

North Central London CCG consultation planning guide

Overview

The CCG has a statutory duty to engage with residents and communities in planning, and taking decisions, on local services. Beyond meeting this duty, there is a strong evidence base demonstrating the positive impact of involving residents, service users and communities in designing and delivering inclusive, accessible and effective health and care services.

A decision on whether formal consultation is required should be considered at the beginning of your project or programme, and viewed as an integral part of the work plan. It is good practice to allow around three months to ensure the consultation is meaningful and robust. To note, well run engagement follows the same route as a more formal consultation process, with little difference in terms of the way involving residents and communities is carried out.

The approach to collecting, analysing and using insights should be defined at the start of the project, to ensure that the views shared during the consultation are given meaningful consideration and we can report how were used to inform decisions and plan. Sufficient resource (staffing and budget) should be identified to deliver consultation activity and sufficient time should be built into the project plan.

This document should be read in parallel with the CCG resident and community engagement guide on our intranet ([here](#)). NHS England has produced helpful guidance on patient and public participation in health and care commissioning, found [here](#).

Consultation process overview

- Identify change e.g. revision to a local service or pathway, service relocation
- Pre-engagement: Carry out meaningful engagement with local population to find out their needs, how they access services / pathways, manage their own health and their main concerns about the service
- Use this insight to help shape plans / development of the service / pathway / policy etc.
- Present / speak with Overview and Scrutiny Committee to determine if further consultation is needed
- Consultation phase: further engagement with local people on plans
- Post-consultation phase: this includes an evaluation report on responses analysed by an independent organisation, Overview and Scrutiny Committee response and Governing Body / Committee decision.

Consultation Process Step by Step Guide

The CCG Communications and Engagement Team can support you with scoping out the requirements for your project, and where required, advise on how to commission external agency support to deliver the work. The following sets out some key stages, and considerations, to help with your planning:

1. Change to a local service, pathway or policy identified

Working with local services or providers to understand the change that is needed, and why. Think about engagement (potentially including consultation) as early as possible within the project scoping stage.

2. Undertake robust pre-engagement

This is the first step of the process – and it may not be determined at this stage that formal consultation is required. The pre-engagement will inform this decision.

This includes engagement with services users, residents and communities, but may also need to include stakeholders such as:

- Providers affected – including staff
- Partners (Council, VCSE, Healthwatch)
- Local MPs (depending on the extent of the change)
- Local Councillors
- Overview and Scrutiny Committee

3. Use pre-engagement insights to inform development the proposals for change / pre-Consultation Business Case

The CCG is required to demonstrate how the results of the pre-engagement have been used to inform and shape any proposal for change, including Business Cases. This may include the level of support for options being considered, alongside wider themes around service user experience, service accessibility, quality, location etc. We should be able to evidence how we have sought views from a diverse range of groups, including those who face significant barriers to using the services or poorer outcomes. The engagement findings should be considered alongside the Equality Impact Assessment (EIA) and stakeholder analysis.

4. Determine if you need to consult

Meet with the local OSC Chair to share the proposals and the engagement which has taken place. The OSC makes the final decision on whether consultation is needed. For large-scale service reconfigurations or re-location of services, consultation will be required. For proposed changes that would affect smaller patient numbers, or a smaller geography, consultation may not be required.

Involve NHS England assurance team in decision on consultation requirement

The NHS England assurance team should be involved – including seeking their view on a decision taken to consult. They will advise whether the consultation needs to go to Clinical Senate (depending on the scale of the change). It can take some time to set up a clinical senate so find this out as soon as possible. NHSE may also wish to assure the consultation process.

[A Clinical Senate is a senate of clinicians from across London (and sometimes further afield) who assess consultation plans and pre-consultation business cases. Their focus is how the plans affect patient care and quality]

5. Write a consultation mandate

This is a very simple and short document which highlights who is carrying out the consultation, what it is about, who will be consulted with and what the final aim of the consultation is. This is not an essential but is best practice to produce this. It should clearly articulate how the results of the consultation will be used to inform shape proposals for change and any decisions taken on the change.

6. Prepare the consultation

Different materials will be required depending on the project but core materials should include a consultation document, setting out the scope of the consultation and the methodologies that will be used. The CCG communications and engagement team can provide advice and support, but the following points should be considered:

- Your engagement should be proportionate to the change (in terms of the level of activity planned and the scope of the audiences to be engaged).
- A range of appropriate methods should be used, including 1:1 telephone and face to face interviews, face to face and online forums or focus groups, and surveys.
- You must consult and involve past and current service users, families and carers, and ensure views are received from a representative demographic mix. For larger scale changes, engagement with wider residents, community groups, VCSE should be included.
- Consultation materials need to be as easy to understand as possible with a set of clearly defined questions specifically about the proposals. The survey should include demographic monitoring and should be distributed via a range of methods (face to face, on-line, telephone etc) and channels.

You must also produce an easy read version of the consultation materials, including the proposals and survey. There are local charities we can commission who will co-produce the easy read document with service users. This can take up to eight weeks.

7. Present to the Overview and Scrutiny Committee on the Consultation and proposals

This will include the proposals, consultation documents and the proposed methodology for the consultation.

8. Present to Governing Body (and/or relevant committees) on the Consultation and proposals

This will include all consultation materials, methodology and proposals. Please note there may be other meetings you need to attend before the consultation documents and proposals come to the Governing Body. This could include a Governing Body Seminar and appropriate Committees or Boards.

9. Undertake the consultation (8-12 weeks)

The consultation must run for a minimum of 8 weeks but best practice is to allow 12 weeks. Establish how and when insights will be captured and analysed – including check-points to review insights during the consultation. This will ensure:

- Views shared are being considered and can influence the project, and any decisions, throughout; and
- The engagement can be tailored throughout the project – e.g. to explore emerging themes in more detail or to address any issues (under-representation of certain communities in the feedback being received).

Once the consultation has formally closed, there is a period of around 4-8 weeks (see point 11) that people can continue to feedback. It is possible to undertake further, focused engagement during this stage (e.g. focused on seeking views from a particular community or to look in-depth into a particular aspect of the proposal/engagement findings).

10. Develop the consultation evaluation report (usually 1 month)

It is best practice to commission an independent evaluation company to evaluate the consultation results. The independent evaluation company will analyse the responses and write an evaluation report. Allow 1 month minimum for this.

11. Feedback period (usually 1 month)

The consultation evaluation report must be published and should be widely shared (including with all those who have participated), alongside the proposals for change, Equality Impact Assessment etc. This gives people an opportunity to highlight any further gaps, concerns or appropriate ideas. Feedback received during this stage must be captured and analysed, with any appropriate action take (e.g. further engagement, see point 9). Between 4 – 8 weeks should be allowed, proportionate to the findings of the consultation and the scale of the change proposed.

During this time you present to the Overview and Scrutiny Committee on the consultation process, evaluation report and proposals. It is at this meeting, where they take into account the views expressed in the evaluation report, that the OSC will give their views on the proposals.

12. Final Decision by the Governing Body / Committee

The final consultation report should be included within the papers brought to the CCG Governing Body or relevant CCG committee, for decision on the proposal.

13. The Governing Body/ Committee decision is published and shared

The CCG communications and engagement team will support you to publish, and widely publicise, the decision taken by the CCG and information on the next stage of the programme.