

## Engagement Projects 2018/19

1.

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets
<b>Engaging with looked after children</b>	SO 1 - To be a high performing CCG, deliver our statutory duties and use our available resources innovatively to deliver the best outcomes for our population. SO 6 - To deliver on the outcomes of the Locality Plan in respect of Children, young people and families	From January 2019	Series of visits to care homes to speak to young people about their issues around accessing healthcare services. If possible hold focus group in each home setting.	To examine the barriers looked after children face in accessing mainstream services.  To promote the range of services available to looked after children.	<b>Looked after children find it easier to access services. CCG has intelligence from looked after children to build into commissioning decisions.</b>

<b>Stakeholder Engagement and Communication Implementation Plan</b>	
<b>1 Engaging with looked after children</b>	
<b>Overview</b>	
Subject of engagement - scope	To engage with looked after children across the borough to examine the barriers they face to accessing healthcare services and to inform them of: <ul style="list-style-type: none"> <li>• Services available for young people</li> <li>• Changes to local services</li> <li>• How that can get involved.</li> </ul>
Engagement approach - method	Focus groups or small group meetings in each home. Aim to get group to write a story or poem about their issues.
Targeted stakeholder groups and representatives	Looked after children in each township. Carers / care home staff

<b>Practical Plan</b>			
	<b>Activities and resources</b>	<b>Responsibility</b>	<b>Timeframe</b>
Preparation	Contact list for each home with key lead Transformation information in readable form Background information on types of young people in homes		
Invitation - publicity	E mail to key contacts		
Pre - Information	N/A		
Logistics	Travel to and from homes with gear		
Venue, timing	TBC		
Equipment etc.	Flip chart, pens. Possibly lap top and projector.		
Agenda / plan for the event	Introduction Ground rules Issues to be covered Objectives Outcomes		
Ground rules – terms of reference	Respect all No idea is silly One conversation at a time All views are equal		
On the day roles and facilitation	Group facilitator	Phil, member of safeguarding, care home staff member	
Record keeping and assurance	Notes from meeting, notes to be agreed by group		
Assurance procedure	Make contact through homes Staff on hand at all times All notes agreed by group Report to GB and PPEC Ensure feedback to participants		

Feedback to participants	Report and outcomes to participants with follow up visit		
Wider communication of results	Possible follow up and report in Livin It		
Signals for success (hoped for inputs and outcomes)	Looked after children at each venue participate Story / poem from each venue Young people feel more able to access services they need		
Participant satisfaction feedback method	Evaluation sheets		
<b>Risk Assessment</b>			
Risks:	Poor uptake from homes Young people not engaged Safeguarding issue		
Contingency Plan:	Have a champion from staff to encourage participation Ensure agenda has something young people will be attracted to Have safeguarding staff at each event / no one to one situations		

## 2.

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets
<b>Strengthening links with the Lesbian, Gay, Bisexual and Transgender community</b>	SO1: To be a high performing CCG, deliver our statutory duties and use our available resources innovatively to deliver the best outcomes for our population. SO2: To deliver on the outcomes of the Locality Plan in	On-going from November 2018	Focus group meetings/ drop in sessions and attendance at existing group meetings, e.g. LGBT coffee morning third Thursday of the	To examine the particular healthcare issues faced by these communities and to discover what improvements they believe need to be	LGBT community more engaged with CCG  <b>More members of the LGBT community will be</b>

	respect of Prevention and Access (Prevention and Self Care)		month	made to healthcare services to enable them to be accessed more easily.	<b>aware of the locality plan and able to engage with and influence its' development and delivery.</b>
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**4. Stakeholder Engagement and Communication Implementation Plan  
Strengthen links and engagement with LGBT community.**

<b>Overview</b>			
Subject of engagement - scope	Health and social care issues for lesbian, gay, trans and undecided people. What are difficulties in accessing healthcare services? What do they need to see changing to improve services?		
Engagement approach - method	Focus group meeting approach at coffee morning/drop in. Work with Voices for All to establish where members of this community are likely to meet – are there any local support groups or similar that we could attend. Are there any known Gay etc. friendly establishments in the borough?		
Targeted stakeholder groups and representatives	Lesbian and Gay Foundation, Proud Trust, Lesbian, Gay, Trans and undecided members of the community		
<b>Practical Plan</b>			
	<b>Activities and resources</b>	<b>Responsibility</b>	<b>Timeframe</b>
Preparation	Basic agenda to structure meeting Presentation about the CCG		
Invitation - publicity	N/A		
Pre - Information	Press releases, tweets etc.		
Venue, timing	TBC		
Transport, food, lodging etc.	N/A		
Equipment etc.	Flip Chart – Flip chart stand		
Process to meet desired outcomes	Focus group meeting / coffee morning with structured agenda –		

