 

ACCEPTANCE AND MANAGEMENT OF PETITIONS POLICY

**November 2023**

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**The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as ‘uncontrolled’ and as such may not necessarily contain the latest updates and amendments.**

# AMENDMENTS

Amendments to the policy may be issued from time to time. A new amendment history will be issued with each change.

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# Introduction

Petitions are an important means through which local people have a voice on Integrated Care Board (ICB) business.

They can be raised as a discrete statement by the signatories or as a response to a proposal being made by the ICB. In this way they are either proactive – the expression of public opinion on a health issue that a section of the population believes they need to raise with the ICB – or reactive, in response to a specific commissioning decision.

A petition represents the expression of the views of the people who sign it. Petitions will therefore be used as one piece of evidence to contribute to an overall picture of public opinion and will not be used in isolation to determine a necessary action.

This policy outlines how the ICB will consider and action any petitions received from the local community, whether during or outside a formal consultation period.

# Purpose

The purpose of this policy is to detail how Humber and North Yorkshire ICB (HNY ICB) will ensure any petitions received are dealt with appropriately and in accordance with the requirements of the ICB’s Constitution and Standing Orders. This policy is relevant to petitions received in either paper or electronic format.

# Definition/ Explanation of Terms

For the purpose of this policy, a petition is defined as a written document signed by a number of people requesting some form of action from HNY ICB.

# Scope of the Policy

This policy relates to the receipt and management of either hard copy or e-petitions. Petitions may be proactive, e.g. unsolicited where there is public opinion that a new service may be required to fill a perceived gap in service provision; or reactive, for example, in response to a Place or collaborative initiated proposal to change an existing service. The policy sets out how petitions will be received whether outside a formal consultation period or during a formal consultation period.

The policy applies to NHS HNY ICB and all its employees and must be followed by all those who work for the organisation, including the Integrated Care Board, Integrated Care Partnership, those on temporary or honorary contracts, secondments, pool staff, contractors and students.

# Duties, Accountabilities and Responsibilities

## ICB Chair & Chief Executive

Where a petition submitted to HNY ICB reaches the minimum level of signatories (1000 unique signatures or more) the Chair of the ICB will consult with the Chief Executive, or their nominated deputy, to confirm that the petition is valid and agree the scheduling of the petition as an item on the agenda of the next available meeting in public of the ICB Board.

Valid petitions that do not meet the minimum level of signatories (up to 999 unique signatories) will be redirected for consideration and response within the ICB and in accordance with the provisions of the ICB’s Scheme of Reservation and Delegation and Operational Scheme of Delegation.

## Nominated Representative

The Chief Executive may delegate responsibility for the actions arising from a valid petition to a senior officer of the ICB (typically deputy director level or above).

## Board Members

Board Members are responsible for considering petitions brought to the attention of the HNY ICB Board and for providing a response to the petition organiser where this is the case.

## Executive Director of Corporate Affairs

The Executive Director of Corporate Affairs has delegated authority from the Chief Executive for the strategic and operational management to ensure that ICB processes comply with legal, statutory, and good practice guidance requirements, including oversight of the implementation of this policy. The Executive Director for Corporate Affairs will liaise with the Executive Director for Communications, Marketing and Public Relations, where appropriate, to ensure stakeholder relations are managed effectively.

## Director of Governance and Board Secretary

The Director of Governance and Board Secretary is responsible for ensuring the process of handling petitions is properly managed and executed in compliance with this policy, including providing administrative support to the process of acknowledging receipt of the petition and confirming how the ICB has processing the petition.

## All staff

All ICB staff, including temporary and agency staff, are responsible for forwarding all petitions received by their team to the relevant inbox (see 6.1 below). They must ensure compliance with relevant policy and procedure documents and co-operate with the governance team to respond to petitions relevant to their team when requested to do so.

