

TALKING, LISTENING AND WORKING TOGETHER

Meeting the North East Lincolnshire Commitment

A Community Engagement Strategy

Approved by North East Lincolnshire Union Board on November 12th, 2019

Review date 1st January 2022



North East Lincolnshire Council (the council) and NHS North East Lincolnshire Clinical Commissioning Group work closely together to make best use of our shared resources to improve the health, care and life experiences of everyone living in North East Lincolnshire.

We want to get better at how we talk, listen and work together with our communities and:

- talk to the public as early as possible so we can all work together to develop solutions;
- make sure everything we do is informed by what local people share with us about their experiences, concerns and aspirations;
- be confident that none of our communities are left out of the conversation

We have adopted the 'North East Lincolnshire Commitment' (on the right) and this strategy sets out how the council and the CCG will work to meet this.

This strategy has also been drawn up by community members, and representatives from the Voluntary, Community and Social Enterprise (VCSE) sector working as equal partners with the CCG and council.

Here we've set out the steps we will take to understand things better from the different points of view of local people and work together to develop the best solutions so we can all live well in North East Lincolnshire.

This strategy is a first step towards a clear and more consistently applied approach to developing an 'on the ground' understanding of North East Lincolnshire and its communities. This will build mutual trust and sincere relationships to help us make the right decisions and support community-led change.

The North East Lincolnshire commitment	
Talking	<p>We will be clear and honest about</p> <ul style="list-style-type: none"> ⇒ how you can get involved ⇒ what we are doing with what you've told us
Listening	<p>We will</p> <ul style="list-style-type: none"> ⇒ hear your voice and what you have to say ⇒ use what you tell us to bring about change ⇒ be open to be challenged on the way we do things
Working Together	<p>We will</p> <ul style="list-style-type: none"> ⇒ encourage all of our communities to take part ⇒ come to the places where you are ⇒ work together with you and others to make the best use of time and money
<p>Making Every Conversation Count</p> <p>Created by community members, and representatives from the Voluntary, Community and Social Enterprise (VCSE) sector working as equal partners with the CCG and council and agreed as the way to do things in North East Lincolnshire</p>	

Talking

When we are talking to you, we will be clear and honest about how you can get involved, and what we are going to do with what you have told us.

We think it is important to let you know from the start why we want to talk to you and how you can get involved, to give you more opportunity to get involved; and we will have better services and outcomes as a result. We intend to do this by talking to people as early as possible so that we can all work together to develop solutions to best meet the needs and aspirations of the population of North East Lincolnshire.

These are some of the ways we can do this:

Promoting involvement – we use a range of communications to inform people about how they can have their say. This includes social media – Facebook, Twitter, Instagram - and dedicated sections of our websites - <https://www.northeastlincolnshireccg.nhs.uk/get-involved/> and <https://www.nelincs.gov.uk/have-your-say/>

NELC consultation mailing list – people who want to be kept informed about council consultations can subscribe to the mailing list and will receive email notifications on consultation based activity in North East Lincolnshire <https://consultation.questionpro.eu/>

Accord - a community membership scheme giving people a say on health, care and wellbeing plans. Through this scheme local people tell us what things they are interested in talking to us about and how they want to do so. The scheme is led by a Steering Group of volunteers who work with the CCG to make sure Accord counts. <https://nelccg-accord.co.uk/>

'You Said, We Did' updates - published on the council and CCG websites show how the feedback we receive from people, (including experiences, ideas and opinions), has influenced decision-making locally.

Public events - where we bring communities together to talk about priorities and plans and how we have taken forward previous feedback from the public. We make sure events are interactive and held at different times throughout the day, giving more people the opportunity to attend. We publish the contents and outcomes from these sessions in a feedback report afterwards. <https://www.northeastlincolnshireccg.nhs.uk/get-involved/way-forward-events/>

Stakeholder Lists – we maintain contact lists of local stakeholders, groups and organisations, including those representing groups with protected characteristics under the Equality Act 2010. We update these groups on what is happening and regularly review and update these lists to support engagement with wider audiences.