	notes taken – Notes summarised for group – feedback to be provided after meeting; you said, we did.		
Agenda / plan for the event	Short agenda to provide structure to the meeting		
Ground rules – terms of reference	Respects all views Everyone has the right and opportunity to speak One conversation at a time No idea is silly		
On the day roles and facilitation	Phil Burton to facilitate. Note taker required.		
Record keeping and assurance	Demographic monitoring, Report to Governing Body? Evaluation sheet		
Assurance procedure	Evaluation meeting with Alison Mitchell or Phil Burton each month		
Feedback to participants	Feedback through LGF and web site. Important to highlight any action taken.		
Wider communication of results	Web Site, LGTF, Facebook,		
Signals for success (hoped for inputs and outcomes)	Lively conversation at meeting and commitment to further engagement Good intelligence specific to the group collected that will inform CCG		
Participant satisfaction feedback method	Evaluation form		
<b>Risk Assessment</b>			
Risks:	LGBT group do not feel able to engage with the CCG / feel CCG not interested Meeting could be diverted to specific personal issues Lack of trust in Statutory bodies.		
Contingency Plan:	CCG must ensure it is open to the views of all sections of the community. CCG should be prepared to show it can make a difference to the client group, if possible deliver a quick win. Strong facilitation to ensure agenda is followed.		

Work with LGBTF to build relationship over the long term.  
 If programme does not gather momentum after 6 months consider one off event for the community – question time format.

### 3.

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets
<b>Engage project in partnership with Mind</b>	SO1: To be a high performing CCG, deliver our statutory duties and use our available resources innovatively to deliver the best outcomes for our population. SO2: To deliver on the outcomes of the Locality Plan in respect of Prevention and Access (Prevention and Self Care) SO3: To deliver on the outcomes of the Locality Plan in respect of Neighbourhoods & Primary Care (Getting help in the Community) SO7: To deliver on the outcomes of the Locality Plan in respect of Mental Health	June 2018 onwards		To give members of new and emerging communities the opportunity to engage with service providers and commissioners and influence decision making.	More awareness/understanding in new and emerging communities, in particular with refugees and asylum seekers, to reduce the pressure of stigma and lack of awareness for individuals which will lead to more people seeking help at an earlier stage.  Reduce crisis situations developing  Better assessment outcomes and treatment for individuals through

					<p>effective communication and engagement – at primary and secondary care level.</p> <p>Health services developing more culturally sensitive approaches to meet the needs of these communities. Better engagement with health services to facilitate diagnosis and treatment (e.g. early diagnosis), and improve access to services - especially at primary care level</p>
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<b>5. Stakeholder Engagement and Communication Implementation Plan</b> <b>Engage 2</b>	
<b>Overview</b>	
Subject of engagement - scope	<p><b><u>Engage, Challenge, Support</u></b></p> <p>Great strides have been made in identifying and responding to the considerable challenges facing health service professionals in meeting the health needs of an increasingly diverse population. The Engage Project has been working with new and emerging communities, in particular refugees and asylum seekers to raise awareness and promote access to health services.</p>

	<p>The project has carried out a number of focus groups, including a conference, and has:</p> <ul style="list-style-type: none"> <li>• Identified the needs of these communities and gaps in service provision;</li> <li>• Investigated how these communities are engaging with health services and other service providers, including the barriers they continue to face in accessing services</li> <li>• Explored how best to engage effectively with these communities, and identified how best practice can inform culturally sensitive service provisions.</li> </ul> <p>Eight recommendations were made in the final report to HMR CCG for implementation as follows:</p> <p><b>Firstly</b>, the project will develop a series of health promotional and awareness raising materials, some in community languages, to help improve access and take up of community health services, and reduce the dependency on emergency services.</p> <p>Raising awareness will not only help meet the emotional and mental health needs of refugees and asylum seekers, but will also challenge the stigma and cultural taboo that prevent many people seeking help early.</p> <p><b>Secondly</b>, the project will seek to develop joint partnerships with faith based organisations, building on their current role in supporting refugees and asylum seekers and using bespoke materials such as the Qur'an and Emotional Health booklet to help guide people towards non-emergency and self-help provisions.</p> <p>Rochdale Refugees and Asylum Seekers Forum is a multi-agency Network that has been set up, as one of the recommendations, to work closely with other frontline services to help improve the experience of people from new and emerging communities, especially refugees and asylum seekers accessing health care services.</p> <p><b>Thirdly</b>, the Project will develop a series of training materials for frontline health professionals, including GPs and surgery/health centre staff to help improve cultural understanding and sensitivity when working with people from refugee and asylum seekers community.</p> <p><b>Finally</b>, the project will hold one learning event in March 2019 to draw on best practice, explore and evaluate the experiences of refugees and asylum seekers using health care services, and the experiences of health care staff working with refugees and asylum seekers.</p>
Engagement approach - method	Targeted focus groups in two languages.



