

Report to:	HEALTH AND WELLBEING BOARD
Date:	21 September 2017
Executive Member / Reporting Officer:	Angela Hardman, Director of Public Health Liz Windsor-Welsh, Chief Executive Officer, Tameside Action Together
Subject:	COMPACT: RELATIONSHIP WITH PEOPLE, COMMUNITIES AND THE VOLUNTARY, COMMUNITY, FAITH AND SOCIAL ENTERPRISE SECTOR (VCFSE).
Report Summary:	This report introduces new work that is about to commence to establish a new, and progressive way of working between statutory organisations and the voluntary, community, faith and social enterprise sector. This is key to the success of our ambitions for both health and social care reform and wider public sector reform.
Recommendations:	It is recommended that the Health and Wellbeing Board take note of the work and: <ul style="list-style-type: none"> • Endorses the ambitions of the work. • Agrees for the relevant senior personnel from their organisation will participate in the development of the 'Principles' that will detail our commitments. • Ensure there is a commitment from senior personnel across key agencies to join the Leadership Group to ensure progress is made and system blockers identified and resolved.
Links to Health and Wellbeing Strategy:	This work has cross cutting relevance to the Health and Wellbeing strategy and in particular the implementation of Care Together and its ambitions for increased Self Care. This also links to emerging work with regard to Public Sector Reform, 'Forward Five' and the re-development of the Early Help Strategy.
Policy Implications:	None immediately but will have significant relevance to the following once the commitments are developed, particularly in relation to; <ul style="list-style-type: none"> - Citizen and patient engagement - Commissioning strategies and plans - Care Together implementation
Financial Implications: (Authorised by the Section 151 Officer)	There are no direct financial implications arising from the report at this stage.
Legal Implications: (Authorised by the Borough Solicitor)	Achieving this 'new relationship' will require clear leadership, governance and accountability. It would be helpful to set out expectations in a MOU.

Risk Management :

There are no risks associated with this report.

Access to Information :

The background papers relating to this report can be inspected by contacting Anna Moloney



Telephone: 0161 342 2189



e-mail: anna.moloney@tameside.gov.uk

1.0 INTRODUCTION

- 1.1 At a meeting on 22nd March 2017, there was a joint commitment from the Single Commissioning Function (SCF), Integrated Care Foundation Trust (ICFT) and representatives of Action Together to establishing a new, and progressive way of working between statutory organisations and the voluntary, community, faith and social enterprise sector (VCFSE). This is key to the success of our ambitions for both health and social care reform and wider public sector reform.
- 1.2 Subsequently, senior leadership from these organisations have proposed the development of a 'Compact' to underpin a new and progressive relationship with the VCSFE. Historically 'Compacts' have often been viewed as passive agreements between the state and the VCFSE. We have agreed that this agreement should detail our shared ambitions and agree how we will actualise this new relationship in our joint work together by identifying joint priorities where change is required and key workstreams to begin to implement these changes.
- 1.3 It is also important to note that a number of the transformation programmes associated with Care Together rely heavily on the VCFSE (e.g. social prescribing, asset based approaches) and as such their success will be enabled by a consistent set of principles, values and ultimately actions that traverse the approach taken by all agencies in Tameside and Glossop.

2.0 DEVELOPING A PROGRESSIVE RELATIONSHIP BETWEEN STATUTORY AGENCIES AND THE VCFSE

- 2.1 The development of a Compact with the VCFSE will enshrine a set of key principles that all organisations should adhere to. This process will require collaborative leadership and accountability to ensure that all partners are aware of it; its principles and how it should influence the way we work.
- 2.2 We should be clear what success looks like and identify a set of metrics that are indicative of working differently with the VCFSE, people and communities and assure ourselves of progress against them. Therefore the Single Commission and Tameside and Glossop Integrated Care Foundation Trust are to work with Action Together, The Bureau Glossop and High Peak CVS and their members to develop and publish a new Compact with the VCFSE. It will embed awareness and understanding of the way we do things as any Compact has to be on the basis of equal partnership and co-leadership. It is not a document that outlines how statutory agencies will engage with the VCFSE.
- 2.3 The Compact should be orientated around a set of key principles and underpinned by an expectation of partnership and collaboration, these principles could be:
 - Respect – with statutory and VCFSE organisations both being accountable in different ways. Relationships need to be underpinned by integrity and transparency, built on a mutual understanding of the differences between partners;
 - Honesty – successful relationships must be underpinned by honest, full and frank conversation;
 - Independence – many VCFSE organisations will have a remit to represent the views of a population – their independence must be maintained and protected, irrespective of whatever other relationship exists;
 - Diversity – partners involved in the Compact must demonstrably value a thriving civil society that brings a multitude of voices to the fore;
 - Citizen Empowerment – working together, the statutory sector and the VCFSE can deliver change that is built around people and communities, meeting their needs and reflecting their choices;

- Volunteering – The significant role played by volunteers for the benefit of the public and a vibrant society should be recognised, appreciated and built upon.

3.0 LEADERSHIP AND GOVERNANCE

3.1 Achieving this ‘new relationship’ will require clear leadership, governance and accountability. In order to do this we will establish a Leadership group that will be cross sectoral and made up of senior representatives from across a wide range of public sector agencies and VCFSE organisations. This should be jointly chaired by a representative from the VCFSE and a representative from the statutory sector. The group will drive forward work relating to the ambitions and agreed principles and seek to uncover and resolves blockers in this new way of working. Where appropriate groups don’t already exist, workstreams should be established to ensure we address key areas including (but not exclusively):

- The commissioning relationship with the VCFSE;
- The role of the VCFSE as strategic influencers;
- The role of the VCFSE in supporting public engagement and co-production;
- The VCFSE as a route to support a new relationship with people and communities;

3.2 This work should feed appropriately in to the governance of the local health and care economy, Tameside’s Voluntary Influencing Group and critically including the Health and Wellbeing Board.

4.0 NEXT STEPS AND KEY MILESTONES

4.1 The following key actions and milestones will ensure this work progresses and achieves stated aims;

- Establish the Leadership Group and agree Terms Of Reference, scope and activity milestones (October 2017);
- Facilitate engagement from across public agencies and the VCFSE (Tameside and Glossop) to establish the shared ambitions and agree principles (by December 2017);
- Agree workstreams and begin work in practice to address priority areas (January 2018);
- Leadership Group meets bi-monthly to review progress, identify and resolve system blockers;
- Report back progress to identified governance forums including Health and Wellbeing Board.

4.2 The two accountable officers for this work are; Angela Hardman, Director of Population Health, and Liz Windsor-Welsh (Chief Executive Officer, Action Together, also on behalf of High Peak CVS and The Bureau).

5. RECOMMENDATIONS

5.1 As stated on the front of the report.