

How to involve the public on staff appointment panels

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A longer version of this document is available [here](#)



Purpose of this paper

This briefing paper aims to provide good practice guidelines on how to involve public contributors in staff recruitment. This resource should help members of the public, frontline staff, and managers to encourage progress in this area. As readers provide feedback, further insights will be used to update the paper. Please contact shahnaz.aziz@nottingham.ac.uk to suggest improvements or tell us how you have made use of this paper.

Introduction

In the health and social care world, we believe that the effectiveness of the staff recruitment and selection process improves when the appointment panel includes public contributors¹. This partly rests on the merits of Values Based Recruitment (VBR), an approach which is being actively promoted within the NHS to select staff on the basis of their values and beliefs as well as their technical skills. The organisation's statement of values should be coproduced by public contributors working alongside staff, and for NHS organisations, will be derived from the [NHS Constitution. Values Based Recruitment](#) then tests the alignment of candidates to the organisation's values. It has been shown to increase staff satisfaction and reduce turnover. Involving public contributors will assist the appointment panel in focusing on the values of candidates and is a legitimate component of Values Based Recruitment².

This approach to recruitment was pioneered 25 years ago³ and it is now used across the country in several NHS⁴, Council⁵ and voluntary organisations⁶, and locally in a number of organisations in the East Midlands⁷.

Despite these local innovations and the availability of general advice⁸, the practice is not embedded throughout all appointments or across all agencies.

This document sets out the case for such involvement, points to resources, and offers guidance to assist those who make appointments, as well as those who design the recruitment process, train people to run it, sit on panels or apply for jobs.



A note on language and the reach of this paper

The term 'public' refers to people who bring their lived experience on to the staff appointment panel. We include people with a range of health conditions, experiences or circumstances that would make them eligible for health or social care support, including being a relative or friend of someone in receipt of support (carer). We also include members of the general public.

The paper recommends the application of the same core values to all competitive recruitment and selection processes, whether a first appointment to a job in the organisation or a promotion, secondment, or redeployment, and to all roles and grades of staff. Within this general framework, there is room for adaptation to particular circumstances⁹.

The interview process includes the following steps: forming the job description and person specification, designing tests for job applicants, preparing interview questions and model answers, reading application forms, and shortlisting candidates, attending the interview panel, scoring, and recording answers and contributing to decision making. Members of the public may be involved in all of these steps, although we note that some choose particular areas where they feel they can add most value.

Even where an organisation has not involved the public in its recruitment process in the past, there has often been a tradition of inviting guests who are external to the appointing organisation, to serve as panel members. For example, a colleague from the Local Authority or a charity may be invited to join a panel within the NHS, or vice versa. This is good practice and ensures scrutiny and diverse perspectives.

Finally, we observe that meaningful involvement of the public will extend beyond the recruitment process to all other aspects of the organisation's activities, including selection panels, strategy development, commissioning, and quality assurance.

Why include public contributors?

There are five reasons, as follows:

1. The UK's disability civil rights movement has insisted on 'nothing about us without us' and this has been adopted by the NHS¹⁰.
2. Organisations report the following benefits:
 - Public contributors from outside help the in-house panel to avoid narrow thinking and take a broader view. They also act as an external witness to the process and thereby provide an additional safeguard to ensure it is entirely fair.
 - Public contributors help the appointment panel to select applicants that have the right values and approach to compassionate care.
 - It provides the right starting point for the applicant's future working relationship with people using the service. More broadly, it establishes from the outset that staff are employed through public funds, their work is for public benefit, and they are accountable to the community.



3. Research in other fields, such as professional training¹¹ and healthcare research¹² suggests that public involvement improves outcomes. This may be true for recruitment too. We would predict an increase in staff satisfaction and service user outcomes and a reduction in turnover and complaints as a result of involving the public.
4. Policymakers and professional bodies may expect it¹³.
5. Commissioners and regulators may require it as a condition of funding.

Some brief guidance notes

A positive experience. The recruitment process is often the first experience an individual has of an organisation. It is therefore vitally important that the experience is both professional and positive for the candidate.

Pool learning. It is helpful to talk to some of the organisations mentioned in this briefing paper, read some of the published material and network with others who are promoting opportunities for members of the public to sit as panel members in staff recruitment.

Create a plan. It takes time and effort to establish a regular process whereby appointments routinely include a public contributor on staff recruitment and selection panels. The following elements should be considered:

- Engage Human Resources professionals
- Develop and deliver training for public contributors
- Recruit and support them
- Identify an appropriate budget
- Decide what counts as success and how to report on progress.

There may be public contributors who are already highly skilled in staff recruitment from a range of settings.

