

ADULT SERVICES AND HEALTH COMMISSION October 2007

Report of the Director of Corporate and Adult Social Services

Development of Local Involvement Networks (LINks)

RECOMMENDATION

1.1 To support the planned development of the local LINk in Derby City

SUPPORTING INFORMATION

Background

- 2.1 Local Involvement Networks, LINks, form one aspect of the government's plans to widen and strengthen patient, user and citizen engagement in health and social care as outlined in the Department of Health document, "A stronger local voice".
- 2.2 The LINks are one of five elements of the new framework to give people a greater say in how their local health and social care services are provided and will replace the Patient and Public Involvement forums which are due to be abolished on March 31 2008.
- 2.3 The establishment of a local LINk is the responsibility of Social Services departments but it is not the intention that they will provide the service. There will be a need for the department to identify and commission a suitable organisation to act as host and provide support for the LINk.
- 2.4 As the Local Government and Public Involvement Bill will not now receive Royal Assent before October or November the government have recognised that the LINks will not be fully operational by April 2008. It is anticipated that local authorities will have made some progress in establishing the basic LINk structure and that the host organisation will have been identified.
- 2.5 These processes will be helped by the publication, at the beginning of August, of the guidelines for establishing the LINk and for the procurement of the host organisation. These guidelines are not prescriptive but allow flexibility for the LINks to fit with local

circumstances. Reports on the experiences of the early adopter programme are also now becoming available.

Procurement of the host organisation

- 2.6 The procurement process for the host organisation is being led by Dawn Moran, Head of Procurement. Although the formal process cannot begin until Royal Assent is received she will be making initial preparations and we will begin to engage with interested parties.
- 2.7 The amount of time to procure the host is very limited and the amount of funding available to us will not be disclosed until later in the year. In the unlikely event that this exceeds £140,000 the process will be subject to OJEU and it would be a challenge to meet the April deadline.

Developing the LINk

- 2.8 Evidence from the authorities involved in the early adopter programme supports the creation of a working group of interested stakeholders as a valuable way of informing the development of the LINk. They could identify existing engagement activity and ensure the group is able to reflect the needs of all interested and diverse communities.
- 2.9 In preparation for the development of such a group and the LINk in Derby, information on the tendering opportunities for the host organisation and on the opportunities for involvement in the development of the LINk have been circulated via the Health and Social Care forum and the CVS newsletter.
- 2.10 A mapping exercise is also being carried out jointly with health services and the CVS to identify other local forums which could contribute to the process.
- 2.11 A project group, composed of representatives of Adult Services, OSCR and a representative of Derby City Primary Care Trust, has now been formed. This will oversee the process to procure the host organisation and to establish the LINk in Derby.

The LINk

- 2.12 The primary role of the LINk is to provide a stronger voice for local people in the planning, design, commissioning and provision of health and social care services. They will be allowed to develop flexibly to take into account local groups and communities and their priorities but there are a number of principles which will be common to all.
- 2.13 The membership of each LINk will be of individuals, groups and organisations with an interest in their local care services. Every LINk should be inclusive and enable involvement from all sections of the community, especially those who are difficult to involve or seldom heard. To achieve this the LINk will need to adopt a variety of methods and will

- need to offer different styles of involvement and time commitment in order to be accessible to all.
- 2.14 The transition to LINks should be an evolutionary process which will help to build on the work of existing forums and enable users to have a stronger voice and influence across the health and social care system. This will also help to reduce the danger of losing the experience and skills of those people already involved in the groups such as the Patient and Public Involvement forums.
- 2.15 The LINk will be accountable to the community and to the Secretary of State for Health and will need to measure and demonstrate how it has performed and produce an annual report.
- 2.16 Details on the power of LINks will be provided in future regulations

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Background papers: None

List of appendices: Appendix 1. Implications

Appendix 2 Department of Health guidelines

Appendix 1

IMPLICATIONS

Financial

1. None arising from this report.

Legal

2. The Local Government and Public Involvement Bill will, when it receives Royal Assent, require local authorities with a social services responsibility, to establish a LINK and procure an organisation to act as host to provide support for the LINk.

Personnel

3. None arising from this report.

Equalities impact

4. The development of the LINk will benefit all Derby people.

Corporate Priorities

 This report links to the Council's commitment to involve the citizens of Derby in decisions about future development and to the review of neighbourhood working which proposes the replacement of Area Panels with a Neighbourhood Forum in each of the 17 wards.

Appendix 2

Department of Health Guidelines

Getting ready for LINks planning your Local Involvement Network

Getting ready for LINKs contracting a host organisation for your Local

Involvement Network