PCC Interim Statement of Strategic Intent 2026-2028

Our Vision

Our vision is for a Health and Social Care Service, actively shaped by the needs and experience of patients, clients, carers and communities, to enable them to live the best lives they can.

Our Purpose

We are an independent, influential voice connecting people to Health and Social Care services so that they make positive change. With respect to health and social care services, the PCC:

- represents the interests of the public;
- promotes the involvement of the public;
- assists people making or intending to make a complaint;
- promotes the provision by HSC bodies of advice and information to the public about the design, commissioning and delivery of services;
- undertakes research into the best methods and practices for consulting and engaging the public.

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Our Values

We are committed to the HSC values and these will be reflected in our behaviours.

Working Together

Excellence

Openness and Honesty

Compassion

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Our Role in the System

The PCC is a statutory corporate body established under the Health and Social Care (Reform) Act (2009). It plays a unique role in the health and social care system. The HSC Framework Document (2011), produced by the Department, describes the roles and functions of the various health and social care bodies and the systems that govern their relationships with each other and the Department. The document stipulates that '**the overarching objective of the PCC is to provide a powerful and independent voice for patients, clients, carers and communities on health and social care issues through the exercise of its legislative functions**' as noted above under 'Our Purpose'.

The Framework Document states that "*The PCC's relationship with the other HSC bodies is therefore characterised by, on the one hand, its independence from these bodies in representing the interests and promoting the involvement of the public in health and social care and, on the other, the need to engage with the wider HSC in a positive and constructive manner to ensure that it is able to efficiently and effectively discharge its statutory functions on behalf of patients, clients and carers. It also has considerable influence over the manner in which consultations are conducted by the HSC."* The PCC understands that this paragraph summarises the intent of the Department as to how the PCC should discharge its functions and that this position is reflected in PCC's statutory powers.

The Framework Document summarises the constructive tension at the heart of the PCC's functions – balancing on the one hand, remaining independent to be able to exercise a challenge function on behalf of the public, whilst on the other hand retaining constructive relationships with the wider HSC, is critical in enabling the PCC to maintain influence and work on behalf of patients, clients, families and carers.

The HSC Framework document outlines that the PCC has an important independent assurance role for the Minister of Health, based on our statutory functions. The only other organisation that has such a role is the RQIA. The PCC is directly funded by the Department of Health to safeguard its independence from HSC organisations.

The HSC Framework Document further outlines the independent challenge as follows:

PCC focuses on the interests of patients, clients and carers in HSC services. This goes beyond a straightforward information or advocacy role; it includes working with HSC bodies to promote the active involvement of patients, clients, carers and communities in the design, delivery and evaluation of services. The PCC also has the power to look into specific aspects of health and social care and report their findings publicly to the Department. PCC provides important independent assurance to the wider public about the quality, efficacy and accessibility of health and social care services and the extent to which they are focused on user needs.

Our Resources

Overall, the functions and role of the PCC as described in articles 17 to 20 of the Health and Social Care (Reform) Act (Northern Ireland) 2009 are wide ranging and imply a pivotal role for the PCC which arguably is not reflected in its current budget, which equates to roughly £1 for each person living in Northern Ireland.

The geographical remit of the PCC is all of Northern Ireland, across the breadth of health and social care including Family Practitioner Services, as well as the services provided or commissioned by HSC Trusts. The PCC faces challenges in

managing competing priorities and defining the scope of roles within constrained resources in a small organisation the size of the PCC.

The PCC have previously developed and submitted to the Department a Strategic Outline Case (Feb 2023) which seeks to address PCC's resourcing issues. The level of funding for PCC within its core allocation is a risk as we continue to operate in a significantly challenging fiscal environment, with significant funding gaps at a Departmental and NI level.

Our Strategic Outcomes

In the longer term we will see two big differences:

- The public voice is influential regionally and locally in the design, planning, commissioning and delivery of health and social care;
- The Health and Social Care system is responding regularly to people with openness, honesty and compassion to address difficulties or failures in standards of care.

