



# Shaping public services through citizens' inquiries

**Jez Hall and  
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# Shared Future CIC



**Independent social enterprise  
working to empower citizens**

**Supporting and promoting  
Participatory Budgeting**

**Community Engagement and  
Coproduction Specialists**



**New members of the International  
Democracy R+D Network**



# Format for today

## Welcome

- Overview of Deliberative Processes (mini-publics)
- Q+A's
- Case Studies
- Videos
- Practical Sessions

## Letting you know about:

- Filming
- Materials
- Breaks (12.00pm and 2.15pm)
- Close (4.00pm)



## Anything Else?

# Introductions

- Who works for a Local Authority?
- Who is elected?
- Anyone else in the room?
- Who has experienced a Citizen Led Deliberative Process?

## The Game of Give and Take

# Overview of Citizen Led Deliberative Processes

The concept of mini-publics was first proposed by Robert Dahl in 1989 as a mechanism for enabling citizens to deal with public issues.

The roots of such processes can be traced back to the Athenian political system when positions of political authority, including the selection of magistrates and council were often made by random selection.

The random selection of citizens is one of the defining features of the mini-public.

**This is sometimes called Sortition**

# Overview of Citizen Led Deliberative Processes

Features which characterise mini publics:

- The purpose is to gather together a *'microcosm of the public'*
- Each citizen having the same chance of being selected to take part
- Those that take part are remunerated for their efforts
- Discussions are facilitated
- A number of (so-called) experts (or commentators) provide evidence to the participants who in turn question (or cross examine) them.

*Democratic innovations consisting of ordinary, non-partisan members of the public designed to be ...*

*'groups small enough to be genuinely deliberative and representative enough to be genuinely democratic'.*

# Overview of Citizen Led Deliberative Processes

	Citizens juries	Planning cells	Consensus conferences	Deliberative polls	Citizens assemblies
<b>Number of citizens</b>	12 to 26	100 to 500	10 to 18	100 to 500	50 to 150 (or more)
<b>Number of meetings</b>	4 to 5 days	4 to 5 days	7 to 8 days	2 to 3 days	2 to 3 days (or more)
<b>Selection method</b>	Random selection	Random selection	Random plus self-selection	Random selection	Random plus self-selection
<b>Activities</b>	Information plus deliberation	Information plus deliberation	Information plus deliberation	Information plus deliberation	Information plus consultation plus deliberation
<b>Result</b>	Collective position report	Survey opinions plus collective position report	Collective position report	Survey opinions	Detailed policy recommendation
<b>Destination of proposal</b>	Sponsor and mass media	Sponsor and mass media	Parliament and mass media	Sponsor and mass media	Government and public referendum

# Overview of Citizen Led Deliberative Processes

*'The disadvantage of self-selection, is that the panel will mainly feature articulate, highly educated white men aged over 30, the so-called 'professional citizens', which is hardly ideal'. (Reybrouck 2013).*

Mini-publics typically employ a form of **stratified sampling** whereby the population is divided into a number of separate social groups.

Offering **incentives** to participants to engage and maintain their attendance is common practice.

The organisers of the Scottish wind farm citizens juries concluded *'It seems that the financial reward was crucial for successful recruitment and inclusive participation'* (Roberts and Escobar 2015)



# Overview of Citizen Led Deliberative Processes

*“Deliberation includes exchanges between two or more people around a common topic, with back and forth reactions to each other’s views,*

*Puzzling over an issue to work something out collectively, the sharing of reactions, trying to understand the position of others, a willingness to be persuaded by another’s position.*

*There is the possibility of disagreement, conflict and argument and discussion of that disagreement.*

*Ideally all this discussion should lead to a consensual resolution or of conclusion to the question being explored’*

**‘Deliberative or refined public opinion can be thought of as opinion, after it has been tested by the consideration of competing arguments and information conscientiously offered by others who hold contrasting views’ (Fishkin 2009)**

# Overview of Citizen Led Deliberative Processes



## Critiques of Citizens Juries

Inclusivity

Impact on decision making

(and add your responses, questions and concerns?)