Accessible information – our communication and engagement materials should be accessible and where appropriate provide information in other formats such as paper copies, audio, other languages and Easy Read. <https://www.northeastlincolnshireccg.nhs.uk/about-us/making-our-information-accessible/>

Listening

We want to listen to what you have to say – we really want to hear your voice and understand your priorities. We will use what you say to bring about change and we want you to tell us when we don't get it quite right. We want to make sure everything we do is informed by what you and other people tell us, in order to understand your concerns and aspirations fully. Understanding more about local values, the barriers people often encounter and the experiences of people living in different communities improves the way people and organisations communicate, giving a stronger voice to all in how things are organised.

This means working with the right communities, people and organisations at the right time on each particular issue. Working like this enables us to understand and explore different views and build successful, targeted solutions to influence positive change both in communities and within organisations.

How we do this:

Feedback – We encourage feedback (compliments, complaints, comments) about the way we do things via the council's online feedback [form](#) or CCG Patient Advisory and Liaison Service ([PALS](#)). We respond openly, appropriately and with the intention of learning from what we have been told. Or you can get in touch with the [team](#)

Surveys - Not everyone can come to meetings or can come to talk to us in person – online and paper surveys are another way for us to understand people's views. Alternative formats are available. We can also arrange for people to complete a survey by post, over the telephone, by meeting with us in person.

Workshops and Focus Groups - where we invite people to speak to us about their experiences and give their views to inform specific service developments.

Outreach – we take the conversation to venues such as markets, libraries, colleges, community centres, special interest groups and in the streets. By listening to local people and the Voluntary, Community and Social Enterprise (VCSE) groups we can agree the best places for us to go and the best ways to listen to different communities.

Diverse groups - We are developing links with groups of people who share a “protected characteristic” as defined by the Equality Act 2010 to understand their experiences and needs better and the impact on them of our proposals and plans. There are nine protected characteristics, which are Age, Disability, Gender Reassignment, Marriage & Civil partnerships, Pregnancy & Maternity, Race, Religion & Belief, Sex, and Sexual Orientation. In North East Lincolnshire we also consider unpaid carers and social deprivation as characteristics.

Overcoming barriers to participation – We always try to ensure that whenever we carry out any engagement activity in the community, we choose accessible venues that local people use and engage in ways that people are comfortable with. The Equality Act 2010 places a duty on public bodies to ensure people can afford to take part. Our Volunteer Expenses Reimbursement Policy sets out how we do this¹

Working Together

¹ Volunteer Expenses Reimbursement Policy

When we work together to develop solutions, we want to be confident that none of our diverse communities in North East Lincolnshire are left out of the conversation. We intend to do this by coming to the places people already use and working to develop links with our lesser heard groups. We also want to work together to make the best use of everyone's time and money. We will challenge ourselves and explore all opportunities to discover what is possible.

We will work together with our communities in a variety of ways including:

Community development – harnesses the power in communities to recognise their strengths to lead and initiate change. We will build relationships to better understand our communities and help improve communication about local projects. Working with those who act on what they care about and bringing together individuals in the community with similar priorities to help them engage others. We will work with communities and partners to explore how best to use all resources for social, environmental and economic benefit for that community; stepping back when the time is right.

Co-production – Brings people and organisations together, from the start, to work in equal partnership on solutions by sharing their knowledge, skills and experience. For example - with a focus on Special Educational Needs and Disability (SEND) services - children, adults, staff from different agencies and members of the voluntary sector came together to design their own recipe for 'making things better together'. Solutions designed and delivered with local people and partners are more effective and better value.

People's Panels - Members are recruited from the community to take part in the procurement of a commissioned service. Panel members review tender documents, develop questions and interview potential providers and their views directly inform the contract award decision. Panel members are fully supported to take part, and this may include providing some training and development and ensuring the process is accessible and inclusive.