Our Strategic Goals

Four strategic goals will determine our programmes of work over the next two years. Our commitment to embedding impact practice in our work will provide a framework by which we can judge our success in their delivery. Each aim is supported by a series of operational objectives which specify the changes we want to see, our priorities for the next two years and how we will achieve them. The activities and targets identified against the operational objectives are not exhaustive. As PCC strives to be

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an agile and responsive organisation working within a constrained resource, objectives are likely to evolve as the context changes.

Strategic Goal 1

Connect - To connect and support the public via the PCC freephone service, email service, membership scheme and Make Change Together involvement methodology.

PCC Connect is about connecting the right person at the right time to the right information. Our PCC Connect Freephone service, often the first point of entry to the PCC, is the foundation of PCC Support; beginning with the provision of advice and information to the public.

PCC Connect also captures the initial stages of PCC Engage structures; particularly our Membership Scheme and our 'Make Change Together' involvement methodology, which seeks to ensure the public can access involvement opportunities with us, across the HSC and beyond. This is supported by working in partnership with external stakeholders through a 'network of networks' approach and 'positive passporting'.

Strategic Goal 2

Support - To provide individual and group advocacy support to the public including support for early resolution of issues, complaints, Serious Adverse Incidents (SAI's).

Our advocacy and support begin with the first point of entry to the PCC, which can often involve the provision of advice and information to the public over the phone or via email. Our focus is on finding early resolution of issues through conversation and signposting to appropriate services to meet immediate need. Where early resolution cannot be achieved our advocacy and support carries through to individual and group

advocacy casework. In some cases, this support and advocacy will, progress through the complaint processes. This can include independent advocacy services within SAIs (serious adverse incidents) and Public Inquiries.

Our practice model focuses on relationship building and a partnership approach, putting the voice of the patient and client at the centre of our work. This is important to help us achieve our purpose of promoting the involvement of the public and representing their interests. This approach, uses advocacy and mediation skills on an individual and group basis, to help us support (by way of representation or otherwise) individuals making or intending to make a complaint relating to health and social care in the most effective way.

Strategic Goal 3

Engage - To provide the public with a range of opportunities to get involved and connected to representatives across Health and Social Care, the voluntary and community sectors and other appropriate bodies.

Themed engagement platforms provide members of the public with a forum for engagement on specific areas of work and connect them with representatives across health and social care and voluntary and community sectors. This is critical in fulfilling our statutory functions of promoting the involvement of the public and representing their interests.

An Engagement Platform is a space to bring together a group of people, with a common theme or interest and lived experience, to work together and make change in health and social care. Engagement Platforms allow participants to communicate their experiences and thoughts, related to a policy programme, with the PCC, as well as being able to share their views directly with decision-makers in health and social

care. Engagement Platforms are a significant opportunity for decision makers in health and social care to have meaningful input from experts by experience, in service areas under review, development and reform.

Strategic Goal 4

Impact - To maximise the influence of PCC and demonstrate the impact of the work of PCC on an individual, collective and systems level and communicate this externally. PCC Impact focuses on measuring and demonstrating the impact of our work, and communicating this externally. Through PCC Impact we seek to bring change on an individual, collective and systems level. Our role is to secure a 'seat at the table' for the public. Our goal is to connect the evidence gathered through our advocacy and engagement work under PCC Connect, Engage and Support to influence change.

Using the information gathered through this work gives us the foundation for our policy impact and influence efforts. In order to reach more people, we rely on a 'network of networks' approach. We build relationships with a range of individuals and organisations, using their knowledge and expertise across all of our work. The PCC is a channel for 'constant conversations' across health and social care, recognising the value of bringing the public voice to the decision-making table.

We believe it is important to continue to improve our practice to make sure we make positive policy change. We will focus on the best methods and practices for talking to the public about, and involving them in, matters relating to health and social care

How We Will Work

Governance – Robust governance is the foundation of PCC's work, driving compliance with all the appropriate regulatory requirements and best practice guidelines.

The PCC maintains a sound system of internal governance that supports the achievement of the organisation's policy, aims and objectives whilst safeguarding the public funds and assets in accordance with the responsibilities assigned to PCC by the Accounting Officer for the Department of Health (DoH).

The PCC ensures there is an adequate system for the identification, assessment and management of risk with a range of organisational controls in place designed to ensure the efficient and effective discharge of PCC business in accordance with the law and departmental direction. Every effort is made to ensure that the objectives of the PCC are pursued in accordance with the recognised and accepted standards of public administration.

