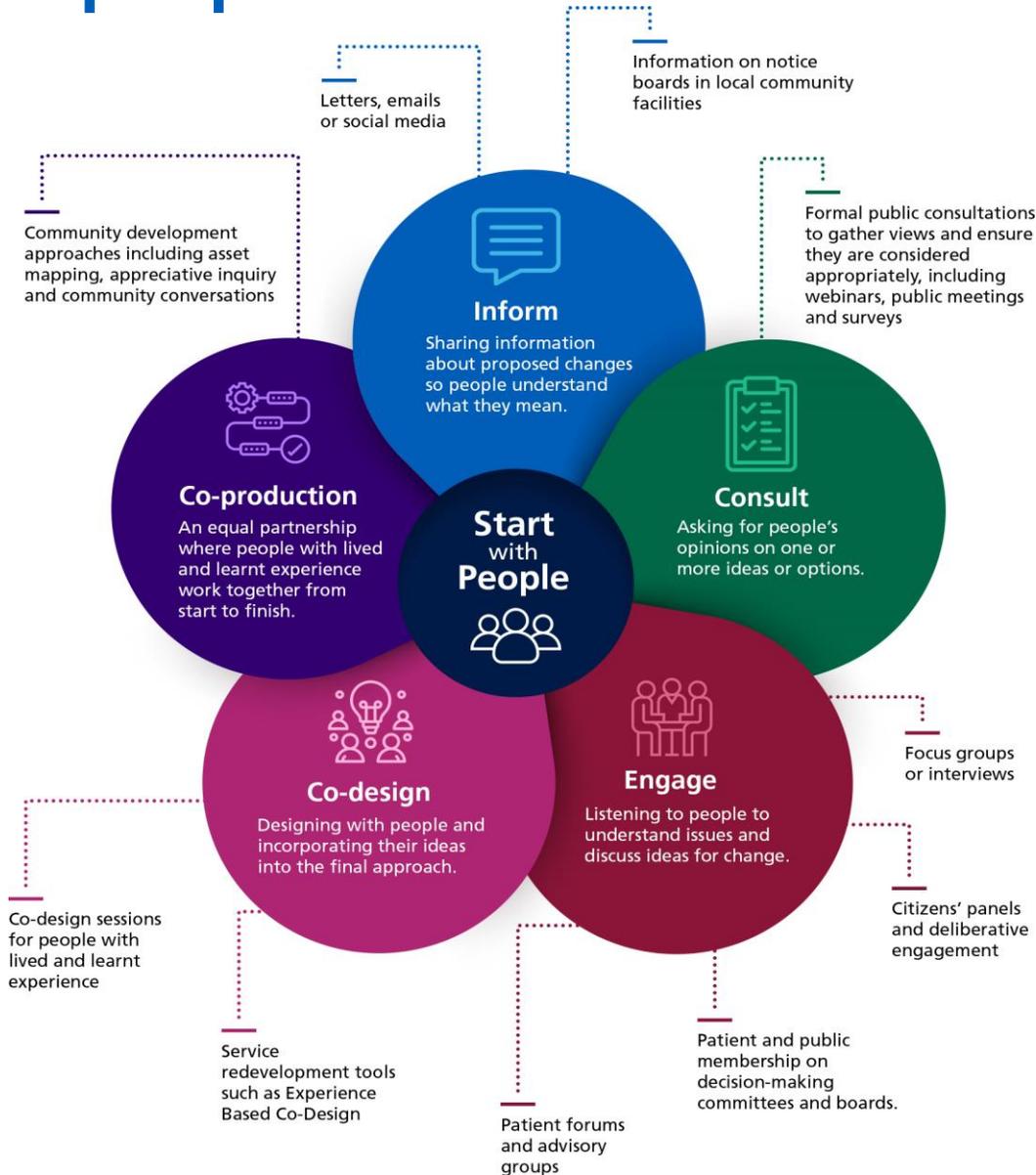


What do we mean by working with people and communities?