# Case Study: The Forest of Dean Citizens' Jury

Dr Malcolm Oswald

Director, [Citizens Juries c.i.c.](#)

Honorary Research Fellow, University of Manchester

*“Putting the public into public policymaking”*

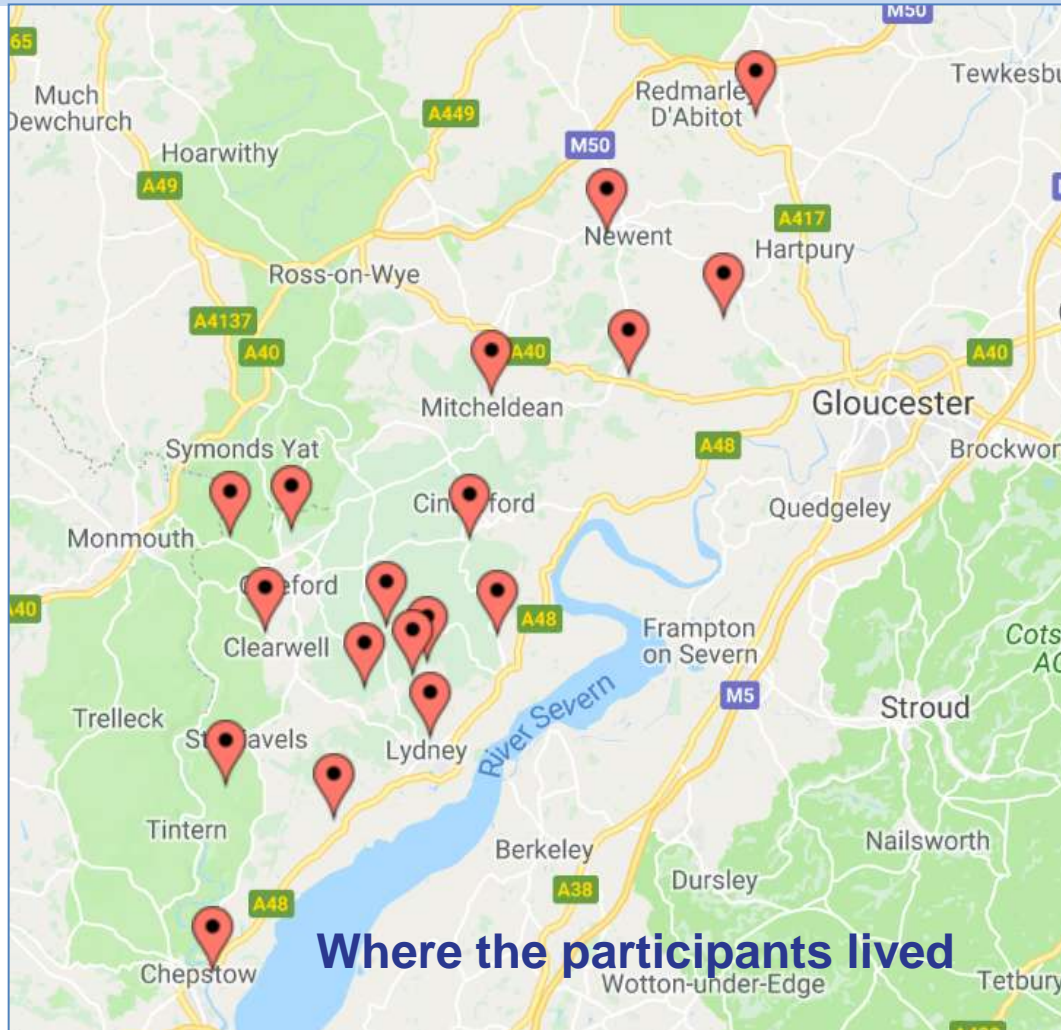


***Where in the Forest of Dean should a new community hospital be built?***

**Become engaged after a most contentious decision had been made, by the health commissioners, after a public consultation**



