

Making people aware of Local Involvement Networks



About this guide

This guide is part of a series aimed at helping make LINKs successful. This guide is designed to help Local Authorities, Hosts and LINKs publicise the opportunities that LINKs present for local communities to influence their health and care services.

Background

LINKs will be set up in England from 1 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.

Making people aware of LINKs

LINKs need to encourage and support more people to get involved in shaping local care services; canvas every section of the community for their views and experiences of local care services; and provide the community with a mechanism for monitoring and reviewing local care services and the ability to hold them to account. LINKs will be expected to give everyone in the community the chance to have their say and to report back to the community on progress. Making people aware of LINKs will be crucial to their success.

Key points

- There is no 'one size fits all' approach to forming a LINK.
- A 'getting ready for LINKs' working group can help with planning.
- Make every effort to reach beyond those people already engaged.
- Use existing networks to reach smaller organisations and individuals.
- Set out a clear framework for LINKs promotion.
- Map community, voluntary sector and community profiles.
- Identify and communicate with seldom heard groups.
- Establishing good communication and engagement involves trust building, and this can take time.

What is the role of the Local Authority?

Local Authorities with social services responsibilities have a duty to make sure that LINK activities can take place in their areas from 1 April 2008. Local Authority officers and councillors need to promote LINKs across their areas and bring local people and groups together to help plan LINKs. The Department of Communities and Local Government (www.communities.gov.uk), the Local Government Association (www.lga.gov.uk) and the Improvement and Development Agency (www.idea.gov.uk) all provide advice and guidance to councils about communicating with communities, particularly people and groups that have been 'easy to ignore' in the past. Authorities may find it helpful to make use of processes developed through the 'local compact' to achieve this. There is more information about this at (www.thecompact.org.uk).

What is the role of the 'Host'?

Once appointed, the Host organisation has responsibility for engaging with people and organisations in recruiting a diverse and representative group to establish a LINK. So, in order to get things started the Host will need to focus on 'outreach'. There is more information about this on the Communities and Local Government website (www.communities.gov.uk/documents/communities/pdf/151918). Hosts will also play a key role in communicating the ongoing activities of LINKs and the outcomes of those activities.

What is the role of health and social care managers?

Commissioners of health and social care services and the providers of those services need to know about LINKs. Primary Care Trusts (PCTs) and Local Authority social services departments need to be telling the people who provide publicly funded care about LINKs and their powers. Patient and Public Involvement Leads and Patient Advice and Liaison officers in PCTs and NHS Trusts should reach out to management colleagues who need to know about LINKs. They should also promote LINKs to people and groups across their health communities. People working in social care need to promote LINKs to colleagues and also to individuals, carers and families of people receiving social care either in the community or in residential settings. The NHS Centre for Involvement has a dedicated network for people working in PPI (<http://www.nhscentreforinvolvement.nhs.uk/index.cfm?Content=183>).

What is the role of Patient Forum members?

Patient Forums will be abolished on 31 March 2008. Forum members can play a valuable role in the setting up of LINKs by sharing their experience of PPI and they are strongly encouraged to talk to people in their communities about the opportunities that LINKs present for everyone to influence health and social care services. However, it's a matter of personal choice whether former Forum members get involved with LINKs.

Who should LINKs reach out to?

It's important to reach beyond those people who are already engaged in patient, public and service user involvement. Examples of the people that LINKs need to reach are¹:

- self-advocacy groups;
- local support groups;
- black and minority ethnic groups;
- faith groups;
- youth groups;
- social care users and user groups;
- community empowerment networks;
- homeless networks;
- gay and lesbian networks;
- schools and young people's groups;
- residents associations and care home residents;
- representatives from local voluntary and community sector organisations, neighbourhood forums;
- councils for voluntary organisations; and
- local representatives from national charities.

How should LINKs reach out?

LINKs are about providing opportunities for people to share their views about health and social care services in ways that suit them. People will not have to join a committee or belong to any organisation to take part. LINKs need to develop a wide range of creative mechanisms for community engagement and participation. First steps could be to start to think through:

- a community engagement strategy;
- how to reach and involve individuals, groups and communities that have been 'easy to ignore' in the past; and
- how LINKs can promote 'community development' in health and care.

'Community development' is the set of skills which strengthens community participation in local decision making. The National Institute for Health and Clinical Excellence (NICE) has published guidance on community development methods and approaches to health development

(<http://www.nice.org.uk/guidance/index.jsp?action=byID&o=11929>). The Community Development Foundation is a source of intelligence, guidance and delivery on community development (www.cdf.org.uk). The NHS Centre for Involvement is developing a more detailed guide about community development.

Communicating with communities about LINK activities and outcomes is crucial to the success of LINKs. They need to consider how they can best meet the communication needs of diverse communities, particularly when traditional methods can exclude a significant number of people.

¹ This list is illustrative only

To do this you could:

- agree a communications and information sharing strategy;
- develop a range of communication and information sharing mechanisms – how can LINKs provide information to diverse groups at the right time and in the right ways?; and
- find out how other public and voluntary sector organisations communicate with communities – are there existing mechanisms LINKs could tap in to?

The Care Services Improvement Partnership have published guidance about communicating with diverse groups

(<http://www.mard.csip.org.uk/guidelines-and-standards/engaging-diverse-groups/communication.html?keywords=supporting%2520communication>).