However, there may not be enough trained public contributors to attend all recruitment panels from the outset. Several alternative options are available, including:

- Begin with the most senior appointments, as these are few in number but highly influential and it sends out a strong signal that public contributors should be involved in important decisions. Nottingham University Hospitals NHS Trust have involved public contributors in the appointment of consultants and other senior posts.
- Begin with the posts where the job entails the maximum amount of time interacting with people using the service¹⁴. If the public contributor is offering specific help in discerning which candidate has the best attitude towards people using the service, then these patient-facing roles are where that judgement is most needed.
- Treat all appointments with the same priority, irrespective of grade or role, so work on a 'first come, first served' basis. This is the approach taken by Nottinghamshire Healthcare NHS Trust.



Ring-fence funding and resources to ensure that engaging the public as panel members is done properly. Like quality, this should not be an optional extra that can be ignored until additional funds are provided but cannot be done well without proper investment. Senior sponsorship from the Board and Human Resources department is also required, and a strategy and action plan developed and delivered over time to build the right culture in the organisation, skills amongst all panel members, effective procedures, training, and quality assurance.

Develop skills. Nobody should serve on a panel until they have received sufficient training or experience to ensure that they understand:

- The job role that is being filled, so that they make apt judgements about how the candidate's ability matches the real duties and expectations of the role.
- The recruitment and selection process, so that they understand each step of the process and the basis of judgements.
- The values that drive the employing organisation and recruitment process, including equal opportunities principles, so that they appreciate how both individual candidates are assessed, and are aware of the conscious and unconscious processes that might create unfairness. For example, panellists are required to move beyond their personal preference for one candidate over another, so that they consider their role as acting on behalf of patients.
- Data protection and confidentiality obligations, so that disclosures made during the recruitment process are not misused. This has included situations where the panel member discovers through the interview that a staff member, another person using the service, or a neighbour has applied for the job in question.

At Nottinghamshire Healthcare NHS Trust, public contributors had access to training opportunities, all provided free of charge. As with all training at the Trust, courses are open to both service users and staff, and everyone expects to learn together in the same classroom. The training opportunities were:

- Understanding the recruitment and selection process – a 4-hour course for panel members
- The responsibilities of panel chairs – a 4-hour course to help everyone understand the duties of the chairperson. Public panellists have trained and then served as chair for both integrated and twin panel arrangements (see below).
- A three month 'buddy' programme for new panel members who have completed the training and then attend panels in the buddy period but do not vote. After each panel is over, they discuss the process with their more experienced colleague.

Select the right public contributors. Panel members need to make appropriate use of their own life experience of using services. They may need to build on skills in managing their own disclosure and boundary setting. Very recent and vivid experiences of using services and interacting with staff may colour the contributor's approach and their views need to be held in balance with those of other panel members through the scoring process.

To avoid both the existence and appearance of nepotism, no relative or partner (including cohabitants and civil partnerships) should have any line management responsibility or be involved in any aspects of appointment, promotion, remuneration or compensation decisions



regarding that person. When any such relatives and/or partners are employed, a written statement to reflect the steps that have been taken to ensure that no internal conflict of interest will arise due to that relationship, should be placed on their respective personnel files. Similarly, steps should be taken to declare and avoid conflicts of interest, if necessary, by potential panellists standing down and being replaced if they have prior knowledge of the candidate.

People who participate in recruitment and selection as public contributors will have the ability and willingness to:

- Listen and concentrate
- Express their views in a constructive manner
- Appreciate the principles that drive the process (equality, confidentiality, data protection, compliance with law and policy) and act accordingly
- Pursue the interests of the employing organisation
- Appraise their own capacity to be involved and take appropriate action.
- Learn from training opportunities and accept guidance from the recruitment manager.

Provide support. Line managers and keyworkers may need to develop skills in engaging public contributors as equals or in negotiating their 'dual identity' as a panel member who has also used the service. Other panel members and work colleagues may need to confront their own assumptions and prejudices and may need to be provided with suitable information about the recruitment process to assist them to clarify their expectations and address any misunderstandings. Paying attention to training and skills should not exclude people who have powerful insight but presently lack sophisticated skills. The experience of serving as a panel member may affect their general approach to the service in both helpful and unhelpful ways and so the person needs to be supported before, during and after the interview. Public panellists may need more support than is routinely provided to others.

Build relationships. Do we want to develop a cohort of highly experienced public panellists who have frequent opportunities to assist the recruitment process, or is the goal to widen the group as far as possible? Do successful organisations make arrangements with a user-led organisation or engage individuals? Are there any links between the process of recruiting public contributors as panel members and the organisation's support for jobseekers, so that public panellists have a better chance of obtaining paid work?