# Case Study: The Forest of Dean Citizens' Jury



Where the participants lived



# Case Study: The Forest of Dean Citizens' Jury

## And the decision?

Malcolm Oswald presented with 2 jurors  
to the relevant Health Boards

They unanimously backed the jury's recommendation of:  
Cinderford



# Case Study: The Forest of Dean Citizens' Jury

## Video from BBC News reports



BBC Points West news report 30 July 2018 (start of jury)

2 mins



BBC Point West news report 3 August 2018 (end of jury)

2 mins



# Clarifications and Questions on

## Citizen Led Deliberative Processes

**Break**



# Case Study: Citizen Inquiry on Shared Decision Making

In autumn 2018 a diverse group of Scottish Citizens gathered over three days to make recommendations on shared decision-making in health and social care. The question the members were asked to consider was:

***‘What should shared decision making look like and what needs to be done for this to happen?’***

In February 2019  
the Scottish Health Council and  
Chief Medical Officer’s  
Realistic Medicine Team  
launched the Recommendations





# Case Study: Citizen Inquiry on Shared Decision Making

## Why use a Citizen Inquiry approach?

The Chief Medical Officer's (CMOs) 2014-15 annual report, 'Realistic Medicine', called for changes in the way care is delivered in Scotland. The CMO challenged healthcare professionals to:

- Consider how to build a more personalised approach to care,
- Reduce harm and waste,
- Manage risk better,
- Reduce unwarranted variation in health, treatments and outcomes,
- Find innovative ways to improve the way healthcare is delivered in Scotland.

**Alongside other approaches (such as a citizen panel) it was felt the inquiry approach matched their aspiration to Co-produce with citizens.**

# Case Study:

## Citizen Inquiry on Shared Decision Making

### 1: Oversight Panel Formed

15 expert people representing the health and social care system, including patient advocacy groups and independent academics. Their role was to:

- Ensure that the process is fair and rigorous,
- Agree on the question to be posed to the Citizens' Jury,
- Suggest topics to be considered by citizens in the process,
- Identify commentators/witnesses best able to present on these topics,
- Monitor the process of citizen selection,
- Comment and offer guidance on the evaluation framework,
- Advise on the dissemination of the Jury's findings.

**The Oversight Panel met on four occasions, at the start of the process, between sessions and after the final session.**

# Case Study:

## Citizen Inquiry on Shared Decision Making

### 2: Implementation Group

Working alongside the Oversight Panel was a Implementation Group (of about 7 people from the commissioning organisation) whose function was to:

- Support the work of the Oversight Panel,
- Check on logistics, safeguarding and ensure key tasks were on track,
- Liaise with the facilitation team over process, reports and other issues,
- Conduct attitudinal evaluations and surveys of participants,
- Support internal and external communications.



# Case Study: Citizen Inquiry on Shared Decision Making

## 3: Recruitment



- Letter sent to 3000 residents,
- Randomly, over a wide area,
- People living within five Health and Social Care Partnership areas, as well as three NHS Board areas (Tayside, Fife and Forth Valley),
- Based on agreed stratifications for rural, semi rural and urban,
- Matching a statistical profile for all of Scotland,
- Incentives offered (£100 per day), as well as expenses for travel, childcare, etc.
- We used a private market research company, who received well over 260 responses
- Respondents provided further information (age, gender, ethnicity, health conditions etc),
- 26 citizens were able to be matched against a range of stratifications (characteristics) based on known national statistics,

# Case Study: Citizen Inquiry on Shared Decision Making

## 4: Stratification

Challenge of balancing representativeness against size of the sample

We seek to over-represent from marginalised groups if that is possible

Each invitee was individually interviewed and briefed by the facilitators

Recruitment profile	Original proposed profile	Actual profile of those recruited
<b>Age</b>		
16 to 25	6	5
26 to 44	6	6
45 to 64	6	7
65 and over	7	8
<b>Gender</b>		
Female	13	12
Male	12	14
<b>Scottish Index of Multiple Deprivation</b>		
1 (most deprived)	6	8
2	6	5
3	5	5
4	4	5
5	4	3
<b>Urban / Rural</b>		
Urban	20	20
Rural	5	6
<b>Disability / long term health condition</b>		
Yes	10	10
No	15	16
<b>Ethnicity</b>		
Ethnic Minority	2-4	3
White British	23-21	23