An early 'Engagement Plan' and 'Communication Plan' helps to set out a clear framework for LINKs promotion. There are different ways to publicise LINKs, and invite individuals and organisations to engage. These range from holding open public events, workshops, and developing 'easy read' materials, to targeting work with communities and seldom heard groups. There are examples of communication strategies developed through the LINKs Early Adopter Programme

(<http://www.nhscentreforinvolvement.nhs.uk/index.cfm?Content=193>).

Early stakeholder events may give LINK working groups a tangible sense of common purpose. As a first step, they can also bring together the 'known' voluntary and community organisations, statutory organisations and former Patient Forum members, with an 'emerging' broader range of people and local communities. A series of events could be held at different locations and at different times of the day – and events can be aimed at specific interest groups, for example children's health or mental health and learning disability services.

Interest in LINKs can be generated through direct contact with, and presentations to, local voluntary and community groups, district and parish councils, members of statutory organisations, and neighbouring Local Authorities. Publicity and advertising material - such as leaflets, posters, articles in newspapers, banners, websites, bulletins, radio slots, generic presentations, etc are also very useful for provide information that clearly communicates the purpose and values of LINKs.

Mapping the community profile

Mapping community and voluntary sector organisations and building a community profile can be carried out alongside the promotion of LINKs. Sometimes some of this work has already been done by, for example, the Local Council for Voluntary Service or by Local Authorities. But you may have to start from scratch.

Reaching different communities, groups and the 'seldom heard'

When thinking about communicating with seldom heard groups, no automatic assumptions should be made about who or where these groups are. Once LINKs have been able to better identify these kinds of groups, LINKs should find out from them how they would like the LINK to communicate with them. It can be a good idea to use pictures of members of these communities (with appropriate consent) in

promotional literature, so that other people can identify that LINKs are also for them. It's also crucial to provide promotional material in a format and language that will be understood by the intended audience.

It is very important to promote shared understandings and the feeling of being welcome in a LINK, and be proactive for particular organisations – for example race equality councils and black and minority and ethnic groups. Community leaders and faith groups can also help to communicate about LINKs.

The experience of disabled people, people with learning difficulties and people with mental health conditions is a significant resource, so make it clear their experience and knowledge is valued. Think through the implications of your promotional programme so that any venues can meet all access requirements. Disability Discrimination Act compliance can mean many things. A ramped entrance that is a five minute journey by wheelchair from a meeting room is not accessible. Similarly, if toilets for disabled people are remote from a meeting space, then they are not accessible.

The Care Services Improvement Partnership have published guidance about communicating with diverse groups (<http://www.mard.csip.org.uk/guidelines-and-standards/engaging-diverse-groups/communication.html?keywords=supporting%2520communication>).

Potential challenges

Promoting LINKs across communities can be challenging whether you are in a compact urban area with a diverse or transient population or a large rural area where communities are spread out. Reaching out and involving people is an ongoing task. Good communication and engagement is often a trust building exercise carried out over longer timeframes.

Involving people with a variety of backgrounds and abilities in LINKs may be challenging but it is very important and ultimately very rewarding. So attempt to ensure that the effectiveness of communications and engagement is monitored on an ongoing basis; capture feedback from target audiences, and factor this into your future strategy.

Decision making in the LINK

As a first step, it's likely that many participating groups, organisations and individuals – including former Patient Forum members – involved in the set up phase, may have experience in communicating with local groups and individuals on health and social care issues, and will be able to share good practice and learning. An initial working group can help with the development of LINKs engagement and communication strategy planning, and early practical tactics. However, this group must also plan to reach out to bring in many others and involve them in LINKs governance. Some principles to consider are:

- removing barriers to participation in the way LINKs work;
- involve a diverse range of service users, patients and carers in the LINK;
- build community development approaches in to the way LINKs work;

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- be creative and innovative in the way LINKs reach out to communities;
- learn from 'experts by experience' rather than 'representative views'.

Why should people get involved?

Many people already give up their time to help improve services for their community. LINKs can build on this work to make sure that the needs of the community are not neglected. For the first time, through LINKs, people in local communities will have a tool to help shape all the health and social care services in their area. Until now, lots of people and groups have been excluded from involvement. LINKs, because they have to represent the whole community, will help change this. Individuals and organisations will be able to take part in LINKs with the common purpose of improving services and influencing key decision makers.

Promoting LINKs in practice²

After establishing a LINKs working group, form a communications and engagement subgroup responsible for setting, monitoring and evaluating objectives on an ongoing basis in line with local needs. The subgroup can prioritise those groups and people that the LINK needs to reach and plan how to reach them and within what timescale. The group can identify key networks and communications channels to enable effective contact with groups, individuals and stakeholders. Communications can be through a 'cascade' approach, using existing networks and communications channels to reach smaller organisations or individuals. Then establish mechanisms to enable that stakeholders, people and groups can contact the LINK. Ensure effective monitoring of communications and engagement activity. Agree and distinguish between different communication needs – those needing in depth regular information and those needing less frequent, less detailed information. Where possible, create long term media relations opportunities.

Contact us

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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>

The Department of Health has published documents that provide information and guidance about contracting a host
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_077266

² This example is based on a real scenario but is for illustrative purposes only

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The Local Involvement Network Regulations 2008

http://www.opsi.gov.uk/si/si2008/uksi_20080528_en_1

Information about Government policy

www.dh.gov.uk/patientandpublicinvolvement

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