

City of London Joint Health and Wellbeing Strategy Engagement Framework 2020-21

Introduction

The City of London Corporation seeks to make co-production common place in strategy and service development. However, co-production has many definitions. Use of the term without clarity on what it 'means' for public engagement can cause confusion at best, and resentment at worst.

The aim of the City of London Joint Health and Wellbeing Strategy Engagement Framework ('Framework') is to provide guidance on how the City of London Corporation can engage its local community to shape the strategy in a meaningful way. The Framework sets out:

- The approach the City Corporation will adopt
- Principles that will guide all engagement
- How the approach will be put into practice
- Next steps

Our approach

There are many definitions of co-production, as the approach is still developing and changing. However, all definitions agree that co-production includes service users, citizens and professionals coming together to influence decisions.


The definition the City Corporation will follow is from the Care Act 2014:

*"when groups of people get together to influence the way that services are designed, commissioned and delivered"*¹.

There are several stages of co-production, or public participation. To ensure both clarity and transparency in how the public will be engaged with the strategy, the City Corporation will use the International Association for Public Participation (IAP2) spectrum². The IAP2 is an international model that provides a framework on how government can effectively engage the community in decision-making processes. In developing this strategy, the City Corporation will 'consult' and 'involve' the public. It is acknowledged that due to time restrictions and Covid-19 it is not possible for the City Corporation to engage at either the 'collaborate' or 'empower' end of the spectrum.

¹ <https://www.thinklocalactpersonal.org.uk/co-production-in-commissioning-tool/co-production/In-more-detail/what-is-co-production/>

However, the public's advice and recommendations will be required for shaping and developing services. Therefore, the intention is to 'collaborate' and 'empower' the public in how the strategy is put into *action*. This distinction will be made clear throughout the engagement process. See Table 1 below for definitions.



	INFORM	CONSULT	INVOLVE	COLLABORATE	EMPOWER
PUBLIC PARTICIPATION GOAL	To provide the public with balanced and objective information to assist them in understanding the problem, alternatives, opportunities and/or solutions.	To obtain public feedback on analysis, alternatives and/or decisions.	To work directly with the public throughout the process to ensure that public concerns and aspirations are consistently understood and considered.	To partner with the public in each aspect of the decision including the development of alternatives and the identification of the preferred solution.	To place final decision making in the hands of the public.
PROMISE TO THE PUBLIC	We will keep you informed.	We will keep you informed, listen to and acknowledge concerns and aspirations, and provide feedback on how public input influenced the decision.	We will work with you to ensure that your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how public input influenced the decision.	We will look to you for advice and innovation in formulating solutions and incorporate your advice and recommendations into the decisions to the maximum extent possible.	We will implement what you decide.

TABLE 1: INTERNATIONAL ASSOCIATION FOR PUBLIC PARTICIPATION (IAP2) SPECTRUM

Our principles

A set of principles have been established to guide the engagement approach.

1. We will always be clear on the **purpose** of any engagement.
2. We will always be **transparent** about what can, and what cannot, be achieved.
3. We will take all available measures to **include and engage** all representative communities.
4. It is our **responsibility** to engage diverse and hard to reach groups.
5. We will work in **partnership** with other stakeholders and organisations to coordinate activity and avoid over-engagement.

Putting the approach into practice

Data – what do we already know?

Using the updated City of London JSNA, Public Health Profile, any recent surveys undertaken and national research a synthesis will be provided of:

- Cohorts/groups/communities
- Inequalities across demographics
- Health and wellbeing issues across demographics
- Gaps in the data

This piece of work will both help us develop questions for the public and set out the emerging priorities of the strategy.

Communication Channels

The Department for Community and Children's Services Communication team has provided a list of channels across all services that are used to communicate with the public. Work has been undertaken to map what groups are covered within these existing channels and what the gaps are.

Engagement methods

The first step will be to send a survey out to our existing communication channels. The survey will test the emerging priority areas with the public, seeking to fill in the gaps in our knowledge and understand how the Square Mile can be improved for our communities.

There are known limitations with this method of engagement. It is unlikely that the survey alone will provide a representative sample of the City of London population. It will be one method of engagement used.

Increase participation

Related stakeholders will be key to our engagement work in not only providing their experience of working with target groups but also in sharing their networks of people. Mapping work has already been undertaken of the City of London voluntary sector. We will work with chosen VCS organisation's that will help us target the hard to reach. Groups that are particularly underrepresented include older males, carers, LGBT members, BAME members and those with a disability or illness.

An engagement tool kit will be developed for stakeholders to use with their service users. Throughout the engagement period we will be reviewing how successfully underrepresented groups are being reached and make changes to the engagement approach as needed.

By addressing the reasons why people do not participate we can increase our reach with the public. Reasons for not participating include:

- Lack of interest in the issues.
- Lack of information and understanding of the issues.
- Perception that their input is not valued or will not make a difference.
- Lack of follow up or feedback previously provided for other or same issues.
- Not understanding how their contribution may have been used in the past on other or same issues.
- Engagement methods that are intimidating or inappropriate.
- Language or cultural barriers.
- Accessibility barriers – digital, venue (type of access/geographical location), time, holiday.

For some of the Square Mile's marginalised groups, for example rough sleepers, it may be necessary to finance an experienced third party to undertake engagement.

Other engagement methods

Below are examples of IAP2 engagement methods for 'consult' and 'involve'. Whilst not all these methods will be practical, they can form a basis for discussion with stakeholders on what different community groups may respond best to. For example, existing public meetings can be utilised where people are in surroundings they find comfortable. Interviews could take place with people the service users are already familiar with.

Examples of IAP2 consultation methods:

- Workshops
- Forums
- Focus groups
- Public meetings
- Online or paper surveys
- Public comment/displays
- Discussion groups
- Interviews
- Invitation for submissions
- Listening posts
- Road shows
- Ideas boards
- Citizen's panels
- Open day
- Market research

Examples of IAP2 involvement methods:

- Reference groups
- Advisory group
- Peer to peer research
- Workshop series