

# Local Involvement Networks (LINKs) Bulletin

Issue 1 – March 2007

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## About this bulletin

This bulletin is for all:

- NHS staff working on Patient & Public Involvement programmes;
- Local Government staff working on user involvement programmes and the procurement of host organisations for LINKs;
- Voluntary and community sector organisations who are interested in providing a 'host' service to the new LINKs or becoming a member of a LINK, including those that provide forum support services;
- Current PPI Patients' Forum members; and
- Health and social care regulatory bodies with PPI interests.

We would ask that you forward the bulletin to all members of your team who may benefit from this information. You may wish to print and display this bulletin on all relevant notice boards or arrange to have it published on your internal intranet sites.

## Feedback

We welcome your ideas and comments that will shape the format and content of this bulletin in the future. The next edition will be published in April 2007. Please e-mail [ppimailbox@dh.gsi.gov.uk](mailto:ppimailbox@dh.gsi.gov.uk) or write to the PPI Policy Team, Room 502A, Skipton House, 80 London Road, London SE1 6LH.

## Introduction

Welcome to this first monthly edition of the Local Involvement Networks (LINKs) Bulletin, keeping you up to date with developments on LINKs. We are still at the very early stages of introducing this new system. The establishment of LINKs forms part of the Local Government and Public Involvement in Health Bill, currently under consideration by the House of Commons. The establishment of LINKs is still subject to the passage of legislation, as a result we cannot give a definitive time scale for establishment at the moment. We will ensure you are kept up to date with progress as the Bill moves through Parliament and will of course inform you once we are able to "set a date" for LINKs' establishment.

We would like the transition from old to new to be as smooth and as straightforward as possible. This newsletter is intended to keep all stakeholders and interested parties aware of the progress being made towards the establishment of LINKs, and will provide helpful tips and advice about gearing up for LINKs and how to get involved in preparation both locally and nationally.

## Website links

If you are reading a printed copy of the bulletin, you may not be aware that further information is available on most items. If you go to the online version of the bulletin you can access links to further information at the click of a button. It is available at <http://www.dh.gov.uk/PolicyAndGuidance/OrganisationPolicy/PatientAndPublicInvolvement/fs/en>.

You will also be able to access further background information about LINKs on our website and access key documents such as A Stronger Local Voice published in July 2006 and the Government response document published in December 2006.

## Voice piece

**Harry Cayton – National Director of Patients and the Public, Department of Health**



I am pleased to be able to contribute to this important newsletter and to highlight the opportunities the introduction of the new local involvement networks (LINKs) will bring to current health and social care systems. LINKs will be powerful advocates for the views that they gather and will help to provide higher quality services for their local populations. They will aspire to be a stronger and more influential local voice of the health and social care service user.

*LINKs will enable genuine involvement for a far greater number of people than is currently available,*

I know the ultimate purpose of user and public involvement is to underpin the production of improved services, which better satisfy the needs and wants of users of services. Patients, carers and users of services are the real experts in the care they need and want, their input is therefore essential if services are to be tailored to their needs, to create a user led health and social care system. I believe it is also essential to involve users, as well as the groups that represent them, in the commissioning decisions that are taken, to ensure they have input into what services are provided in any locality. This should create local ownership and support for services.

The establishment of LINKs fits with the overarching themes of the Local Government and Public Involvement in Health Bill – ensuring greater opportunities for local people to influence and shape services in their area and help local authorities, Primary Care Trusts and service providers become more accountable to people. The inclusion of these provisions tell a coherent story of the government's efforts to promote public engagement.

*LINKs will be powerful advocates for the views that they gather and will help to provide higher quality services for their local populations.*

LINKs will enable genuine involvement for a far greater number of people than is currently available, ensuring local communities have a stronger voice in the process of commissioning not only health, but social care services and enabling them to influence key decisions about the services they both use and pay for.

You can begin to engage with those people and organisations in your area that will have a direct role to play in the establishment of LINKs. You can make contact with a local Early Adopter pilot site and see how they are doing with their planning and see if there are any lessons you can learn. We plan to hold regional events over the next few months, following on from the outcomes of the national event held on 13<sup>th</sup> December in London. Information about the regional events can be obtained from the Commission for Patients and Public Involvement in Health at [helpdesk@cppih.org](mailto:helpdesk@cppih.org) or on 0845 1207111.

I want to wish you all the very best of luck with your planning processes and hope the information we provide goes some way in clarifying your role within the LINKs system.

