

**Report to:** **SINGLE COMMISSIONING BOARD**

**Date:** 17 January 2017

**Reporting Officer** Sandra Stewart – Director of Governance  
Michelle Walsh – Interim Director of Nursing, Quality and Patient Safety

**Subject:** **EVIDENCE BASED DECISION MAKING – AN APPROACH TO EQUALITY, QUALITY & CONSULTATION**

**Report Summary:** The Tameside and Glossop Single Commissioning Function came into effect from 1 April 2016. To assist the new single commissioning function in making robust evidence based decisions a number of requirements need to be met. This report summarises those requirements and the support available to contract and commissioning managers to ensure they discharge their obligation to provide robust and evidential reports to decision makers.

The three areas covered are:

- Equality and diversity
- Quality and risk
- Consultation and engagement (including ongoing patient participation)

The joint approach outlined in the following sections seeks to provide a standard framework by incorporating and adapting the relevant elements used by the two organisations prior to the establishment of the Single Commissioning Function.

The substantive documentation will be kept under review and amended to ensure it remains both compliant and effective.

**Recommendations:**

The following recommendations are made:

- The Single Commissioning Board (SCB) is asked to note the content of the report.
- The Single Commissioning Board (SCB) is asked to agree and support the approach as outlined.
- The Single Commissioning Board (SCB) agrees workshops are held for relevant staff on the approach outlined and the need for robust evidential decision making.

The substantive documentation will be kept under review and amended to ensure it remains both compliant and effective.

**Financial Implications:**

No direct financial implications as a result of the report.

**(Authorised by the statutory Section 151 Officer & Chief Finance Officer)**

**Legal Implications:**

**(Authorised by the Borough Solicitor)**

This report sets out a process to ensure both organisations stay legally compliant, reduce risk of challenge and importantly make good decisions.

<b>How do proposals align with Health &amp; Wellbeing Strategy?</b>	The report outlines an approach that supports the delivery of the priorities of both Tameside Council and NHS Tameside & Glossop CCG including in the area of health and wellbeing.
<b>How do proposals align with Locality Plan?</b>	The report outlines an approach to equality, quality and consultation which will underpin the development and implementation of the Locality Plan.
<b>How do proposals align with the Commissioning Strategy?</b>	The report outlines an approach to equality, quality and consultation which will assist in ensuring the objectives of the Community Strategy are achieved.
<b>Recommendations / views of the Professional Reference Group:</b>	The Professional Reference Group (PRG) discussed the approach as outlined, in particular the practicality of the different templates. It was noted that those using it so far have found it helpful and that the approach will be kept under regular review to ensure it continues to be fit for purpose and evolve and improve through use and practice.
<b>Public and Patient Implications:</b>	The report outlines an approach to equality, quality and consultation which is dependent on effective public and patient involvement.
<b>Quality Implications:</b>	The report outlines an approach that ensures the Single Commissioning Function discharges its obligations with regard to undertaking a quality impact assessment.
<b>How do the proposals help to reduce health inequalities?</b>	None specifically arising from this report.
<b>What are the Equality and Diversity implications?</b>	The report outlines an approach to ensure both Tameside Council and NHS Tameside and Glossop CCG meet their equality and diversity obligations including the Public Sector Equality Duty (PSED).
<b>What are the safeguarding implications?</b>	None specifically arising from this report.
<b>What are the Information Governance implications? Has a privacy impact assessment been conducted?</b>	None specifically arising from this report.
<b>Risk Management:</b>	The report outlines an approach that ensures the Single Commissioning Function discharges its obligations with regard to undertaking a quality and risk impact assessment.
<b>Access to Information :</b>	The background papers relating to this report can be inspected by contacting Simon Brunet – (Acting) Head of Policy & Communications – Governance, Resources & Pensions – Tameside Council.



Telephone: (0161) 342 3542



e-mail: [simon.brunet@tameside.gov.uk](mailto:simon.brunet@tameside.gov.uk)

## 1. BACKGROUND

- 1.1 The Tameside & Glossop Single Commissioning Function (SCF) came into effect from 1 April 2016. To assist the new Single Commissioning Function (SCF) in making robust evidence based decisions a number of requirements need to be met. This report summarises those requirements and the support available to contract and commissioning managers to ensure they discharge their obligation to provide robust and evidential reports to decision makers.
- 1.2 The three areas covered are:
- Equality and diversity;
  - Quality and risk;
  - Consultation and engagement (including ongoing patient participation).
- 1.3 The joint approach outlined in the following sections seeks to provide a standard framework by incorporating and adapting the relevant elements used by the two organisations prior to the establishment of the Single Commissioning Function.
- 1.4 The substantive documentation will be kept under review and amended to ensure it remains both compliant and effective.