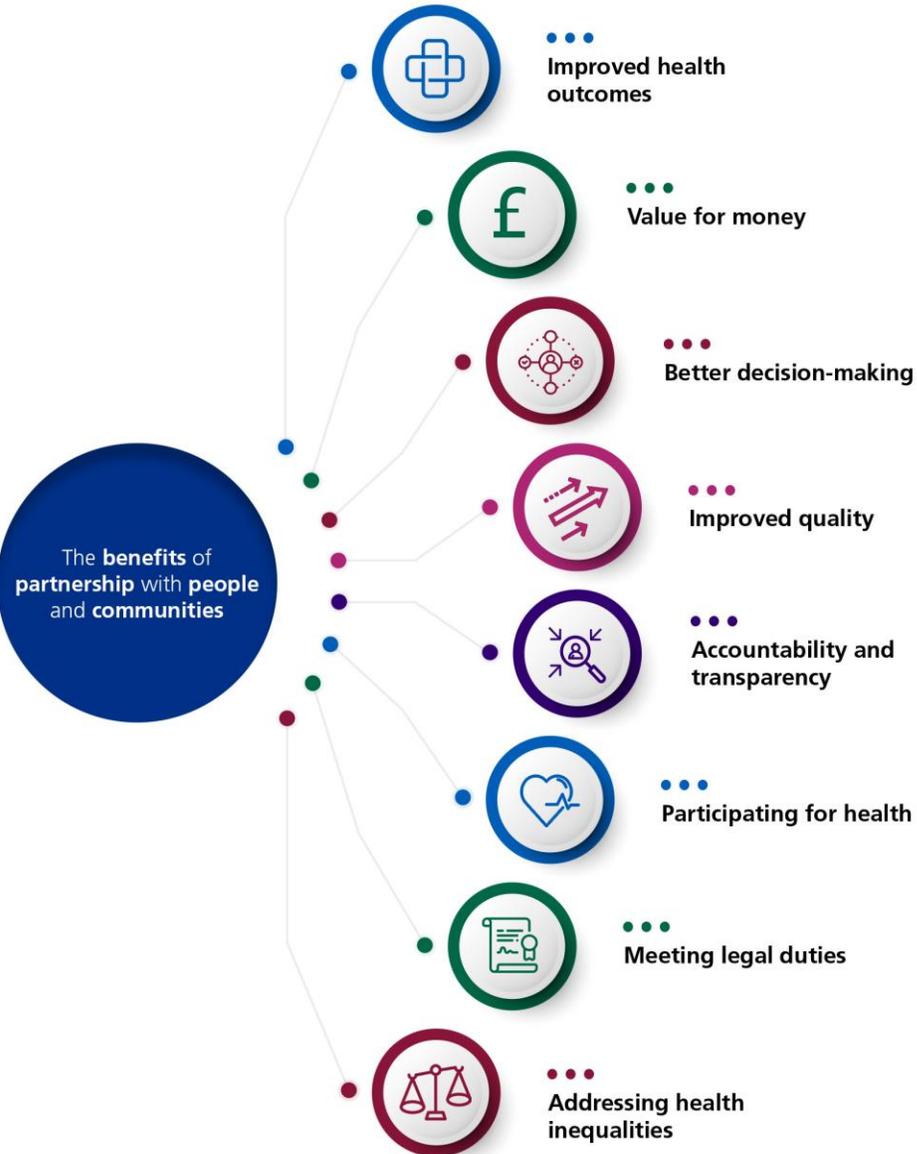


Engagement, participation, involvement, co-production, patient public voice, lived experience partner...

These words are used to mean different things (or the same thing!) by different people. More natural language such as “working in partnership with people and communities” works better.

When done well, working with people includes a range of activities:

Why work with people and communities?



Improved health outcomes: Ensuring services meet people’s needs, improving their experience and outcomes. People have the knowledge, skills, experiences and connections services need to understand in order to support their physical and mental health.

Value for money: Services that are designed with people and therefore effectively meet their needs are a better use of NHS resources. They improve health outcomes and reduce the need for further, additional care or treatment because a service did not meet their needs first time.

Better decision-making: Business cases and decision-making are improved when insight from local people is used alongside financial and clinical information. Challenge from outside voices can promote innovative thinking which can lead to new solutions that would not have been considered had the decision only been made internally.

Improved quality: Services can be designed and delivered more appropriately, because they are personalised to meet the needs and preferences of local people.

Accountability and transparency: Engaging more meaningfully with local communities helps to build public confidence and support as well as being able to demonstrate public support for proposals.