Our Key Policy Positions

In fulfilling our role of representing the interests of the public and providing an independent challenge function to the wider HSC system, the PCC has developed a number of organisational positions, based upon the evidence we gather through our advocacy and engagement work, what we hear directly from the public and our work in providing evidence to public inquiries. These positions are designed to seek systemic and regional changes in the interests of the public in health and social care in Northern Ireland and to support HSC system leadership. Some of our key positions are summarised below.

Our Strategic Approach to Public Participation

At PCC we firmly believe there is a need to establish a more strategic approach to public participation, through which we can critically examine the roles of Personal and Public Involvement, Engagement, Patient Experience, public consultation, Advocacy and Complaints and how these aspects of involving the public in the HSC fit together to ensure the voice of the public is adequately heard and appropriately listened to in the following areas:

- Service Change, Design Commissioning and Delivery;
- Quality and Safety; and
- Clinical and Social Care Governance.

A clear objective of taking a more strategic approach is to improve outcomes for the public and their experience of HSC services and to build trust between the public and services.

In the context of an HSC system under unprecedented pressure, with a limited budget, and a society facing significant health inequalities, it is vital that we maximise and mobilise all the resources at our disposal to improve health outcomes for all.

We can all agree that the skills, knowledge and experience of our health care professionals are key assets to our health service. Likewise, we can agree that the budget, buildings, equipment and medicines are vital to delivering good quality care. The public, however, are experts, by experience, in the care they or someone they care for has received. This experience and expertise should not be lost to the system, and if appropriately utilised, the public can add significant value to the commissioning and design of services, and their safety, across the region. Through their lived experience, the public know what their needs and those of their

communities are, what has worked and what has not. In this sense, people, and the communities in which they live, should be seen as a core asset to the Health and Social Care system and should be appropriately involved in policy development and quality assurance, as well as being consulted, once policies have been drafted.

Given our statutory role and remit, PCC will continue to be a key advocate for a strategic approach to public participation.

The Importance of Regional Independent Advocacy Services

Advocacy support is not only vital for individuals and families, it is a key part of assurance within the Health and Social Care System, advocacy is not a 'nice to have'. It:

- Reduces potential for compounded harm
- Provides assurance and can be a key part of the governance and assurance of any review process
- Enhances potential learning
- Addresses inequality and subsequently inequity in complaint and engagement processes.

A significant focus of our impact and influence work has been on promoting the importance of independent advocacy support to individuals and families, but also to the health care system. In our written submissions and consultation responses to DoH, we have emphasised the importance of ensuring independent advocacy services are a core part of new policy and practices. In written responses to the DOH consultations we outlined what we consider should underpin the provision of independent advocacy services within the Health and Social Care system.

Encouraging the use of Data, Insights and Intelligence to learn early

Better triangulation of information and data, across the HSC system, can help ensure that potential issues are captured early, and services can be improved at the right time. Through our advocacy cases and engagement work, the PCC holds important data, insights and intelligence about health and social care services in Northern Ireland. This has prompted us to explore, with others across the HSC system, how this information, and additional sources of information reflecting the public's experience, such as information held by regulators and patient experience programmes, can best be utilised as part of Trusts Quality Assurance and Governance Frameworks, in meeting their statutory duty of quality.

Operational Plans

Our Statement of Strategic Intent is supported by an annual operational plan which sets out the detailed work plan in support of our five key strategic goals. It describes the activity we will undertake, the outputs we plan to deliver but importantly how we will assess and measure the impact of our work. Our annual plan will be agile and responsive to the external environment and we will continually assess our work, its relevance to the public and the need to respond appropriately as the external environment dictates.

Operational Outcomes – as we move forward we will see the following improvements:

- Increase public awareness/confidence in the role of PCC.
- Enhanced profile of PCC with networks and organisations leading to positive outcomes for individuals and enhanced access to the right services.
- Increase in the number of PCC members.
- Increase in the number of early resolution of issues.
- Resolution of complaints.
- Increased opportunities to promote the involvement of the public, represent their interests and harness their skills and experience to shape policy and services.

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