



## Tameside & Glossop Partnership Engagement Network (PEN)

### Follow up Engagement Strategy and PEN Forum approach workshop

9 February 2018  
2pm  
Lesser Hall 1 (Dukinfield Town Hall)

As part of the wider development of the Partnership Engagement Network (PEN) a task and finish workshop made up of representatives of patient and public groups and key stakeholders was held on 27 November 2017 to scope out an Engagement Strategy for Tameside and Glossop.

The feedback and comments received from the task and finish workshop in November were used to support the development of the first draft of the Engagement Strategy.

The development and implementation of strategy will be jointly facilitated by the Tameside & Glossop Strategic Commission (Tameside Council and NHS Tameside and Glossop Clinical Commissioning Group) and the Tameside & Glossop Integrated Care NHS Foundation Trust (aka Tameside Hospital).

Those who participated in the initial workshop in November 2017 were invited back to a second workshop held on 9 February 2018. The purpose of the follow up workshop being to ensure that the feedback received in November had been incorporated into the draft Engagement Strategy and to discuss and agree the final strategy.

The group were invited to look through the draft strategy and asked to comment. Each section of the draft strategy was discussed and requests for amendments put forward by members of the task and finish group. A small number of amendments were put forward. All agreed that once amended after taking into account feedback and comments from the group the Tameside and Glossop Engagement Strategy could be agreed as a final document.

All changes have been incorporated into the final version of the Tameside and Glossop Engagement Strategy attached to this note at **Appendix 1**.

The task and finish group were also asked to discuss and approve a proposed approach to the PEN Forum.

The group agreed the general approach as outlined in the note in particular that the PEN Forum should be informal approach, meet 3 times a year (with other ad hoc meetings as required) and be a place to bring together key themes emerging from different pieces of engagement and consultation activity. Following a discussion on membership it was agreed not to have a set membership but leave it open to a core invite list that covers all sectors and characteristics. In effect the approach used for strategy workshops.

All changes have been incorporated into the final version of the PEN Forum approach document attached to this note at **Appendix 2**.

There was also a general discussion about the PEN approach (Conference – Forum – Panel) and the three aspects of engagement (Strategic – Thematic – Neighbourhood). The group felt that in both cases these made sense and were the sensible way forward. However it was noted there needed to be further clarity regarding what each one would mean. It was agreed that this would be something that would evolve over time as we learnt and gained experience as a partnership and network.

The workshop closed at approximately 3pm

**Note:**

The following organisations and groups provided input into the development of the strategy at either one or both of the task and finish group workshops in November 2017 and February 2018:

- Glossop Patient Neighbourhood Group
- Ashton Patient Neighbourhood Group
- Hyde Patient Neighbourhood Group
- Citizens Advice Bureau (Glossop)
- Job Centre Plus
- MIND
- Kush Amdid
- Action Together
- The Bureau (Glossop)
- New Charter Housing
- Active Tameside
- Indian Older Women's Community Group
- Tameside Armed Service Community
- Tameside Council
- Healthwatch Derbyshire
- NHS Tameside & Glossop Clinical Commissioning Group
- Tameside & Glossop Integrated Care NHS Foundation Trust
- Derbyshire County Council

# Engagement Strategy for Tameside and Glossop



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# Introduction

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**Tameside and Glossop Strategic Commission (Tameside Council (TMBC) and NHS Tameside and Glossop Clinical Commissioning Group (CCG)) and Tameside and Glossop Integrated Care NHS Foundation Trust (T&G ICFT) are committed to ensuring that the public, stakeholders, partners and the voluntary, community and faith sectors are central in shaping the way we commission and deliver the best possible outcomes for our population.**

Our ambitions for a fully integrated approach and the fact that the things that affect our population traverse traditional organisational boundaries and department is reflected in the single approach to engagement described in this strategy.