	<ul style="list-style-type: none"> <li>• Develop and produce appropriate training and awareness raising materials.</li> <li>• 3 x training sessions with individual targeted community groups (30 people attending training sessions);</li> <li>• 2 x Training/awareness sessions with GP practices (12 practices supported)</li> <li>• Deliver learning event in March 2019, specifically targeted at refugees and asylum seekers and health care professionals who support them, with the aim of: <ul style="list-style-type: none"> <li>• Drawing on best practice.</li> <li>• Exploring and evaluating experiences of using health care services and supporting patients from refugees and asylum seekers. .</li> </ul> </li> <li>• The event aim to reach about 60 people.</li> <li>• 3 x meetings of Rochdale Refugees and Asylum Seekers Forum.</li> <li>• 5 x faith based organisations supported.</li> </ul>		
Targeted stakeholder groups and representatives	South Asian Community plus Black African, Eastern European, Iraqi/Syrian and other Arabic, asylum seekers/refugees		
<b>Practical Plan</b>			
	<b>Activities and resources</b>	<b>Responsibility</b>	<b>Timeframe</b>
Preparation	N/A	Mind commissioned to action	July 18 - March 19
Invitation - publicity	N/A	Mind commissioned to action	July 18 - March 19
Pre - Information	N/A	Mind commissioned to action	July 18 - March 19
Venue, timing	N/A	Mind commissioned to action	July 18 - March 19
Transport, food, lodging etc.	N/A	Mind commissioned to action	July 18 - March 19
Equipment etc.	N/A	Mind commissioned to action	July 18 - March 19
Process to meet desired outcomes	N/A	Mind commissioned to action	July 18 - March 19

Agenda / plan for the event	N/A	Mind commissioned to action	July 18 - March 19
Ground rules – terms of reference	N/A	Mind commissioned to action	July 18 - March 19
On the day roles and facilitation	N/A	Mind commissioned to action	July 18 - March 19
Record keeping and assurance	N/A	Mind commissioned to action	July 18 - March 19
Assurance procedure	N/A	Mind commissioned to action	July 18 - March 19
Feedback to participants	Report and article in Livin It		July 18 - March 19
Wider communication of results	CCG website, annual report, report, Livin It article	Phil Burton / Mind	July 18 - March 19
Signals for success (hoped for inputs and outcomes)	N/A	Mind commissioned to action	July 18 - March 19
Participant satisfaction feedback method	Evaluation sheets	Mind	July 18 - March 19
<b>Risk Assessment</b>			
Risks:	Failure to identify required cohort of participants Language issues make communication difficult Lack of trust from participants		
Contingency Plan:	Work with churches and SERCO to identify key cohort Employ translation / interpreters for most needed languages Build relationship over project period plus work with officers supporting refugees and asylum seekers to build rapport.		

## 4.

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets
Increase involvement with CCG	SO1: To be a high performing CCG, deliver our statutory duties and use our available resources innovatively to deliver the best outcomes for our population.				

