

The Quality Framework for Community Engagement and Participation:

Supporting the delivery of effective engagement, developing practice and sharing learning

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Introduction

The [Quality Framework for Community Engagement and Participation](#) supports NHS boards¹ and health and social care partnerships carry out effective community engagement and demonstrate how they are meeting their statutory duties for public involvement and community engagement. It provides a framework to organisations and those assuring them, on what good quality engagement looks like and helps to develop practice and share learning.

It is suggested that the self-evaluation is completed on a 12-month rolling cycle by NHS boards and health and social care partnerships. However, organisations can decide when to use the framework and which domains to include. This self-evaluation will form the basis for organisations demonstrating how their engagement activity is in line with statutory duties, as set out in national guidance.

Regular self-evaluation should form part of good internal governance and is a key driver for local improvement work. Improvement plans that are developed in response to the self-evaluation should also be monitored and regularly reviewed.

Organisations should discuss their approach with Healthcare Improvement Scotland (HIS) in order for us to provide timely advice and support.

For national NHS boards, this approach should be followed, with appropriate changes made to take into account their specific remit and purpose.

Background

The framework is based on the Quality of Care Approach designed by Healthcare Improvement Scotland and was developed with The Care Inspectorate and other key stakeholders.

Healthcare Improvement Scotland has a statutory responsibility to help drive improvement in the quality of health and social care services and to collaborate where appropriate in the delivery of these duties.

¹ Not all statements will be applicable to both territorial NHS boards and national NHS boards due to the individual circumstances of national NHS boards.

Healthcare Improvement Scotland has particular delegated statutory responsibilities to support, ensure and monitor the public involvement duties in respect of health services across NHS boards and health and social care partnerships.

Development

This framework was developed with colleagues from across health and social care and other key partners. As well as supporting internal and external assurance, it provides an improvement tool primarily for the use of health and social care providers. It has been designed to support reflection and self-evaluation, which is an important first stage in any quality improvement journey.

The framework was tested with four organisations during 2021-2022 and their feedback and experience has been used to review the tool and guide to self-evaluation.

The Quality Framework for Engagement and Participation was developed for an organisational review of the quality of community engagement and participation. However, during the testing phase some organisations used the framework at a service level to review engagement structures and processes. If being applied at a service level the same approach should be taken but adapted to the service being reviewed.

This framework supports the principles contained within the Scottish Government and COSLA² community engagement and participation guidance [Planning with People](#) (2024) and supports its use.

[The Health and Social Care Standards](#), published in 2017 by the Scottish Government, set out what we should expect when using health, social care or social work services in Scotland. The objectives of the Standards are to drive improvement, promote flexibility and encourage innovation and set out the rights of people to be involved in decision-making regarding the provision of care services.

What is community engagement?

“Community engagement is a purposeful process which develops a working relationship between communities, community organisations and public and private bodies to help them to identify and act on community needs and ambitions. It involves respectful dialogue between everyone involved, aimed at improving understanding between them and taking joint action to achieve positive change”.

² Convention of Scottish Local Authorities (COSLA), www.cosla.gov.uk/

The framework seeks to identify, support and assure engagement activity within organisations in relation to routine engagement; specific engagement activities (for example, engagement on strategies and strategic plans); and internal governance systems for community engagement activity. The framework should be used by both senior management and staff to inform reflection, evaluation and decision-making about how best to improve engagement with users of the services.

The framework is not designed to be a checklist. It should be used to support regular open and honest organisational self-evaluation as part of routine internal assurance processes. This can help to identify the support needed to embed meaningful community engagement.

The self-evaluation process

Self-evaluation is a process by which organisations and services reflect on current practice to identify areas where action could drive improvement in service delivery and ultimately, in outcomes for people experiencing and accessing their services.

The process should also celebrate what is going well in terms of community engagement, what can be learned and spread across the organisation.

The self-evaluation tool is available on our [website](#).

Domains - the outcomes to be measured

The self-evaluation should tell a story about where you believe your organisation, or service, to be overall against each domain in the framework.

