

Professor Jane Cummings
Chief Nursing Officer
NHS England
Skipton House
80 London Road
London SE1 6LH

19 May 2017

Dear Jane,

People and Communities Board

Thank you for your letter of 5 May. I am replying on behalf of the former PCB members. We have valued the opportunity to work with NHS England as champions of the Five Year Forward View ambition of a “new relationship with people and communities”.

We thank you for recognising the significance and impact of our work. It included supporting the new care model vanguards, developing the six principles, producing practice documents based on those principles, shaping official guidance, and hosting the innovative People’s Transmathon last November. It culminated in our high impact actions report submitted to Simon Stevens in February this year.

As well as these higher-profile activities, we worked alongside many colleagues in NHS England and the other arm’s length bodies and Forward View boards, helping to encourage a coherent and concerted approach to realising the Forward View vision.

The PCB was not a traditional board. We did not manage or steer a programme, nor were we ever given resources or accountability for delivery. Our strength lay in being able to bring citizen voice to the top of the NHS system and to connect decision makers with people and communities. We had (and still have) significant potential to make change as champions of the Forward View ambitions through our respective networks.

Given all this, we can only express disappointment that NHS England has chosen to stand the PCB down. This was not necessary, it could have been avoided and it will inevitably lead to some loss of energy, momentum and

goodwill. There were other ways in which you could have better integrated our contributions. The decision to disband the PCB sends mixed messages about NHS England's commitment to person and community centred approaches to health and care and to working in partnership.

We recognise that new partnership arrangements offer the chance to make a fresh start, to repair any damage and to find better ways to marry the leverage of NHS England with the expertise, energy and networks of partners. For this to succeed will require:

- Committing at senior level to resource the taskforce and make it work
- working as a partnership of equals, from design to delivery
- taking a holistic approach to health and wellbeing
- building on the work and approach of the PCB, with wide representation, including people with extensive patient and carer experience
- focussing on clear deliverables which are NHS England's own responsibility, as well as helping to stimulate and support the wider movement for people-centred change.

Our high impact actions report, which benefited hugely from the contributions of NHS England colleagues, provides a sound basis for the taskforce. Our recommendations were only partially reflected in the document "Next Steps on the NHS Five Year Forward View". As you acknowledge, more remains to be done and this is an agenda that is at risk of being side-lined because of a short term focus on cost and performance.

If the conditions are right, there will be much help on offer from the now former PCB members, the broader voluntary and community sector, and from champions of people power across the health and care world. It would be remiss of NHS England not to embrace this.

Yours sincerely,



Jeremy Taylor

Chief Executive