Stakeholder Engagement and Communication Implementation Plan Increase involvement with CCG			
<b>Overview</b>			
Subject of engagement - scope	To increase the range and numbers of people engaging with HMR CCG.		
Engagement approach - method	Letter to local businesses, schools, community centres, RBH, churches/mosques, sports clubs		
Targeted stakeholder groups and representatives	All local people		
<b>Practical Plan</b>			
	<b>Activities and resources</b>	<b>Responsibility</b>	<b>Timeframe</b>
Preparation	Draft letter to each audience	Phil Burton	01 – 31 December 2018
Invitation - publicity	N/A		
Logistics	N/A		
Process to meet desired outcomes	Letter to organisations introducing CCG and what we do. Outline opportunities for engagement	Phil burton	
Record keeping and assurance	Log of letters sent/ responses/outcome	Phil burton	01 – 31 December 2018
Assurance procedure	N/A		

Feedback to participants	Respond to all responses with offer of meeting to discuss further involvement	Phil burton	January 2019 onwards,
Signals for success (hoped for inputs and outcomes)	Good level of responses form organisations Numbers taking up offer of meeting.		
Participant satisfaction feedback method	N/A		
<b>Risk Assessment</b>			
Risks:	Low level of responses Try following up letter with phone calls.		
Contingency Plan:	Resend letter to organisations not responding in 14 days (Little extra action can be taken unless significant spend approved)		

## 5.

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets
<b>Older people engagement</b>	SO1: To be a high performing CCG, deliver our statutory duties and use our available resources innovatively to deliver the best outcomes for our population. SO2: To deliver on the outcomes of the Locality Plan in respect of Prevention and Access (Prevention and Self Care) SO 7 To deliver on the outcomes of the Locality Plan in respect of Mental Health	On going	Meetings –User Carer forum, Rochdale Senior Citizens, Circle tea and Talk sessions	To capture views of older people about health and social care issues and to pass on relevant information about locality plan	Older people more aware of health and social care services and developments in the locality plan. <b>More older people feel they can influence the decisions affecting them.</b>

**Stakeholder Engagement and Communication Implementation Plan**  
**7. Older people engagement**

<b>Overview</b>			
Subject of engagement - scope	On-going engagement with older people about their key health and social care issues, and how they think services can be improved. Updating on key initiatives such as GM Devolution Locality Plan		
Engagement approach - method	Meetings with recognised older peoples groups at various venues.		
Targeted stakeholder groups and representatives	Age UK User carer forum, Rochdale Senior Citizens group, HMR Circle Tea and Talk sessions		
<b>Practical Plan</b>			
	<b>Activities and resources</b>	<b>Responsibility</b>	<b>Timeframe</b>
Preparation	Presentations and hand outs	Phil	2 weeks prior to each meeting
Invitation - publicity	Regular meetings with established groups – attend as a speaker	N/A	
Venue, timing	Various throughout the year		
Transport, food, lodging etc.	N/A		
Equipment etc.	Possibly lap top and projector, paper for note taking		
Participant reimbursement	N/A		
Process to meet desired outcomes	List of meeting dates for year, prepare presentations / notes for each meeting, note taking during meeting, feedback at following meeting, report key issues to PPEC	Phil	Each meeting
On the day roles and facilitation	Attending set group meetings – facilitation by chair at meeting	Group Chair Person	
Record keeping and assurance	Notes taken at each meeting, any key issues reported to PPEC for	Phil	Quarterly PPEC meetings

	discussion. User Carer Forum and Rochdale senior citizens minutes issued		
Assurance procedure	Above	Phil	Quarterly PPEC meetings
Feedback to participants	Feedback given at each meeting re meeting before.	Phil	
Wider communication of results	If any needed through web site or groups own newsletter / minutes	Phil and Group Chair.	Within 2 weeks of meeting
Signals for success (hoped for inputs and outcomes)	Older people feel they are aware of locality plan and other key developments and can influence their development.	Phil	
Participant satisfaction feedback method	Annual evaluation		
<b>Risk Assessment</b>			
Risks:	These are vocal groups and not delivering the service could lead to public criticism of the CCG and possible loss of reputation.		
Contingency Plan:	If attendance is an issue ensure another officer can attend. Ensure the groups know who to contact at CCG for queries.		

## 6.

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets
<b>Establishing links in the workplace</b>	SO1: To be a high performing CCG, deliver our statutory duties and use our available resources innovatively to deliver the best outcomes for our population. SO2: To deliver on the outcomes of the Locality Plan in	From Feb 2019	Encouraging larger employers to allow the CCG to hold sessions with employees in the workplace. This will run similar to schools	Employees will have access to information in their workplace, will be able to raise key issues and influence decision making.	Better informed, healthier workforce. Employees able to influence CCG decision making.  Number of people

