

## **Cabinet – 27 July 2011**

### **Healthwatch Pathfinder**

**Portfolio:** Councillor Zahid Ali, Communities and Partnerships  
Councillor Barbara McCracken, Social Care and Health

**Service:** Walsall Partnership

**Wards:** All

**Key Decision:** No

**Forward Plan:** No

#### **1. Summary of Report**

- 1.1 Attached to this report (**Appendix A**) is a plan presented as part of a proposal to the Department of Health for Walsall to be a Pathfinder authority for developing Healthwatch.
- 1.2 The plan details the necessary steps for Walsall to develop the current Local Involvement Network (LINK) arrangements, which have been less than satisfactory, to become a fit-for-purpose Healthwatch. In doing this, Healthwatch will unite a number of existing health and social care-related public engagement mechanisms and will complete all the necessary preparation to establish itself as a body corporate as suggested by the current draft legislation.
- 1.3 It is envisaged that Healthwatch will encourage greater involvement of our communities, ensure more accountability in terms of effective operations and providing value for money and improve services having listened to patient concerns.

#### **2. Recommendation**

That Cabinet endorses the plan for Walsall to be a Pathfinder for Healthwatch to the Department of Health.

#### **3. Background Information**

- 3.1 The Public Involvement in Health Act 2007 placed a duty on councils to establish a LINK for health.
- 3.2 In July 2010 the government announced plans to set up Healthwatch as a replacement for LINKs.

- 3.3 Further details of how the key changes above have been reported to Cabinet may be found in a previous Cabinet paper considered at the meeting held on 15 December 2010. Since then Walsall Partnership has been actively engaging with stakeholders to establish Healthwatch.
- 3.4 In early March 2011 a letter was sent, signed jointly by David Behan (Director General of Social Care, Local Government and Care Partnerships) and Joan Saddler (National Director of Public and Patient Affairs) of the Department of Health, inviting councils, including Walsall, to submit proposals to accelerate their transition from LINK to Healthwatch by participating in a Pathfinder scheme.
- 3.5 The stakeholders in Healthwatch have jointly prepared a proposal and this was submitted to the Department of Health by the deadline of 12 May 2011. The delivery plan for this proposal is attached at **Appendix A**.
- 3.6 The proposal plans to join together some existing health and social care-related public engagement groups, including:
- LINKs
  - MyNHS Walsall and its Parliament
  - Patient forums of the Manor Hospital
  - Patient participatory groups to be convened by General Practitioners
  - Area Partnerships
- 3.7 A work programme for the Healthwatch programme has been produced and would need to be delivered irrespective of whether or not Walsall is awarded Healthwatch Pathfinder status.
- 3.8 In the work programme, and to fulfil Department of Health guidelines, Healthwatch will become a legal entity and will trade and employ staff, as detailed in **Appendix B**.
- 3.9 The proposal should deliver a more comprehensive public engagement mechanism to supersede the current Walsall LINK. The catchment to the Board of Healthwatch will be wider, particularly due to the benefit of including MyNHS Walsall and its health parliament, which has over 14,000 members.
- 3.10 Walsall Healthwatch is likely to have the right to nominate a representative to the new Health and Wellbeing Boards. Consequently, it is important that the development work already started is carried through to ensure the widest catchment for such representation and that the new Healthwatch Board is itself fully representative of health interests and attracts high-quality people.
- 3.11 The plan will enable Healthwatch to forge strong links with council engagement mechanisms, particularly Area Partnerships.

## **4. Resource Considerations**

### **4.1 Financial:**

- 4.1.1 The Pathfinder proposal must be achievable within existing resources. Cabinet has already approved an allocation of £152,608 to support LINK and the implementation of the Healthwatch. Part of this budget will fund the resources required to deliver the Pathfinder. A small amount of additional funding may be made available by the Department of Health, but this is not yet secured and is unlikely to be significant.

### **4.2 Legal:**

- 4.2.1 It should be noted that the Council still has an ongoing duty to maintain a LINK and that this obligation will continue to be met in the transition plan set out at **Appendix A**.

### **4.3 Staffing:**

- 4.3.1 There is no direct impact on staffing although the to-be-formed Healthwatch may need additional staff support. This will be contained within the Council's budget.

## **5. Citizen Impact**

Accelerating Healthwatch, joining Walsall LINK with MyNHS Walsall and other stakeholders will deliver a significant improvement in LINK performance and create a positive impact on Walsall citizens.

## **6. Community Safety**

No direct impact.

## **7. Environmental Impact**

No direct impact.

## **8. Performance and Risk Management Issues**

### **8.1 Risk:**

- 8.1.1 Walsall Council has a duty to maintain a LINK. The ongoing fulfilment of this duty will need to be managed, but it is not a significant risk.

### **8.2 Performance Management:**

- 8.2.1 A properly functioning Healthwatch should improve the performance of social care services.