# Case Study: Citizen Inquiry on Shared Decision Making

## 5: Commentators

The Oversight Group recommended commentators with:

- Expert knowledge of the system or the topic
- Divergent perspectives
- Ability to communicate

Commentators were briefed and instructed

- Use everyday language
- Not to use presentation aids and speak directly to people
- Be prepared to answer questions honestly and openly

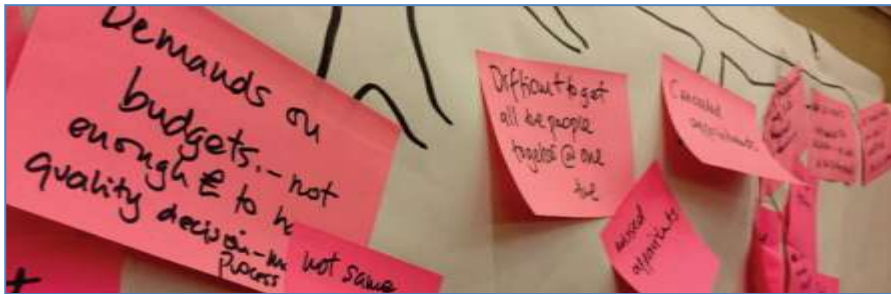


# Case Study: Citizen Inquiry on Shared Decision Making

## 6: Inquiry Sessions

### Day One: Setting the baseline and forming the group

- Exercises to get people working together
- Exploring preconceptions and identifying barriers
- Initial commentator sessions (whole group)



# Case Study: Citizen Inquiry on Shared Decision Making

## 6: Inquiry Sessions



### Day Two: Commentators and Deliberation

- Intense group based commentator sessions
- Deliberation groups
- Initial recommendation setting





# Case Study: Citizen Inquiry on Shared Decision Making

## 6: Inquiry Sessions

### Day Three: Recommendation setting

- Raw recommendations reviewed
- 13 recommendations short-listed
- Finalising the wording
- Priority setting/ranking



# Case Study: Citizen Inquiry on Shared Decision Making

## 7: Recommendations

Rank	Recommendation	Themed	Score
1	A programme to begin to inform and educate patients of their right to ask questions of their health professional and the benefits of doing this in terms of what they want and the best outcome for them. This would require investment and could be done in the following ways: <ul style="list-style-type: none"> <li>a) - information leaflets or information monitors (screens) in GP surgeries should include questions that patients can ask:               <ul style="list-style-type: none"> <li>i) - Is this test, treatment or procedure really needed?</li> <li>ii) - What are the risks and benefits?</li> <li>iii) - What are the side effects?</li> <li>iv) - What are the alternative treatment options?</li> <li>v) - What would happen if I did nothing?</li> </ul> </li> <li>b) - Introduce a questionnaire given to patients while waiting to see a health professional: are you aware of... decisions? Do you need any help from family or someone independent to help you make decisions? What do you want answers to... children about...</li> </ul>	A	64
4	There should be a database online for all healthcare and social care professionals to access information about patient's history. Security to be agreed with patient's consent. This will make sure that all relevant past information is taken into account when shared decision-making is happening so improving the quality of decisions made.	F	29
6	Medical appointment times need to be more flexible as 10-minute appointments can be too short to explain problems and to question the professional about options for treatment.	C	23
12	There needs to be more support when or if a power of attorney is required, this includes the cost. If not it can delay shared care or decision-making. Or find alternative ways to do it e.g. guardianship, living wills?	E	13

### Themed groups

- A** Inform, educate and prepare patients to ask questions
- B** Creating the culture for shared decision making including adequate finances, resources and support
- C** The organisation of appointments
- D** Training for professionals
- E** Advocacy
- F** Patient's information and records