	respect of Prevention and Access (Prevention and Self Care)		– first identify issues with employees and then set up speakers to lead discussions on key issues.		able to engage with the locality plan direct from their workplace.
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<b>10 Establishing links in the workplace</b>			
<b>Overview</b> – To engage with what is a missed community who are working when we deliver the majority of events. Using larger employers should enable us to engage with seldom heard people and hopefully from a variety of ethnic backgrounds. There is the possibility that in the lower skilled workforces people from emerging communities may be accessible.			
<b>Subject of engagement - scope</b>	To raise awareness of the local healthcare environment and find out what the key healthcare issues are for these communities.		
<b>intended outcomes</b>	CCG will have access to whole new audience CCG will have intelligence about the healthcare issues for people who work office hours People who work will be able to take part in or influence decisions affecting them Working people will have a voice on healthcare issues		
<b>Engagement approach - method</b>	Focus groups, workshops, open café events.		
<b>Targeted stakeholder groups and representatives</b>	Employees in their workplace.		
	<b>Activities and resources</b>	<b>Responsibility</b>	<b>Timeframe</b>
<b>Preparation</b>	Compile list of key larger employers: <ul style="list-style-type: none"> <li>• Zen internet – 01706 902080</li> <li>• RBH -</li> <li>• RBC</li> <li>• British Vita</li> <li>• MacBrides</li> <li>• JW Sports</li> <li>•</li> </ul> Contact employers to gain entrance to the workplace Try to establish the demographic of	Phil	By end of February 2019

	the workforce Plan sessions in similar way to lessons		
<b>Invitation - publicity</b>	Invites and publicity to all employees in an organisation Twitter, Facebook,	Phil/comms	
<b>Pre - Information</b>	Agenda distributed to workforce if possible Facts about the borough's health	Phil / employer	
<b>Logistics</b>	N/A		
<b>Venue, timing</b>	Employer premises	Phil to arrange	
<b>Transport, food, lodging etc.</b>	N/A		
<b>Equipment etc.</b>	Table, flip charts, pens, post it notes, possibly projector and lap top	Phil	
<b>Participant reimbursement</b>	No		
<b>Process to meet desired outcomes</b>	Contact employer Convince management of benefit Target only larger employers who may release staff for a time Try sessions in the lunch break if required Have a unique pull such as Health Checks Try focus groups or workshops – possibly commissioning exercises Document all views given Record and ensure feedback	Phil	
<b>Agenda / plan for the event</b>	On a session to session basis each one different to match demographic of the workforce	Phil	
<b>Ground rules – terms of reference</b>	No Ideas daft Respect each other and all views One conversation at a time	Phil / participants	
<b>On the day roles and facilitation</b>	TBC		



<b>Record keeping and assurance</b>	Notes taken verbatim or as near as possible, all recorded and written up, feedback to check if clear recorded. Engagement log complete after each session, demographic log and evaluation sheets completed	Phil	
<b>Assurance procedure</b>	Report progress to PPEC, report results and recommendations to PPEC and GB. Report action back to participants	Phil	
<b>Feedback to participants</b>	Draft conversation and then official report with recommendations. You said we did	Phil	
<b>Wider communication of results</b>	PPEC, GB, web site, twitter, press release		
<b>Signals for success (hoped for inputs and outcomes)</b>	Good take up from employers (3 of larger in first year) Turn out of 15 or more per session Get allowed back Employees say there are more aware of healthcare offer Less time lost in the workplace Employees know who to go to for what condition. Employees report better health and wellbeing	Phil	
<b>Participant satisfaction feedback method</b>	Evaluation sheets		
<b>Risk Assessment</b>			
<b>Risks:</b>	No employers return contact No employees turn up at sessions		
<b>Contingency Plan:</b>	Try to ensure employers understand possible benefit Try to ensure employees understand possible benefit Use Chamber of commerce breakfast meeting to drum up support		

## 7.

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets
<b>Work with young people with a learning disability Project in partnership with Possabilities</b>	SO1: To be a high performing CCG, deliver our statutory duties and use our available resources innovatively to deliver the best outcomes for our population. SO2: To deliver on the outcomes of the Locality Plan in respect of Prevention and Access (Prevention and Self Care) SO6: To deliver on the outcomes of the Locality Plan in respect of Children, young people and families	January 2019	Meetings and workshops	Series of meetings with young people with a learning disability to give them the opportunity to engage with the CCG, tell their stories and take part in decision making.	Young people with learning disability better informed and able to influence the work of the locality plan  Increase in the number of people with a learning disability who feel they can influence the decisions affecting them.