Honour diversity. Enrich the experience by ensuring that the least frequently heard voices are engaged, regardless of age, race, faith, gender, sexual orientation, culture, and life circumstances. For example, guidance is available¹⁵ on how to make reasonable adjustments¹⁶ for include people with dementia, children and young people, and drug misusers in appointment panels. The interview process needs to be conducted in a manner which enables everyone to fully participate, and with adequate breaks and refreshments to ensure panel members and candidates can give their best.

Reasonable adjustments should be made to ensure public contributors can access every aspect of the recruitment process including papers, buildings, online platforms.



Establish proper terms and conditions. This includes:

- The role should be described in writing so that panel members are entirely clear about what they are being expected to do.
- Payment. While some panel members are quite willing to volunteer their time, it is good practice to recognise the level of responsibility held in this role by offering a participation payment if this is in line with payment policy. Most definitely all out of pocket expenses i.e., travel/car parking/caring costs etc must be reimbursed.
- Panel members are required to sign a declaration about confidentiality.
- Consideration should be given to whether prospective public panellists should be checked with the [Disclosure and Barring Service](#).

Full involvement – with targeted expertise. Some public panellists report having no contact until the day of the interview, when they are introduced to the other panellists, issued with a pre-written question or two and told to read it out when asked to do so. This is not acceptable.

The expectation is that people are involved in reviewing the job description and person specification, designing tests and interview questions, planning the interview process, asking questions, and scoring responses, and finally resolving any difference of view about who should be appointed.

The public panellist has a distinct insight into the candidate's attitude toward compassionate care and their skills in creating a therapeutic relationship. The questions that they ask in the interview and their judgement about the responses given will be particularly important to the selection process.

The table below is incomplete, but offers some suggestions for job descriptions, person specifications and interview questions. The topics covered in the second column are not aligned to those in the first column.



| Building public involvement into the job description and person specification | Building public involvement into the Interview questions |
|---|--|
| <p>Work in collaboration with local and national PPI colleagues to promote and develop a robust approach to involvement.</p> <p>Develop a plan for the development and embedding of PPI in the organisation. Develop effective databases to support participation, engagement, and involvement.</p> <p>Encourage members of the public, patients, and carers to become involved in the organisation.</p> <p>Seek out the full range of patient, carer and public experience and insight, and work directly with patients and the public harness this and improve services.</p> <p>Advise all colleagues of their duty to consult and involve patients and carers throughout their work.</p> <p>Establish and maintain constructive relationships with a broad range of voluntary, community and patient-led groups and organisations. Act as the organisation's representative for patient experience and involvement at networking events.</p> <p>Focus on what matters most to patients, carers, and the public. Capture positive stories for the media.</p> <p>Design, deliver and facilitate focus groups, workshops, conferences, and network events that engage with diverse audiences.</p> <p>Ensure that activity is planned in ways that encourage engagement with those who are seldom heard, to be inclusive and reflective of the diversity of the community.</p> <p>Implement the principle of 'nothing about me without me', thus complying with national policy and demonstrating leadership in the field.</p> | <p>When meeting colleagues in other parts of the country, and other organisations, what would you describe as your ambition for public involvement?</p> <p>Where would you look for public contributors who are able to act as informed allies in strategy development?</p> <p>You could spend your whole time just collecting contact details of community groups. How will you approach the challenge of building networks?</p> <p>Tell us about a time when you worked with patients as partners. What worked well, what would you do differently and what advice would you give to others? What would you say is the most important thing you can do to encourage involvement?</p> <p>How can you help people who are unfamiliar with formal meetings to participate?</p> <p>In your experience, what are some of the obstacles to participation?</p> <p>What difficulties might colleagues perceive in involving patients and carers?</p> <p>What is your vision for service user involvement?</p> <p>How will you find out what matters most to patients, carers, and the public?</p> <p>What are the implications of employing a disabled person in your team and how will you be sure about these?</p> <p>Moving into a new area, how would you identify service users who you might involve in a new development?</p> <p>How have you set about implementing the principle of 'nothing about me without me' in the past? What is the best place to start?</p> |



| | |
|--|--|
| <p>Provide information to the general public and respond to communication in a timely, professional and friendly manner.</p> <p>Organise venues, equipment, catering, participation payments and out of pocket expenses.</p> | <p>Why does communication with the public break down?</p> <p>Where would you find help in making practical arrangements for meetings and events?</p> |
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Different kinds of panel. There are three ways to involve people in the recruitment and selection process:

- An informal opportunity to meet the candidates before the formal interview, with feedback to the selection panel
- A twin panel arrangement in which there are separate interviews with a public panel and a professional panel, and each candidate is therefore interviewed twice. Where twin panels are used, it is important to decide how a conflict of view between the two panels will be resolved. For example, a panel could be made up of service users, chaired by a service user who has completed the training in chairing appointment panels. Conflict between the two panels is minimised.
- An integrated panel in which the public contributor is a full member of the single interview panel.

