

Local Involvement Networks Annual Reports



About this guide

This guide is part of a series aimed at helping make LINKs successful. It is designed to help people involved with LINKs understand the requirements relating to the preparation and publication of annual reports about LINK activities.

Details of the other guides in the series are available at:

www.nhscentreforinvolvement.nhs.uk/linksguides/

Background

LINKs have been set up to give communities a stronger voice in how their health and social care services are delivered. Run by local people and groups, the role of a LINK is to promote involvement, to find out what people like and dislike about local services, monitor the care provided by services and to use LINK powers to hold services to account.

Key points

- LINK annual reports must cover the period 1 April to 31 March each year.
- Reports must be published by 30 June each year.
- The first reports must be published by 30 June 2009 and must include all activities during any 'transitional period' applicable to the Local Authority area.
- Copies of LINK annual reports must be made available to the public and sent to the Secretary of State and the Care Quality Commission.
- Copies must also be sent to relevant Local Authorities, Primary Care Trusts, Strategic Health Authorities and Overview and Scrutiny Committees.
- The Government has set out in Directions what LINK annual reports must contain.
- LINKs should think creatively and innovatively about how their annual reports can be used to communicate with local people and groups about the effectiveness of the LINK.
- LINKs should consider making their annual reports available in ways that are easy for people and groups in their communities to understand.
- Although LINKs must produce annual reports, they can communicate with communities about their activities in other ways throughout the year.

Where are the requirements for LINKs annual reports set out?

LINKs were established by the Local Government and Public Involvement in Health Act 2007. Part of the Act (section 227) requires LINKs to publish an annual report about their activities during the previous financial year (ie the period from 1 April to 31 March). A copy of the Act can be found at:

www.opsi.gov.uk/acts/acts2007/ukpga_20070028_en_1.

LINK annual reports must be published by 30 June after the end of the financial year concerned. Because LINKs were set up from 1 April 2008, their first annual reports must be published by 30 June 2009 and must include details of their arrangements and activities during any 'transitional period' (ie where Local Authorities provided support to LINKs before formally appointing a Host).

The Act states that the requirement to publish an annual report must be part of the arrangements that Local Authorities make to support LINKs. This means that Host organisations must facilitate the preparation and publication of annual reports by LINKs.

Although Hosts have a role to facilitate the preparation and publication of annual reports, it is important to remember that the annual report is that of the LINK not the Host. The LINK itself will need to agree the content of their report.

The Act requires that copies of LINK annual reports must be made available to the public. The Act also states that copies of LINK annual reports must be sent to:

- the Secretary of State;
- relevant Local Authorities and Overview and Scrutiny Committees; and
- relevant Primary Care Trusts and Strategic Health Authorities.

The Health and Social Care Act 2008 (section 94 of Part 3 of the Act) places a further requirement on LINKs to send a copy of their annual report to the Care Quality Commission. A copy of the Act can be found at:

www.opsi.gov.uk/acts/acts2008/ukpga_20080014_en_1.

The Commission will become the single regulator for health and social care services from 1 April 2009, as the result of the merger of functions of the Healthcare Commission, the Commission for Social Care Inspection and the Mental Health Act Commission. Section 4 (1)(c) of the Act states that the Commission must take into account information provided by LINKs in carrying out its work and the Commission will be working with LINKs to make sure that information flows are timely and influential.

Publishing an annual report is one way that LINKs are accountable to the Secretary of State and local communities about the activities they undertake and the public money they spend. LINKs need not rely on their annual report as the only means of communicating about their activities and their achievements. The NHS Centre for Involvement has published a guide to Accountability and Transparency for LINKs (Guide No. 11 in this series) which explores other ways that LINKs can demonstrate their effectiveness locally.

What must LINKs include in their annual report?

The Government has published 'Directions on Matters to be Addressed in Local Involvement Network Annual Reports'. You can find a copy of the Directions at: www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsLegislation/DH083831 and they are also included as an appendix to this guide which can be downloaded separately at www.nhscentreforinvolvement.nhs.uk/LINKsguides/.

A simple checklist for LINK annual reports is set out below. The next section of this guide provides a more detailed commentary about how LINKs can build on the basic requirements in the checklist.

