

## 2<sup>ND</sup> PROGRESS REPORT: HILLINGDON LINK

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<b>Papers with report</b>	Appendix A

### INFORMATION

#### Executive Summary

Since the scrutiny in June 2009 there has been substantial change with the contract to host the LINK being terminated with HAPUK at the end of December and moved to Groundwork Thames Valley under a Service Level Agreement to the end of March 2011.

Since this change the administration of the LINK has improved considerably. The LINK has moved to new office accommodation and is progressing options to establish a 'shop-front' presence in Uxbridge to improve accessibility. The number staff hours available to the LINK has increased substantially and better value for money is now being secured. Membership of the LINK is expanding and Hillingdon compares favourably with other authorities in this regard. The LINK is now represented on a broad range of health and social care boards and committees and it has developed good working relationships with neighbouring LINK in order to progress sub regional and regional issues.

The funding for the LINK expires in March 2011 and no decision has been made by government about its continuation beyond then.

#### Introduction

The External Services Scrutiny Committee has considered the operation of Hillingdon's LINK on three previous occasions:

- 1) 24<sup>th</sup> September 2008 the Committee considered the work undertaken to establish the LINK and the relationship between the LINK and External Scrutiny Committee
- 2) 17<sup>th</sup> June 2009 the Committee reviewed the progress of the LINK after its first year of operation
- 3) 23<sup>rd</sup> September 2009 it considered the protocol between the LINK and ESSC which was a recommendation of the previous review.

#### Background

In July 2006 the Department of Health published A Stronger Local Voice which proposed new and different ways of engaging patients and the public in health and social care decision making. These proposals aimed to develop a stronger national voice for patients and members of the public and create an enhanced role for the public in the regulation of services. The new approach is expected to engage 'hard to reach' groups and those people not traditionally engaged in consultation.

Key to these proposals was the establishment of Local Involvement Networks (LINKs) which are community-based networks of organisations and individuals committed to widening the influence of users of health and social care services in the service planning, development and improvement process. They are intended to build on the work of former Patient and Public

Involvement Forums, Overview and Scrutiny Committees and a range of engagement activities co-ordinated by the NHS and social care organisations. LINKs provide an opportunity to focus on the whole patient journey and will cover all health and social care services at a local level.

The Local Government and Public Involvement in Health Act, 2007 placed a statutory duty on each Local Authority with a Social Services responsibility to ensure that a Local Involvement Network (LINK) was established in its area from 1st April 2008. LINKs replaced the former system of Patient and Public Involvement Forums which ended as of 31st March 2008

## **Governance**

The legislation requires that:

- Local authority commissions a 'host organisation' (funded by a grant from the Department of Health)
- Host cannot be local authority or NHS body
- Local authority is accountable for delivering 'arrangements' to secure LINKs

This arrangement results in a tripartite arrangement between the Council, host organisation and LINK.

## **Overview and Scrutiny Committee**

The legislation creates a formal relationship between the LINK and Overview and Scrutiny function:

- LINK power of referral on health and social care to OSC
- Duty on OSC to respond, decide and take into account information provided
- Receipt of Annual Report including transparent budget information
- Replicates Patients Forum relationship

The detail of this relationship is now documented in a protocol agreed by ESSC on 23<sup>rd</sup> September 2009.

## **The Role of LINKs**

LINKs cover any health or social care service that is funded by the taxpayer, except those that apply to children. The main roles of LINKs are to:

- Promote & support local involvement in commissioning, provision and scrutiny of health and social care ('Care services')
- Obtain and feed in views to those who carry out or manage these functions
- Make reports and recommendations on care service improvement

## **Powers of LINKs**

The legislation provides legal powers to enable the LINKs to:

- make reports and recommendations and get a reply within a set period of time (20 working days proposed);

- ask for information and get a reply within a set period of time (Freedom of Information Act requirements will apply);
- go into some types of health and social care premises to see what they do (independent sector provided services excluded);
- refer issues to the local overview and scrutiny committee and get a response 20 working days proposed).

### **Role of the Host Organisation**

The role of the host organisation is to:

- help and support the LINK in its activities;
- manage the budget for the LINK;
- report back to the Council on expenditure, activity and achievements of both the host organisation and the LINK;
- provide advice and support to the LINK, including the setting up of governance arrangements and the resolution of disputes;
- ensure that the LINK enables representatives from all the different communities to have their say and get involved.
- assist with access to relevant information from the Department of Health, the NHS, the Council, voluntary sector organisations, etc;
- enable the LINK to set a local agenda driven by the priorities and interests of local communities.

