Derby LINk HEALTH

Annual Report 2010–2011



Contents

- 1. Chair's Introduction
- 2. Manager's Introduction
- 3. Who we are
 - -Management Committee
 - -Staff Team
 - -Authorised Representatives
- 4. What we did this year
 - -Recruitment
 - -Training
 - -Care Homes Work
 - -CQC Work
 - -Research
 - -Overview and Scrutiny Committee
 - -Formal Requests
- 5. HealthWatch
- 6. Financial Report
- 7. Contact us

Introduction Steve Studham, Chair of Derby LINk

It has been a year of challenges and change.

The economic downturn and cut backs have resulted in the need to carry on our activity with reduced funding. Despite the uncertainties of the last year our host team have continued to provide support and advice which is greatly valued. We have lost two members of the staff team, Saima Ayaz and Lyndsey Ramsden and I thank them for their input to the LINk.

The LINk has continued throughout the year with Care Home visits and working with health and social care providers in both the city and further afield, details of these are covered in the following reports.

The new government's change of emphasis on the provision of health and social care has required the LINk to focus much more on the future, so time and resources have been increasingly used to look at the challenges and changes that both users and providers of services are facing. It is always easier to dismiss the need to change than to accept it ,but with a positive approach realistic improvements to service provision can be made.

The coming year will be a one of transition from LINk to HealthWatch involving the unpaid volunteers in more thought provoking activity and action. I thank them for the commitment they have given and will give to improving health and social care in Derby.

Steve Studham Chair Derby LINk

Introduction Mark Blaney Derby LINk Manager

In my introduction to last year's report I highlighted the uncertainty about the future of the project suggesting this should act as inspiration for us to aim to show the value of the project and promote best practice in public engagement. I am proud to say that we did we act and we have met both of those aims.



Our main work this year has focussed on surveys of care homes in the City. The success of this work has far exceeded our expectations; it has been adopted by the Care Quality Commission (CQC) as an example of best practice and promoted nationally to other LINks. The project has also been an excellent example of the voluntary and public sector, providers and service users working together to ensure everyone gets the best care possible.

We conducted a survey of Derby residents' experiences of Health and Social Care focussing on the experiences of young people which has been used to inform decision making about services. And we worked with CQC as the lead LINk gathering patient experience on the service review of East Midlands Ambulance Service. Additionally we have received over 50 requests for consultation and engagement and have representation on the PCT board and many other service design groups.

However, the coming year will present many challenges. LINks are being abolished and replaced with HealthWatch with greater powers and responsibilities. We feel we are well set for the transition and await confirmation of the duties with interest.

In the meantime we will continue working with our volunteers and service providers to ensure the people of Derby are as involved as possible in the design, quality and commissioning of health and social care services.

Mark Blaney Derby LINk Manager May 2011

Who we are

Management Committee

Of our over 150 active members, 13 currently sit as Management Committee members discussing and identifying issues, agreeing policies and setting out how the project develops. Issues are identified from public consultation, working with service providers and members' own experiences. Our Management Committee members are:

Steve Studham - Chair Peter Swift – Vice Chair Carol Burns Wendy Locke Gloria Newell Ciselyn Alexander Margot Keats Som Bhalla Tim Proctor Margaret Hall Maggie Attenborrow Raj Gill Raj Bali

We are fortunate to have a skilled and committed management board who work well together and with the host to continue to develop Derby LINk both locally and nationally.

Staff team

We have a team of four staff who provide support to our volunteers as well as acting as liaison between the project and statutory partners including the Primary Care Trust and City Council. These are: Mark Blaney – LINk Manager Jessica Davies – LINk Researcher Saima Ayaz – Recruitment and Membership Officer Lyndsey Ramsden – LINk Communications Assistant

We are grateful for the excellent support offered by Amy Sewell who provided administrative cover for most of 2010.

Authorised representatives

The Local Government and Public Involvement in Health Act 2007 states that Health and Social Care service providers will be under a duty to allow authorised representatives of LINks to Enter and View and observe the carrying on of activities on premises owned or controlled by the service provider.