LINK annual reports must include

- Name, address and contact details for the LINK (page 4)
- Name, address and contact details for the Host organisation (page 4)
- Names of individuals who were either authorised representatives of the LINK or were involved in making relevant decisions (pages 4-5)
- The amounts of any money received by the Host from the Local Authority to support LINK activities during the year, together with the amounts spent and what it was spent on (page 5)
- The LINK activities that have been carried out (pages 5-6)
- How the views of people involved in LINK activities have been made known to commissioners, providers, managers and scrutineers of care services (page 6)
- The impact of LINK activities (page 7)
- How many requests for information were made to commissioners and providers (including independent providers), what those requests concerned and who the requests were made to; whether or not responses were received and whether these were within 20 working days of receipt of the request (page 7)
- How many referrals were made to Overview and Scrutiny Committees (OSCs), the matters concerned, whether receipt of referrals was within 20 working days, whether the OSC kept the LINK informed about any actions in relation to referrals and what actions OSCs took in respect of the referrals (pages 7-8)
- How many reports or recommendations were made to commissioners, what those concerned, whether they responded within 20 working days with an explanation of actions to be taken or why actions were not to be taken (page 8)
- Which premises authorised representatives entered and viewed and how many times those premises were entered and viewed (page 8)

Copies of LINK annual reports must be sent to (page 12)

- the Secretary of State;
- the Care Quality Commission;
- relevant Local Authorities and Overview and Scrutiny Committees
- relevant Primary Care Trusts and Strategic Health Authorities

In their first annual reports covering the period 1 April 2008 to 31 March 2009, LINKs must include details of their activities during any 'transitional period.'

How can LINKs build on the basic requirements?

The checklist above sets out the basic requirements for LINK annual reports. This section of the guide aims to help LINKs understand how they can build on the basic requirements to use their annual reports and the information contained in them to communicate with local communities about the relevance, importance and achievements of LINKs.

- **Name, address and contact details for the LINK**

Local people and groups need to know how to contact the LINK, either to raise any concerns about local health and social care services or to express an interest in taking part in LINK activities. It is important that local people can identify with their local LINK and understand what it does, how it does it and what it achieves.

The Department of Health has commissioned a project to help LINKs decide on a local identity that expresses the values of LINKs and helps people recognise and relate to their local LINK.

The contact details for the LINK may well be those of the Host (see below), but the name of the LINK will be different from that of the Host. It is important to remember that the Host is not the LINK and that LINKs are independent.

- **Name, address and contact details for the Host organisation**

Local Authorities with social services responsibilities have a duty to ensure that LINK activities take place in their areas. They do this by contracting with independent Host organisations that help to set up, maintain and support LINKs.

Hosts will be a key contact point for local people and groups, together with health and social care commissioners and providers, but they do not carry out LINK activities themselves. Their role is to provide support to the volunteers involved with LINKs under the contract they have with the Local Authority.

It is possible that the Host may not be based in the local area and some Host organisations may be supporting more than one LINK. In these circumstances, contact details should be clear to avoid confusion.

- **Names of individuals who were either authorised representatives of the LINK or were involved in making relevant decisions**

LINKs are required to establish and publish procedures for decision-making and for authorising individuals to carry out the powers that LINKs have to 'enter and view' health and social care services.

The NHS Centre for Involvement (NCI) has published a guide to Governance (Guide No.12 in this series) and a Code of Conduct for LINKs powers to 'enter and view' has been prepared by the Department of Health. Details about how to find the NCI guide and the Code of Conduct are at the end of this guide.

It is important that local people can identify who is involved in running a LINK and how they take decisions about priorities for LINK activities. This part of the report could be used to explain the structure of the LINK and the opportunities for people and groups to get involved – for example if there is a process of elections to any ‘governance group’, or any particular ‘interest groups’ that people can contribute to.

In their first annual reports, LINKs could helpfully describe how they have reached out to a diverse range of people and groups when planning and setting up the LINK. Also described could be the steps taken by the LINK to reach out to a range of diverse people and groups in order to include them in their activities.

Information about who was authorised to undertake visits to health and social care premises to carry out LINKs powers to ‘enter and view’ could also include details of the procedure for authorisation and how people can apply to become authorised in the future.