# Policy Document Requirements

## Submission of Petitions

Petitions may be submitted to the HNY ICB for consideration by either:

* + 1. Sending hard copy petitions by post to: FAO Chief Executive, Health House,

Grange Park Lane, Willerby, HU10 6DT

* + 1. Sending notification of a petition electronically, marked for the attention of the Chief Executive, to hnyicb.corporateaffairs@nhs.net

## Eligibility of Petitions

In order to be received for consideration, petitions should meet the following criteria:

* Petitions may be received in paper or electronic (e.g., email, web based or social media) format.
* Petitions should include a statement of petition containing:
  + the organisation to which the petition is being addressed.
  + the proposition which is being promoted by the petition.
  + the timeframe over which the petition has been collected.
* The following information about each petitioner should be included:
  + Name
  + Postcode
  + Signature (in the case of a written petition)
  + Email address (in the case of an electronic petition) If this data is not collected due to the data controller not sharing the data, e.g., a social media or 38 degrees petition, the petition will only be acknowledged as an indicator of public sentiment.
* The name and address of the petition organiser, who must be a resident within the area to which the petition relates, should be provided on the first page of the petition.

Petitions will not be considered if one of the following exemptions apply:

* They are repeated, meaning:
  + covering the same or substantially similar subject matter to another petition received in the preceding six months, or
  + presented by the same or similar individuals or groups as another petition received within the previous six months.
* They are vexatious, meaning:
  + focussing on individual grievances, or
  + the actions or decisions of an individual not the organisation.
* They concern issues which are outside the ICB’s remit, meaning:
  + concerning matters relating to another organisation,
  + requesting information available via a Freedom of Information request,
  + being used to correspond with individuals on personal issues, or
  + from signatories not based in the UK.
* The information contained is confidential, libellous, false, defamatory, or offensive, meaning:
  + it contains information which may be protected by an injunction or court order,
  + it contains information that is potentially confidential, commercially sensitive, or which may cause personal distress or loss, or
  + it contains language that may cause offence, is provocative or extreme in its views.

Where a petition does not meet the requirement set out in the criteria above then the Director of Governance and Board Secretary will respond in writing within ten working days to confirm that the petition has been received and that the petition does not meet the criteria. The reason for rejection will be given clearly and explicitly.

## Acceptance of Petitions

An acknowledgement of receipt of the petition will be provided to the lead petitioner by the Director of Governance and Board Secretary within five working days of receipt with a clear explanation about what will happen next.

A petition will be considered as part of the decision-making of the ICB (unless one of the exemptions set out in sec 6.2 applies). If a petition relates to a subject, proposal or matter about which the ICB is actively seeking public opinion, and if the petition is submitted before the publicised close date of the engagement or consultation process, the petition will be considered as an item of correspondence, in the same way that any other response would be considered. Petitions will be considered as valid for consideration as part of the consultation if they meet the requirements set out in the criteria outlined in this policy.

## Processing of Petitions

The process for managing a petition received within HNY ICB should be as follows:

* Petitions should be sent by post to: FAO Chief Executive, Health House, Grange Park Lane, Willerby, HU10 6DT or electronically, marked for the attention of the Chief Executive, to hnyicb.corporateaffairs@nhs.net;
* Where petitions are received by other staff members or teams within HNY ICB, they will forward the correspondence to the above address to enable the petition process to be co-ordinated from a central point.
* Once a petition is received, the HNY ICB governance team will assess that it meets the criteria of a petition (as detailed in Section 6.2) and log its receipt. Once the assessment is complete, the petition will be either:
  + Declined
  + Accepted as a discrete statement for consideration.
  + Accepted as a response to a consultation or proposal for consideration.