<b>11 Learning Disability</b>	
<b>Overview</b>	
Subject of engagement - scope	Work with those with a learning disability to ensure that they have a voice about healthcare issues and give them the same influence as other local people.
Intended outcomes	Those with LD feel they have a say and can influence healthcare decisions that affect them. CCG is aware of issues that face those with learning disability CCG involves those with LD in decision making process
Engagement approach - method	Focus groups with less severely affected one to one interviews with those more seriously disabled Must involve carers and family

Targeted stakeholder groups and representatives	People with mild to moderate learning disability, families and carers, professional support staff		
	Activities and resources	Responsibility	Timeframe
Preparation	Scope out the work, number of meetings needed etc. Consider more in depth involvement opportunity Map out venues Materials needed – use large proportion of visual materials		
Invitation - publicity	Work with PossAbilities to advertise opportunity		
Pre - Information	N/A		
Logistics	N/A		
Venue, timing	PossAbilities hubs dates and times to be arranged		
Transport, food, lodging etc.	N/A		
Equipment etc.	Flip chart paper, pens, crayons, felt tips, pants/tops and washing line, PowerPoint to play millionaire game, note pads		
Participant reimbursement	N/A		
Process to meet desired outcomes	Arrange right audience Arrange hubs on dates / times Invites to participants Outline agenda Discussion with group or individual Record conversations Type up notes Write up report Check with audience Report to GB		
Agenda / plan for the event	TBC		

Ground rules – terms of reference	Ni idea daft Respect all Take part as much or as little as you want		
On the day roles and facilitation	Phil B facilitator possibly with carer/case worker or family		
Record keeping and assurance	Attendance register Demographic details		
Assurance procedure	Monthly evaluation meeting with Alison Mitchell		
Feedback to participants	Draft report to be ratified by participants before going to GB		
Wider communication of results	Health page in Observer, press release with link to report, HMR website		
Signals for success (hoped for inputs and outcomes)	Good turnout, participation from all, good feedback from participants, willingness to do more		
Participant satisfaction feedback method	Evaluation sheet but easy read		
Risk Assessment			
Risks:	Possibilities do not want to participate, poor attendance		
Contingency Plan:	Back up of other support organisations, run small groups and try to get those who attended to spread the word.		

8.

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets
<p><b>Transformation of healthcare services</b></p>	<p>SO1: To be a high performing CCG, deliver our statutory duties and use our available resources innovatively to deliver the best outcomes for our population.            SO2: To deliver on the outcomes of the Locality Plan in respect of Prevention and Access (Prevention and Self Care)            SO3: To deliver on the outcomes of the Locality Plan in respect of Neighbourhoods &amp; Primary Care (Getting help in the Community)            SO4: To deliver on the outcomes of the Locality Plan in respect of In Hospital - Planned (Getting more help)            SO5: To deliver on the outcomes of the Locality Plan in respect of In Hospital - Urgent Care (Getting more help)            SO6: To deliver on the outcomes of the Locality Plan in respect of Children, young people and families            SO7: To deliver on the outcomes of the Locality Plan in respect of Mental Health</p>	<p>Ongoing through 2017/18/19</p>	<p>Series of events targeted at specific community groups to ensure all protected characteristics are covered:</p> <ul style="list-style-type: none"> <li>• Older people</li> <li>• Young people</li> <li>• BME communities</li> <li>• LGBT community</li> <li>• Mental health service users</li> <li>• Disabled people</li> <li>• Carers</li> </ul>	<p>To discuss:</p> <ul style="list-style-type: none"> <li>• The locality and GM plans</li> <li>• Progress with proposals</li> <li>• What else do we need to do?</li> </ul>	<p>Local people are aware of the integrated care agenda, know what is proposed and how its progressing</p> <p>Local people are able to contribute to the locality plan and Devolution GM decisions</p>