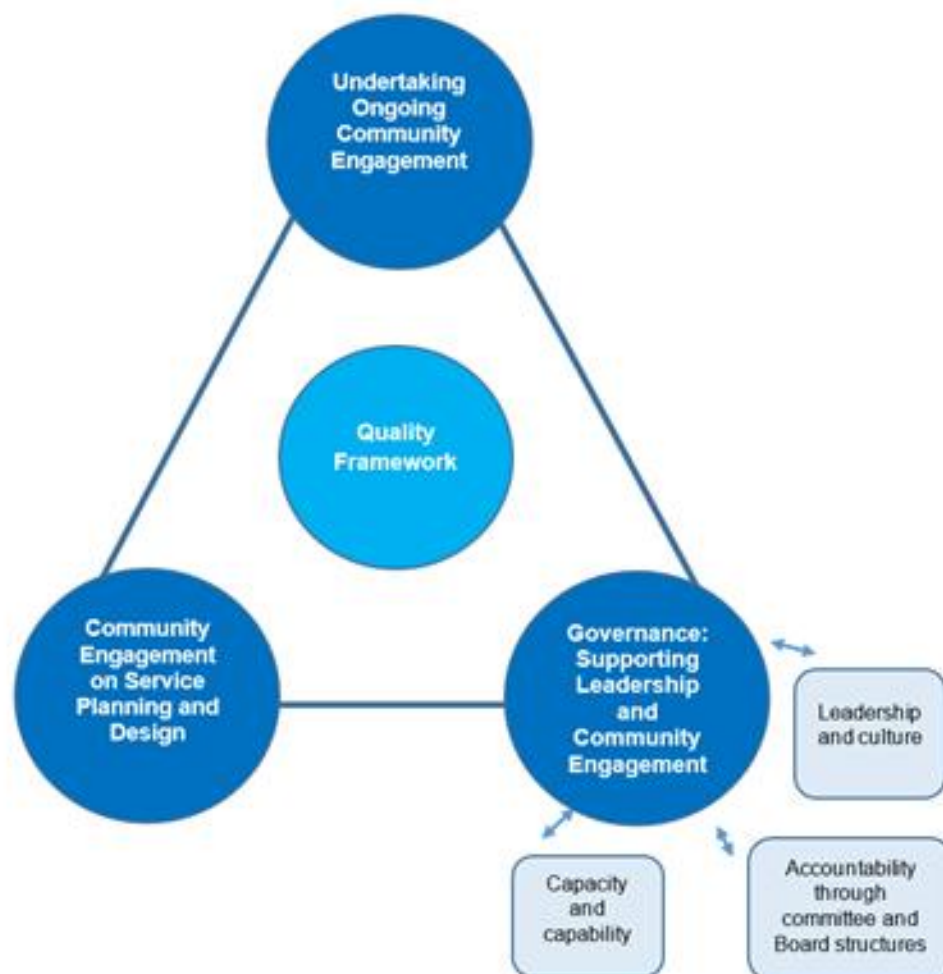
This self-evaluation tool enables organisations to evaluate their performance against three areas of focus, called domains, which are outlined within the framework.

Each domain has two associated quality indicators and statements to guide discussion, and support evaluation with a view to answering key questions. They could be considered outcomes to be measured.

Domain 1: Ongoing engagement and involvement of people.	• The organisation undertakes ongoing engagement with people and communities to ensure that services meet their needs, identify sustainable service improvements and to develop trust.
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	• The approach to engagement is inclusive, meaningful and is evaluated to identify learning and the impact.
Domain 2: Involvement of people in service planning, strategy and design.	• The involvement of people and communities has had a positive impact on service change and strategy development and has been planned as part of the organisation's wider engagement strategy. • People representing communities have been involved throughout the development, planning and decision-making process for service change and strategy development.
Domain 3: Governance and leadership- supporting community engagement and participation.	• Robust corporate governance arrangements are followed for involving people, founded on mutuality, transparency, equality, diversity and human rights principles. • To engage effectively and inform decision-making, the organisation supports and improves the participation of people by dedicating resources (in people, time and budget).

Domain three should be completed with input from senior staff and executives with responsibility for the delivery and governance of the organisation's community engagement work. It is important to have organisational buy-in to using the framework to ensure staff and stakeholders are supported to carry out self-evaluation, improvement planning and that the improvement plan is supported.



Fundamental Principles

The principles for engagement are drawn from statutory duties, best practice and supporting documentation.

- **Proportionate** - the scale of the engagement should be related to the impact of the change or policy.
- **Robust** - the information shared is evidence based and there is sufficient information to give 'intelligent consideration'. The process makes full use of available methods for engagement.
- **Collaborative** - genuine opportunity for people to influence decisions and undertaken when proposals are still at a formative stage.
- **Inclusive** - involving the people most affected by change or policy from the beginning and ensuring that the engagement process is fully accessible to all.
- **Timely** - engagement from the outset and ensures that there is adequate time for consideration and response.
- **Transparent** - information is accessible and publicly available, and there is due consideration of the engagement feedback when coming to a decision.