Developed in partnership with key stakeholders, this strategy creates a single framework, guiding principles and ambitions that will enable us:

- To create the space for ongoing conversation with the public, starting conversations early and developing collaborative solutions;
- Ensure that our plans, strategies and policies are informed by the voice of the public;

- Have systems that allow us to engage with a broad cross section of the population that is as representative as possible of the communities of Tameside and Glossop;
- Ensure that officers working for the statutory agencies in Tameside and Glossop have ready access to engagement opportunities to inform their work;

Involving the public is key to successful public service delivery and results in better services, more appropriately tailored to people's needs. This strategy sets out our approach but will require the organisations across the public sector, their partners – and community and patient groups – to embrace it and turn it into practice making reality of the principle of ensuring the voice of the public is at the heart of everything we do.



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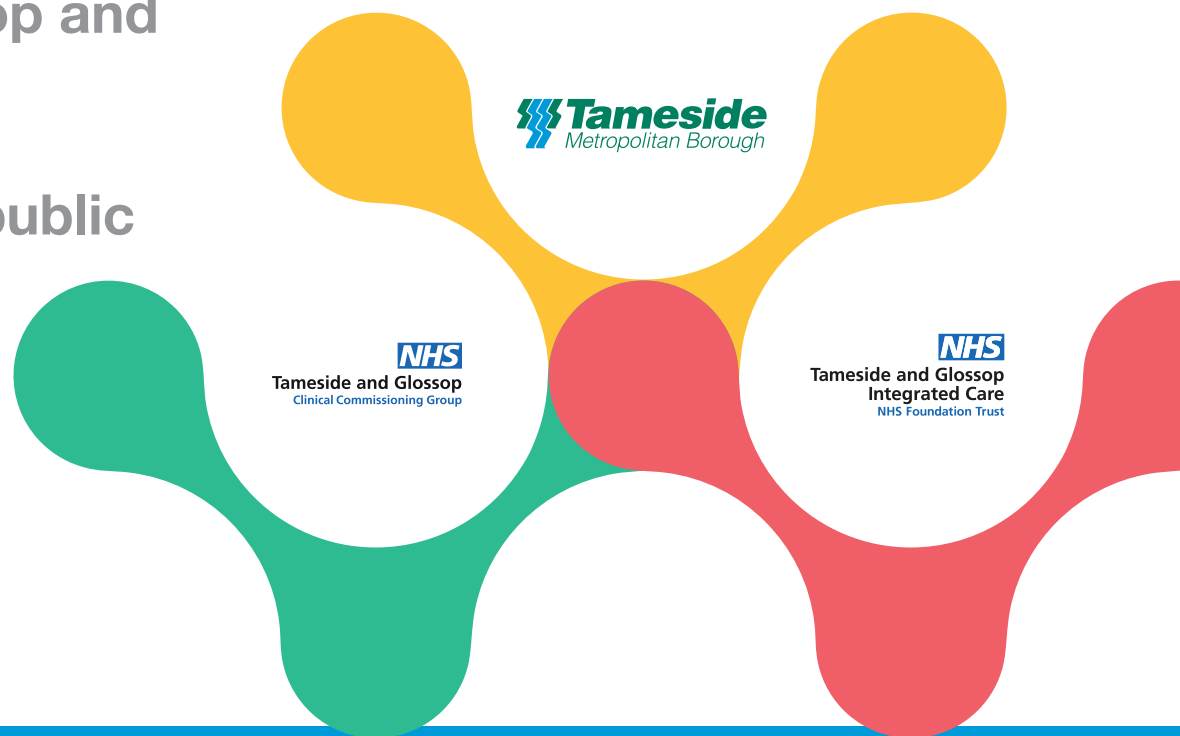
# Vision

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Our vision for Tameside and Glossop puts people at the heart of decisions about their local services.

Working together we will create a sense of collective ownership of the issues faced by the communities of Tameside and Glossop and how we address them together.

We will start conversations with the public and stakeholders early, shaping our plans from the start.