Community Equality Impact Assessment Panel – Brings together community members from all walks of life who help us understand the impact of our plans and policies on groups with protected characteristic and give their views to make sure we take into account people's needs when we design our services and commission our providers.

Community Forum – The forum is made up of volunteers from the local community called community leads; they work alongside clinical and managerial staff from the CCG. Community Leads feedback concerns and compliments from the local community and challenge where appropriate to influence and inform decision-making. There are dedicated leads supporting a wide range of service areas, committees and working groups.

<https://www.northeastlincolnshireccg.nhs.uk/who-we-are/community-forum/>

Voluntary, Community and Social Enterprise (VCSE) Forum – We link directly with representatives from the VCSE sector to share information and explore opportunities for cross-sector partnership working. The Forum aims to create greater opportunities for collaboration between VCSE organisations and our public and private sector partners for the benefit of the local communities that we serve.

How will we know that this commitment is working?

We will turn this strategy into action to make a positive difference, by making sure that:

- engagement is at the heart of projects, programmes, plans and strategies and is referenced in all documents
- our staff are supported to do this effectively
- the people affected by an issue are involved in the solution from the earliest stage
- everyone working towards that solution has shared responsibility for ensuring the people to whom it matters are involved
- engagement is ongoing and doesn't end when a service is launched
- we develop relationships with community groups and partners that makes things happen
- we create opportunities to listen to seldom-heard groups
- we challenge ourselves to work differently

Putting it into practice - how we will measure our progress

- Evidence in project plans that we have spoken to people early
- Number of project groups that include representation from communities
- You Said – We Did updates for all engagement activity to be published within 6 months of the close of the engagement/consultation and where this is not possible to publish a progress update at timely intervals
- People we engage feel they are positively involved in plans and solutions
- People we engage feel that they have been listened to
- Member of groups we engage with feel that their involvement has been worthwhile
- Increase in the number of procurement processes that incorporate a People's Panel
- Talking, Listening and Working Together commitment included in service specifications/service delivery plans and part of contract/performance monitoring as part of our social value expectations
- CCG maintaining Green Star (Outstanding) rating for Patient and Public Involvement in the NHS Integrated Assessment Framework (IAF)
- Evidence of assurance from Community Forum in meeting minutes and reports around community involvement in plans and decisions
- Increased number of communities creating their own change
- Evidence that services designed in keeping with this commitment meet people's needs

Appendix 1 - Summary of legal duties, guidance and resources relating to engagement and consultation

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1. Statutes

1.1. National Planning Policy Framework 2012 (as amended)

Published by the Ministry of Housing, Communities and Local Government this provides a framework within which locally-prepared plans for housing and other development can be produced. *Plans should...be shaped by early, proportionate and effective engagement between plan-makers and communities, local organisations, businesses, infrastructure providers and operators and statutory consultees.*

1.2. The Town and Country Planning (Local Planning) (England) (Amendment) Regulations 2017

A [Statement of Community Involvement](#) (SCI) sets out how the a local authority proposes to involve its communities, stakeholders, businesses and other interested parties in the preparation, alteration and review of the Local Plan, other planning policy documents and the planning application process. The Council have a statutory duty to prepare an SCI and then review and if necessary update it every five years

1.3. NHS Act 2006

Section 242, of the NHS Act 2006, places a duty on the NHS to make arrangements to involve patients and the public in planning services, developing and considering proposals for changes in the way services are provided and decisions to be made that affect how those services operate.

Section 244 requires NHS bodies to consult relevant local authority Overview and Scrutiny Committees (OSCs) on any proposals for substantial variations or substantial developments of health services.

Section 14Z2 of the Health and Social Care Act 2012 places a specific duty on Clinical Commissioning Groups to ensure that patients and the public are involved in the planning of services, developing proposals for any changes to services, and the operation of services.