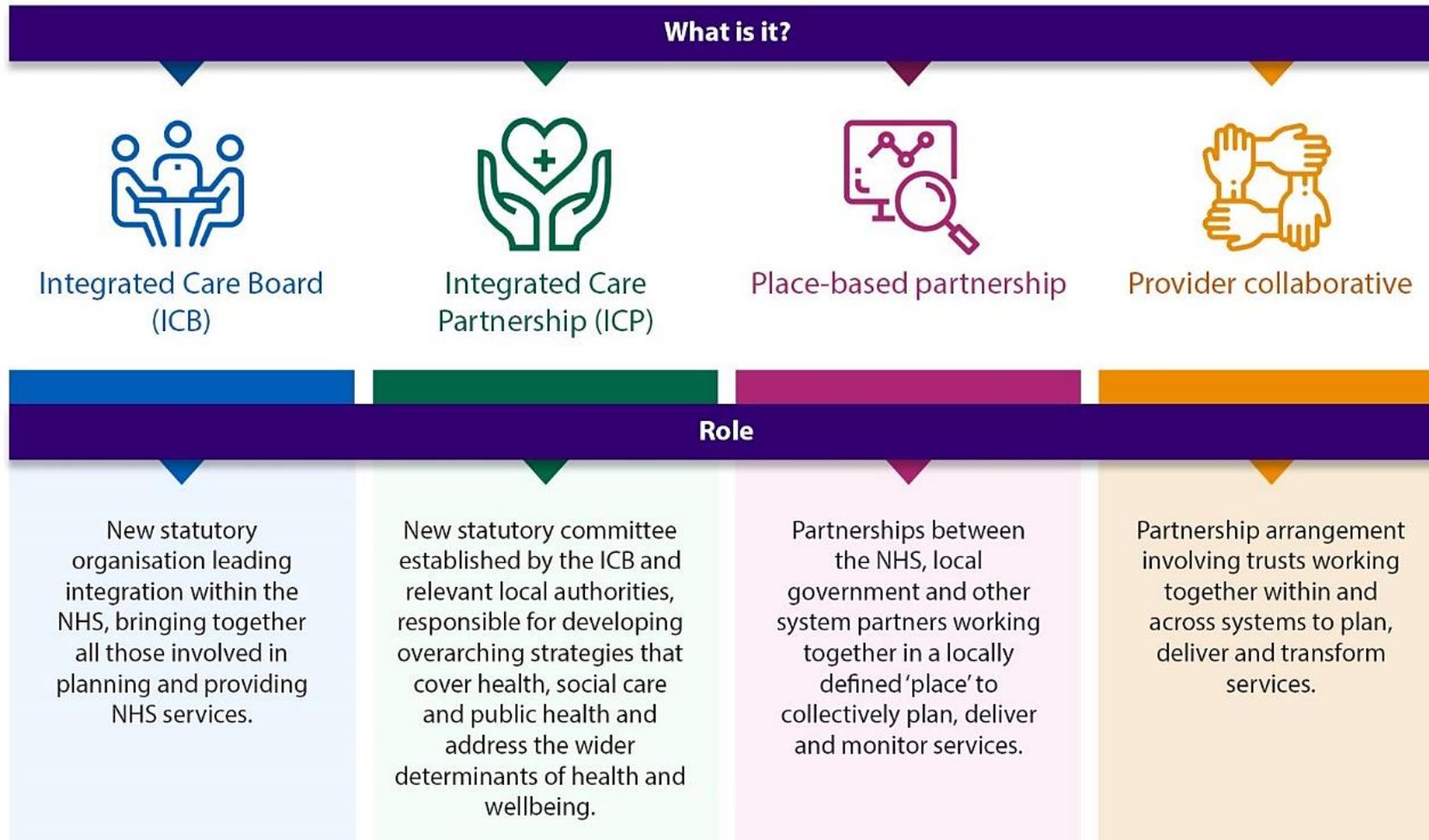
Participating for health: Being involved can reduce isolation, increase confidence and improve motivation towards wellbeing. Individuals’ involvement in delivering services that are relevant to them and their community can lead to more formal volunteering roles and employment in health and care sectors.

Meeting legal duties: Failure to meet the relevant legal duties risks legal challenge, substantial costs and delays, and damage to relationships and trust between organisations and communities.

Addressing health inequalities: jointly identifying solutions to barriers to access, developed in partnership with people using community-centred approaches.

Reminder of the new legislation

- February 2021 White Paper proposed legislation to underpin the move towards integration, which was emphasised in the 2019 [Long Term Plan](#).
- The new Health and Care Act will come into force in July 2022. The emphasis is on integration **within the NHS** and **between the NHS and other partners**.





Integrated Care Board (ICB)



Integrated Care Partnership (ICP)



Place-based partnerships



Provider collaborative

Participation responsibilities

Involve people and communities in the planning of services and proposals and decisions having an impact on services.

Demonstrate how legal duties have been met at different levels.

Create strategy on how the ICB will work with people and communities.

Develop integrated care strategies with people and communities.

Include community leaders and independent representatives of local people.

Local authority role in making connections to communities and democratic representatives.

Fully engage those affected by decisions.

Build on existing approaches to involve people in decision-making.

Support PCNs and neighbourhood teams to work with people and communities to strengthen health promotion and treatment.

Share and build on the good practice that exists in member organisations, such as co-production approaches and links to local communities.