- **The amounts of any money received by the Host from the Local Authority to support LINK activities during the year and how the money was spent**

Local Authorities have received allocations from the Government to fund LINK activities in their areas for a three year period until 2011. The amounts of these allocations for each local area have been published. The allocations are not ‘ring-fenced’ (ie Local Authorities do not have to spend all of the funding on LINKs) and form part of the Area Based Grant to Local Authorities.

Publishing the amount of the allocation that councils have passed on to Hosts through the contractual process is a way for local people to hold councils accountable for the arrangements they have made for effective LINKs in their areas.

Annual reports also need to include:

- details of the amounts spent by Hosts in respect of the LINK in the year concerned; and
- details of what those amounts were spent on.

If Local Authorities supported LINKs in other ways during the ‘transitional period’, details of expenditure during that period needs to be included too.

- **The LINK activities that have been carried out**

A key aspect of a LINK annual report will be how it describes what it has done to meet the core objectives of LINKs to:

- ***promote involvement*** – for example how the LINK helped local communities to have a voice in planning and running care services and how the LINK helped health and social care commissioners and providers to engage with local communities;

- ***find out people's experiences of services*** – for example the methods the LINK used to reach out to a diverse range of people and groups, particularly those considered 'hard to reach' or 'seldom heard' in the past;
- ***assess whether improvements are needed to services*** – for example the processes and criteria the LINK used to analyse and prioritise feedback from the community, how it decided whether to make visits and how recommendations for improving services were developed; and
- ***make their findings known*** – how the LINK communicated with health and social care commissioners and providers, what outcomes they expected from their reports and recommendations.

LINKs should consider how best they can report on the different aspects of their work, for example by dividing their report in to sections on key themes that reflect a balanced work programme.

This part of the report could usefully explain the criteria used by the LINK to analyse feedback about services from local communities, how the LINK decided which issues to tackle and how the LINK decided whether visits to 'enter and view' services should be undertaken.

LINKs could use this part of the report to include a statement about whether or not they have adopted the Code of Conduct for LINK 'enter and view' powers prepared by the Department of Health or whether the LINK adopted its own Code of Conduct. The LINK might also usefully explain what proportion of their overall work related to visits.

This could also be a useful part of the report to talk about who the LINK involved in their work, the steps the LINK took to reach a diverse range of people and groups and the arrangements the LINK made to work together with other LINKs on common issues.

- **How the views of people involved in LINK activities have been made known to commissioners, providers, managers and scrutineers of care services**

LINKs need to build relationships across their local health and social care networks with people who plan, manage and run services and those who have a role to hold services to account in order to open up good channels of communication. This part of the report might set out the relationships that the LINK has built with local stakeholders.

This part of the report could include a statement from the LINK about any agreement it has reached with commissioners and providers about how they will consider and respond to the LINK annual report.

This part of the report could build on the section about LINK activities (see above) and could set out the mechanisms that LINKs have used to communicate the findings from their work and the views they have gathered to

the people that make decisions about health and social care or those that hold services to account.

- **The impact of LINK activities**

This part of the report will be crucial in demonstrating that LINKs are effective and credible in terms of reaching out and gathering views and experiences of a diverse range of people and groups across communities, assessing priorities and translating the results of their activities into reports and recommendations that have influence with the people that plan and run health and social care.

LINKs are required to set out the impact that their activities have had on health and social care services. Different ways to report about impacts could include:

- core objectives for LINKs – to promote involvement; find out people's experiences of services; assess whether improvements are needed to services; and make their findings known;
- health and social care topics that LINKs tackled; and
- people and groups in the community.

In order to add credibility to their own assessment of their impact, LINKs could consider including a commentary from commissioners and providers of services about the work of the LINK and the impact it has made.

LINK annual reports should also praise good services and acknowledge changes resulting from LINK activities as well as highlighting concerns and problems.

- **How many requests for information were made to commissioners and providers (including independent providers), what those requests concerned and who the requests were made to; whether or not responses were received and whether these were within 20 working days of receipt of the request**

One of the ways that LINKs can carry out their work is by asking for information from the people who plan and run health and social care services.

Under the governance arrangements for LINKs, decisions to ask for information need to be published.

