

Bite-size guides to patient and public participation

Guide 2: Governance for participation

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NHS England's series of '**Bite-size guides**' aims to help colleagues plan and deliver the best possible patient and public participation, in line with **Transforming participation in health and care**.

For further information, please contact england.nhs.participation@nhs.net

Produced by the Patient and Public Voice team at NHS England.



Why governance?

The NHS must be more responsive to the needs and wishes of the public, all of whom will use its services at some point in their lives. We need to ensure that public, patient and carer voices are at the centre of our health-care services, from planning to delivery. Every level of our commissioning system will be informed by listening to those who use and care about our services. These guides aim to support clinical commissioning groups and others to plan and deliver good patient and public participation. We should work jointly with communities to improve our NHS together.

This 'Bite-size guide' sets out the principles for embedding patient and public voice (PPV) in governance frameworks for commissioning and service development, and suggests some practical steps you can take to ensure accountability to the public and those affected by plans and decisions.

Core principles

Public and patient participation should be present across governance frameworks for policy and work programmes. This means participation from strategic overview to service development.

1

Public and patient voice (PPV) needs to be integral to governance, not seen as an 'add-on'.

2

Avoid creating isolated public and patient voices, by having more than one PPV member in any working group that will otherwise be dominated by professionals. Multiple patient/public representatives are recommended to enable balance and diversity of perspective.

3

Reach out and include voices of communities that are seldom heard. Think through any health and care inequalities that your programme is specifically trying to address, and ensure groups affected are represented.

4

Resource and support patient and public representation appropriately. This needs to be factored in to budgets and staffing capacity.

5

Be clear about what difference PPV has made. Provide feedback in a timely manner, and be honest when issues raised are not taken forward and why.

6



Practical steps you can take

1/

Map out the governance framework of your programme to ensure patient and public participation is robust and fully embedded, from strategy and design to delivery.

2/

Build patient and public representation into the Terms of Reference of governance committees. Think about how you will recruit PPV members fairly to your committees.

3/

Ensure that resources to support patient and public voice (PPV) are included in the budget allocated to the work programme. As a minimum, this should cover any 'out of pocket' expenses incurred by PPV members in undertaking their role, including any bespoke access needs people may have to support their participation.



Practical steps you can take

4/

Be clear about what expectations there are of the patient or public member role, at each level of participation:

- i. What perspective is the member expected to bring: their own experience as a patient or carer; representing a community of interest; or representing a patient group/organisation?
- ii. What time commitment and activity is expected, including meetings and actions between meetings?
- iii. What are the confidentiality requirements of meetings?

5/

Ensure that the group as a whole supports the patient and public voice (PPV) member, and enables them to participate fully. For example, involve a range of other members in drawing up PPV role descriptions and in their recruitment.

6/

Think through how the role will be recruited. There are a range of potential approaches, but it is important that the recruitment process is clear, robust and agreed within the terms of reference.

Options include:

- i. open recruitment;
- ii. engagement from specific stakeholder groups;
- iii. inviting representatives into the governance frameworks from wider reference groups.



Practical steps you can take

7/

Once recruited, ensure that PPV representatives receive good support to help them participate fully in the programme of work. This should include:

- i. an induction process;
- ii. consider offering a mentor/buddy;
- iii. what time commitment and activity is expected.

8/

Give consideration to the appropriate timing and access to meetings, allowing plenty of advance notice for preparation, attendance, and follow up requirements.

9/

Ensure accessible formats are used for documents, including printing and posting documents, where required, and not assuming PPV members have easy or regular access to the internet.



Practical steps you can take

10/

Put in place a transparent and workable evaluation and feedback process. If patient and public voice (PPV) members feel that their collective voice is not being listened to, how should this be raised and progressed?

11/

Work with existing stakeholders including the voluntary sector and PPV groups. They are a great source of expertise, and can act as 'critical friends'.



Want to learn more?

- i** [Transforming participation in health and care](#) (NHS England, 2013) is the statutory guidance for commissioners on this subject. It includes a range of resources and case studies demonstrating good practice.
 - i** The government's consultation principles and guidance can be found [here](#). 
 - i** NHS Networks' [Smart guides to engagement](#) series provides straightforward advice on all aspects of patient and public engagement, in an easily digested format. Their [Commissioning zone: working with patients and public](#) offers links to resources and good practice.
 - i** The Equality and Human Rights Commission website includes a range of useful [advice and guidance](#).
 - i** The [Engagement cycle](#) is an online resource to help commissioners undertake meaningful patient and public engagement, for maximum impact, hosted by *InHealth* and the Centre for Patient Leadership.
 - i** The Equality Delivery System for the NHS – EDS2, is a facilitative tool that helps NHS organisations to improve their equality performance, in full collaboration with their patients, communities and staff. More information about the Equality Delivery System can be found [here](#). 
 - i** [Compact Voice](#) offers a range of useful resources and voluntary sector information.
 - i** [Voluntary sector health and care: strategic partners portal](#) is a source of news, events and resources, for and about the sector.
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 **Principles for
participation in
commissioning**

 **Governance for
Participation**

 **Planning for
Participation**

 **Budgeting for
Participation**