Use insight and feedback from patient surveys, complaints data and partners like Healthwatch.

Trusts must meet their legal duties to involve people when planning and developing proposals for changes through the collaborative.

The new legislation continues the duty to involve...

...although the context will change as ICBs take on commissioning functions of CCGs and some that currently sit with NHS England.

The duties refer to 'carers and their representatives' as well as individuals who use services.

ICBs (Section 14Z45) and NHS England (Section 13Q) must involve the public...

"In the *planning* of the commissioning arrangements by the Board/Group."

"In the development and consideration of *proposals* by the Board/Group *for changes* in the commissioning arrangements

"In *decisions* of the Board/Group affecting the *operation* of the commissioning arrangements."

Section 14Z59: Performance assessment of ICBs by NHS England

...to include public involvement and consultation

Section 242 of the consolidated NHS Act 2006...

...a duty on NHS trusts to make arrangements to involve patients and the public in service planning and operation, and in the development of proposals for changes.

Why develop new guidance?

- Health and Care Act 2022 continues the legal duties on public involvement and has a requirement that guidance on how ICBs can do this, is developed
- Statutory guidance to provide the detail of how NHS organisations should work effectively with people and how ICBs will be assessed on this
- Existing guidance is from 2008 and 2017. The 2022 health and care landscape creates new statutory organisations and is fundamentally different, particularly the emphasis on integration and collaboration
- Changing ambitions for how systems work with people – at system, place and neighbourhood levels

Scope

- Statutory guidance for ICBs and NHS providers, replacing existing statutory guidance and the September 2021 Support Guidance.
- It is policy for NHS England and can be used as good practice guidance for other health and care organisations

NHS England	Status: Policy	Public involvement duty: NHS Act 2006, as amended by the Health and Care Act 2022
Integrated Care Board	Status: Statutory guidance	Public involvement duty: NHS Act 2006, as amended by the Health and Care Act 2022
NHS trust and foundation trust	Status: Statutory guidance	Public involvement duty: NHS Act 2006, as amended by the Health and Care Act 2022
Integrated Care System partners	Status: Good practice	Public involvement duty: N/A

Ambitions for the guidance

- Health and care systems place greater investment in early engagement and to promote ongoing dialogue and with people and communities
- Take a 'community-centred' approach: work together with local communities, who are often better placed to create solutions to the health challenges we face
- Plans and strategies are fully informed by engagement and there is feedback on the impact of engagement
- Focus on building relationships, partnership, transparency and trust
- Encourage collaboration across systems in engaging with local populations

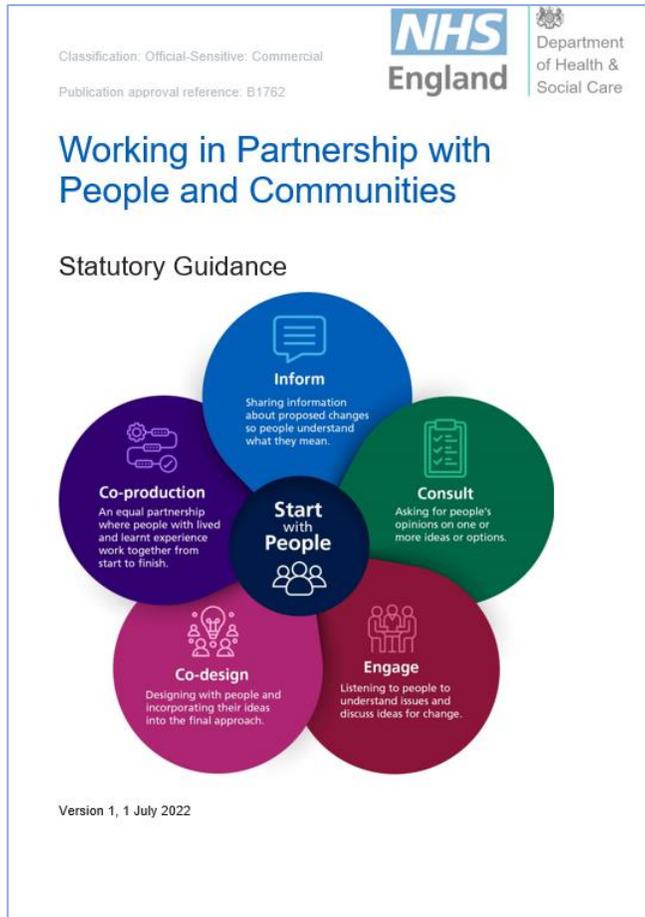
Any questions so far?