LINKs can use this part of their report to demonstrate how their use of requests for information contributed to their overall activities and impact. It will also be helpful for local people to assess which commissioners and providers were asked for information, the kind of information being requested and their willingness to respond promptly to the LINK.

- **How many referrals were made to Overview and Scrutiny Committees, the matters concerned, whether receipt of referrals was within 20 working days, whether the OSC kept the LINK informed about any actions in relation to referrals and what actions OSCs took in respect of the referrals**

LINKs have powers to refer issues to council Overview and Scrutiny Committees (OSCs). The relationship between LINKs and OSCs is potentially

a powerful one in the accountability framework for health and social care locally.

LINKs could use this part of the report to make a statement about whether they have agreed a protocol with relevant OSCs about expectations around the criteria that LINKs will use to judge whether referrals are appropriate and the criteria that OSCs will use to judge what action to take.

- **How many reports or recommendations were made to commissioners, what those concerned, whether they responded within 20 working days with an explanation of actions to be taken or why actions were not to be taken**

Local people and groups will want to see that LINK activities resulted in meaningful, evidence based recommendations that reflect the views and experiences that LINKs have gathered as part of their work.

- **Which premises authorised representatives entered and viewed and how many times those premises were entered and viewed**

The Code of Conduct that has been prepared by the Department of Health about LINK 'enter and view' powers makes clear that visits to premises where health and social care are being delivered should take place as a result of feedback that the LINK has received about services and should form only one aspect of the work of LINKs.

This part of the report will be useful for LINKs to demonstrate that visits were informed by feedback and that the number of visits was reasonable within their overall work programme.

Is there a required format for LINK annual reports?

Although the Government has set out what needs to be included in a LINK annual report, there is no required format for how the information should be presented. The Department of Health and the NHS Centre for Involvement hope to develop the LINKs Exchange website (www.lx.nhs.uk) as the portal for LINKs to submit their annual reports to the Secretary of State and will be working with the new Care Quality Commission to decide how best LINKs can send their reports to the Commission.

However, it might be helpful for LINKs to consider adopting a framework for their reports, particularly for copies that are publicly available.

LINKs should consider the style and language used in their reports and should avoid using provocative or potentially defamatory statements about services, organisations or individuals. However, LINKs should not be afraid to use their reports as a vehicle to hold services to account, but this should be done constructively and in the spirit of partnership. LINK annual reports should highlight good services and acknowledge positive change as well as concerns and problems.

LINKs could consider publishing a summary of their annual report highlighting their main activities and achievements, together with a more detailed version that explores

the issues in more depth. People may not have time to read lengthy reports but may appreciate a 'snapshot' of the LINK. Others may want the chance to read about LINK activities in depth.

The following framework is suggested as a guide for LINKs to consider¹:

- **Front Cover** – the name and identity of the LINK and the time period covered by the report. The identity of the LINK should express the values of LINKs and help people recognise and relate to their local LINK – the Department of Health has commissioned a project to help LINKs with this.
- **'Better Together'** – an introduction to the report perhaps from the Chair of the 'governance group' or another person involved in running the LINK if the structure is less formal.

This part of the report might also incorporate facts about the LINK, for example contact details for the LINK and the Host organisation; names of people who were authorised by the LINK to 'enter and view' services, the names of people involved in decision making.

- **Why Our Work is Needed** – what the LINK knows about the health and social care issues facing communities in its area.
- **What You Told Us** – what local people said they wanted the LINK to do. LINKs could consider, for example, including information about levels and diversity of participation in the LINK (eg how many individuals from different sections of the community took part in LINK activities, how many voluntary and community sector groups participated, were any of these people and groups likely to have been regarded in the past as 'seldom heard' or 'hard to reach'?).
- **What We Did** – LINKs could consider either framing their reports around core objectives for LINKs (explaining what they did under each category), or relate these core objectives to different health and social care topics or different people and groups in the community.

This section could potentially incorporate information about:

- requests for information made to commissioners or providers;
 - referrals to Overview and Scrutiny Committees;
 - reports and recommendations to commissioners;
 - visits to health and social care premises; and
 - how the results of LINK activity were communicated.
- **What We Achieved** – a chance to demonstrate that LINKs have promoted involvement, effectively gathered views and experiences about health and social care services from a range of people and groups in communities and communicated them in ways that have influenced health and social care managers to change services in ways that meet the aspirations of local people and groups.