## TOP STORY - “Gearing up for LINKs”

### Key Facts

We know that there are differing degrees of awareness about LINKs and many individual stakeholders and organisations have raised concerns about this.

Here is a summary of key facts about the new LINKs:

- It will be the responsibility of local authorities to make arrangements for the establishment of LINKs by contracting with a ‘host’ which in turn will put in place arrangements to attract people to participate in and form the LINK;
- LINKs will define Local Authorities
- the Department of Health will make targeted grants available to local authorities to enable them to fund the establishment of LINKs through the procurement of the ‘host’;
- The amounts made in these targeted grants will be made public;
- LINKs will be open to all, there will not be any set membership;
- LINKs will have the power to determine what areas of work they focus on, within their statutory functions which will be:
  - o promoting and supporting the involvement of people in the commissioning, provision and scrutiny of local care services;
  - o obtaining the views of people about their needs for, and experiences of, local care services and making these views known to people responsible for commissioning, providing, managing or scrutinising those services;
  - o making reports and recommendations about how local care services could be improved, to people responsible for commissioning, providing, managing or scrutinising those services.
- LINKs will have a set of ‘powers’ which will enable them to:
  - o enter specified types of premises and view the services provided as well as collecting the views and experiences of recipients of services;
  - o request information and receive a response within a specified timescale;
  - o make reports and recommendations and receive a response within a specified timescale; and,
  - o refer matters to the relevant Overview and Scrutiny Committee (OSC) and receive a response.
- LINKs, directed by their governance structure, and the decision making process it has put in place, will have the power to focus on issues which are of concern to the local community;
- LINKs and Overview and Scrutiny Committees (OSCs) will need to work closely together, but will remain independent of each other;
- for LINKs to be effective they will need to be inclusive and draw on a wide range of views and inputs;

- LINKs will need to develop close working relationships with commissioners and providers, to enable them to perform a role of critical friend;
- To enable them to make a headstart with the process, encourage people and organisations to start to develop ways of working locally which can foster the development of LINKs early .

## NEWS IN BRIEF

### Legislation update

The primary legislation to establish LINKs is currently being considered by Parliament. Over the next few months the provisions in the Local Government and Public Involvement in Health Bill will receive considerable scrutiny and it will not be until the Bill receives Royal Assent later this year that we can be sure of the final arrangements for LINKs. However, we do think it important that in the meantime all those who may be involved in making them a reality begin to think through how they might play their part. The Local Government and Public Involvement in Health Bill was introduced in the House of Commons on Tuesday 12<sup>th</sup> December 2006. As well as the provision for the establishment of LINKs, the Bill also:

- makes provisions with respect to local government and the functions and procedures of local authorities and certain other authorities;
- makes provisions with respect to persons with functions of inspection and audit in relation to local government;
- establishes the Valuation Tribunal for England;
- ***will abolish Patients' Forums and the Commission for Patient and Public Involvement in Health; and***
- ***strengthens and updates the duties on health service bodies to consult the public.***

You may wish to follow the stages of this Bill by logging on to:

[http://www.publications.parliament.uk/pa/pabills/200607/local\\_government\\_and\\_public\\_involvement\\_in\\_health.htm](http://www.publications.parliament.uk/pa/pabills/200607/local_government_and_public_involvement_in_health.htm)

### Health Select Committee investigation in to PPI

On 2<sup>nd</sup> November 2006, the Health Select Committee issued a press notice informing us that it would be undertaking a short inquiry into public and patient involvement in the NHS. The inquiry started in January 2007.

Amongst the matters the committee has considered are:

- The purpose of public and patient involvement
- The proposed establishments of Local Involvement Networks (LINKs): their powers and make-up
- Public consultation over changes to services in both primary and acute sectors (Section 11 of the Health and Social Care Act 2001)

The committee has heard evidence from key stakeholders including the Commission for Patient and Public Involvement in Health, a number of Patient Forum members, Healthlink, the NHS Confederation, the Health and Social Care regulators, Harry Cayton, National Director of Patients and the Public, Meredith Vivian, Head of Responsiveness and Accountability Branch as well as the Minister with responsibility for Patient and Public Involvement, the Rt Hon Rosie Winterton, Minister for Health Services.

Transcripts of the proceedings from this investigation and other relevant information are available on the Parliamentary website at:

[http://www.parliament.uk/parliamentary\\_committees/health\\_committee.cfm](http://www.parliament.uk/parliamentary_committees/health_committee.cfm)

The Committee hopes to report on its findings just after Easter.