Where a valid petition is submitted on a specific subject by a group of individuals who wish to raise an issue of concern with the Board, the process to be followed will be:

1. The Director of Governance and Board Secretary, or their nominated deputy in their absence, will receive the petition and acknowledge receipt of the petition to the lead petitioner within five working days of receipt, together with a clear explanation about what will happen next.
2. For petitions with significant support (defined as supported by 1,000 or more unique signatories), the Chair of the ICB will consult with the Chief Executive, or their nominated deputy, to confirm that the petition is valid and agree the scheduling of the petition as an item on the agenda of the next available meeting in public of the ICB Board.
3. In all circumstances, the response and outcome will be advised to the lead petitioner in writing via the governance team within ten working days from the date the response is agreed.
4. Petitions may be received during a formal consultation period relating to a subject, proposal or matter about which the ICB is actively seeking public opinion. If the petition is submitted before the publicised close date of the engagement or consultation process, the petition will be considered as an item of correspondence, in the same way that any other response would be considered.

When a report on the outcome of consultation is prepared, the following issues will be taken into account when considering a petition:

* + If a petition is raised about a perceived lack of or missing service, consultation is not a public referendum or public vote. Influence will be afforded to the most cogent ideas and arguments, based upon clinical effectiveness, quality, patient safety, clinical and cost effectiveness and not necessarily to the views of the most numerous stakeholders.
  + Where submitted in response to a consultation, the petition should be relevant to the subject of the consultation. It may not necessarily use the same words, but it should have a bearing on the proposal(s) that HNY ICB have put forward.
  + The petition should reflect the latest proposals and policy statements being made by the HNY ICB and not relate to issues that are no longer under consideration. This is particularly relevant when considering the timescale during which signatures have been collected.
  + The petition should provide an accurate reflection of the proposals in the consultation, rather than including misleading information or statements.
  + The petition should relate to the consultation and to the proposed action of the ICB (and/or its stakeholders), rather than to broader policy agenda beyond the scope of the consultation.
  + The petition’s concerns will be assessed in relation to the aims being put forward in the consultation, and the rationale and constraints behind it. For example, a petition that proposes a realistic alternative option will normally be given greater weight than a petition that simply opposes an option that has been put forward for valid reasons.
  + The petition’s concerns will also be assessed in relation to the impact on other populations/Places if these demands were accepted. This assessment could take into account views expressed in other petitions (which may conflict) or in more direct responses to the consultation.

The organiser of the petition will receive correspondence from HNY ICB as the body that has initiated the consultation, in the same manner as other respondents to the consultation. Petitions will be formally acknowledged in the analysis of consultation responses, along with all the other responses.

# Consultation

In developing this policy discussion has taken place between the governance team and staff supporting the process.

# Training

No specific training requirements associated with this policy have been determined.

# Monitoring Compliance

The Director of Governance and Board Secretary is responsible for ensuring the process of handling petitions is properly managed and executed in compliance with this policy, including providing administrative support to the process of acknowledging receipt of the petition.

Petitions received will be retained by HNY ICB for a period of five years, consistent with the retention period for public consultation documents as defined in the NHS Records Management Code of Practice 2021.

Hard copy documents will be retained in offsite storage under ICB archiving arrangements. Electronic copies of petitions will be retained for the same period.

# Arrangements for Review

This policy will be reviewed not less than every two years. Earlier review may be required in response to exceptional circumstances, organisational change, or relevant changes in legislation/guidance, as instructed by the senior manager responsible for this policy.

# Dissemination

This policy will be published on the ICB internet and will therefore be available to both staff and the public.

The ICB Board will agree a method for monitoring the dissemination and implementation of this policy. The Executive Director of Corporate Affairs will ensure that this policy document is reviewed in accordance with the timescale specified at the time of approval. No policy or procedure will remain operational for a period exceeding three years without a review taking place.

Staff who become aware of any change which may affect a policy should advise their line manager as soon as possible. The ICB Board will consider the need to review the policy or procedure outside of the agreed timescale for revision.

# Associated Documentation

ICB Constitution

Records Management Policy

Persistent and Unreasonable Contacts Policy Standards of Business Conduct Policy

NHS Records Management Code of Practice 2021

# Appendices

Appendix 1 - Anti-Fraud, Bribery and Corruption

# Impact Assessments

## Equality

NHS Humber and North Yorkshire ICB is committed to creating an environment where everyone is treated equitably and the potential for discrimination is identified and mitigated. It aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others.