In general, NHS and social care organisations are moving towards the integrated panel, sometimes retaining the use of two or even more panels for the most senior appointments.

Offer payment. Local practice varies on whether public contributors receive an offer of payment. We recognise that involvement in the recruitment process is a serious matter that has significant outcomes for candidates, requires legal obligations to be met and demands full engagement in the process and these aspects form a compelling argument for offering payment. We note that there are very good reasons for both accepting and for rejecting the offer of payment, and individual choice should be upheld. Where payment is agreed, a frank discussion needs to be had regarding payments, and potential impacts regarding benefits and HMRC declaration and public contributors should be advised to seek guidance. The administrative procedure for making payment needs to be lean and responsive so that people are paid promptly and without too much trouble.

Decide what to do about documents. Tracking documents that help the recruiting manager to manage the appointment process should include a prompt to engage public contributors. Application forms are normally provided to all panel members. It is good practice to provide documents two weeks in advance, to give time for people to read them carefully. The demographic data is removed before the forms are seen by panel members and then all documents are returned to the chair at the end of the panel. However, practice varies regarding whether public contributors see the application form. The arguments for and against are shown in the table below.



| Why public contributors should be offered sight | Why public contributors may not want to see the application form |
|---|---|
| <p>It creates parity between salaried panel members and public contributors</p> <p>It provides background information to help the panel member make sense of the answers given in the interview</p> | <p>Some public contributors have limited stamina and concentration, and reading all the application forms takes too long</p> <p>The information on the application form has already been reviewed to create the shortlist, so this does not need to be repeated in interview</p> <p>Public contributors should focus on values, attitude, and relationships, not documents.</p> <p>Where panel members are in an unusual situation, such as in a secure psychiatric facility and the risk assessment reveals a heightened risk that disclosures may be misused.</p> |



References

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² [North East Dementia Alliance \(2013\) Working with people with dementia and their carers: Values Based Recruitment – A toolkit.](#)

³ See [here](#).

⁴ 2gether NHS Foundation Trust, and Tees, Esk and Wear Valleys NHS Foundation Trust and South London & Maudsley NHS Foundation Trust, Hertfordshire Partnership NHS Foundation Trust. Mersey Care NHS Foundation Trust has involved service users and carers in over 3,000 appointments, including 197 appointments between 1 January and 28 March 2012, ranging from domestic staff through to Clinical Psychiatrist in High Secure Services.

⁵ Gloucestershire County Council, Lancashire County Council and Kent County Council.

⁶ Richmond Fellowship, Fitzroy.

⁷ Leicestershire Partnership NHS Trust, Nottingham City Council department of adult social care, the Involvement Interview Team at Nottinghamshire Healthcare NHS Trust, Derbyshire Healthcare NHS Trust and Nottingham University Hospitals NHS Trust.

⁸ See, for example, Sussex Skills for Care (2008) [How to Involve People who use Services and Carers in Staff Recruitment and Development: A Practical Guide for Employers.](#)

⁹ For example, changes have happened where Nottinghamshire Healthcare NHS Trust have adapted the process for use in medium and high secure psychiatric inpatient settings. Prisoners were involved in the recruitment of healthcare staff in HMP Lindholme.

¹⁰ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/216980/Liberating-the-NHS-No-decision-about-me-without-me-Government-response.pdf

¹¹ Barnes, D. Carpenter, J. and Bailey, D. (2000) Partnerships with Service Users in Interprofessional Education for Community Mental Health: A Case Study. *Journal of Interprofessional Care* 14, pp189-200

¹² See [here](#)

¹³ For example, see Department of Health (2010) *Joint Guidance on the Employment of Consultant Psychiatrists*, page 9. Available [here](#).

¹⁴ This is the position taken by Lancashire Care NHS Foundation Trust, Blackpool Borough Council, Blackburn with Darwen Borough Council and Lancashire County Council joint policy.

¹⁵ For example, guidance on including people with dementia is available in the [DEEP Guide \(2013\) Involving people with dementia in recruitment and selection](#). Advice on involving children and young people is available in Ballard T (undated) *Involving Children & Young People Young People In Recruitment and Selection*, and also [Action for Children \(2009\) The right choice: involving children and young people in recruitment and selection](#). Advice on involving substance misusers is available from Scottish Drugs Forum (undated) *Tip Sheet 3: Involving service users in staff recruitment*.



¹⁶ Reasonable adjustments are required under the Equalities Act 2010 to ensure that people are not excluded due to a protected characteristic, such as disability.

