1. What does citizenship and civic engagement mean in the 21st century? Why does it matter, and how does it relate to questions of identity?

In times of economic pressures, difficulties and public services buckling under pressure it is critical we all have an understanding that engagement, citizenship and involvement of the public is important to ensure appropriate engagement with people is maintained and not for people by professionals. In 21st century the support of lay people, citizens and volunteers can offer additional capacity both paid and unpaid, a movement of people power if undertaken properly to create civic ownership and aspirations of the need to be “wanting” to part of and participate in civic duty is core to sense of belonging. This should apply to all communities from all socio-economic groups.

The meaning of citizenships and civic engagement – this two terms have become interchangeable and without clarity. 1) Citizenship is about you and your rights e.g. living in a country, having rights to participate in democracy and right to be equal. This extends to rights to live legally without concern. This is about your entitlement and you being here, you receiving the privilege 2) Civic Engagement is about people contributing to society, or being involved in a public or formal matter when one is being asked to participate or be involved – doing the right thing but being requested to by others as it’s a public function e.g. attending the event at Town Hall, being given an award, doing something and giving back to society in your local area.

Clearly, it matters as at present civic duties do not extend to all communities and it this concept with the public to have a have a greater role, a duty to be included in “local” life. Examples are Neighbourhood Networks in Leeds, Board roles of charity sectors to volunteering is poor. However, within the context of an Ageing population we need to gain support of citizens rather than seeing citizens as a threat. We should be utilising our community assets to be civic leaders working alongside people, be involved, and be active and contributors in society like our resources as co-workers.

It matters as clearly there is a mistrust of the public, the way we involve them, the outcomes of the recent activities in Scotland, the referendum, we must re-examine polls, existing mechanisms and processes that exist to involve people as from our experiences its always the usual “professional” suspects as opposed to usual “people” suspects as people do not get invited unless the Leadership (only few exist) ensure people are involved. How do we share what this role means, how do we co-design with public this understanding in language they understand (easy read), how do we promote the message and be seen as one of the “people.” This relates to Identity of the public and professional.

Private sector/other industries

Private sector e.g. supermarkets seem to get it right to know consumers as they will match demand and maximise profits in the sector. However, in this areas we have no sector leaderships as we are consumed by old metrics e.g. satisfaction surveys, complaints and concerns policies with little for service user involvement to shape or be civic citizens.

There needs to be a radical rethink, as in Leeds there are examples locally of good work where civic engagement is happening to co-design, get results and less public outcry. Leeds examples include joint working with council, third sector to develop a sense of shared outcomes e.g.

- Access usability Group – partnership with council, citizens and private sector to involve people to shape and design highways and planning i.e. John Lewis Partnership, closure of pedestrian streets, railways and new build;
- Better Lives Board – Leeds city council Adults and health and LIP, co-chaired with a councillor and citizen of Leeds;
The Expert Transport Advisory group where Leaders of the council have identified people (2 independent people) have to be partners to shape future planning of transport;

NHS and Maternity services where local people have been involved and then plans developed to change services at scale 2,000 people involved; and

The Leeds mental health framework was developed by citizens jointly with NHS/LCC and now has led to people led contract specifications being devised called “I statements”

Self-care and reliance – this does require support, citizens are not ready provided the opportunity or resources to “roll” out to wider communities how they support each other, its isolated and restricted to certain people who have sadly often the ability and education to develop such network, leading to a vicious cycle of dependency and isolation. Organisations play a significant ref: https://vimeo.com/42332617?ref=em-share

Action/recommendation: There is no single vision or consistent leadership that wants to address in a bold risk managed approach of harnessing communities.

2. Citizenship is partly about membership and belonging. Are there ways we could strengthen people’s identity as citizens, whether they are citizens by birth or naturalisation? Could citizenship ceremonies or events throughout the educational process play a role? Should pride in being or becoming British be encouraged?

The sense of belonging does exist but common themes tend to bring people together e.g. exclusion, obesity like attending weight management clinics, smoking cessation clinics. The referral tend to be via health professionals – so are these the roots to ensure people understand their roles? Are people or peers the way forward e.g. hairdressers plays a huge role in peoples life, 30 mins with them every 4 weeks – can be of impact to share and hear real stories, wisdom and plays a higher role than my medical staff or council staff. The role of the OT, therapist is of good wisdom and confidence as a “gatekeeper”, does not judge and are clearly knowledgeable to all people.

