

Public and Patient Involvement Assurance Group (PPIAG)

Report from meeting of: Wednesday 26 October 2022

Attendance: Evan Rees, Rasheed Cader, Nishita Andrea Ganatra, Brigitte Heller, Mathew Hulbert, Vaughan McLeod, Andy Murtha, Ruth Olugbenga, Brian Rowlands, Mary Smith, Janet Thompson

Integrated Care Board (ICB) representation: Sue Venables, Jo Ryder, Kirstie Swinfield (notes)

Apologies:

Topic presented	The VCSE Alliance
Presented by	Jo Ryder, Experience and Relationships Manager, LLR ICB
Purpose of presenting	<p>The PPIAG were asked to consider:</p> <ol style="list-style-type: none"> 1. Whether the VCSE Alliance model covered the NHSE requirements to: <ul style="list-style-type: none"> • Encourage and enable the sector to work in a coordinated way • Provide the ICS with a single route of contact and engagement with the sector and links to communities • Better position the VCSE sector in the ICS and enables it to contribute to the design and delivery of integrated care and have a positive impact on health priorities, support population groups or reduce health inequalities 2. Does the VCSE Alliance model help to create a strong and effective ICB which will have a deep understanding of all the people and communities it serves? 3. Does the VCSE Alliance create a genuine partnership arrangement with the voluntary and community sector, social enterprises, and individual communities, initially with the NHS and, overtime, across all system partners?
Geographical scope of engagement	Leicester, Leicestershire and Rutland (LLR)

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<p>Demographic scope of engagement</p> <p>E.g. age, gender, income/occupation, cultural background, disability, family status.</p>	<p>Direct engagement with all Voluntary, Community, and Social Enterprise (VCSE) organisations across LLR commissioning them to engagement all communities, with particularly emphasis on those with protected characteristics, carers and the vulnerable.</p>
<p>Engagement timescales</p>	<p>The Alliance was co-designed with the VCSE sector over a period of ten months.</p>
<p>Which LLR-wide workstream does this impact</p>	<p>Communications and Engagement Cell with the aim of:</p> <ul style="list-style-type: none"> • Encouraging and enables the VCSE sector to work in a coordinated way. • Providing the ICS with a single route of contact and engagement with the VCSE sector and links to communities. • Better positions the VCSE sector in the ICS and enables it to contribute to the design and delivery of integrated care and have a positive impact on health priorities and support populations groups to reduce health inequalities.
<p>Evidence of engagement activities</p>	<p>Three co-design workshops coordinated from November 2021. Coordinated testing of website with sector.</p>
<p>Any (relevant) groups not engaged with</p>	
<p>Key themes emerging from the presentations as identified by the Group</p>	<ul style="list-style-type: none"> • The Alliance presented new ways of talking to this vital sector. It was important for the VCSE to measure engagement, as well as for the Alliance to present a clear picture of diverse communities across LLR and ensure that, through insights, the ICS was hearing the voices of people. • There were concerns for the future funding of the sector, particular in the face of budget challenges and the ICB was asked to consider the long-term sustainability of the Alliance. • In positioning the Alliance, it was important that the voluntary sector was seen as adding value and not as a way of providing services that should be provided by the NHS or social care. • The Alliance should be the key engagement tool that links the voice of people with protected characteristics, carers and the vulnerable with the ICS. • It was important to consider how VCSE groups that do not actively use the internet would find out about The Alliance, as well as how they would be able to participate and bid for funding.
<p>Areas of good practice</p>	<ul style="list-style-type: none"> • The VCSE Alliance was a real attempt to balance the voice of both small and large voluntary and community organisations.

	<ul style="list-style-type: none"> The Alliance aimed to reduce levels of bureaucracy previously adopted.
Areas for improvement and recommendations	<ul style="list-style-type: none"> The criteria for each funding bid should be clearly defined. Acronyms/initialisms should be spelt out in full (e.g. VCSE)
These engagement activities have predominantly involved: <ol style="list-style-type: none"> Co-production Co-design Engagement Formal consultation Informing Educating 	2. Co-design
Was the Group assured that engagement/consultation had been satisfactorily completed?	Yes
Was the Group assured that insights had impacted decisions/planning?	Yes
Other business	<p>The assurance tracker was discussed and it was agreed that three items (3, 15 and 29) would be moved to the closed tracker.</p> <p>The Group requested a work plan which would detail the upcoming topics they would be asked to assure.</p> <p>Reports presented to the Leicester, Leicestershire and Rutland ICB Quality and Safety Committee would be shared with the Group.</p> <p>It was agreed that future PPIAG meetings would be scheduled for 2 hours and every other meeting would be face-to-face, with a plan to trial 'hybrid' meetings, so that people who were unable to attend face-to-face could still join the meeting virtually.</p> <p>The next meeting is scheduled for 23rd November 2022.</p>