Links with statutory duties and national guidance

The framework has been developed to reflect current policy, guidance and standards and should be considered in conjunction with public involvement duties.

The relevant duties, guidance and standards that informed this framework are noted in [appendix 1](#).

NHS boards, health and social care partnerships and Local Authorities all have a statutory responsibility to involve people in developing and delivering care services. All relevant public bodies are expected to demonstrate how they are engaging with communities, and to evidence the impact of engagement. The Scottish Government and COSLA, [Planning with People](#) guidance supports care organisations to meet their legal responsibilities.

Domain three focuses on governance and in particular [COSLA's New Blueprint for Local Government](#) and the Scottish Government [NHS Scotland - blueprint for good governance](#).

The organisational approach

It is important to understand how well your organisation is currently engaging. This can be done systematically, efficiently and quickly using a range of methods. You might want to know:

- What role do communities have in your organisational structures?
- How do people respond when you communicate with them?
- Are levels of public satisfaction and trust in your organisation high or low?
- How does your organisation view engagement?
- Is engagement regarded as important and is there a shared view of what it means?
- Has there been a culture of tokenism?
- Has engagement influenced decisions?

Self-evaluation is a process by which organisations and services can reflect on current practice to identify areas for improvement in service delivery and ultimately, in outcomes for people experiencing and accessing their services. Improvement on the basis of self-evaluation, rather than that which is solely mandated by external agencies, can inspire greater local ownership of issues and the design of more effective solutions.

We recommend that public and community representatives play an active role in the completion of the self-evaluation and identification of areas for improvement. The diagram below highlights the key steps in the process with the self-evaluation step providing an important first stage in the quality improvement process.

Organisational commitment and buy-in

The framework requires organisational commitment and buy-in to the process to ensure appropriate resources are allocated; input to the self-evaluation in relation to domain 3 (Governance: Supporting Leadership and Community Engagement); and, support with implementing the improvement plan.

We would also recommend that the self-evaluation and improvement plan are validated with any designated community engagement/public involvement committee and with the Board.



Stage in the process	Key questions	Key tasks
1. Self-Evaluation The self-evaluation tool is shared with the identified people within the organisation/service and with people who participate, or have taken part, in engagement activities.	How are we doing? Do we understand how good our engagement is and the impact it has? Who do we need to involve in this process?	• Pre-meeting with participants to provide background, explain process and agree approach. • The self-evaluation is sent to participants ensuring sufficient time (2/3 weeks) for completion. • Schedule the consensus and improvement planning sessions.
2. Consensus Session Individual responses are collated by the organisation/service and shared ahead of the session. At the session, the results are reviewed and discussed to identify strengths and areas for improvement.	What is working well? How do we know that? What evidence do we have to support this? Where do we need to focus improvement?	• Share collated self-evaluation results and evidence ahead of the consensus session. • Identify good practice and capture areas for improvement. • Share the identified good practice and learning.
3. Improvement Planning Discussion session to identify and agree key priority areas for improvement and agree potential actions, resources and leads.	What do we plan to do next? What are the key priority areas for improvement? What are our improvement priorities? What changes do we plan to test out?	• Informed by discussion at the consensus session and suggestions made in the self-evaluation. • Capture key priority areas for improvement and discussion. • Agree how the improvement plan will be developed.
4. Improvement Plan Development of a draft improvement plan for the 12 months ahead detailing the risks, resources, timescales, leads for each action and intended outcome/impact that achieving this improvement will provide.	How will we measure improvement and impact? What resources do we need? What are the timescales? Who needs to be involved? How will we monitor progress?	• Informed by discussion at the improvement planning session. • Identify a lead person for each of the actions. • Agree process for regular monitoring of progress. • The agreed draft improvement plan is approved by the relevant committee or Board. • Publish the plan.
5. Improvement Activity Activity to deliver the local improvement activity led by the organisation/service, with support from HIS-CE.	Are we making an impact? How do we know this?	• Review progress and provide regular updates on progress to the relevant committee or Board.

The self-evaluation tool

The approach, layout and prompts are based on quality improvement approaches used by Healthcare Improvement Scotland so will be familiar to organisations that have taken part in the [wider assurance work Healthcare Improvement Scotland](#) undertakes.

