

Local Involvement Networks

# Bulletin



Issue 14 – June/July 2008 Gateway ref: 10227

## About this bulletin

### Welcome to the Local Involvement Networks (LINKs) Bulletin

This bulletin has been developed to help keep you up to date with the latest developments for LINKs. It is produced by the NHS Centre for Involvement on behalf of the Department of Health.

This publication will be of particular interest to:

- LINK participants;
- voluntary and community sector organisations;
- Host organisations who are supporting LINKs;
- health and social care professionals;
- local government staff working on user involvement and the setting up of LINKs;
- members of Health Overview and Scrutiny Committees; and
- health and social care regulators.

Please feel free to circulate this bulletin to colleagues, display it on relevant notice boards or publish it on your internal intranet sites.

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## Voice piece

**Sarah Connelly, Policy Lead, Department of Health, explains why a Code of Conduct is necessary for LINKs' visits**

As most people involved in LINKs know, the law enables authorised LINK representatives to enter certain care services to see them at work.

The Government put this ability in place because one of the roles of a LINK is to check how services are being delivered. A role they would find hard to fulfil if they could not see for themselves how a service is run and talk to the people who use it. Nonetheless, with this ability comes responsibilities that everyone needs to understand and risks that need to be guarded against.

Because of the potential for visits to impact on patients' rights, their safety and the smooth delivery of care, legislation already puts in place strong safeguards. However, to make clear how a visit should be carried out, a Code of Conduct for LINKs' visits has been published.

Prepared by the Department of Health, this document has been informed by both best practice, as well as the views of those who use and provide services.

Designed to be used by both LINKs' representatives and service providers, the Code aims to ensure that the rights of service users and staff are respected, encourage a spirit of openness and partnership, and support a constructive relationship between a LINK, a provider and the community.

LINKs need to be able to visit services to gather the information they need but these visits should be proportionate and reasonable. This Code, if used as a guide, should help achieve this balance.

## News in brief

### Code of practice published

A 'Code of Conduct' for LINKs' visits has been published.

The document sets out the principles and practical considerations relating to LINKs' ability to enter and view certain health and care services.

The Code:

- explains the legal responsibilities and duties;
- sets out good practice in terms of preparing for a visit;
- provides advice for authorised representatives at the time of their visit (including conduct); and
- covers what LINKs should consider once a visit has finished (including how to share information).

The Code can be downloaded at:

[www.nhscentreforinvolvement.nhs.uk/links](http://www.nhscentreforinvolvement.nhs.uk/links)

### Regional event update

To find out what LINKs wanted in terms of future support and guidance, a series of regional events have been held.

Largely attended by Host organisations, the nine events were run by Care Services Improvement Partnership (CSIP) in partnership with NCI.

The events also provided an opportunity for Hosts to hear about the Code of Conduct.

A number of themes emerged from the events, including the desire for guidance.

Hosts welcomed the guidance documents already available on the NHS Centre for Involvement website ([www.nhscentreforinvolvement.nhs.uk/linksguides/](http://www.nhscentreforinvolvement.nhs.uk/linksguides/)).

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In particular, there were requests for central guidance on the following:

- working in the world of social care – understanding social care policy and priorities and engaging with people currently using social care services;
- models of community engagement – especially reaching people who do not usually have a strong voice;
- an induction pack for LINK members;
- accredited training packages;
- performance management – of the Host (by the LINK), the Local Authority and the LINK;
- more guidance on governance; and
- working across Local Authority boundaries.

Information from the events will inform the next phase of Government funded advice and support for LINKs.

Every region will continue to meet in the future to share thoughts, ideas and learning. These regional networks will be facilitated by CSIP. A report from the events will be shared with LINKs.

### Engaging people and communities

A number of Government initiatives, including LINKs, have been put in place to engage more people and communities in healthcare.

To help NHS professionals implement these policies, a guide called 'Taking the lead – engaging people and communities' has been published by the Department of Health. A national conference for NHS leaders was held on 8 July.

The document includes information on a range of projects, from information prescriptions to the new NHS duty to involve.

To download the guide or to access information about the conference, visit [www.dh.gov.uk/ppe](http://www.dh.gov.uk/ppe).

### Get involved – NHS Constitution

As part of the wider review of the NHS, a draft Constitution for the NHS has been published.