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# Outcomes

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The success of this strategy should be assessed by the extent to which:

- People have an opportunity to express their views and feel confident that their voices are heard;
- People feel their opinions and ideas will influence the commissioning, design and delivery of local services;
- Our services will be better as a consequence of engagement and consultation;
- High quality engagement will be something that occurs routinely within our organisations, and is ongoing.



# Objectives

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In order to realise the outcomes identified above we have identified the following key objectives, critical to success:

1. Strengthen partnership working, developing and sustaining constructive relationships between local communities, partner organisations and decision makers.
2. Ensure meaningful and continuing conversations with public, partners and key stakeholders and embed an ongoing dialogue with the public in the practice of commissioners and providers;
3. Reduce inefficiency and duplication in engagement and consultation practice so the work we do has maximum influence and impact.
4. Ensure that the voice of all parts of our communities are heard and everyone has the opportunity to express their views.
5. Share information, knowledge, experience and best practice so that the development of new ideas is informed by existing learning.
6. Provide timely engagement and consultation activity and the commissioning and the service development it has fed in to.



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# Who is this strategy for?

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This strategy outlines how Tameside and Glossop Strategic Commission (Tameside Council and NHS Tameside and Glossop Clinical Commissioning Group) and Tameside and Glossop Integrated Care NHS Foundation Trust will involve local residents and stakeholders in decision making, policy development and service delivery.

While facilitated by the three organisations and overseen by the Tameside and Glossop Partnership Engagement Network it is expected that all organisations and groups will have due regard to the strategy.

## Those involved include:

- People who live in Tameside and Glossop.
- People who use services in Tameside and Glossop.
- Voluntary, community, faith groups and social enterprises and charities.
- Businesses in Tameside and Glossop.
- Public sector partners (e.g. Council, police, fire, NHS, colleges).



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# What do we mean by consultation and engagement?

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**Engagement** is the continuous conversation with, and involvement of stakeholders and residents.

**Consultation** is the time-limited seeking of views on specific proposals or options.

In simple terms engagement informs the development of services, commissioning plans and alternative proposals and options for change.

Consultation is then used to understand the impact of those proposals and options to inform further development before making decisions. Engagement can then be used to understand the ongoing impact of that change.

## Why engage?

Conversation between statutory agencies and members of the public and stakeholders is vital for a wide range of reasons.

## It is the right thing to do

The public are shareholders in public services. It is their right, both legally and morally to have a say in how public funds are spent, the strategic direction of the organisations delivering public services and how public services evolve and change over time.

## It improves the quality of services

Listening to the voice of the public in shaping services, improves their capacity to meet the outcomes we expect of them. By talking to stakeholders, especially service users, we can commission and provide more effective services that meet their needs.

## It ensures transparency and shared ownership

Vital insight derived from high quality engagement, reduces the risk of poor decision making and allows members of the public to understand better the decisions that are being taken, why they are being taken and play a full role in evaluating the alternatives.

## It's a legal duty

The legal duties on public bodies relating to engagement and consultation participation are many and varied, but primary consideration should be given to:

- NHS Act 2006
- Health and Social Care Act 2012
- The 'Gunning' Principles
- Public Sector Equality Duty and Equality Act 2010

Brief summaries of these duties can be found at Appendix 1.



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# Our principles

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Our principles demonstrate how we will approach engagement and consultation in Tameside and Glossop to involve residents in decision making, policy development and service delivery.

## We will:

### INCLUSIVE

#### Be Inclusive

We will work to ensure all protected characteristics and communities are well represented and focus on enabling participation from those voices who are least heard.

### TRANSPARENT

#### Be Transparent

Our engagement and consultation will be transparent – we are committed to being open and honest about the process, parameters, information that emerges from engagement exercises and how it influences the decision making process.

### RESPECTFUL

#### Be Respectful

Everybody's views will be treated with respect and consideration. Different and varied opinions will be treated fairly irrespective of the individual or group and the views expressed.