<b>Transformation of healthcare services</b>			
<b>Overview delivering a number of events to ensure public and patients can participate in and influence the development of the Locality Plan and devolution agenda.</b>			
Subject of engagement - scope	The local plans for healthcare in Rochdale borough for the next 4 years		
Intended outcomes	Local people will be aware of GM Devolution and know what it is. Local people will be aware of the Locality plan and the key themes. Local people will feel they have had the opportunity to influence the development of the plan.		
Engagement approach - method	Presentations/ workshops/focus groups.		
Targeted stakeholder groups and representatives	Local people, particularly those with protected characteristics		
Preparation	Ensure transformation information complete and in languages that have been requested.	Comms and engagement team	On-going
Invitation - publicity	press releases, web site, notify third sector organisations	Comms and engagement team	On-going
Pre - Information	Press releases, social media, public media slots, Information on web site.	Comms and engagement team	
Logistics	N/A		
Venue, timing	Venues booked and times advertised	Comms and engagement team	On-going
Transport, food, lodging etc.	N/A		
Equipment etc.	Pens paper, A3 copies of 7 minute briefs	Comms and engagement team	On-going
Participant reimbursement	No		On-going
Process to meet desired outcomes	Pre event publicity Discussion about locality plan Document participant views Feedback PMOs and GB Categorised report	Comms and engagement team	On-going

Agenda / plan for the event	Presentation of the key themes and then discussion and questions	Comms and engagement team	On-going
Ground rules – terms of reference			
On the day roles and facilitation	Engagement Lead/theme lead/programme manager		
Record keeping and assurance	Attendance sheets and evaluation sheets wherever possible.		
Assurance procedure	Use of core materials to ensure we are on message Ensure transformation information available at all events. Complete evaluation sheets for each event if possible		
Feedback to participants	Report on web site Feedback from GM and NHSE Press releases Story on health page Report sent to each participant	Comms and engagement team	Ongoing
Wider communication of results	Report on web site Feedback from GM and NHSE Press releases Story on health page	Comms and engagement team	Ongoing
Signals for success (hoped for inputs and outcomes)	Good turnout at each event Good discussion at each event Coverage by local media		
Participant satisfaction feedback method	Evaluation sheets		
<b>Risk Assessment</b>			
<b>Risks:</b>	Poor turnout at events, little public interest There has been media coverage and press releases, web site information but public may still be disinterested		
<b>Contingency Plan:</b>	No real contingency, could keep holding events targeted at specific groups.		

# 9

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets
<b>Commissioning services</b>	SO1: To be a high performing CCG, deliver our statutory duties and use our available resources innovatively to deliver the best outcomes for our population. SO2: To deliver on the outcomes of the Locality Plan in respect of Prevention and Access (Prevention and Self Care) SO3: To deliver on the outcomes of the Locality Plan in respect of Neighbourhoods & Primary Care (Getting help in the Community) SO4: To deliver on the outcomes of the Locality Plan in respect of In Hospital - Planned (Getting more help) SO5: To deliver on the outcomes of the Locality Plan in respect of In Hospital - Urgent Care (Getting more help) SO6: To deliver on the outcomes of the Locality Plan in respect of Children, young people and families SO7: To deliver on the outcomes of the Locality Plan in respect of Mental Health	Ongoing through 2018/19	Service user panels to scrutinise specifications, score tenders, moderate scores and interview providers.  Involve local people in co design of services wherever possible.	To ensure service users and the public can influence decisions made in commissioning.	Local people feel they can influence and take part in commissioning decisions Local people are aware of the way commissioning services works



<b>. Involving public and patients in the commissioning of services by using service user panels to read / develop specs., score tender submissions and interview possible providers</b>			
<b>Overview</b>			
Subject of engagement - scope	TBC		
intended outcomes	Patients/service users/public help CCG make commissioning decisions Patients/service users/public feel they can influence the decisions that affect them		
Engagement approach - method	Participation in tendering process		
Targeted stakeholder groups and representatives	Service users, patients, public		
<b>Preparation</b>			
Invitation - publicity	Invite to each person and also from third sector groups representing those with particular characteristics,	Phil/ Comms / commissioners	Prior to each tender
Pre - Information	Briefing about the process, and the commitment needed	Phil	Prior to each tender
Logistics	N/A		
Venue, timing	Various		
Transport, food, lodging etc.	N/A		
Equipment etc.	N/A		
Participant reimbursement	No		
Process to meet desired outcomes	Ensure participants are fully briefed Copies of all relevant documents available in suitable format Ensure confidentiality and conflict forms completed by all Ensure participants know the process, their role and feel supported to take part	Phil/ Comms / commissioners	Prior to each tender
Agenda / plan for the event	Standard process to be followed		