# Case Study: Citizen Inquiry on Shared Decision Making

## 8: Launch and Report

### Stakeholders hear the recommendations

- Delivered by Inquiry members
- Working groups consider 'how to implement'
- Commissioners respond



'The Scottish Government is committed to carefully consider each of the jury's recommendations and reply to them all, either with a commitment to action or an explanation as to why that recommendation cannot be taken forward'

## Discussion groups:

**Strengths and Challenges of the model,  
including brief feedback**

## Lunch

*Invitation to you to suggest a challenge or exemplar for the afternoon*

# Afternoon Session

## Videos:

**Involve Citizens Assembly on Adult Social Care (3:00)**

**<https://youtu.be/k-E5tjVWUmE>**

**Shared Decision-Making Participants Responses (3:30)**

**<https://youtu.be/kdx90fWwBMQ>**

**newDemocracy Foundation. What is a Citizen's Jury? (3:40)**

**<https://youtu.be/fwSciUIDUD0>**

# Afternoon Session

## Scenario planning

Exemplar project within a small municipality related to:

- a) Climate Change
- b) Social Care
- c) Migration
- d) A project proposed by a participant

**Discussion groups:**

**Feedback from Scenario Planning,**

**including setting topics for post break  
discussion groups**

**Coffee Break**

# Case Study: Citizen Inquiry on Mental Health Reform



**West Midlands Mental Health Commission: Citizens Jury**

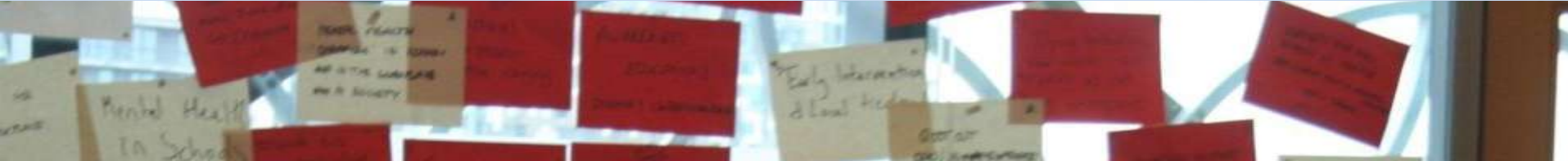


# Case Study: Citizen Inquiry on Mental Health Reform

**‘How can public services be transformed within current spending limits to build wellbeing, keep people mentally well and reduce the impact that poor mental health and wellbeing have on public services, the economy and communities in the West Midlands?’**

**West Midlands Mental Health Commission’s question**

# Case Study: Citizen Inquiry on Mental Health Reform



**In our mental health system, what is working well, what isn't and what should be done next?**



**West Midlands Mental Health Commission's revised question**

# Case Study: Citizen Inquiry on Mental Health Reform



21 people with lived experience make recommendations to the Mental Health Commission after eight sessions of deliberation

**Twenty one shortlisted applicants**

**Females: 12, Males: 9**

**Ages:** 20 to 35: 6, 36 to 45: 5, 46 to 60: 6, 60+: 3

**Geography:** Birmingham: 15, Coventry: 2, Sutton Coldfield: 1, Walsall: 3

**Ethnicity:** White: 12, Asian British: 4, Black/Black British: 3, Chinese: 1, Mixed heritage: 1.

Participants had experiences of psychosis, bipolar, depression, schizophrenia, eating disorder, anxiety, borderline personality disorder, stress, PTSD.