## 9. Equality Implications

- 9.1 The purpose of a local Healthwatch is to ensure that all parts of the community have the opportunity to make a contribution to the shaping and scrutiny of health and social care services in Walsall

## 10. Consultation

- 10.1 The proposal for Walsall Healthwatch to become a Pathfinder has been signed off by the following:

- Walsall Council
- Walsall Partnership
- NHS Walsall
- Walsall Healthcare NHS Trust
- MyNHS Walsall
- Walsall LINK

### Background Papers:

Cabinet report 15 December 2010 entitled *Healthwatch*

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Jamie Morris  
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15 July 2011

Councillor Zahid Ali  
Portfolio Holder



15 July 2011

## Walsall Healthwatch Pathfinder Transition Plan

[illegible]

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## **HealthWatch Advisory Group bulletin**

### **Issue 1**

**22 June 2011**

### **Introduction**

This is the first issue of a regular bulletin from the HealthWatch advisory group. It contains up to date, authoritative information on HealthWatch developments. The bulletin will be distributed through the Department of Health (DH), the Care Quality Commission (CQC), the National Association of LINK Members (NALM) and other advisory group members.

Feel free to use the content in your publications to keep your stakeholders and members informed about HealthWatch.

### **Newsflash**

The Government response to the NHS Future Forum listening exercise was published on 20 June. [Click here to view the document](#). A key headline from the document is that HealthWatch England and Local HealthWatch organisations will now be launched in October 2012.

### **Background to HealthWatch**

To strengthen the collective voice of patients and carers in the system at both a local and national level, Local Involvement Networks (LINKs) will evolve to become Local HealthWatch, and HealthWatch England will be set up as the independent consumer champion within the Care Quality Commission (CQC).

### **Local HealthWatch key issues**

LINKs were established through the Local Government and Public Involvement in Health Act, 2007. LINKs are responsible for both health and social care, wherever funded by public money. Their main powers and responsibilities are to influence commissioning, to monitor services by entering and viewing, to make recommendations, to request and receive information and to gather the views and experiences of their community about their local services. Local HealthWatch will have additional responsibilities for NHS complaints advocacy and for signposting information. The Health and Social Care Bill also states that Local HealthWatch organisations will be 'bodies corporate' and will be able to hire their own staff.

It is proposed that, subject to the passage of the legislation, Local HealthWatch organisations will begin in October 2012, with their NHS complaints advocacy responsibilities coming on stream in April 2013.

Currently, the proposed evolution of LINKs to Local HealthWatch organisations is being explored through Local HealthWatch Pathfinders, early

adopter Health and Wellbeing Boards, the HealthWatch Programme Board, the HealthWatch Advisory Group, and forthcoming Action Learning Sets.

The National Association of LINK Members (NALM) is also undertaking work to consider HealthWatch transition issues which will feed into the Advisory Group.

Additionally, the Department of Health is pulling together a network of regional leads for HealthWatch.

These multiple initiatives will help ensure that as many people as possible are involved in the work to develop HealthWatch and get it up and running smoothly. They may be paused or parked as the many representations made about all aspects of the Bill continue to be considered.

Meanwhile, there are two key messages from the first meetings of the Advisory Group:

- The first concerns the continued support for LINKs. LINKs will remain until legislation changes. LINKs' funding, provided by the Department of Health to local authorities, remains at the same level as under the area based grant. The Department of Health's funding has not been reduced but neither is it 'ring-fenced'. LINKs should expect to be fully funded for the work they do. Further, as the Bill intends for Local HealthWatch organisations to be 'bodies corporate' with the power to hire their own staff should they wish to do so, local authorities should work with LINKs and other partners to fully explore the options for moving from LINKs to local HealthWatch. Some options and advice are set out in [the HealthWatch Transition Plan](#) published on 30 March 2011.
- The second concerns clarification of roles and responsibilities of local authorities and Local HealthWatch organisations and summarised the key points as:
  - Local authorities will be responsible for establishing and funding Local HealthWatch organisations;
  - Local authorities will commission a Local HealthWatch organisation;
  - Local HealthWatch organisations will, as bodies corporate, be responsible for arranging their own support services;
  - Local authorities will be responsible for ensuring accountability and value for money (of Local HealthWatch organisations).

### **Summary of discussions from HealthWatch advisory group sub groups**

The HealthWatch advisory group has set up four sub groups to focus on specific areas of the work programme. They are:

- HealthWatch England Principles and Practicalities
- Local HealthWatch: Building a convincing case
- Local HealthWatch: Creating a good local HealthWatch
- Communication and engagement: a strategy



On Tuesday 21 June the communications sub group met and discussed reputation development (or branding) for HealthWatch and solutions for the HealthWatch website approach and domain strategy.

### **How to get involved in developing HealthWatch**

To set up HealthWatch the Care Quality Commission and the Department of Health have set up a joint programme. This is made up of a programme board and an advisory group. To read more about these groups and to read the minutes of the meetings please visit the CQC [website](#).

To ensure people can feed in their views on the development of HealthWatch an online forum is being set up for anyone who is interested to feed in their views. The forum will start running in July. From the date of this bulletin, if you haven't already noted your interest in joining, and you would like to, please email [healthwatch@nunwood.com](mailto:healthwatch@nunwood.com)

If you would like to find out more about the NHS modernisation programme, please visit the DH website at: <http://healthandcare.dh.gov.uk>.

### **HealthWatch Advisory Group**