Viewing and observation must be carried out for the purposes of LINk activities. Derby LINk has offered regular training on the process and legislation associated with Enter and View visits. Derby LINk has agreed to use these powers to visit care and residential homes in the city. The aim of the visit will be to provide a lay person's view of the home focussing on dignity and quality of life for residents and their families which will compliment the official inspections all homes must have.

As of March 2011 we have not had to formally use the powers of Enter and View as we have received universal cooperation and support from care home managers and staff.

Those members who have completed the formal training and safeguarding adults awareness training are;

- 1. Matthew Buckley
- 2. Carol Burns
- 3. Som Bhalla
- 4. Patsy Campbell
- 5. Margaret Hall
- 6. Margot Keats
- 7. Wendy Locke
- 8. Gloria Newell
- 9. Peter Swift
- 10. Paul Turnbull
- 11. Shirley Wessels
- 12.Anne Zokas

Several other members have completed one of the training courses and are awaiting CRB checks.



What we did this year

Recruitment

Membership of Derby LINk has progressed well over the past year; currently we have a pool of 153 volunteers, from diverse backgrounds, with good representation from all equality groups from across the city.

We have developed a range of different roles for members to allow them to participate as much or as little as they would like. These roles provide a range of opportunities for involvement and offer a variety of volunteer experiences, they are: Member, Researcher, Ambassador, Representative, Authorised Representative and Committee Member.

Member Roles	Numbers
LINk Member	153
LINk Committee Member	14
LINk Researcher	32
LINk Authorised Representatives	13
LINk Ambassador	37
LINk Representatives	29



Speed Volunteering

We were fortunate this year to have a budget for promotion and marketing. We used a small amount of this money to support a speed volunteering event run by Derby Volunteer Centre at The Spot in Derby.

The main aim of the event from LINk's perspective was to launch our City Wide Research Survey as well as increase awareness of our project and recruit members. The organisers of the event were a little disappointed with the number of attendees, although this was explained by the unseasonal weather and ongoing road works near the venue. However, for LINk it was an unqualified success. We managed to get 70 surveys completed, twice the expected target for the day, and recruited three new volunteers. We also received some positive coverage in the local press which gave a great kick start to our research project.

Community events

In the past year we have worked to involve as many people as possible in the work of the project and give them opportunities to engage with service providers about the issues that affect them. We have attended over 30 public events including coffee mornings, support groups, information events and staff meetings either to give presentations or as part of our promotional activity.

To reach as wide a section of the population as possible, the Derby LINk team decided to use a range of communication channels to raise awareness of issues and opportunities for involvement and promote the good work we have achieved so far.

The work has helped to increase our membership and ensure we have good representation from



communities and interested groups across the City.

Newsletter

One of the main methods of communicating with our members and the wider community is via our fortnightly newsletter. This goes out to over 160 groups and individuals, including providers and statutory partners. The newsletter carries information on upcoming events, opportunities for involvement, current consultations and latest news about health and social care services. We have received great praise for the newsletter, and its style and format have been copied by other LINks nationally.

We provide paper copies for members who do not have computer access and most news items are copied to our website for wider publicity.

Training

Volunteers play a vital role in Derby LINk. Our aim is to meet the needs of our volunteers and provide all the training and support they request to help make the most of their volunteering opportunity.

Derby LINk has developed training plans for their members, to enable them to fully participate in consultations, meetings, conferences and represent Derby LINk.

Induction and Communication Training

Induction and communication training is offered to all new members, this training session gives our volunteers a better understanding of Derby LINk, their role as a volunteers and the policies and procedures of Derby LINk.

This training session gives members a chance to raise any concerns they may have about volunteering with the project and successful completion ensures members are covered



by our insurance policy to carry out LINk activities. On the completion of Induction LINk ID badges are issued.

This year we have changed the way we deliver induction training by having one to one meetings with new members at a time of their convenience. This has been welcomed by members.

Ambassador and Representative Training



One of the aims of LINk is to engage with as many different groups and individuals as possible. To help with this we have devised the roles of Ambassador and Representative.

Members who undertake these roles agree to attend meetings or events they normally attend anyway and feedback any information or developments whilst also raising issues on behalf of LINk.

Enter and View training

The Enter and View Training pack was introduced in April 2009. This is compulsory training for LINk members who wish to qualify as Authorised Representatives, and take part in enter and view visits of health and social care premises.