10 principles for working with people and communities

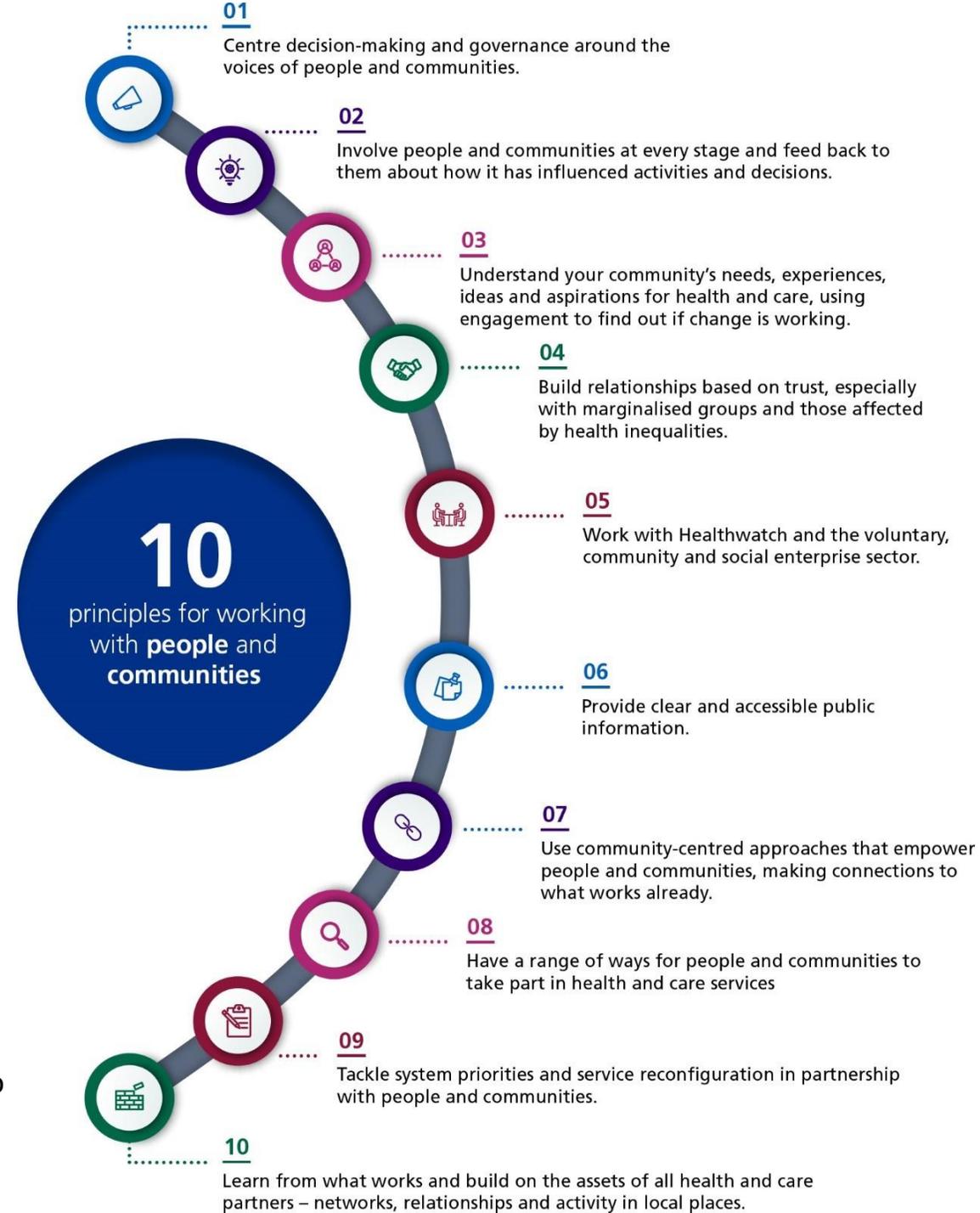
- Based on the September 2021 Implementation Guidance for ICSs
- Form the basis of each ICB's strategy on working with people and communities
- Will be built into the assessment framework for ICB's involvement duties

The principles are

Statutory Guidance: Working in Partnership with People and Communities



By applying these principles organisations will develop strong and trusted relationships with their diverse communities, enabling them to work together to design and deliver services that effectively meet people's needs.



Learning and Support Offer

- Access to existing online and in person workshops, webinars and open discussion sessions
- Access to existing self service resources, toolkits and examples of great practice
- ICS Engagement Leads network and Start with People Network
- Guidance on annual reports and the oversight framework in 2022/23

Contact us



Link to the guidance: <https://www.england.nhs.uk/get-involved/involvementguidance/>

Comments, questions or feedback to: england.engagement@nhs.net