

Community engagement to improve health

<http://publications.nice.org.uk/lgb16>

Published: 12 March 2014

Introduction

This briefing summarises NICE's recommendations for local authorities and partner organisations on how community engagement approaches can be used to improve the planning and delivery of all services, including those that impact on health. It is particularly relevant to health and wellbeing boards. This includes local healthwatch organisations that sit on these boards.

Community engagement is a highly complex area^{[1],[2]}. NICE recognises that local authorities have considerable experience in this area. However, the set of evidence-based principles described here could help strengthen the relationships they have with the people they serve. Certainly, the principles will ensure any investment in a people-centred approach to improve health and health-related benefits is worthwhile, for both local authorities and their local communities.

Local authorities will also need to take the local context into account when putting these evidence-based recommendations into practice. This includes health issues of particular concern locally, community and political preferences and public health resources.

For the purposes of this briefing 'community engagement' is used as an umbrella term covering 'community engagement' and 'community development'. It is about encouraging people to get directly involved in decisions that affect their wellbeing. Examples where their input will be needed include new building or housing developments, the availability of leisure services, access to housing, safe and secure neighbourhoods and employment opportunities.

Multiple terms are used to describe different approaches to community engagement, but the approaches are broadly grouped as follows^[3]:

- information provision and exchange
- consultation
- co-production
- delegated power
- community control.

Community engagement ranges from the simple provision of information to power sharing with local communities. The former may impact on the appropriateness, accessibility, uptake and, ultimately, the effectiveness of services. But the latter is more likely to have a positive impact on service quality, the development of a real sense of community, an improvement in socioeconomic circumstances and community empowerment. Ultimately, it can have an effect on population health and health inequalities.

A range of methods may be used including: citizens' panels and juries, neighbourhood committees and forums and community champions.

Effectiveness will depend on the context in which the approach is used and the process used to implement it – poor implementation may have a negative impact^[3].

Key messages

- Local authorities have a responsibility to promote and protect health, tackle the causes of ill-health and address health inequalities – engaging effectively with the local community can help achieve this ([Health 2020](#); [Healthy lives, healthy people](#); [Fair society, healthy lives](#)).
- If local authorities and their partners get local communities involved in decisions about how to design or improve services this will make services more effective, cost-effective and sustainable – and there will be greater uptake.
- Engaging with the community can build trust in local authorities and their partners by improving accountability. It can also help develop a sense of community and encourage people to adopt more healthy attitudes and behaviours^[4].

- Local authorities may be at risk of challenge or judicial review if community engagement does not adhere to legislation. There is also the risk of getting community engagement wrong and there is legislation on when and how it should be done, for example, the [Equalities Act 2010](#) and the Gunning Principles^[5].

The National Institute for Health and Care Excellence (NICE) is an independent organisation providing guidance and advice to improve health and social care.

For further information on how to use this briefing and how it was developed, see [About this briefing](#).

^[1] Morgan A, Popay J (2007) Community participation for health: Reducing health inequalities and building social capital. Public Health: Social Context and Action: Social Context and Action. Maidenhead: Open University Press p154–65.

^[2] Coulter A (2009) Engaging communities for health improvement: A scoping study for the Health Foundation. London: Health Foundation.

^[3] Popay J (2010) Community empowerment and health improvement: the English experience. Morgan A, Davies M, Ziglio E (editors) Health assets in a global context: theory, methods, action. New York: Springer p183–195.

^[4] [Strategic Action Programme for Healthy Communities Literature Review - Phase one: November 1999–March 2000](#).

^[5] The Gunning principles (propounded by Mr Stephen Sedley QC and adopted by Mr Justice Hodgson in R v Brent London Borough Council, ex parte Gunning [1985] 84 LGR 168). The principles say that:

- "(i) Consultation must take place when the proposal is still at a formative stage
- (ii) Sufficient reasons must be put forward for the proposal to allow for intelligent consideration and response
- (iii) Adequate time must be given for consideration and response
- (iv) The product of consultation must be conscientiously taken into account."

What can local authorities achieve by engaging with the community?