Only members who have successfully completed our induction training are eligible to take part. On completion of training, a CRB check for members is submitted.

This training session is specifically designed for better understanding of legislation, government directions, the process of a visit and the reporting system we use. In this session, group work, group discussions and different case studies are planned to give members in-depth understanding of issues and highlight the importance and sensitivity of these visits.

Cultural and Religious Awareness Training

Our Cultural and Religious Awareness training package was designed at the request of our volunteers. In this session the main beliefs of three religions, Hindu, Islam and Sikh, along with Asian cultural practices and customs, and main festivals celebrated, are introduced and explained. The course aim is to give members a

better understanding of theses faiths and cultures, to break down barriers, address misconceptions and reduce chance of misunderstanding or offence when working with these communities on a personal and professional level.

Sari wrapping and stick dance form a fun element of the session alongside



more serious learning. We have received overwhelmingly positive feedback on this course, from all the attendees and intend to run it regularly throughout the year.

These training sessions were delivered throughout the year and attended by over 50 volunteers and other individuals.

Care homes

The main achievement and focus of much of our workload, for 2010-11 has been our care home visits.

Every LINk has powers to 'Enter and View' any premises that provide health or social care services. Each LINk Host must provide statutory training for its members on the legislation and procedures associated with an Enter and View visit.

Following the training we discussed how we should use these powers to best effect, members decided to use our powers to speak to residents of care homes about their experiences of living in the homes. We expanded this to include residents and staff members' views of the homes to give a fuller view.

Since May 2010 we have visited 39 care and residential homes in the city and recorded the views of hundreds of residents, their relatives and the staff of the homes. A report is compiled of each visit which, once approved by the home, is shared with NHS Derby City, Derby City Council and the Care Quality Commission (CQC). These reports have been very well received and resulted in Derby LINk being invited to take part in a national learning set with CQC on how best LINks can share



information form the public. The learning set has now finished and the care homes work is promoted by CQC as an example of best practice, already more than 10 LINks in other areas have accessed the resources we developed and are carrying out visits in their own areas.

Additionally CQC compliance inspectors now access these reports prior to carrying out formal inspections to gather a fuller picture of services offered.

We plan to continue this work in 2011–12, revisiting homes to see if they have acted on our recommendations.

CQC work

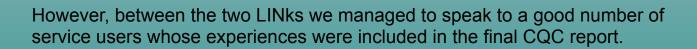
As a result of the care homes work, we were invited to get involved with other CQC reviews and inspections.

The LINk Manager was asked to present a report on the visits to the regional inspection team of CQC as well as to the national CQC/LINks advisory group.



Derby LINk was asked to record patient experience of the East Midlands Ambulance (EMAS) as part of a service review. This was understandably a large piece of work. We thought it would be helpful to involve LINks form across the

East Midlands to gather as much feedback as possible and promote partnership working. Unfortunately, only Leicestershire LINk responded to our request.



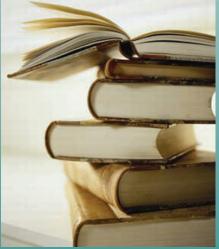
Research Report

The last year has been busy for Derby LINk in terms of research, with greater involvement in long term projects such as The City Wide Research and our work into Care Homes. The former sought to identify people's experiences of using Health and Social Care Services in Derby regarding provision, support and personalised care; to analyse trends in regards to people's positive and negative experiences; to identify people's perceptions of dealing with Health and Social Care Services regarding information, accessibility and



improvements; and also to identify what three services people would like to see improved in the city. The project was completed in early November, after nearly six months of consultation, and the findings were made available to the public via LINk's website and shared with the relevant statutory partners in the city. Derby LINk worked in partnership with RAM FM to obtain a snapshot of the city's views on Health and Social Care Services and a total of 782 respondents participated in the research with a representative sample of the six equality areas: gender; age; ethnicity; religion; sexuality; and disability.

The research project into Care Homes was the largest piece of work undertaken by LINk employees and volunteers over the past year, and is still an ongoing and developing study in the city. The purpose of this research was to document the experiences of residents, their families and carers at homes across the city, examining involvement and information; personalised care; treatment and support; safeguarding and safety; suitability of staffing and quality and suitability of management, concentrating on the ten dignity areas issued by The Department of Health.