#### Be Effective

We will ensure that all consultation and engagement represents good value for money by better co-ordination between organisations and services, the use of new technology and using feedback effectively.

#### Be Genuine

Our engagement will be a genuine opportunity to influence decision making we will ensure that the views of those involved will genuinely contribute to the decision-making.

#### Strengthen Relationships

We will strengthen our relationships with the public and with local organisations, partners, businesses and the voluntary community sector. Working together is the best way to improve local services.

### EFFECTIVE

### GENUINE

### RELATIONSHIPS



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# Our principles

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## FEEDBACK

### Provide Feedback

We believe it is important that those involved in the engagement process are told how their involvement has contributed. We will ensure that people receive feedback.

### Evaluate and Learn

We incorporate evaluation and learning into all our consultation and engagement activity. Ascertaining the perception of participants, staff and partners enables us to constantly make improvements to our engagement practice.

## EVALUATE

BE  
EFFECTIVE

BE  
GENUINE

STRENGTHEN  
RELATIONSHIPS

PROVIDE  
FEEDBACK

EVALUATE  
AND LEARN

BE  
INCLUSIVE

BE  
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BE  
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OUR  
PRINCIPLES



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# What we will do

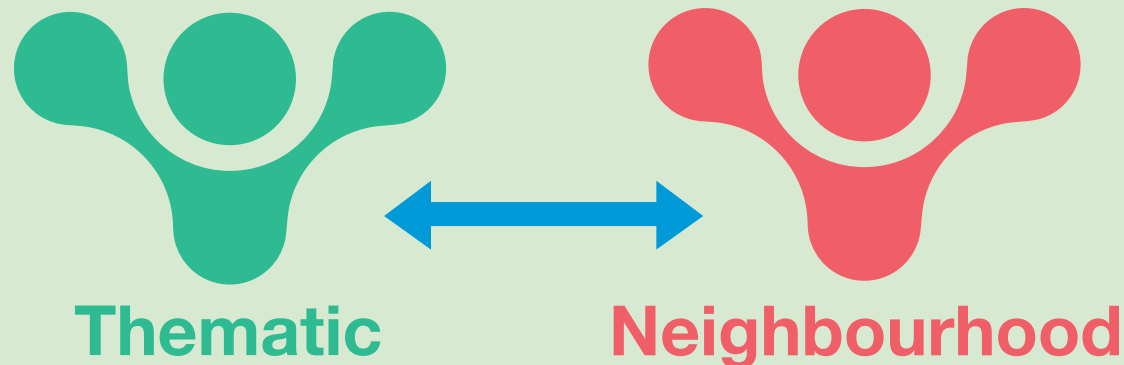
Our approach to consultation and engagement has three broad elements - strategic engagement, thematic engagement and neighbourhood engagement.

**Strategic engagement** is about engaging on the approach, principles and direction of travel, and identifying any key themes that emerge from operational engagement activity.

**Strategic engagement**



**Operational engagement**



**Operational engagement** is about engaging on services, new and developing models, emerging ideas and also includes consultation on service changes.



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# What we will do

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## Strategic Engagement

The Partnership Engagement Network (PEN) was established as part of a multi-agency approach to provide public and partners with an identified and structured method to influence the work of public services and to proactively feed in issues and ideas.

The Partnership Engagement Network (PEN) is a mechanism that facilitates strategic discussion, direction setting and buy-in. It does not make decisions, but it forges networks and partnerships out of which work programmes could develop.

## Operational engagement

We need to ensure that engagement is a core part of all the work we do. Operational engagement broadly takes two forms:

- **Thematic engagement** where services need to seek views on a specific issue or project;
- **Neighbourhood engagement** where services in their area should have an ongoing conversation with their service users/customers in their local area to ensure they are meeting need and striving to continuously improve;

## Feedback

We will develop approaches to ensure that people who participate in engagement activity receive feedback in relation to impact and decisions that are taken as a consequence. Feedback will need to take place in a variety of ways depending on the type of engagement taking place.