Mental Health Together We Can – is an example of people in Leeds being involved in developing the Leeds Mental Health Framework that is bottom driven by people with people, led by LCC and NHS and the 3rd sector, this led to the creation of sense of belonging, involvement and setting up policy as “togetherness.” This is hailed as an example of great partnership and then developed further as it developed MINDWELL a portal for people with mental health created with professionals and people to educate people through the complexities of the mental health system – with people and professionals.

Strengthen people identity – is this a question of definition, again have we undertaken different survey methods, at Leeds Involving People we work with all communities to ask local people what they understand by the services could be replicated in Leeds e.g. case study – Independent Access Usability Group Leeds – works with citizens, council and private sector to shape John Lewis Centre Victoria Gate, people felt a sense of belonging, being a part of the planning for the design of this building and as such people promote this without question across the country. A sense of identity, pride and meaningful involvement leads to ownership “perceptions” of people that will lead to people having an association of having worked within Leeds, their city and contributed as part of their civic duty.

How do we measure this “britishness” and demonstrate this value in public life and what actions do we take to ensure polite behaviours e.g. neighbourhoods, check on our people is enshrined in UK values, is it the British flag – this is still seen in some Asian communities as being affiliated to the National Front, EDL, is this confused with patriotic values as in USA.

Leadership systems and visibility

Like Grenfell Towers, the fall out created by lack of a visible compassionate Management led to a huge failure by the council then having to re-establish and re-profile their role after gaining a bad reputation. It is clear there are a only few Leaders who want to genuinely meet with people, are
concerned about people and do meet people outside the formal board structures, where they are presented with orchestrated people who will sing the usual good, bad and indifferent case study or user experience. Re-establish Trust and confidence indicators; measures that will make public bodies work in communities as part of their role or with independent organisations by setting up new:

- Set Indicators to show how professionals values are demonstrated e.g. communication, and ability to relate to the public and what outreach did you undertake in the community;
- The current leaderships models ensure focus on outcomes, as we move towards local based work, the systems need to change e.g. supervision notes to include how do you speak, make contact and connect with local people as part of your work (all public bodies need to measure this);
- Encourage commissioner to think collectively and with right organisations e.g. self-run groups, Are we maximising on these community “anchors” roles, and creating local roles for local people that are new and have power and established respect as these people are from those communities – bottom up approach

We need to rethink what people think as their role changes as they grow older, new communities and then question what attracts communities to engage or belong to some groups: LIP experiences are people get involved because:-

- Identify with the community and the topic, with support of peers. Often safety in numbers and the feelings the time invested is worthwhile and they will be valued as time as we get older is recognised as a commodity
- Ensure opinion or views have chance to be voiced in safety –use an independent body e.g. not a provider
- Targeted efforts need to be made with a need to go places where people do attend, with risk management with care and safety, yet we stand around supermarkets in the cold and ask questions that entice as there is nothing to “sell” no blurb only the people sharing their priceless experiences – in confidence away from the point of service delivery

**Recommendations/Action:** “Peoples Chief Officer” to be developed led by people for people in each city, where people can relate and connect to a “real” person?

**Recommendations/Action:** Develop a recognised qualification (co-designed with People and local university like NVQ level) to be provided that says an achievement in “civic duty” award not only about language but how you integrate and are committed to living in Britain; Have we asked families what and how they can be involved to shape this agenda? Or is it the usual organisation and same people that provide feedback, what are the lessons are we radical to make strong position statements from Leaders political and community?

3. Civic engagement can be seen as both a responsibility and a right of citizenship. Beyond the existing legal framework, should citizens have additional formal rights and responsibilities? How do you see the relationship between the two? Should they have the force of law individually or be presented as reciprocal duties between citizen and state? How should they be monitored and/or enforced?

The laws need to be re-enforced, with guidance as at present there is no parity of user rights between health and council. This power balance needs to change with the citizen as the consumer, the relationship is different if you are phoning the council or health, the tone changes e.g. consumer tends to have “more” rights with the council e.g. bin collection, and less with NHS services as this service is fixed as a “take it or leave it” service offer

The duty to involve laws around engagement must be a pre-requisite not after thought as a tick box e.g. NHS Institute asks before you can apply for a grant the question have you “consulted”,
usually no guidance exists as to how or what and that extends to CQC that asks question “have you involved the patient” but what does legislation is subjective.