1.4. NHS Constitution 2010

The NHS Constitution came into force in January 2010. It places a statutory duty on NHS bodies and explains a number of rights which are a legal entitlement for patients. One of these is the right to be involved directly or indirectly through representatives in the:

- Planning of healthcare services;
- Development and consideration of proposals for changes in the way those services are provided; and
- Decisions to be made affecting the operation of services.

1.5. The Equality Act 2010

The Equality Act 2010 promotes fair treatment of people regardless of any protected characteristic they may have. To support development of commissioning plans and decision making, it is essential that particular engagement and communication methods take into account the needs of people with a protected characteristic and enables them to fully participate.

This strategy encourages the use of a wide range of communication methods and tools to promote access to information to ensure engagement processes are open and accessible.

Public Sector Equality Duty as contained in section 149 of the Equality Act 2010 states that public bodies must, in the exercise of their functions have due regard to the need to :

- Eliminate unlawful discrimination, harassment, victimisation and other conduct prohibited by the Act
- Advance equality of opportunity between people who share a protected characteristic and those who do not
- Foster good relations between people who share a protected characteristic and those who do not.

1.6. Care Act 2014

The CCG has directly applicable duties under the Care Act, and has further duties delegated to it via contract with North East Lincolnshire Council. These include:

- Ensuring that the promotion of wellbeing of individuals in need of care and support, and carers, is central to provision of all care and support functions
- Promoting the integration of care and support with health and health related services
- Establishing and maintaining a service for providing people in North East Lincolnshire with information and advice relating to care and support
- Facilitating and shaping the market for care and support to offer a diverse range of quality provision.

The expectation within the Care Act is that those responsible for commissioning services should develop them on the basis of active engagement and consultation with service users, carers and providers.

1.7. Children and Families Act 2014

Section 19 of the Act sets out the general principles that local authorities must have regard to when supporting disabled children and young people and those

with Special Educational Needs under Part 3 of the Act. Local authorities must pay particular attention to:

- the views, wishes and feelings of children and their parents, and young people;
- the importance of them participating as fully as possible in decision-making and providing the information and support to enable them to do so; and
- supporting children and young people's development and helping them to achieve the best possible educational and other outcomes.

The Local Offer must be developed by local authorities and their health partners, together with children and young people with SEN and disability and their families.

1.8. The Localism Act 2011

Under the Localism Act in 2011 every council in England is required to provide a 'comprehensive and efficient' library service. This must be done:

- in consultation with their communities
- through analysis of evidence around local needs
- in accordance with their statutory duties

2. Case Law

2.1. The 'Gunning Principles'

The Gunning Principles apply once it has been agreed that consultation should take place. The "Gunning Principles provide a set of key consultation propositions, established through case law, that must be adhered to. These are:

- Consultation must take place when the proposal is still at a formative stage;
- Sufficient reasons must be put forward for the proposal to allow for intelligent consideration and response;
- Adequate time must be given for consideration and response;
- The product of consultation must be conscientiously taken into account.

2.2. The 'Brown Principles'

Case law sets out broad principles about what public authorities need to do to have due regard to the aims set out in the general equality duties. The 'Brown principles' set out how courts interpret the duties, which are that:

- Decision-makers must be made aware of their duty to have 'due regard' and to the aims of the duty.

- Due regard is fulfilled before and at the time a particular policy that will or might affect people with protected characteristics is under consideration, as well as at the time a decision is taken.
- Due regard involves a conscious approach and state of mind. A body subject to the duty cannot satisfy the duty by justifying a decision after it has been taken.
- Attempts to justify a decision as being consistent with the exercise of the duty, when it was not considered before the decision, are not enough to discharge the duty.
- General regard to the issue of equality is not enough to comply with the duty.
- The duty:
 - Must be exercised in substance, with rigour and with an open mind in such a way that it influences the final decision
 - Must be integrated within the discharge of the public functions of the body subject to the duty. It is not a question of 'ticking boxes'.
 - Cannot be delegated and will always remain on the body subject to it.
- It is good practice for those exercising public functions to keep an accurate record showing that they had actually considered the general equality duty and pondered relevant questions. If records are not kept it may make it more difficult, evidentially, for a public authority to persuade a court that it has fulfilled the duty imposed by the equality duties.

