

BRIEFING NOTE

Agenda Item

No. 5

TO: SOCIAL CARE & INCLUSION SCRUTINY PANEL

DATE: 15 February 2011

RE: WALSALL LINK/HEALTHWATCH TRANSITION

Purpose

At the request of Councillor Oliver (Chair) this report is to update the Social Care & Inclusion Scrutiny Panel on progress with the transition from LINK (Local Involvement Network) to HealthWatch.

Context

Walsall LINK was established in 2008 following a statutory duty placed upon all local authorities in the Public Involvement in Health Act 2007. The purpose of LINKs, as stated on page 221 of the Act, is as follows:

- (1) *Each local authority must make contractual arrangements for the purpose of ensuring that there are means by which the activities specified in subsection (2) for the local authority's area can be carried on in the area.*
- (2) *The activities for a local authority's area are:*
 - (a) *promoting, and supporting, the involvement of people in the commissioning, provision and scrutiny of local care services;*
 - (b) *enabling people to monitor for the purposes of their consideration of matters mentioned in subsection (3), and to review for those purposes, the commissioning and provision of local care services;*
 - (c) *obtaining the views of people about their needs for, and their experiences of, local care services; and*
 - (d) *making:*
 - (i) *views such as are mentioned in paragraph (c) known, and*
 - (ii) *reports and recommendations about how local care services could or ought to be improved, to persons responsible for commissioning, providing, managing or scrutinising local care services.*
- (3) *The matters referred to in subsection (2)(b) are:*
 - (a) *the standard of provision of local care services;*
 - (b) *whether, and how, local care services could be improved;*
 - (c) *whether, and how, local care services ought to be improved.*

The Equity and Excellence: Liberating the NHS (July 2010) White Paper, set out how LINKs would be evolved into becoming a new body called HealthWatch (see attached Cabinet paper dated 15 December 2010 at appendix 1).

However, the recent Health and Social Care Bill (19 January 2011) sets out proposed new legislation. In summary it passes the powers, previously given to LINKs, to HealthWatch. It requires local authorities to establish Health reform Watch as part of wider health-care, with Primary Care Trusts being phased out and commissioning being passed to new GP commissions and the establishment of a new Health and Wellbeing Board. It is not prescriptive in terms of whether current LINKs should become the new HealthWatch organisation in an area.

There are now two key bodies operating in Walsall whose primary purpose is engagement of communities in health and/or social care issues:

1. Walsall LINK
2. MyNHSWalsall

This is unusual as most local authorities have only a LINK.

MyNHSWalsall has combined a number of health and patient consultative bodies and now has over 14,000 members participating in its network. It has established work groups and has an elected 'parliament' to represent various interests. Walsall LINK is less developed but, under the legislation previously referred to in this report, has powers not held by MyNHSWalsall; for example, the power to enter and view premises where care is provided and the power to refer matters to Scrutiny.

Consequently, on Thursday 20 January 2011 the Executive Director of Social Care and Inclusion and the Director of Walsall Partnership, held a joint meeting with key non-executives of both Walsall LINK and MyNHSWalsall. The objective of the meeting was to consider how these two organisations might work together to form HealthWatch. The following outcomes were agreed:

1. The two organisations would meet without officers of the council to build relationships and progress with a way forward.
2. The Director of Social Care and Inclusion would arrange for an introductory meeting for both organisations with the two newly established GP commissioner bodies in Walsall.
3. Regular meetings would be planned through the 2011/12 transition year to ensure progress.

During the 2011/12 financial year the council has an obligation to maintain a LINK in Walsall. The basis on which all LINKs operate is that a LINK Board is established as an independent organisation and is supported by a host organisation which the council contracts. In Walsall Black Country Housing Association are contracted to support Walsall LINK. They have confirmed their willingness to continue as host during the transition year. Cabinet has approved the continuation of the existing contract, to be renewed at a frequency determined by the officers involved. This has since been agreed with Black Country Housing Association as being reviewed quarterly.

Funding for LINKs has hitherto been provided through Area Based Grants. For 2011/12 this has been absorbed into the core grant received by the council. Provision has been made of £159,448 to support the LINK during 2011/12. However, officers of the council are in negotiation with the host and LINK Board to reduce this expenditure. This is opportunity to reduce costs by bringing the host staff into council accommodation, rather than rent separate offices, and also by not replacing staff that have left.

Recommendations

The Scrutiny Panel is requested to:

1. Note the legislation changes described in this report and actions being taken to establish HealthWatch during the transition year April 2011 – March 2012.
2. Note the continuation of LINK during the transition year and LINK support contracted to Black Country Housing.

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