### **HAPUK – Hillingdon LINK’s former host**

The contract with HAPUK was not delivering to our satisfaction and remedial work did not deliver sufficient improvement. Although there was considerable dialogue with the company and they appeared responsive to the issues, confidence in HAPUK had deteriorated to such an extent that it was clearly in all parties’ interest for the contract to be terminated which occurred on 31<sup>st</sup> December 2009 without penalty or incident.

### **Groundwork Thames Valley**

Groundwork is a local social enterprise and longstanding partner of the Council with a strong record of successful delivery of community based projects. They were approached to provide the host function under Service Level Agreement that expires in March 2011 when the present Government funding for the LINK ceases. Since taking over this role feedback from the LINK and other partners is that the host service has improved considerably.

### **Cost of the SLA**

There is no change in the cost to the Council arising from the change in host with payment of £11,025 per month being made by the Council. Groundwork provide staff and support services to the value of £8975 per month and the remaining £2050 is spent by Groundwork in agreement with the LINK Board who have strategic responsibility for the LINK and its work-programme.

An under-spend by HAPUK of £17,180 arising from the slow progress of the LINK has been recovered and £16,875 has been to fund the transitional costs to Groundwork eg. new website (see [www.hillingdonlink.org.uk](http://www.hillingdonlink.org.uk)), office equipment etc.

## **Staffing**

The initial contract with HAPUK provided for 16 hours of staff time per week in the borough with a further 12 hours of dedicated support from their Wiltshire HQ and other support staff as required. As noted in the previous report to Scrutiny, the anticipated advantages of this arrangement and the economies of scale that were suggested were not being secured. Having moved to Groundwork, 2 members of staff are now employed full-time (74 hours per week) within the borough and there is additional capacity for specialist staff to be temporarily employed to undertake specific activities or projects for the LINK.

## **Office Accommodation**

As the LINK has developed and expanded so has its requirement for office space. Earlier this year the LINK officers were relocated to an office in the Centre Management Suite of the Mall Pavilions provided free of charge by them. Plans are being developed for the LINK to have a more public presence and discussions with the Mall Pavilion and another property holder for use a 'high street' presence are reasonably advanced. A decision to occupy such premises will only be taken when there is greater clarity about the funding of the LINK from 2011/12.

## **LINK Membership**

At 28<sup>th</sup> May 2010 there were 688 members of the LINK entered on the new database including 135 affiliated organisations within Hillingdon. The details of a substantial number of members were not provided by HAPUK and steps are being taken to identify these residents and add them to the new database as well as attracting new members.

Our LINK membership compares favourably with other boroughs with Westminster reporting a membership in the region of 400 and Kent, with 5 times the population of Hillingdon, reporting a membership of about 950.

## **LINK Activities**

The LINK Board developed a new work plan in January which is attached at appendix A. Board members in attendance at the Scrutiny Committee will be able to provide the further detail. The LINK is now represented a wide range of partnerships, committee, boards and forums and so is well positioned to influence services and commissioning. It is presently using its powers of entry and review in a limited manner but training will commence in July to allow for certain members to inspect against regulatory benchmarks and contract requirements will which greatly strengthen the position and authority of the LINK.

## **LINK development priorities**

At a recent review meeting between officers, Groundwork and Link Board members the following issues were agreed as priorities for development:

- Role descriptions for LINK representation at meetings to provide clarity of purpose and scope of representation

- Sustainability of the LINK by making better use of members and volunteers to more widely distribute roles and responsibilities so that future performance is less dependant upon key individuals.

### **Other related issues**

The future of the LINK is uncertain with no commitment to funding by the government beyond this year.

The effectiveness of LINKs appears to be determined by the Department of Health according to the number of formal submissions made by the LINK to Scrutiny and the actions then taken. Whilst this does provide a measure it is not sufficient as it fails to value the collaborative approach taken by the LINK Board to engage with service providers to identify and resolve early emerging issues without involvement of Scrutiny.

### **SUGGESTED SCRUTINY ACTIVITY**

Members review the evidence presented to them and, following further questioning of the witnesses, decide whether to take any further action.

### **BACKGROUND INFORMATION**

None.