Ground rules – terms of reference	Respect all views No ideas daft Score what you see not what you think you know		
On the day roles and facilitation	PB to facilitate all sessions with participants Finance Director will facilitate Moderation meeting	Phil	Timescales will depend on lots and sections to be scored etc.
Record keeping and assurance	Records will be official copies of documents from process kept by SBS		
Assurance procedure	Key is to keep aware of all commissioning projects so that public/patients and service users have full opportunity.	Phil	Ongoing
Feedback to participants	Results of tenders feedback after cool off period	Phil/Comms	After each tender is finalised
Wider communication of results	Announcement on web site when appropriate	Comms	After each tender is finalised
Signals for success (hoped for inputs and outcomes)	Service user panels for each tender		
Participant satisfaction feedback method	N/A		
Risk Assessment			
Risks:	No patients/service users interested or able to commit to process Breach of confidentiality / conflict		
Contingency Plan:	No real contingency Ensure panel members sign confidentiality and conflict agreements and fully understand implications		

# 10.

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets

Stakeholder Engagement and Communication Implementation Plan			
<b>Overview</b>			
Engagement approach - method			
Targeted stakeholder groups and representatives			
Preparation			
Invitation - publicity			
Pre - Information			
Logistics			
Venue, timing			
Equipment etc.			
Participant reimbursement			
Process to meet desired outcomes			
Agenda / plan for the event			
Ground rules – terms of reference			
On the day roles and facilitation			
Record keeping and assurance			
Assurance procedure			

Feedback to participants			
Wider communication of results			
Signals for success (hoped for inputs and outcomes)			
Participant satisfaction feedback method			
<b>Risk Assessment</b>			
Risks:			
Contingency Plan:			

## 11.

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets

Stakeholder Engagement and Communication Implementation Plan			
<b>Overview</b>			
Subject of engagement - scope			
Engagement approach - method			
Targeted stakeholder groups and representatives			
Preparation			
Invitation - publicity			
Pre - Information			
Venue, timing			
Equipment etc.			
Process to meet desired outcomes			

Agenda / plan for the event			
Ground rules – terms of reference			
On the day roles and facilitation			
Record keeping and assurance			
Assurance procedure			
Feedback to participants			
Wider communication of results			
Signals for success (hoped for inputs and outcomes)			
Participant satisfaction feedback method			
Risk Assessment			
Risks:			
Contingency Plan:			

# 12.

Event	Strategic objective / Locality plan / commissioning	Date	Method	Objective	Expected Outcome/targets

Stakeholder Engagement and Communication Implementation Plan			
8.			
Overview			
Subject of engagement - scope			
Engagement approach - method			
Targeted stakeholder groups and representatives			
Preparation			
Invitation - publicity			
Pre - Information			
Logistics			
Venue, timing			
Transport, food, lodging etc.			
Equipment etc.			
Participant reimbursement			
Process to meet desired outcomes			
Agenda / plan for the event			
Ground rules – terms of reference			
On the day roles and facilitation			
Record keeping and assurance			
Assurance procedure			
Feedback to participants			

<b>Wider communication of results</b>			
<b>Signals for success (hoped for inputs and outcomes)</b>			
<b>Participant satisfaction feedback method</b>			
<b>Risk Assessment</b>			
<b>Risks:</b>			
<b>Contingency Plan:</b>			

### 13.

<b>Event</b>	<b>Strategic objective / Locality plan / commissioning</b>	<b>Date</b>	<b>Method</b>	<b>Objective</b>	<b>Expected Outcome/targets</b>

<b>Overview</b>			
<b>Subject of engagement - scope</b>			
<b>Intended outcomes</b>			
<b>Engagement approach - method</b>			
<b>Targeted stakeholder groups and representatives</b>			

<b>Preparation</b>			
<b>Invitation - publicity</b>			
<b>Pre - Information</b>			
<b>Logistics</b>			
<b>Venue, timing</b>			
<b>Transport, food, lodging etc.</b>			
<b>Equipment etc.</b>			
<b>Participant reimbursement</b>			
<b>Process to meet desired outcomes</b>			
<b>Agenda / plan for the event</b>			
<b>Ground rules – terms of reference</b>			
<b>On the day roles and facilitation</b>			
<b>Record keeping and assurance</b>			
<b>Assurance procedure</b>			
<b>Feedback to participants</b>			
<b>Wider communication of results</b>			
<b>Signals for success (hoped for inputs and outcomes)</b>			
<b>Participant satisfaction feedback method</b>			
<b>Risk Assessment</b>			
<b>Risks:</b>			
<b>Contingency Plan:</b>			