## Evaluating and learning

We know we won't always get things right. In addition to building the processes described in this strategy to support engagement, we will listen to people's views relating to our engagement processes and seek to continuously improve.



# Assurance and accountability

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As with any strategy we need to be confident that the principles and approaches suggested, translate into action and impact. As this strategy is designed to cut across all statutory agencies working in Tameside it is impossible to define a single approach.

## However the following should be considered by all constituent organisations:

- Ensure engagement is core to development plan or commissioning strategies where appropriate;
- Ensure operational engagement is part of all operational managers' remits;
- Ensure engagement features in all approved strategic documents and plans;
- Ensure the public and key stakeholders have early awareness of emerging issues and programmes of work, and are involved at the pre-planning stage;
- Ensure agencies work together and have shared ownership and accountability for engagement and consultation and the decision they inform;



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# Resources and contacts

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## NHS England

[www.england.nhs.uk/participation/involvementguidance/](http://www.england.nhs.uk/participation/involvementguidance/)

## Local Government Association (LGA)

[www.local.gov.uk/our-support/our-improvement-offer/care-and-health-improvement/integration-and-better-care-fund/better-care-fund/integration-resource-library/communication-and-engagement](http://www.local.gov.uk/our-support/our-improvement-offer/care-and-health-improvement/integration-and-better-care-fund/better-care-fund/integration-resource-library/communication-and-engagement)

## Cabinet Office

[www.gov.uk/government/publications/consultation-principles-guidance](http://www.gov.uk/government/publications/consultation-principles-guidance)

## The Consultation Institute

[www.consultationinstitute.org/](http://www.consultationinstitute.org/)

## Tameside Metropolitan Borough Council

[www.tameside.gov.uk](http://www.tameside.gov.uk)

## Tameside and Glossop Integrated Care NHS Foundation Trust

[www.tamesidehospital.nhs.uk](http://www.tamesidehospital.nhs.uk)

## Tameside and Glossop Clinical Commissioning Group

[www.tamesideandglossopccg.org](http://www.tamesideandglossopccg.org)

If you have any questions or would like any further information on anything contained in this document please contact:

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# Appendix 1 - Summary of Legal Duties

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## NHS Act 2006

Section 242, of the NHS Act 2006, places a duty on the NHS (including NHS Foundation Trusts) to make arrangements to involve patients and the public in planning services, developing and considering proposals for changes in the way services are provided and decisions to be made that affect how those services operate.

Section 244 requires NHS bodies to consult relevant local authority Overview and Scrutiny Committees (OSCs) on any proposals for substantial variations or substantial developments of health services.

## Health and Social Care Act 2012

Section 14Z2 of the Health and Social Care Act 2012 places a duty on CCGs to ensure that patients and the public are involved in the planning of services, developing proposals for any changes to services, and the operation of services.

## The “Gunning Principles”

The Gunning Principles apply once it has been agreed that consultation should take place. The “Gunning Principles provide a set of fundamental consultation propositions, established through case law, that must be adhered to.

The Gunning principles are that:

1. Consultation must take place when the proposal is still at a formative stage;

2. Sufficient reasons must be put forward for the proposal to allow for intelligent consideration and response;
3. Adequate time must be given for consideration and response;
4. The product of consultation must be conscientiously taken into account.

## Public Sector Equality Duty (PSED) / Equality Act 2010

The Public Sector Equality Duty (PSED) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations between different people when carrying out their activities.

Under the Public Sector Equality Duty and the Equality Act 2010, there are nine protected characteristics groups:

- i) Age
- ii) Disability
- iii) Gender Reassignment
- iv) Pregnancy and Maternity
- v) Race
- vi) Religion/Belief
- vii) Sex
- viii) Sexual Orientation
- ix) Marital/civil partnership status – is also relevant for some areas of the Public Sector Equalities Duty.