The Constitution covers a set of principles and values which should guide everything the NHS does. The document also explains the responsibilities of public, patients and staff. The document also sets out certain rights and pledges to the public so everyone knows what they are entitled to, and what to do if they do not get what they should.

Included in the rights is the right of people to have their say in the planning and development of local services – which means the local NHS should reflect what communities think is important.

This consultation invites comments from everyone who pays for, uses or works in the NHS. Specifically, the Government want to know Is the constitution clear? Do you agree with the approach it takes? How can the NHS use it to improve services?

To have your say, email [nhsconstitution@dh.gsi.gov.uk](mailto:nhsconstitution@dh.gsi.gov.uk) or write to NHS Constitution, Rm 611a Richmond House, 79 Whitehall, London, SW1A 2NS. There will be consultation events running all over England – details of which you can find out about from your local NHS.

To find out more visit [www.dh.gov.uk/consultations](http://www.dh.gov.uk/consultations).

## You ask

### What information do LINKs have to collect for annual reports?

Each LINK has to submit a report every year to the Secretary of State for Health and so it is important that LINKs ensure that they are collecting the information they need from the day they start work.

The legal Directions for LINKs set out what must be included in a report, although LINKs are free to enclose additional information and learning if they wish.

Each annual report must provide factual information about its key personnel, its host organisation and its finances, as well as information about the activities it undertook to fulfil its statutory functions and relating to its powers as set out in the regulations.

For example, factual information about Host, finance and key personnel would include the amount of money made available to the Host by the Local Authority to support LINKs' activities in that financial year.

An example of information on activities it undertook to fulfil its statutory functions would include any work a LINK has done to promote and support the involvement of local people in the commissioning, provision and scrutiny of local care services.

Information about the use of LINKs' power would include how many requests for information it made, and to whom.

Host organisations should ensure that they have read the Directions and understand the information they should be collecting.

The 'Directions on Matters to be addressed in Local Involvement Network Annual Reports 2008' are available by visiting [www.lx.nhs.uk](http://www.lx.nhs.uk) or [www.dh.gov.uk/links](http://www.dh.gov.uk/links).

## You share

**Jane MacFarlene, LINK Support Manager for Cumbria CVS, Host to Cumbria LINK**, explains what the organisation has achieved so far

Cumbria's large geographical area and sparse population make it a very different county from many others in England with the economic and social fortunes of its inhabitants varying significantly. While the Eden Valley, for example, is prosperous and people generally lead healthier, longer lives, the west of the county is in economic decline and suffering from increasing unemployment – partly through the decommissioning of Sellafield. Poor road networks are a problem and major cultural differences are evident throughout Cumbria since, historically, the main populated areas are remote from each other.

"It is essential that our LINK addresses those cultural differences," says Jane. "CVS has five offices spread throughout Cumbria and this gives us really good knowledge of the county and the potential to provide an effective outreach for our LINK. We have also already undertaken a lot of developmental work with the local community. Data on voluntary organisations is comprehensive, so we are off to a flying start!"

CVS started promoting the Cumbria LINK through existing networks from day one, 1<sup>st</sup> April. It has been working closely with the transitional LINK Steering Group and local consultants, Wingspan, have been providing support by scrutinising its

consultation process, which is already underway.

“We have identified the key stakeholders and are using the local Third Sector Infrastructure Forum to contact the hard to reach groups,” says Jane. “The range of these is surprising – people living in isolated rural areas, older people, the traveller population and a lot of Eastern Europeans, which are new to us. The working age population can also be difficult to engage with.”

CVS has already sent out a questionnaire to its key stakeholders. This posed six questions, centring on matters such as what their expectations were, what they hoped the LINK would achieve, what structures were already in place for PPI and who should be involved in drafting the LINK’s terms of reference.

“The feedback was good,” says Jane. “There was general agreement that the LINK needs to make a real difference to people’s lives in Cumbria by representing the voice of its population and reflecting the diversity of needs across the county. It was also felt that the network needed to work on a number of levels to shape strategy, policy and priorities in health and social care, reflecting the experience of people who use service to inform operational policy and support and empower individuals and communities.”

CVS has been promoting the new LINK through various events throughout Cumbria, the Cancer Support Network, General Practice managers and patient panel members in acute hospitals.

“Good working relationships will be the making of the LINK,” says Jane. “We will be listening closely to what people say they want from it. We want the Cumbria LINK to be truly owned by the people of Cumbria.”

