

Local Involvement Networks

What LINKs Mean for: Health and Social Care Commissioners and Managers



“LINKs will make it easier to respond to what communities want”

Background

Links will be set up in England from April 2008 to give communities a stronger voice in how their health and social care services are delivered. Independent networks of local people and groups, LINKs will find out what people want, investigate issues and use their powers to hold services to account.

A brief history

Health and social care professionals know that, if they can find out what communities want they are better able to provide responsive services. In 2006, the Department of Health published plans to strengthen the ability for commissioners and managers to talk to communities by introducing Local Involvement Networks (LINKs).

Up to now, one of the ways that the NHS has talked to patients has been through Patients' Forums. Attached to local Trusts, Forums helped to improve frontline care, but they have also faced barriers.

LINKs will begin to be set up from April 2008. They will build on the work of Forums but they will be open to anyone to join. LINKs will cover all publicly funded health and social care services in an area, no matter who provides them. They will make it easier for people who commission and manage health and care services to talk to communities and find out what they want. LINKs are part of the local accountability and scrutiny arrangements and they will have powers requiring health and social care managers to respond to them. LINKs will also be able to refer matters to Overview and Scrutiny Committees in councils that have social care responsibilities.

Key Points

- Care gets better when professionals find out and respond to community needs. LINKs give more people the chance to have their say.
- LINKs will provide a single system that health and social care services can use to involve communities.
- LINKs will help Primary Care Trusts and local councils build peoples' views into Joint Needs Assessments, local area agreements and all parts of the commissioning process, helping to make sure commissioning is 'world class'.
- LINKs will help Trust Boards, councils and care providers access a wide range of views, helping to develop care pathways, ensure continuous improvement and compliance with Standards for Better Health and duties to consult and involve (Section 242).
- Run by local people and groups, LINKs will ask what people think, monitor the delivery of care and use their powers to hold services to account. Some members of LINKs will be able to visit some places where health and social care services are provided to see how services are delivered and monitor peoples' experiences.

How LINKs will work

The NHS and local government are increasingly working together to decide what health and social care services should be provided and how they should be run. Local people need to shape these services whether provided in hospital, the community or in peoples' homes. LINKs have the potential to:

Provide a single approach to monitoring health and social care

A LINK for every Local Authority with social services responsibilities will be tasked with finding out the views of people in that area and holding the Local Authority, the NHS and providers to account.

Provide a stronger, more independent voice

Not run by any public or Government organisation, LINKs will be truly independent. They will be hosted and supported by a community organisation (called a 'Host') with experience of engaging people.

Be more representative

Expected to ask every section of the community for their views and experiences, LINKs will not only amplify the views of more groups and individuals in the community, they should also provide a platform to those who might not often have their voice heard.

Make community involvement more convenient

Many people who receive health or social care would like to influence services but may not have the time to join groups or sit on committees. LINKs should provide more ways for more people to be heard. Communities should be provided with more opportunities – using the internet, focus groups, events and other mechanisms – to express their views. Those who want to should have the chance to get more involved (for example by giving up time to work on a specific issue or joining a group that governs the LINK).

What will LINKs mean for you?

You are under pressure to deliver services in a challenging environment. With competing interests and limited resources, it can be difficult to prioritise actions to improve the experience of people who use services. LINKs have the potential to help simplify this task. LINKs will result in services having to be much more accountable but they should make having an ongoing dialogue with the community easier. LINKs can help councils and the NHS to build community development into strategies to tackle health inequalities. They can help PCTs deliver World Class Commissioning and they can help providers improve the experience of people who use services. You should begin to plan now about how you will use LINKs to help shape current and future services.

What will LINKs cover?

- LINKs will cover most publicly funded health and social care services – no matter who provides them (NHS, council, private sector or third sector). There are some exceptions such as children's social services.
- To help them with their work, commissioners will be expected to provide LINKs with information when they request it and to respond to LINK reports and recommendations.
- As well as helping commissioners respond to LINKs, providers will also be expected to allow trained LINKs representatives to view services.
- New contracts with private, independent or third sector providers of NHS or Local Authority care will need to reflect these expectations.