In Tameside and Glossop we have also identified four other groups: Mental health, carers, military veterans and breastfeeding.





## TAMESIDE AND GLOSSOP PARTNERSHIP ENGAGEMENT NETWORK (PEN)

### PEN FORUM

#### Why a PEN Forum?

The Tameside and Glossop Partnership Engagement (PEN) model was discussed and welcomed at the first conference in October 2017. Those discussions included having a PEN Forum – a forum of a **small number of representatives from stakeholders and those groups that represent the public and patients.**

The general consensus was for a group that would undertake more detailed discussion around **'place shaping'** in Tameside and Glossop, **explore key issues** in greater depth and co-design potential **new ideas and solutions.**

#### What will it do / what is its purpose?

Below is an indicative outline of the purpose of the PEN Forum and what it will do. These are not terms of reference or a work programme. Rather they are a guide for the activity the PEN forum will undertake which will evolve through experience and practice.

- Bring together common issues emerging from engagement and consultation activity
- Raise concerns about gaps and missed opportunities for engagement
- Review forward plan of engagement and consultation activity
- Review the outputs from previous work and ensure the feedback loop is closed
- Forge links with marginalised or seldom heard groups
- Facilitate strategic discussion, direction setting and buy-in
- Forge networks and partnerships out of which work programmes and ideas could develop
- Share best practice and learning across the area
- Grow a cohort of subject specialists and practitioners who can advise colleagues
- Build relationships across the multi-agency partnership
- Inform future meetings of the PEN Conference, and the review the outputs from previous ones
- Undertake detailed discussions on specific current topics

#### How will it operate / what is its format?

PEN Forum is an **informal set-up** with a **flexible approach** to what, when, how and who.

PEN Forum will meet **3 times a year** with additional ad hoc meetings as required. When taken with the PEN Conference meeting 3 times a year that means there is a PEN 'get-together' in some form on at least a bi-monthly basis. Of course, a wide range of ad hoc, ongoing and bespoke activity will take place outside the Conference and Forum as part of, and supported by, the PEN family



It is proposed to have the first meeting of the PEN Forum in **April 2018**. A further two future dates will be identified to alternate with PEN Conferences on a roughly bi-monthly basis. Other meetings will be set up as required based on need.

Meetings of the PEN Forum will be used to look at things in more **granular detail** and work together to **co-design solutions** and bring forward **new ideas**.

The strength and influence of the PEN Forum is drawn from its effectiveness in providing an **advisory and championing role** across the Tameside and Glossop engagement and consultation environment.

Meetings of the PEN Forum will be arranged and facilitated jointly by the Tameside and Glossop Single Commission (Tameside Council and NHS Tameside and Glossop Clinical Commissioning Group) and Tameside and Glossop Integrated Care NHS Foundation Trust (aka the Hospital).

The Forum will undertake an annual review of the purpose and aims of the PEN approach – and its effectiveness in achieving them.

### **Who will take part?**

As stated above the PEN Forum is an informal and flexible set-up, however it feels sensible to have some form of **core group** who are involved to provide a **line of sight over time**.

Rather than a fixed or defined membership the PEN Forum will operate on the basis of a **core invite list**. Members of that core list are invited to attend and take part in as many or as few of the meetings of the PEN Forum as they wish.

The three facilitating organisations - Tameside and Glossop Strategic Commission (Tameside Council and NHS Tameside and Glossop Clinical Commissioning Group) and Tameside and Glossop Integrated Care NHS Foundation Trust (aka the Hospital) – will be responsible for ensuring the core invite list is **representative of all geographies, sectors and characteristics**.

They will regularly review both the core list and attendance at meetings of the PEN Forum (and other workshops) to **ensure balance and legitimate representation** – and take proactive action where necessary.

### Note:

The Pen Forum approach outlined above was developed through discussions at the PEN Conference in October 2017, further feedback following the conference, the PEN strategy workshop in November 2017 and then agreed at the PEN strategy workshop in February 2018.