An equality impact assessment has been undertaken. No equality impacts have been identified.

## Bribery Act 2010

Due consideration has been given to the Bribery Act 2010 in the development (or review, as appropriate) of this policy document, further details can be found in Appendix 1.

## General Data Protection Regulations (GDPR)

The ICB is committed to ensuring that all personal information is managed in accordance with current data protection legislation, professional codes of practice and records management and confidentiality guidance. More detailed information can be found in the Data Protection & Confidentiality Policy and related policies and procedures.

# Appendix 1 – Anti-Fraud, Bribery and Corruption

The ICB has a responsibility to ensure that all staff are made aware of their duties and responsibilities arising from the Bribery Act 2010. Under the Bribery Act 2010 there are four criminal offences:

* + - Bribing or offering to bribe another person (Section 1)
    - Requesting, agreeing to receive or accepting a bribe (Section 2);
    - Bribing, or offering to bribe, a foreign public official (Section 6);
    - Failing to prevent bribery (Section 7).

These offences can be committed directly or by and through a third person and, in many cases, it does not matter whether the person knows or believes that the performance of the function or activity is improper.

It should be noted that there need not be any actual giving and receiving for financial or other advantage to be gained, to commit an offence.

All individuals should be aware that in committing an act of bribery they may be subject to a penalty of up to 10 years imprisonment, an unlimited fine, or both. They may also expose the organisation to a conviction punishable with an unlimited fine because the organisation may be liable where a person associated with it commits an act of bribery.

Individuals should also be aware that a breach of this Act renders them liable to disciplinary action by the ICB, whether or not the breach leads to prosecution. Where a material breach is found to have occurred, the likely sanction will be loss of employment and pension rights.

To raise any suspicions of bribery and/or corruption please contact the Executive Director of Finance and Investment. Staff may also contact the Local Counter Fraud Specialist (LCFS) at – Audit Yorkshire, email: [nikki.cooper1@nhs.net](mailto:nikki.cooper1@nhs.net) or mobile 07872 988939.

The LCFS or Executive Director of Finance and Investment should be the contact for any suspicions of fraud. The LCFS will inform the Executive Director of Finance and Investment if the suspicion seems well founded and will conduct a thorough investigation. Concerns may also be discussed with the Executive Director of Finance and Investment or the Audit Committee Chair.

If staff prefer, they may call the NHS Counter Fraud reporting line on 0800 028 40 60 between 8am-6pm Monday-Friday or report online at [www.reportnhsfraud.nhs.uk](http://www.reportnhsfraud.nhs.uk/). This would be the suggested contact if there is a concern that the LCFS or the Executive Director of Finance and Investment themselves may be implicated in suspected fraud, bribery or corruption.

# Appendix 2 – Petition Acknowledgement

Reference: [Insert reference] Acknowledgement

Thank you for submitting your petition to the Humber and North Yorkshire ICB.

Your petition is being processed in accordance with the Acceptance and Management of Petitions policy, which is available to view on the ICB website.

If the petition is valid (i.e., it meets the requirements set out in section 6.2 of the policy) it will be considered by the relevant team and responded to.

If the petition relates to a subject, proposal or matter about which the ICB is actively seeking public opinion and was submitted before the publicised close date of the engagement or consultation process, the petition will be considered as an item of correspondence in the same way that any other response would be considered.

Where a petition has received 1000 signatures or more, the Chair of the ICB will consult with the Chief Executive, or their nominated deputy, as to whether the petition should be included as a specific item for the agenda at the next meeting of the ICB Board to agree any appropriate actions.

If the petition is not valid (i.e., it does not meet the requirements set out in section 6.2 of the policy) you will be informed in writing within ten working days. The reason for the rejection will be given clearly and explicitly.

If you have any queries about this request or wish to contact us again, please email [hnyicb.corporateaffairs@nhs.net](mailto:hnyicb.corporateaffairs@nhs.net) and the message will be forwarded appropriately. Please remember to quote the reference number above in any future communications.