Help meet your legal obligations

Engaging with communities can help you meet your legal obligations on:

- Improving health and reducing health inequalities ([Health and Social Care Act 2012](#)).
- Engaging the public in the commissioning and provision of services ([Health and Social Care Act 2012](#)).
- Getting local communities involved in the development of local plans and planning decisions that affect their area, including neighbourhood planning ([Localism Act 2011](#); [National Planning Policy Framework 2012](#)).
- Unlawful discrimination and equality in relation to race, disability, sex, religion or belief, sexual orientation and age ([Equality Act 2010](#)).
- Informing, consulting and involving local people appropriately when carrying out any of your functions ([Local Government and Public Involvement in Health Act 2007](#) and the [Localism Act 2011](#)). Note: the proportion of people who had taken part in some form of consultation about local services or problems in the last year was 18%. However, 47% said they would like to be more involved ([Community life survey: August 2012–April 2013 statistical bulletin](#), Cabinet Office 2013).
- Promoting or improving the economic, social or environmental wellbeing of your area ([Local Government Act 2000](#)).

Improve health and tackle health inequalities

Reducing health inequalities is a key priority. A range of social, economic, cultural and environmental factors cause poor health and inequalities in health.

Getting the community involved may help address these wider determinants of health by raising awareness of local services and ensuring they are accessible and meet local people's needs and priorities. This makes it more likely that services will be successful and sustainable^[6].

Elected councillors, with their knowledge of local communities, are ideally placed to provide a direct link with those in a position to address the social determinants of health.

Realise the potential of individuals and communities

Effective engagement can help people and communities take greater control of their own health and wellbeing. By working as equal partners with health and social care service providers, they can influence service provision and develop skills to create an environment that supports their health and wellbeing. It also means communities can be empowered to make effective use of resources – and ensures those resources reach^[7] the people who are most in need.

Change people's health-related behaviour

Many barriers to adopting a healthy lifestyle relate to circumstances beyond people's immediate control. Getting the community involved in the design, commissioning and delivery of local services and creating environments that address these wider determinants of health could help people change their health-related behaviour.

In turn, this could reduce the number of premature deaths and illnesses – and the related costs to society – of cancers, vascular dementias and circulatory diseases ([Healthy lives, healthy people](#)).

Meet public health and adult social care responsibilities

Engaging with communities could potentially help local authorities and their partners meet a range of indicators in the [public health](#) and the [adult social care](#) outcomes frameworks. The former includes 'improving the wider determinants of health' (domain 1):

- use of green space for exercise or health reasons
- social isolation
- older people's perception of community safety.

It also includes 'health improvement' (domain 2) – community engagement could have a positive effect on self-reported wellbeing and the proportion of physically active and inactive adults in the population.

Community engagement will also have a positive effect on social isolation^[6], a key social care indicator listed under 'enhancing quality of life for people with care and support needs' (domain 1).

^[6] Popay J (2010) Community empowerment and health improvement: the English experience. In: Morgan A, Davies M, Ziglio E (editors) Health assets in a global context: theory, methods, action. New York: Springer p183–195.

^[7] Foot J, Hopkins T (2010) A glass half-full: how an asset approach can improve community health and well-being. London: IDEa.

^[8] Attree P, French B, Milton B et al. (2011) The experience of community engagement for individuals: a rapid review of evidence. Health Social Care Community 19: 250–60.

What NICE says

NICE recommendations

This section highlights the type of activities that NICE's recommendations on community engagement cover (from guidance published up to February 2014). Those with responsibility for directly commissioning, managing or providing services may find that they already adhere to these evidence-based recommendations. However, the recommendations still serve as a useful checklist. Read them in full by following the hyperlinks.

Following all of NICE's recommendations on community engagement will help you make the best and most efficient use of resources to improve the health of people in your area. The recommendations below are all from NICE's [Community engagement](#) pathway. They cover 4 important interlocking themes and should be implemented together.

Prerequisites for success

Check that your existing culture and practice is based on the following actions:

- Take account of lessons learned from existing community initiatives, see [Develop national, regional and local policy](#).

-
- Invest in [long-term initiatives](#).
 - [Identify the changes needed within the organisation](#) to support community engagement (this involves being open to organisational and cultural change).
 - [Agree levels of engagement and power](#) between statutory and community organisations.
 - [Build mutual trust and respect](#) between statutory and community organisations.