# Case Study: Citizen Inquiry on Mental Health Reform



**Identifying views within the members of the inquiry**

# Case Study: Citizen Inquiry on Mental Health Reform



**Facilitation using visual rather than text based language**

# Case Study: Citizen Inquiry on Mental Health Reform

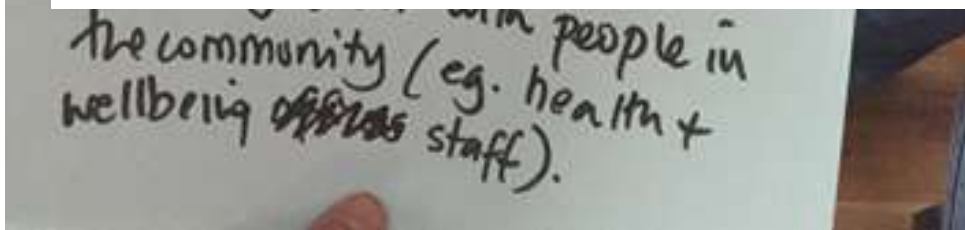


**Facilitation using informal spaces, and without aids**

# Case Study: Citizen Inquiry on Mental Health Reform



**Questioning based on participants working in groups (facilitated to avoid dominant voices)**



# Case Study: Citizen Inquiry on Mental Health Reform



**The Explorers**



# Case Study: Citizen Inquiry on Mental Health Reform



The Explorers

## The Engagement work: December 2012 to March 2013

### Outputs

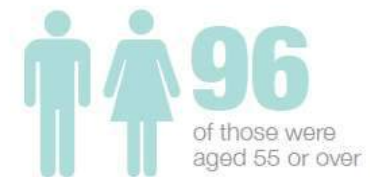
From December 16th 2012 to March 1st 2013, the Explorers used a very creative range of methods for meeting local residents to discuss and record their views.

- 615 residents were interviewed, from every part of the estate and across all age-groups (143 children, 70 teenagers, 118 people aged 18-29, 80 people aged 30-39, 63 people aged 40-49, 45 people aged 50-54, 86 people aged 55 and over).
- An even number of male and female residents were interviewed for children, teenagers, and 18-29;
- there were more female than male respondents for ages 30-39 (58 female/22 male), ages 40-49 (49 female/15 male), ages 50-54 (28 female/17 male) and over 55s (65 female, 31 male).

### Settings

Interviews were held in a wide range of community settings:

- A table in the reception area in St Chads
- Schools and School Councils
- Home Visits accompanying Regenda staff
- Community group meetings in St Chads Childrens Centre, Blackthorn Road Community Hall, Farm Road Youth Centre
- Events organised by the Explorers (Santa's grotto in St Chads, in partnership with Action For Children; coffee mornings in St Chads and Blackthorn Road Community Hall; in partnership with Urban Angels)
- Job Club in St Chads Library
- Interviews with SPAR customers (with permission from the store manager)
- Regenda Partners events: (launch at Community Hall; Raise the Youth event)
- Street interviews



# Impact on decision makers: Changing the culture of 'we know best'



Improve

Support

Understanding

Empower

**THRIVE WEST MIDLANDS**  
An Action Plan to drive better mental health and wellbeing in the West Midlands

WEST MIDLANDS COMBINED AUTHORITY MENTAL HEALTH COMMISSION

Shared Future  
A Community Interest Company

The West Midlands Mental Health Commission Citizens Jury

WEST MIDLANDS COMBINED AUTHORITY



# Impact on participants



Inquiry Members Presenting Results  
(who are the experts now?)

Start up  
a Food  
Co-op  
Who would like  
to get ACTIVE

Regular  
veg  
Variety

# Co-production and legacy



Blackburn Obesity Jury 2008

Higher Croft Food Co-op: 450 households now members

# **Nuts and Bolts Discussion Groups:**

**Develop 1-2 questions for Me**  
(for the closing plenary session)

**And 2-3 recommendations for Yourself**  
(and colleagues in other groups)

**Write your recommendations and questions on separate papers (1 per sheet)**

# Nuts and Bolts Discussion Groups:

## What makes a good question?

***Addresses a dilemma and ‘ is open, not closed’***

*(a ‘wicked’ problem to which there is not a YES/NO answer)*

## What makes a good recommendation?

***Defines the issue that needs to be resolved***

***Then proposes a solution that is specific and possible.***

**“In order to adopt more deliberative processes in Sweden we have identified that one of the barriers is .....**

**The way to overcome this barrier is to .....”**

**Thank You**

**Jez Hall**

**[www.sharedfuturecic.org.uk](http://www.sharedfuturecic.org.uk)**