The self-evaluation should tell a story about where you believe your organisation to be overall against each domain in the framework. The following key questions should guide responses to the statements:

- How are you doing in respect of this statement?
- Do you understand how good your engagement is and the impact it has?
- How do you know this?
- Do you have evidence to show how good you are?
- What do you need to do better or differently? (For example, what are the key next steps or areas for improvement the organisation needs to take forward to improve engagement?)
- A comments section is available at the end of each domain for NHS boards and health and social care partnerships to highlight additional relevant information.

It is the responsibility of NHS boards and health and social care partnerships to be open and honest in their response and to consider the self-evaluation in with relevant staff and stakeholders. This will provide opportunities to:

- Review what progress has been made and what development and learning has happened
- Allow for reflection and challenge with key stakeholders
- Provide assurance to the service providers, the NHS boards and health and social care partnerships and the public about the quality of engagement
- Highlight areas of good practice for sharing both internally and externally, and
- Highlight areas for improvement and levels of priority.

Organisations can also consider additional measures and factors when considering their evaluation against each domain and statement.

Undertaking self-evaluation

The completed self-evaluation should focus on outcomes rather than activities. This could include a description of the impact of engagement, changes made as a result of feedback, or information on how potential impact is being monitored.

We have developed [a guide](#) to support evaluation and provide practical guidance and advice on how to approach this process.

However, the process is adaptable and we suggest that you discuss and agree the approach with people you plan to involve.

The test sites took a flexible approach and adapted their approach based on feedback from participants.

Evidence

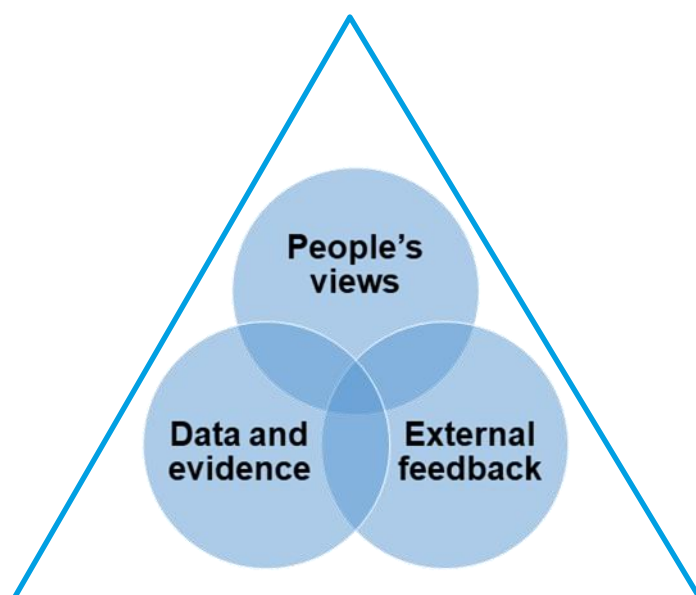
When reviewing evidence it is important to always consider the outcome:

- What happened as a result of implementing a particular policy, service change or improvement activity?
- What was the impact on those receiving and relying on the service, those delivering the service or those supporting the organisation to deliver the service?
- What learning was achieved and how was learning shared with relevant people, across the organisation and wider, to support ongoing quality improvement?

Triangulation of evidence

People completing the self-evaluation are encouraged to use information from different sources to triangulate evidence of the quality of engagement. For example, evaluation feedback, direct observations, consultation reports, discussions with staff and people experiencing and using services. You should use a blend of qualitative and quantitative evidence.

As no one part of the triangle might provide you with the full information, the key is to triangulate all the information you can to inform the self-evaluation process.



Demonstrating engagement activity in line with statutory duties

The statements provided within self-evaluation reflect and align with current policy, guidance and standards. On completion of the self-evaluation, the organisation can use the feedback to inform the improvement planning, and subsequent activities and also support ongoing internal governance and assurance.

Engagement when carrying out service change

Service change

Healthcare Improvement Scotland has a statutory role across NHS boards and health and social care partnerships to support, ensure and monitor patient focus and public involvement activities relating to health services. NHS boards and health and social care partnerships should therefore keep Healthcare Improvement Scotland informed about proposed service changes from the earliest possible stage.