## 2. CONTEXT

2.1 Summarised below is the context in which equality and diversity, quality and risk and consultation and engagement is undertaken and the obligations on both Tameside Council and NHS Tameside and Glossop CCG. The list is not exhaustive but highlights the key and most relevant aspects.

### 2.2 Equality and diversity

- Equality Act 2010 – Section 149: Public Sector Equality Duty (PSED):
  - Have due regard to the need to eliminate discrimination; advance equality of opportunity; and foster good relations;
  - Equality objectives;
  - Publication of information.
- Brown Principles – R (Brown) v Secretary of State for Work and Pensions (2008):
  - Decision makers aware of their duty to have due regard;
  - Due regard must be fulfilled before and at the time of decision making;
  - Exercise duty in substance with rigour & open mind;
  - Duty is on public authorities and non-delegable;
  - Duty is continuing;
  - Good practice to keep an adequate record.

### 2.3 Quality and risk

- Health and Social Care Act 2012 – Section 26 – Duty 14R (NHS Act 2006):
  - Secure continuous improvement in the quality of services provided;
  - Show the effectiveness and safety of services provided and the quality of experience of the patient.
- Health and Social Care Act 2012 – Section 26 – Duty 14S (NHS Act 2006):
  - Assist and support the Board in discharging its duty to secure continuous improvement in the quality of primary medical services.

## 2.4 Consultation and engagement

- Gunning Principles – R v London Borough of Brent ex parte Gunning (1985):
  - Be undertaken when proposals at a formative stage;
  - Include sufficient reasons for particular proposals to allow those consulted to give intelligent consideration and an intelligent response;
  - Give consultees sufficient time to make a response;
  - Be conscientiously taken into account when the ultimate decision is taken.
- NHS Act 2006 – Section 242:
  - 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.
- Health and Social Care Act 2012 – Section 14Z2:
  - 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.

2.5 Undertaking work in these three areas, and producing the necessary impact assessments for both quality and equality, is not optional. It is essential to ensure the contract and commissioning manager is presenting a report to the decision maker that makes him/her/they fully aware of all the impacts and implications of the decision being taken.

## 3. REQUIREMENTS

3.1 The table below outlines the requirements. Supporting documentation is outlined in the appendices.

	Requirement	Support & advice
Equality & diversity	<p>Undertake an <b><u>Equality Impact Assessment (EIA)</u></b> using the framework template attached at <b><u>Appendix 1</u></b>.</p> <p>The completed template should be attached to decision reports to Professional Reference Group (PRG) and Single Commissioning Board (SCB).</p>	<p>Guidance on completion is provided within the template.</p> <p>For further support and advice contact Karen Goodhind or Jody Stewart</p>
Quality & risk	<p>Undertake a <b><u>Quality Impact Assessment (QIA)</u></b> using the framework template attached at <b><u>Appendix 2</u></b>.</p> <p>The completed template should be attached to decision reports to Professional Reference Group (PRG) and Single Commissioning Board (SCB).</p>	<p>Guidance on completion is provided within the template.</p> <p>For further support and advice contact Lynn Jackson</p>

<p>Consultation &amp; engagement</p>	<p>Undertake an appropriate level of consultation commensurate with the decision being taken.</p> <p>A template does not exist given the varied nature of consultations that take place making a single format for report impractical. However a summary of findings should be appended to the decision report that is presented to Professional Reference Group (PRG) and Single Commissioning Board (SCB).</p>	<p>The '<b><u>Toolkit for Engaging with Public, Patients and Service Users in Tameside &amp; Glossop</u></b>' provides a guide on how to undertake appropriate consultation and engagement. The toolkit is attached at <b><u>Appendix 3</u></b>.</p> <p>For further support and advice contact Karen Goodhind or Jody Stewart</p>
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- 3.2 In all three areas above the findings should be summarised in the decision report and the QIA, EIA and consultation / engagement findings appended to the decision report.
- 3.3 It is incumbent on the relevant service / contract / commissioning manager to undertake and complete the three elements outlined above. Support and advice is available as outlined.
- 3.4 It is proposed to run a series of workshops for relevant staff on the approach outlined and the need for robust evidential decision making.
- 3.5 The templates and toolkit above will be kept under regular review to ensure they continue to be fit for purpose and evolve and improve through use and practice.

#### 4. APPENDICES

- 4.1 The following appendices are attached.
- **Appendix 1** – Equality Impact Assessment (EIA) template
  - **Appendix 2** – Quality Impact Assessment (QIA) template
  - **Appendix 3** – Toolkit for Engaging with Public, Patients and Service Users in Tameside & Glossop

#### 5. RECOMMENDATIONS

- 5.1 As set out on the front of the report.