What is the role of a LINK?

The role of a LINK is to:

- encourage and support more people to get involved in shaping local care services; from helping to decide what services should be commissioned, to influencing the way they are run;
- actively canvas every section of the community for their views and experiences of local care services;
- provide the community with a mechanism for monitoring and reviewing local care services and the ability to hold them to account; and
- tell those who commission, run and scrutinise local care services, what local people have recommended to help improve services.

Who makes up a LINK?

LINKs are likely to be slightly different depending on the local structures that already exist but they are likely to be made up of:

- people from existing local community and voluntary organisations, carer groups and those who already campaign on behalf of the people who use care services;
- people from different sections of the community including groups which, in the past, have been 'hard to reach'; and

- Interested individuals who want to get involved in different ways, from those who have the time to help lead a LINK, to those who just want to regularly contribute their views .

What are the powers of a LINK?

LINKs will be able to:

- enter and view specific types of premises where services and care are provided;
- ask for information and expect a response within a specific timescale;
- make recommendations and expect a response within a specific timescale; and
- Refer matters to the local Overview and Scrutiny Committee and expect a response.

How will a LINK be set up?

Each Local Authority (with social services responsibilities) will receive funding for LINK activities. Each authority will be expected to contract a 'Host' organisation to establish and support a LINK in the Local Authority area. The LINK will be independent of any government organisation with its own decision making and governance processes. The Host will be accountable to the LINK.

How much money will a LINK get?

The Government will make £84 million available to fund LINKs between 2008– 2011. The amount each area receives will depend on their population and factors such as levels of poverty.

LINKs in Action¹

Responding to community needs

Every three years, a PCT and a Local Authority review the health and social care needs of their local community to make sure that, in the future, they provide the right services. They are keen to make sure that the community agrees with what their research has told them and that they have not missed anything. The local LINK plays a key role in helping the local authority and PCT understand the needs of their community. Through its network of local groups and individuals, the LINK is able to go out and discuss the plans with different sections of the community. Through this outreach approach, the LINK discovers that access to health services is particularly difficult for people with learning disabilities. The LINK is also able to help identify, through discussions with individuals and carers, appropriate solutions. As a result, the PCT and Local Authority plan to improve the use of Health Action Plans, provide training and information for health professionals and increase the take up of routine screening programmes.

¹ These examples are illustrative only.

Social care commissioning

The social care commissioning unit of a council asks the LINK to find out the views of people with physical disabilities who use a day centre about the activities being offered. There have been complaints from carers and families that the activity programme is quite limited and is based on what the staff think the service users want. There is very little engagement between staff and people using the centre. Activities are not well attended and people are concerned that if the centre is 'under-used', it might be closed altogether.

Some people from the LINK who have been authorised to make visits, arrange to go to the centre and talk to people who use the day centre and their families and carers, together with service users who are LINK members. They also find out that other LINKs have looked at this topic and conclude that staff and users have come together successfully elsewhere to agree stimulating and worthwhile programmes of activities. Furthermore, they conclude that the centre has potential to provide facilities and information to empower people to manage their own lives and improve their health and wellbeing. The LINK reports its findings and recommendations to the local authority and the day centre provider. The local authority reviews services with the provider concerned and develops and implements a user engagement strategy. The local authority gives notice that it wishes to vary the contract based on the LINK feedback to ensure that the provider takes appropriate action to ensure active staff/user engagement and the delivery of appropriate services.

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A simple explanation of LINKs

www.direct.gov.uk/localinvolvementnetworks

Lessons from nine 'Early Adopter' projects around England

<http://www.nhscentreforinvolvement.nhs.uk/docs/EAPS%20final%20report.pdf>

Information about Government policy

www.dh.gov.uk/patientandpublicinvolvement