The quality framework is intended to be used for organisational or service level self-evaluation of engagement, not to self-evaluate service changes or redesign. Healthcare Improvement Scotland has a quality assurance role in this process and further information can be found on our website - <https://www.hisengage.scot/service-change/>

Appendix 1: Guidance, duties and standards reviewed to inform the Quality Framework for Community Engagement and Participation

The development of the framework and self-evaluation took account of the following guidance, duties and guides. Therefore, it may be useful to consider which information and evidence you may have already collated for other reviews and self-evaluation, such as recent inspections by Healthcare Improvement Scotland, recent service reviews, [Clinical Governance Standards self-evaluation](#), Audit Scotland reports.

Statutory duties

- NHS Reform (Scotland) Act, Section 7: Duty to encourage public involvement - www.legislation.gov.uk/asp/2004/7/contents
- Public Bodies (Joint Working) (Scotland) Act 2014, section 36 - <https://www.legislation.gov.uk/asp/2014/9/section/36/2014-04-02?timeline=false>
- Equality Act 2010 - www.legislation.gov.uk/ukpga/2010/15/contents
- Fairer Scotland Duty (2018) - <https://www.gov.scot/publications/fairer-scotland-duty-guidance-public-bodies/>
- Islands (Scotland) Act 2018 - www.legislation.gov.uk/asp/2018/12/contents
- Community Empowerment (Scotland) Act 2015 - <https://www.legislation.gov.uk/asp/2015/6/contents/enacted>
- Human Rights Act 1998 – <https://www.gov.scot/policies/human-rights>

Guidance

- Planning with People- Community engagement and participation guidance for NHS boards, Health and social care partnerships and Local Authorities that are planning and commissioning care services in Scotland, Scottish Government and COSLA (May 2024)- [Part 1 – Planning with People - Health and social care - Planning with People: community engagement and participation guidance - updated 2024 - gov.scot \(www.gov.scot\)](#)
- Health and Social Care Standards: my support, my life, Scottish Government (2017) - www.gov.scot/publications/health-social-care-standards-support-life/
- CEL 4 (2010) Informing, Engaging Consulting People in Developing Health and Community Care Services, Scottish Government 2010 - www.sehd.scot.nhs.uk/mels/CEL2010_04.pdf
- The National Standards for Community Engagement (2016), Scottish Community Development Centre - www.scdc.org.uk/what/national-standards/

- NHS Scotland Health Boards and Special Boards – NHS Scotland - blueprint for good governance: second edition - [NHS Scotland - blueprint for good governance: second edition - gov.scot](#)
- Ministerial Strategic Group for Health and Community Care Review of Progress with Integration of Health and Social Care, Final Report, February 2019 - [www.gov.scot/publications/ministerial-strategic-group-health-community-care-review-progress-integration-health-social-care-final-report/](#)
- COSLA's New Blueprint for Local Government - [www.cosla.gov.uk/ data/assets/pdf file/0021/19551/LG-Blueprint.pdf](#)
- Planning and delivering integrated health and social care: guidance - [www.gov.scot/publications/guidance-principles-planning-delivering-integrated-health-social-care/](#)
- Audit Scotland expectations for auditing Best Value in IJBs/HSCPs - [Best Value | Audit Scotland](#)
- Community Empowerment Act (CEA) Guidance, Part 2 Purpose of Community Planning - [www.gov.scot/publications/community-empowerment-scotland-act-2015-part-2-community-planning-guidance/](#)
- Gunning Principles - [www.consultationinstitute.org/the-gunning-principles-implications/](#)
- Inclusion health principles and practice, Public Health Scotland - [https://publichealthscotland.scot/media/2832/inclusion-health-principles-and-practice.pdf](#)
- Gaun Yersel – Self Management Strategy for Scotland - [www.alliance-scotland.org.uk/blog/resources/gaun-yersel/](#)
- Third Sector Engagement Matrix - [https://vhscotland.org.uk/engagement-matrix/](#)
- Equal and Expert – Best Practice Standards for Carer Engagement - [https://carersnet.org/wp-content/uploads/2021/10/Standards-for-Carer-Engagement.pdf](#)
- Charter of Patient Rights and Responsibilities - [www.gov.scot/publications/charter-patient-rights-responsibilities-2/](#)
- Right First Time, Scottish Government - [https://www.gov.scot/publications/right-first-time-practical-guide-public-authorities-scotland-decision-making-law-second-edition/#:~:text=Right%20First%20Time%20is%20a%20practical%20guide%20for,public%20discourse%20around%20the%20actions%20of%20public%20bodies.](#)
- Principles of Community Empowerment, Audit Scotland - [www.audit-scotland.gov.uk/report/principles-for-community-empowerment](#)