On the whole, homes throughout the city were accommodating, embracing the project as an opportunity to demonstrate the support provided in terms of the provision of care, the facilities availability, the provision of activities and food, and the concepts of dignity and respect, and Derby LINk were able to make recommendations based on observations and interviews as well as sharing best practice. To date, a total of 39 residential and nursing homes have been visited by a team of Derby LINk Researchers. The findings are made available on Derby LINk's website and shared with relevant statutory partners in the city.



Derby LINk also assisted NHS Derby City in a survey regarding Patient Experience of Outpatient Follow Up, **Derby City** examining the information provided to patients; waiting times; manner of staff and overall satisfaction. Derby LINk worked in partnership with NHS Derby City and The

Research Team contacted various groups and organisations throughout the city resulting in 139 respondents participating in the research.

Derby LINk was also approached by the CQC to lead on a piece of research examining service users' perceptions of the Patient Transport Services available within the East Midlands. Derby LINk worked in partnership with the CQC in order to design the survey, and all LINks in the East Midlands Region were invited to participate by assisting respondents to complete it. This research sought to identify people's experiences of using Patient Transport Service in the East Midlands regarding length of time, facilities and support and also to analyse any trends in regards to people's positive and negative experiences of using Patient Transport Service in the East Midlands. Leicestershire LINk opted to take part in the project, and a total of 66 respondents participated in the research. The findings were made available on Derby LINk's website and shared with the relevant partners throughout the city.

Derby LINk was also involved with assisting NHS Derby City in a Direct Access Consultation reviewing direct access services. It asked for views on six options



relating to the two direct access services we have in the city – Derby Open Access Centre and the Walk-in Centre. The review was about reducing duplication in services The initial consultation provided by the PCT was modified in order to be accessible to a much wider sample of the population, and the Derby LINk Team contacted various groups and organisations throughout the city.

The results showed that the people of Derby considered these services vital to the wellbeing of the city and out of the total 2000+ respondents who contributed their views to the consultation, Derby LINk was able to provide the perceptions of 336 respondents.

As a result of the consultation it was announced earlier this month that both services are staying open for a minimum of two years and the LINk Team are very proud to have contributed to the successful outcome.

NHS Derby City will be working with both providers to improve the cost effectiveness of the services and will carry out a more in-depth review will be undertaken to understand issues around access to GPs which were raised in the consultation.

Overview and Scrutiny Commission (OSC)

We have developed excellent relationships with our local Overview and Scrutiny Commission (OSC). We present a quarterly update to the Health OSC, where we are able to answer any queries members may have. We have agreed a policy for working together and sharing information which has worked well over the past year.

As part of the OSC's review of NHS Derby City's consultation on Out of Hours Access to GPs, we were asked to gather information about whether patients were registered with a GP and if they experienced any difficulty in making appointments. We managed to speak to over 300 residents. The results showed that although many patients were registered locally, 945 had experienced difficulty in making an appointment. Our findings were fed back to the OSC for action.

Derby LINk has yet to refer an issue to the Health OSC but would feel confident of receiving the full backing of the members should we do so.

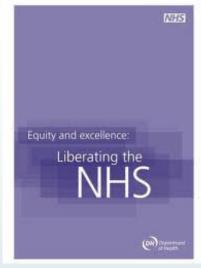
Formal requests

In 2010–11 we have not made any formal requests for information from NHS services. This is due to the excellent relationship we have developed with the trusts who, in our experience, have been more than happy to share information and resources without recourse to formal action. We hope to continue and further develop these relationships as we move towards HealthWatch.

HealthWatch

Following the publication of the Health White Paper in July 2010 it became clear that the Local Involvement Networks were to be continued, with an expanded role, as local HealthWatch.

In response to this the Management Committee of Derby LINk identified an under-spend in their discretionary budget, which they felt would be best used to support the planning of the transition process. We therefore advertised for a consultant group to deliver a comprehensive action plan, including a fully costed delivery model, for the delivery of the full range of HealthWatch functions in Derby.