## In focus

**Community Development (CD) can help LINKs meet their remit to encourage and enable a greater range of people to influence the commissioning and provision of health and social care – Brian Fisher, GP and PPI Lead for the NHS Alliance, explains how**

Community development clearly complements the key purposes of LINKs since its aim is to strengthen people’s motivation and ability to work together to overcome disadvantages and achieve benefits for themselves and others. This applies when they are working directly in their own groups and organisations as well as through interaction with public authorities. It does this by bringing people together in groups, helping the groups grow and become more effective, helping them form networks and alliances, supporting community representatives in decision-making forums and advising professional agencies on how to understand and respond to their users’ collective needs and wishes.

In a survey taken in March 2006, 76% of people said they had never been asked for their views on health services and 68% did not know how to feed in their views. This may reflect a reluctance on the part of some health professionals to share power, coupled with a fear that wide involvement will create demands that cannot be met.

Community Development (CD) is designed specifically to overcome these kinds of problems. It actively tackles the divisions, social exclusion and discrimination that deter some people in communities from participating in activities and decision making. It also works with public authorities and

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agencies to help them understand and engage with the communities they serve.

Local Authorities, other public agencies or voluntary and community organisations usually employ CD workers who carry out this work. LINKs should check whether there is a local CD network that they can tap into. Alternatively, they might consider helping to start one. For more information see [www.cdf.org.uk](http://www.cdf.org.uk).

### Working together

LINKs should work with CD workers and local people to influence PCTs and establish priority tasks for them. These tasks should align with the health and participation targets set out in the Local Area Agreement (LAA).

LINKs can also encourage PCTs to:

- have CD representation on the PCT Board, Management Team and the Professional Executive Committee (PEC);
- employ CD health workers of their own or pay for health agencies to employ them;
- develop a CD strategy in cooperation with the Local Authority;
- ensure that CD underpins Patient and Public Involvement (PPI) work across the range of PCT activity; and
- have other health workers such as Health Visitors and District Nurses trained in CD methods.

LINKs should ensure that every general practice or cluster knows and links with any local community development workers, and with the local voluntary and community sector (VCS). They should also advise on funding of the VCS by health bodies, ensuring that agreements include user participation.

### Issues for discussion

There are a number of key issues which LINKs should advise commissioners to discuss with their populations. These include:

- the issues to be prioritised by the practice-based commissioning (PBC) group;
- how patients perceive the relative convenience/problems of existing services and clinical pathways;
- the design of new approaches;
- how to spend savings made by PBC; and
- how to guarantee and measure quality from the patient viewpoint.

LINKs can also play an important role in collecting evidence and local testimonies of the beneficial health effects of CD and using these to champion the case for wider investment in CD by health agencies.

### Reference

NHS Alliance and National Association of Practice Participation Groups (NAPP), *Effective practice-based commissioning: engaging with local people*. See [www.napp.org.uk](http://www.napp.org.uk)

### Further information

Information on CD training is available from the Federation for Community Development Learning ([www.fcdl.co.uk](http://www.fcdl.co.uk))

A publication called '[Mental Health Policy Implementation Guide - Community Development: Workers for Black and Minority Ethnic Communities](#)' provides an example of how CD is being applied in the field of mental health. To download visit [www.dh.gov.uk/publications](http://www.dh.gov.uk/publications)

A report called '[The Community Development Challenge](#)' looks at the current state of CD and assesses what steps might be necessary to raise its profile and effectiveness. To download the report visit:

Other material on community development is accessible via [www.cdf.org.uk](http://www.cdf.org.uk) and [www.cdx.org.uk](http://www.cdx.org.uk).

## Further information

To get advice and support on establishing LINKs call: 024 7615 0266 or visit: [www.nhscentreforinvolvement.nhs.uk](http://www.nhscentreforinvolvement.nhs.uk).

To find out more about LINKs policy visit: [www.dh.gov.uk/links](http://www.dh.gov.uk/links)

To access more Patient and Public Involvement resources visit: [www.library.nhs.uk/ppi](http://www.library.nhs.uk/ppi).

## Contact us

### Help shape this bulletin

We welcome your ideas and comments that will shape the format and content of this bulletin in the future. This bulletin is published on a monthly basis. Please email: [info@links.nhs.uk](mailto:info@links.nhs.uk) or contact the NHS Centre for Involvement on 024 7615 0266.

**Please note** – there will be no August issue of this bulletin and the September issue will be available from the beginning of that month.