Infrastructure to support local practice

- [Build on the local community's strengths and provide training and resources](#).
- [Work in partnership](#).

Approaches to support and increase levels of community engagement

- [Recruit local people as agents of change](#) to improve health and address the wider social determinants of health.
- [Run community workshops](#) co-managed by professionals and community members.
- [Adopt a 'resident consultancy' approach](#) to draw on the skills and experience of a wide range of individuals and groups.

Evaluation

Involve the community in the planning, design and implementation of an [Evaluation](#) framework.

Examples of practice

Examples of how NICE's advice on community engagement has been put into practice can be found in our shared learning database. They include:

- [Community engagement to increase childhood immunisations](#).
- [Pre-registration pharmacists – community investment project with the third sector](#).

Note that the examples of practice included in this database aim to share learning among local organisations. They do not replace the guidance. (Local authorities are encouraged to submit examples of community engagement practice.)

Developing an action plan

The table below poses a range of questions which could be asked when developing a comprehensive plan to engage your local population and improve their health.

Assessing opportunities for community engagement to improve health	Links to NICE recommendations using the Community engagement pathway
<p>1. Is there someone with overall responsibility for consultation and engagement who can provide advice and support? To what extent does existing practice and culture align with the prerequisites for success? What mechanisms are already in place for community engagement, such as existing surveys?</p>	<p><u>Develop national, regional and local policy</u></p> <p><u>Develop long-term initiatives</u></p> <p><u>Identify the changes needed within the organisation</u></p> <p><u>Agree levels of engagement and power</u></p> <p><u>Build mutual trust and respect between statutory and community organisations.</u></p>

<p>2. Do local commissioning strategies and local policies currently support community engagement? To what extent is community engagement integrated into policy?</p>	<p><u>Develop national, regional and local policy</u></p>
<p>3. Have the issues raised in this briefing been taken into account in the joint strategic needs assessment?</p> <ul style="list-style-type: none"> • Check the local joint strategic needs assessment and carry out a health impact assessment on policies and procedures if necessary. • Consider whether the level of engagement is proportionate to the needs of the communities at higher risk of poor health 	<p><u>Develop national, regional and local policy</u></p> <p><u>Develop long-term initiatives</u></p>
<p>4. How can relationships with voluntary and statutory organisations be used to support community engagement? Are there formal agreements, such as voluntary sector compacts or parish charters in place?</p>	<p><u>Build on the local community's strengths and provide training and resources</u></p> <p><u>Work in partnership</u></p> <p><u>Build mutual trust and respect</u></p> <p><u>Identify the changes needed within the organisation</u></p> <p><u>Agree levels of engagement and power</u></p>

<p>5. How do local services encourage and empower groups or individuals at higher risk of poor health to get involved? How do your services help people get involved in decision making and priority setting? Are the needs of all groups, and, in particular, high-risk groups, addressed?</p>	<p><u>Adopt a 'resident consultancy' approach</u></p> <p><u>Recruit local people as agents of change</u></p> <p><u>Run community workshops</u></p>
<p>6. What type of training is available for (and used by):</p> <ul style="list-style-type: none"> • professionals who engage with the community? • community members? 	<p><u>Build on the local community's strengths and provide training and resources</u></p>

Costs and savings

Improving community engagement can lead to the following costs and savings.

- Different types and levels of community engagement may indirectly result in cost savings through improved service delivery and better outcomes.
- It is difficult to identify the exact costs involved in supporting community engagement activities. But ensuring the processes and activities follow NICE's recommendations could make more effective use of resources. See the [NICE costing statement](#) for more details.
- Using relevant online and social media may prove an effective means of reaching more people for less, compared to more traditional methods^[9].

^[9] Ross C (2012) Social media for Digital Humanities and Community Engagement. Warwick C, Terras M, Nyhan J (editors) Digital Humanities in Practice. London: Facet.