This work will incorporate:

- integration of current LINk services into HealthWatch;
- a scalable model for the delivery of HealthWatch, able to respond to local demands and available resources;
- a Development Plan for 2011-12 for the additional services, including piloting of new approaches; and
- a draft delivery plan for 2012-13 ensuring a fully integrated service is available from April 2012.

Discussions with Derby City LINk members and stakeholders about the transition to HealthWatch revealed an aspiration for the new organisation to build on its established role as the health and social care champion for patients and the public by increasing strategic input and influence.

The LINk's vision is to develop a local HealthWatch with Derby City Council which will take an overview of the health and social care economy in the city on behalf of patients and the public. The aim is to do this by:

- building on and developing current skills and knowledge;
- making a strategic input into the commissioning process to champion patientled pathway design;
- measuring the impact of patient and public involvement;
- reviewing patient and carer experience of service delivery; and
- demonstrating measurable outcomes.

HealthWatch will be the only local organisation with a remit covering health and social care across the entire city. The LINk and Derby City Council believe that if HealthWatch is to have a real impact on the design and delivery health and social care services on behalf of local people, it has to understand and influence service design and commissioning spanning the whole patient pathway.

Finance Report

LINk Project

Financial Summary 2010-2011

Cost Centre: LNK

STAFFING COSTS:	Qtr1: April - June 2010	Qtr2: July - Sept 2010	Qtr3: Oct - Dec 2010	Qtr4: Jan - Mar 2011	Total Spend
	£	£	£	£	£
LINk Manager: M Blaney	7,270.95	7,331.73	7,331.73	7,331.73	
Manager: K Cawdell + M All- bones Information Officer: LR /Mat	2,281.82	2,281.82	2,281.82	4,180.81	
Cover: AS	2,407.91	2,420.95	2,490.94	2,558.08	
Membership Officer: S Ayaz	6,096.24	6,096.24	6,096.24	6,096.24	
Research Officer: J Davies	4,889.70	5,363.28	5,363.28	5,363.28	
Research Onicer. J Davies	4,009.70	5,303.20	5,303.20	5,303.20	
TOTAL Staffing Costs	22,946.62	23,494.02	23,564.01	25,530.14	95,534.79
OVERHEADS:					
Directly charged Office Costs	230.71	419.40	396.18	403.33	1,449.62
Premises & Indirect Overheads	1,957.89	1,735.34	2,146.21	3,645.71	9,485.15
Staff Travel Costs	59.40	222.88	55.60	0.00	337.88
MANAGEMENT, SUPERVI-					
SION & TRAINING	3,106.00	3,106.00	3,107.00	3,107.00	12,426.00
COMMUNICATIONS BUDGET	2,600.95	1,483.43	915.50	64.66	5,064.54
PARTICIPANTS EXPENSES	955.89	211.45	751.38	225.07	2,143.79
OTHER SUPPORT	624.40	0.00	0.00	0.00	624.40
Project Management Fee	2,000.00	2,000.00	2,000.00	3,622.83	9,622.83
TOTAL Other Costs	11,535.24	9,178.50	9,371.87	11,068.60	41,154.21
TOTAL PROJECT COSTS	34,481.86	32,672.52	32,935.88	36,598.74	136,689.00
CUMULATIVE PROJECT COSTS	34,481.86	67,154.38	100,090.26	136,689.00	

How can you get involved?

LINks are designed to be as open and accessible as possible; therefore we have developed a range of ways of participating to ensure everyone can get involved.

You could be a:

Committee Member – attending meetings and taking a full part in Derby LINk's activities;

Researcher – finding information about issues raised, consulting with your community and informing the Derby LINk of your findings;

Ambassador – meeting with service providers and acting as a point of contact for LINk members, representing the views of the LINk when asked to do so; or

Member – receiving information from Derby LINk about current issues and letting us know your thoughts and playing a more active role if you wish.

LINk has recruited more than 100 active members in the past year along with a further 360 groups and individuals who have agreed to receive information from us and comment on any consultation we are asked to take part in.

Contact us

For more information about the work of Derby LINk, to request a membership pack or let us know about an issue you would like us to look into, please contact us at:

Derby LINk 4 Charnwood Street Derby DE1 2GT

Tel: 01332 346266 Email: <u>mark.blaney@communityactionderby.org.uk</u> Web: <u>www.communityactionderby.org.uk/link</u>