Information to the consumer as to rights is unclear when can they raise a concern, who is the lead person and with more integration this will blur boundaries and roles, system changes mean nothing to people, who has communicated the new service offer? It is in the usual manner postcards, letters, we are excluding new communities, the hard to reach or people with sight, impairments e.g. case in example is the accessible standard – not enforceable but good legislation to have in place

I believe the need to show, share case studies of the economic benefits to people and financial benefits of strong relationship with the public – these include Hospital To Discharge in Leeds with Age UK working with key partners inc :

- added value arising from patient/public ideas about how services could be improvement
- Accountability to local people – strengthening quality of governance and obtaining mandate

Civic engagement needs to be formal perhaps not social responsibility or a contract (not clearly worked in main around CSR) not a “memo of understanding” or a “code of compliance” as they all have not materialised. We suggest strong actions that move beyond rhetoric to action being demonstrated e.g. how seriously you have undertaken this role,

People do have rights in the NHS Constitution and Involvement duties but can be ignored e.g. changes are happening where only professional bodies are consulted but this right extends to the public and no one is able to exercise the right to challenge as they do not have the confidence, skill or support to undertake this huge role without reprisal. How do we encourage people to undertake this role, enabling and ensuring they are supported to know the impact of the changes, being briefed and able to participate and ask questions as “Lay” people to professionals?

**ACTION/RECOMMENDATIONS:**

1) There should be a people **Inspector** Directorate (Peoples) created with additional duties working alongside regulatory bodies – where people have their say actioned with clear accountability and not “collusion” or conversations behind closed doors. This should be led by people for people with people, who reports regularly on behalf of people to the people e.g. a role like a Chief Officer- People should have the role to monitor and inspect services as this would be stronger than the current systems that involves only low ratios of people: people e.g. Healthwatch are becoming professional lead and are unable to challenge the council or health as they are funded by those bodies. This should be centrally funded and controlled centrally to be effective.

2) To encourage to collaborate and not competition in the sector by creating a team spirit – Team that is real and connected, extends to involve staff, patients, carers, citizens and communities, There is a growing interest in the people agenda, yet not co-ordinated and with a lack of thinking by commissioners

It does mean a review of how we are organised, how we work, how we are held accountable and how we are measured? Too often we try to adopt new ways of working without changing the environment in which we work – same outcomes models, metrics often old fashioned.

We need to invest and plan, get people to be Involvement ready, assets are “our” people not them and us culture, no divides.

4. Do current laws encourage active political engagement? What are your views on changes to the franchise for national or local elections, including lowering the voting age? Should changes be made to the voting process or the voting registration process? here

5. What should be the role of education in teaching and encouraging good citizenship? At what stages, from primary school through to university, should it be (a) available, and (b) compulsory? Should there be any exemptions? Should there be more emphasis on political
participation, both inside and outside classes? How effective is current teaching? Do the curriculum and the qualifications that are currently offered need amending?

People should be encouraged to be involved by understanding there is a fundamental need to understand and be active from school age to further education by creating new training modules as core on what standards are expected of people as part of citizenship targets for all students in all courses from Curriculum could include, as part of delivery:

- Explain what does communities and neighbourhoods means, how to work within them, be focussed – relationship – they are focus on building relationships with people – not just with people who a Local Area Coordinator may “walk alongside” but also with those in a community who have strengths and assets.
- Employers have a role too e.g. like corporate social responsibility all leaders, staff should be assigned to Lead on communities not just usual activities of painting but outreach into communities, seen as part of the community e.g. having tea with homeless people.

6. Do voluntary citizenship programmes such as the National Citizen Service do a good job of creating active citizens? Are they the right length? Should they be compulsory, and if so, when? Should they include a greater political element? Should they lead to a more public citizenship ceremony? Are they good value for money? What other routes exist for creating active citizens?

There are challenges for involvement of the public and government:

1) No money to support and work with groups as the current metrics do not meet government targets or health targets as community work is not seen as an asset or an indicator. It used to be Trust and confidence for Police Forces, Cohesion targets or community workers are less seen as we eroded youth workers, real community workers to call them health trainers, improvement specialists yet they tend to be barriers e.g. eligibility is inflexible

2) Most vol sector organisations do not fit into the service industry that is being created for the commissioner around this work except loosely “cohesion” sector e.g. social prescribing which is shifting demand from GP’s to VCFS but yet it reduces demand – does it or stops people accessing GPS who have less money less education etc.