¹ This framework is illustrative only

- **Our Income and Expenditure** – information about the amount of money that the Local Authority has passed on to the Host in respect of LINK activities and how that money was spent.
- **Next steps** – how the LINK intends to decide priorities for its work over the next 12 months and how it plans to involve local people and groups in those activities.
- **Thanks** – to people who have taken part in LINK activities, specific partners, etc.

Tips for annual reports

- People will want to know what LINKs did, but more importantly will want to know why they did it and what were the results? Why did LINKs spend time and money the way they did? What difference did it make? Don't assume that readers will automatically understand how your activities helped to achieve your objectives.
- Focus on activity and outcomes, not structure and process. Getting high speed broadband or new accounting software may be big accomplishments for the Host, but have nothing to do with LINK objectives. Use the annual report to inspire people and groups with accomplishments related to your objectives.
- People tend to be inspired by real stories about real people rather than general summaries of your work. Explain what you have accomplished overall, then 'humanise' your report with some personal profiles, perhaps highlighting how your work helped specific groups or communities. Share a LINK participant's story of how they made a positive difference. This will help other people see how they can make a difference too.
- Remember that people whose first language is not English, people with learning disabilities and people with low levels of literacy and numeracy are likely to be excluded from information about LINKs unless you provide information in forms accessible to them. Think about how you can let different kinds of people and groups know about the LINK.
- Consider including a section that explains 'jargon' and health and social care terms, expressions and acronyms, so that people can understand what the report is about.
- Many people won't know how to read a financial statement or won't take the time to read it. Include a paragraph or two that explains in plain English about the finances of the LINK. Where did your money come from and how do you spend it?
- Never leave people wondering how they can help you with your work. Once you've inspired them with 'good works' in your annual report, close by telling them how they can help you do more. How can they support you? Be clear

about the best ways they can get involved with your work and who they can contact for further information.

Sharing achievements with other people and in other ways

Although it is not a statutory requirement, LINKs should consider sending copies of their annual reports to providers (for example NHS Trusts and private/independent providers). Local Strategic Partnerships may also find LINK annual reports useful.

LINKs need not rely on their annual reports as the only way of telling people about their activities and achievements. Websites or social networking sites (for example Facebook) can be a key source of information for local people about LINK activities and priorities. However, LINKs should recognise that access to the internet is not universal and that they need to find other creative and innovative ways of communicating with people and groups that do not usually access information in traditional ways.

LINKs are encouraged to develop creative and innovative ways to report their activities to local communities in ways that people find accessible and stimulating, for example through 'street surgeries', DVDs, exhibitions (for example in shopping areas, libraries, fairs and carnivals) and drama. LINKs could also consider the opportunities provided by digital TV or text messaging for engaging with local people.

An annual report in practice²

The LINK organises a competition to design the cover for the annual report and works with a local college to develop a DVD about its objectives, activities and achievements.

The annual report sets out details of LINK activities and expenditure and includes an 'impact gauge', describing the LINK's strategic aims and translating them into practical impacts. The LINK realises that an annual report is only one way to communicate about its activities and that communicating only once a year is not likely to provide evidence of a commitment to ongoing accountability and transparency.

It identifies other ways to communicate on a regular basis through a social networking website, community newsletters, visits and talks to local groups, articles in the local press and identifies 'community champions' for the LINK who encourage other people to get involved.

The LINK asks people and groups to suggest different ways that the information in the annual report can be made meaningful to them and responds to feedback, for example by organising a drama for people with learning disabilities and recruiting young people to organise a 'roadshow' for their peers across the area of the LINK.

² This example is illustrative only

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Contact us

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www.nhscentreforinvolvement.nhs.uk/links/

A simple explanation of LINKs

www.direct.gov.uk/localinvolvementnetworks

Information about Government policy

www.dh.gov.uk/patientpublicinvolvement

Further information

NCI Guide No. 12 – Governance

www.nhscentreforinvolvement.nhs.uk/linksguides/

Code of Conduct relating to LINK 'enter and view' powers

www.nhscentreforinvolvement.nhs.uk/usefulguidance/