### **‘Getting Ready for LINKs’ National event held in London on 13<sup>th</sup> December**

On 13<sup>th</sup> December 2006 the ‘Getting Ready for LINKs’ national conference was held at the London Paddington Hilton Hotel. This event was organised to explore in detail the development of Local Involvement Networks (LINKs) and provide clarity to those stakeholders present on the arrangements needed to be in place once Patients’ Forums and the Commission for Patient and Public Involvement in Health (CPPIH) come to an end.

The conference, chaired by the Consumers’ Association Principal Policy Adviser, Frances Blunden, attracted an audience of over 150 people, made up of those main stakeholder groups who will be involved, or have a direct impact on the formation of the new LINKs; namely from local government, the NHS, non-profit sector, and patient and public involvement forum members.

Speakers at the event, included Harry Cayton, the National Director for Patients and the Public; Meredith Vivian, the head of the responsiveness and accountability branch at the Department of Health who leads on the overall patient and public involvement policy agenda, and the Minister of State for Health Services, the Rt. Hon. Rosie Winterton MP who addressed the conference with a strategic overview of why there is a need for changes in the system and why LINKs.

For a detailed write-up of this event, please go to <http://www.dh.gov.uk/PolicyAndGuidance/OrganisationPolicy/PatientAndPublicInvolvement/fs/en>.

### **Planning for similar regional events**

The feedback from the 13<sup>th</sup> December event was very positive, and there is an evident thirst for more detail on the proposals. Following this event, DH, CPPIH and other partners are organising a series of nine regional conferences. These will be more workshop focused and will build on the key themes highlighted in London – governance, membership, resourcing, activities & accountability.

Information about the regional event nearest to you can be obtained from the Commission for Patients and Public Involvement in Health at [helpdesk@cppih.org](mailto:helpdesk@cppih.org) or on 0845 1207111.

In November 2006, The Rt Hon Rosie Winterton, Minister of State for Health Services wrote to all Chief Executives of Local Authorities with Social Care responsibilities introducing LINKs. In that letter, she requested all Local Authorities to submit a named contact for the procurement of LINKs. We will be working closely with the named contacts so you are kept up-to-date with progress.

This serves as a reminder to all Local Authorities who have not yet submitted their named contact to do so. The names can be emailed to Florella Baker at the following address:

e-mail: [florella.baker@dh.gsi.gov.uk](mailto:florella.baker@dh.gsi.gov.uk)

### **Early Adopter Projects – Update**

#### CPPIH EAP Background and Progress Update

The Commission for Patient and Public Involvement in Health (CPPIH) is managing seven early adopter projects (EAPs) on behalf of the consortium comprising DH, the Health Care Commission, the NHS Centre for Involvement, Care Services Improvement Partnership, Centre for Public Scrutiny and the Commission itself, to test out the LINKs concept in a variety of deliberately chosen local environments. The projects are located in County Durham, Doncaster, City of Manchester, Hertfordshire, London Borough of Kensington & Chelsea, Medway and Dorset. These areas have been chosen because they represent a mix of, inner urban, urban and rural communities, contrasts between wealth and deprivation, ethnically diverse and relatively homogenous populations and so on. They also represent a geographic spread across England. CPPIH has appointed Transition Co-ordinators to manage the EAPs. There is also a substantial time commitment from CPPIH's four Area Directors and from the Executive Director of Operations & PPI.

In addition the Healthcare Commission has two existing projects in Leeds/Bradford and south west England which are being managed as EAPs as part of the LINKs project.

The NHS Centre for Involvement is working with the Centre for Patient and Public Involvement in Health and the Health Care Commission to evaluate the EAP sites. The purpose of the EAPs is to work with a wide range of local stakeholders to interrogate the LINKs idea by asking hard questions and then applying this learning to the new PPI process so that, assuming parliamentary approval, it can hit the ground running.

Work began on the EAPs in November 2006 and the Transition Co-ordinators came into post on January 1 2007. As of the end of January 2007 all of the CPPIH led EAPs are progressing well and to plan. We will provide a further update next month with details of early progress and learning.

**Stakeholders may wish to contact their local Commission for Patient and Public Involvement in Health (CPPIH) Area Directors or the project manager overseeing the Early Adopter projects, Stephanie Varah.**

**Relevant contact details are as follows:**

**CPPIH Area Director for North Region – Sally Young**



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