Facts and figures

Below are other national facts and figures on community engagement. (Local data is less readily available):

- Nearly 80% of people had a strong sense of belonging to their neighbourhood. Eighty four per cent were satisfied with their local area as a place to live (down from 86% in 2010/11). However, the proportion who felt that people in their neighbourhood pulled together to improve it has decreased significantly, from 67% in 2010/11 to 62% in August 2012–April 2013 ([Community life survey: August 2012–April 2013 statistical bulletin](#), Cabinet Office 2013).
- Although 60% of people thought that crime in the country as a whole had gone up over the last few years, only 28% thought this was true locally. Only 60% agreed that the police and local council are dealing with the antisocial behaviour and crime issues that matter in their local area. ([British Crime Survey 2010/2011](#))
- A recent poll found that 79% of people trust their local authority to make the important decisions: satisfaction with local authorities has increased despite cuts to services ([Ipsos MORI poll](#), January 2013). However, a previous report found that only 43% of the public trust councillors to tell the truth and this figure is even lower for senior council managers, at 36%. ([State of trust: how to build better relationships between councils and the public](#), Demos 2008.)
- Local authorities overestimate how well informed the general public are about local government activities. Although 75% of local council leaders and 55% of local authority chief executives think that the public are well informed about the reasons for planned savings, only 36% of the public were aware of those reasons. ([The \[local\] state we're in](#), PricewaterhouseCoopers 2013).
- The proportion of people who had been involved in community activities at least once in the past year was 23% (people were asked this question in January–April 2013). However, 68% were aware of such activities taking place in their local area ([Community life survey: August 2012–April 2013 statistical bulletin](#), Cabinet Office 2013).

Support for planning, review and scrutiny

Local authority scrutiny activities can add value to strategies and actions to improve the public's health. Effective scrutiny can help identify local health needs and check whether local authorities are working in partnership with other organisations to tackle the wider determinants of health.

NICE guidance and briefings provide a useful starting point, by suggesting useful questions to ask during the scrutiny process.

A range of other support tools are available on the [Centre for Public Scrutiny](#) website and via [Into practice](#) on our website.

Other useful resources and advice

The following resources produced by other organisations may also be useful:

- The [Asset-based Community Development Institute](#) offers toolkits to support community development arranged into 3 general categories: talking points, asset mapping and facilitating tools.
- The [Appreciating assets](#) report explains what asset-based community development means in practice. It was produced by the International Association for Community Development and the Carnegie UK Trust.
- [Reaching out – community engagement and health](#), published by the IDeA, raises issues and provides practical examples of joint working to improve health.
- The [Knowledge Hub](#) offers a platform that supports professional social networking, collaboration and the sharing of information in the public sector.
- The [UK Healthy Cities Network](#) is led and supported by the World Health Organization (WHO). It is tackling health inequalities by applying [Health for All](#) principles such as equity, empowerment, collaboration between sectors (that is, the public, private, voluntary and community sectors) and community participation.
- [Patient and public engagement: a practical guide for health and wellbeing boards](#) is a useful tool for local authority partners, in particular, local healthwatch organisations.

About this briefing

This briefing is based on NICE guidance published up to March 2014 about community engagement to improve health (see the [NICE website](#) for details of published briefings and briefings in development). It was written with advice from NICE's Local Government Reference Group and using feedback from council officers, councillors and directors of public health.

It is for local authority officers and elected members and their partner organisations in the health and voluntary sectors, in particular, those involved with health and wellbeing boards. This

includes: local authority officers and councillors, directors of public health, and commissioners and directors of adult social care, children's services, planning, transport and housing. It will also be relevant to council scrutiny activities.

This briefing may be used alongside the local joint strategic needs assessment to review or update the joint health and wellbeing strategy.

This briefing is intended to be used online and includes hyperlinks to sources of data and further information.

About NICE guidance

NICE guidance offers:

- recommendations based on the best available evidence to help you plan, deliver and evaluate successful programmes
- an objective and authoritative summary of the research and evidence, reviewed by independent experts from a range of backgrounds and disciplines
- an assessment of the effectiveness and cost effectiveness of public health interventions.

Copyright

© National Institute for Health and Care Excellence 2014. All rights reserved. NICE copyright material can be downloaded for private research and study, and may be reproduced for educational and not-for-profit purposes. No reproduction by, or for, commercial organisations, or for commercial purposes, is allowed without the written permission of NICE.

ISBN 978-1-4731-0493-8