2.3. Aarhus Convention - (United Nations Economic Commission for Europe (UNECE) Convention on Access to Information, Public Participation in Decision-making and Access to Justice in Environmental Matters)

The Aarhus Convention is based on three principles, or pillars namely:

- Access to Information
- Public Participation in Decision-making
- Access to Justice in Environmental Matters

It lays down a set of basic rules to promote the involvement of citizens in environmental matters and improve enforcement of environmental law.

2.4. The Doctrine of Legitimate Expectation

The doctrine of legitimate expectation is one of the Court's controls over the exercise of a decision-maker's powers. The general principle is that the Court will intervene to prevent a decision-maker from making a particular decision (or will quash a decision that is already made) where the decision-maker's prior actions or inactions would make it unfair for that decision to stand

This may arise where the decision-maker makes an express promise to do particular things during the decision-making process (e.g. a promise to consult) or where the decision-maker has consistently done those things in the past. The Court will find a **procedural legitimate expectation** where the practice is so well established that it

would be unfair or inconsistent with good administration to allow the public authority to depart from that practice.

A **substantive legitimate expectation** arises where the decision-maker has promised to keep an existing policy in force, or to do a particular thing, for a specific party or group, and that particular party or group would be substantially affected by a decision to go back on that promise (e.g. a decision to go back on a promise made to a care home resident that he or she can stay there for the rest of their life).

3. Policy and Statutory Guidance

- 3.1. [Patient and Public Participation in commissioning health and care – statutory guidance for Clinical Commissioning groups and NHS England](#) and [Involving people in their own health and care: statutory guidance for clinical commissioning groups and NHS England](#) published in 2017 set out the context, benefits and principles of involving people in health and care, the relevant legal duties and key actions for CCGs and NHS England.
- 3.2. [Framework for patient and public participation in public health commissioning](#) published in 2017 describes how NHS England involves patients and the public in the commissioning of public health services.
- 3.3. [Framework for patient and public participation in primary care commissioning](#) published in 2016 as a guide for primary care commissioners to strengthen patient and public participation in NHSEngland primary care commissioning
- 3.4. From 1st August 2016 all organisations that provide NHS care and / or publicly-funded adult social care are legally required to follow the [Accessible Information Standard](#).
- 3.5. [Homelessness code of guidance for local authorities](#) Guidance on housing authority duties to carry out a homelessness review and publish a homelessness strategy.
- 3.6. [Best Value Duty 2011 guidance](#) Authorities should consider overall value, including economic, environmental and social value, when reviewing service provision
- 3.7. A refreshed [Equality and Delivery Systems for the NHS \(EDS2\)](#) was launched in 2013 to help local NHS organisations, in discussion with local partners including local people, review and improve their performance for people with characteristics protected by the Equality Act 2010. By using the EDS, NHS organisations can also be helped to deliver on the public sector Equality Duty (PSED).

- 3.8. One of the 7 Design principles set out in [Libraries Deliver: Ambition for Public Libraries 2016 to 2021](#) says that library services should co-design and co-create their services with the active support, engagement and participation of their communities

4. Resources

- 4.1. Local Government Association [New Conversations: LGA guide to engagement](#)
- 4.2. A guide for councillors and officers working to build a stronger dialogue between council and community
- 4.3. Local Government Association [Councillor workbook: neighbourhood and community engagement](#)
- 4.4. NHS England's online [Resources](#) hub provides a range of range of toolkits and resources to support effective patient and public involvement.
- 4.5. NHS England [Principles for VCSE Engagement and Partnership Working Equality Delivery System \(EDS\)](#) aims to help local NHS organisations, in discussion with local partners including local people, review and improve their performance for people with characteristics protected by the Equality Act 2010. By using the EDS, NHS organisations can also be helped to deliver on the public sector Equality Duty (PSED).