

Partnerships and communities

We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement.

What does good look like:

The trust's leaders at all levels are committed to identifying opportunities to improve services, tackle unwarranted variation and health inequalities, and strengthen resilience. They do this by consistently and proactively collaborating with partners to agree and deliver ambitious outcomes for the health of populations.

Leaders at the trust invest time in building relationships, understanding perspectives, and constructively engaging with:

- partners within integrated care boards
- place-based partnerships
- provider collaboratives
- any other relevant forums, including primary and social care partners.

The trust proactively engages in shared planning and decision-making and takes responsibility for the agreed delivery of services and improvements. The trust's board can demonstrate that it is meaningfully taking the views of partners into account, to understand impacts for the wider health and care system and what is in the best interests of local populations, as part of the decision-making process.

Leaders collaborate with partner organisations to address challenges in the service and the wider integrated care system to meet local needs. Partner organisations include community groups with a focus on those that represent people who are more likely to have poor access, experience and outcomes from care.

Leaders at all levels support a culture of proactively seeking the views of, listening to and acting on feedback from patients, carers and communities. The trust has a diverse range of formal and informal ways of working with people and communities to ensure different groups can take part, co-ordinating engagement and sharing insights with partners where relevant. People and communities, particularly those who are more likely to have poor access, experience and outcomes from care, are empowered, supported and involved in the design, testing, roll-out and evaluation of new ways of delivering care, as well as delivering continuous improvements to existing care models.

The trust can demonstrate to its communities how they have influenced services and are involved in governance. It acts on people's views and concerns to shape culture and deliver high-quality services for all while addressing health inequalities.

The governance and management of partnerships, joint working arrangements and third parties is effective, accessible, transparent and supported by effective assurance systems and data sharing arrangements.

The trust is open, transparent and collaborative with all relevant stakeholders about performance. This is to build a shared understanding of challenges to the system and the needs of the population, and to design improvements to meet them.

Further detail and context:

Working with system partners

Trusts have an important role to play in system and place-based partnerships, provider collaboratives, and the wider health and care system in England. By collaborating with NHS partners and others such as local authorities, they can actively listen and transform care by putting patients, local communities, and wider populations at the heart of decision-making.

[Guidance on good governance and collaboration](#) sets out the longstanding duties for trusts to deliver safe, effective care, and use resources effectively. It also sets out how the success of individual trusts will increasingly be in the context of their contribution to the objectives of integrated care systems. Trusts are expected to work effectively on all issues, including those that may be contentious for the organisation and partners in the system.

As part of this, there is an expectation that trusts engage in shared planning and decision making, implement shared plans and take collective responsibility for delivering services and making improvements in the system. This includes trusts developing the system capital plan and the 5-year joint forward plan in conjunction with the integrated care board.

Providers are expected to participate consistently and constructively as part of place-based partnerships. Additionally, all trusts that provide acute and mental health services are expected to be part of one or more provider collaboratives. Community trusts, ambulance trusts and non-NHS providers (for example, community interest companies) are expected to be part of provider collaboratives where this would benefit patients and makes sense for the providers and systems involved.

Community partnerships and engagement

Working with patients and local communities to design and improve services helps trusts to:

- ensure safe and high-quality care
- make effective use of resources
- address health inequalities.

Trusts have statutory duties to involve patients and the public. This includes their representatives, carers and local residents, whether or not they use or access the trust's services. They need to be able demonstrate how they have involved people in decisions about their services, including proposals for change. It is therefore important to have arrangements to ensure that trusts use insight and data from engaging with patients and the wider community to improve service delivery, patient safety and experiences.

Approaches to community partnerships involve recognising the vital role of communities in improving health and well-being. As well as engaging communities in designing and commissioning formal health and care services, partnerships can go further. For example, community development can build on specific strengths of communities to improve their own health, and engaging communities in care pathways can expand the scope of services available, including social models of care.

Best practice / guidance

Working with system partners

[NHS England: Guidance on good governance and collaboration](#)

[NHS England: Working together at scale: guidance on provider collaboratives](#)

[NHS England: Guidance on developing the joint forward plan](#)

[Guidance on the preparation of integrated care strategies](#)

Community partnerships and engagement

[NHS England: Involving people in their own health and care: Statutory guidance for clinical commissioning groups and NHS England](#)

[NHS England: Statutory guidance on working in partnership with people and communities](#)

Link to regulations

[Regulation 12: Safe care and treatment](#)

[Regulation 17: Good governance](#)

May also consider: [Regulation 9: Person-centred care](#)