The approach should be to work alongside the people, provide training and support and to understand people’s agenda, and have good relationships, building this takes time and time is often not allocated or factored in by commissioners, or time lags too short to start this work for a purpose:

- “Go” to them – and not just turning up when we want something, we spend time with communities. We walk among them.
- We must as public bodies, VCFS and other recognise CDW principals have been eroded and investment diminished over decades in communities. It is only at times of “cost reduction” we tend to ask peoples view, we must understand the architecture of communities, existing and new champions, the grass roots organisations supporting their vulnerable members, changing communities, their third places
- We design our work to fit around communities, to go to speak and obtain information in a non-judgmental approach with a street-level local knowledge by combining outreach, face to face an truthfully going where others don’t want to go, we go places that are risk assessed and over complicated to avoid these areas, the SOA’s, the “no go” areas

7. How can society support civic engagement? What responsibility should central government, devolved and local governments, third sector organisations and the individual have for
encouraging civic engagement? What can the Government and Parliament do to support civil society initiatives to increase civic engagement?

The government need to invest as we did in regions and in communities to be able to be self-reliant, resilient and are capable, we need to be able to be know who to go to when there are issues of concern by;

- Creating roles of local co-ordinators to operate at ward level can be people jointly with professionals leading them in communities at grass roots;
- Create “Trainee” roles of community people that can work alongside who live in a community who have strengths and assets of local areas ,not new people established connectors; and
- Target work – the aim is to be responsive to people who have slipped through the net and are not part of the system as life goes on more of these people will be “us” too, alone and without support

The government must create 1) trainers, 2) Encouraging professionals to work 7 days a week attending venues using groups like LIP; 3) hiring community people as opposed to setting high bars and excluding people as they do not possess certain skill sets of being Price qualified and project management skills

Third sector – the government needs to expand the role of the smaller groups and work within confined parameters or specific areas e.g. peer support, mentoring, substance or mental health and usually do not have the pre-skills to empower and enable people but usually to come of substance, seek housing or benefit advise but not creation of self-run groups, supporting people to have “coffee clubs” or free space

The need to consider the voluntary and community sector as “helpers or connectors” to statutory services to considering what types of services need to be in place to respond to a variety of needs. I believe this is the future co-working and co-designing and see nil examples of this however, there are a number of places that are beginning to try to understand the scale and contribution of the VCS e.g. in Leeds

We can reach mass number and diversity of voices and this is invaluable in and of itself. But also clear value in influencing service redesign to meet diverse needs and preferences of mosaic of communities. Example Care Closer to Home – original proposal about telephone support, rich feedback about people with English as second language, Deaf and Hard of hearing etc.

8. What are the values that all of us who live in Britain should share and support? Can you identify any threats to these values, which affect the citizenship of, for instance, women or various minority groups? If so, how can their citizenship be strengthened?

Review why the lack of shared responsibilities in the UK and increased tensions – is it parental failures to set high standards of all people to be hospitable and tolerate? Is it mistrust of Government Policy and their failure to communicate well intended actions?

9. Why do so many communities and groups feel “left behind”? Are there any specific factors which act as barriers to active citizenship faced by different communities or groups - white, BME, young, old, rural, urban? How might these barriers be overcome?

Try and bring people with the system changes in Leeds having a good culture of partnerships, distinction of roles and clarity in the sector. Then clear improvement can be made creating a sense of inclusion by working with all communities across Leeds in all areas and where professionals do not target
1) St Gemma’s hospice care – NHS CCG Leeds
This was another innovative collaborative way of reaching communities to understand why diverse communities do not access hospice care. This bid was jointly developed, with people and an application for funding to local NHS CCG grants panel being made. This bid required leaders being able to be open to listen, and embark on accepting some difficult conversations may need to take place with communities directly.

Community Forum – BME Forum Adults and Health Leeds City Council. People are engaged with the council facilitated by the 3rd sector i.e to ensure people develop the trust and confidence, are attending, and devise joint agendas on various live key issues such as end of life, council one stop shops etc. This forum is chaired by a Chief Officer and co-chaired by people, selected by people and all meetings held in community services and its role is now expanding to ensure health plays a key role.

Cohesion is alive in Leeds and people sit around the table, no power as citizens to talk and share and learn- all are invited to these meetings

Reference:
http://www.nhsconfed.org/blog/2016/01/thinking-outside-the-tick-box

7 September 2017