

Adult Social Care and Health Overview and Scrutiny Committee

7 December 2011

**Shaping Local HealthWatch in Warwickshire
– Progress Report**

Recommendations

The Adult Social Care and Health Overview & Scrutiny Committee is requested to:

- (1) Note the current position and plans around the development of local HealthWatch in Warwickshire
- (2) Comment on the proposed timescales for the development of local HealthWatch in Warwickshire
- (3) Comment on the stakeholders' feedback in relation to the role of local HealthWatch in Warwickshire
- (4) Give further consideration to the arrangements for establishing local HealthWatch at its meeting on 15 February 2012

1.0 Background

- 1.1 The Health and Social Care Bill currently making its way through Parliament, makes provisions for the establishment of HealthWatch England and subsequent local HealthWatch organisations. Both establishments will be a “consumer champion” for care users and promote better outcomes in health for all and in social care for adults – locally and nationally.
- 1.2 At the national level, the Bill proposes HealthWatch England to be a statutory committee within the Care Quality Commission, which will:
 - Be independent of Government through being a committee of CQC
 - Provide leadership, guidance and support to local HealthWatch organisations
 - Be able to escalate concerns about health and social care services raised by local HealthWatch organisations
 - Provide advice and information to the Secretary of State, NHS Commissioning Board, Monitor and the English local authorities
 - Present an annual report to Parliament
- 1.3 Local HealthWatch will act as a point of contact for individuals, community groups and voluntary organisations around their experiences of health and

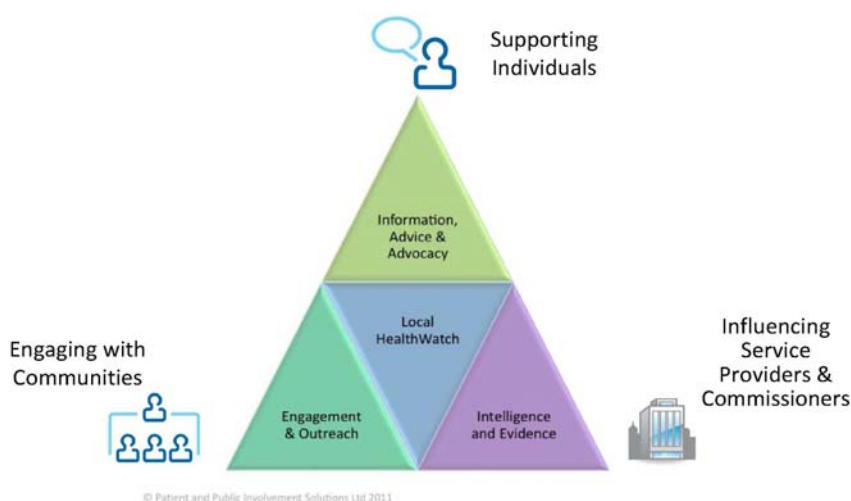
social care. It will influence local commissioning decisions by representing the views of local stakeholders at the Health and Wellbeing Board and influence national policies by informing HealthWatch England about the views and experiences of local people. The specific role of the new service will be to:

- Collect and analyse consumer feedback on local health and social care
- Give consumers a chance to suggest ideas to care professionals that may help improve services
- Investigate specific issues and concerns and make recommendations to care professionals
- Provide information and support to individuals to help them make choices
- From April 2013, provide independent support to people who wish to make an NHS complaint

2.0 Current Position and Plans

- 2.1 Department of Health Guidance highlights the importance of continuity in service provision and thus a smooth transition between the current Warwickshire Local Involvement Network (LiNK) contract and new local HealthWatch arrangements is expected. However, local HealthWatch organisations are required to fulfil additional functions, roles and responsibilities that are not currently provided by Local Involvement Networks. Additionally, local HealthWatch will be a body corporate, able to employ its own staff. This means that unlike LiNKs it will need to be appropriately established in order to have its own legal identity. Therefore, a different model has to be considered to deliver local HealthWatch functions effectively.
- 2.2 There are three main functions of a local HealthWatch, and they can be summarised in the form of a triangle.

HealthWatch Triangle



- 2.3 Warwickshire County Council will have the responsibility to make sure Warwickshire has an effective Local HealthWatch organisation from October 2012. A transition project, leading to the development of viable options for the new service, has been led by the Localities and Partnerships Team which since May 2011 has made significant progress and has been successfully engaging with what is known as the Warwickshire HealthWatch Transition Team, a group of representatives of key stakeholder organisations and groups in the county, including NHS Warwickshire, Local Involvement Network (LINK) members, voluntary and community sector, Adult Social Care services and care users. The outcome of this work is a robust transition plan and communication strategy which in July 2011 received pathfinder status from the Department of Health. The aspiration is that through the Pathfinder Scheme Warwickshire residents will be able to benefit from the new service in its shadow form earlier than in other areas prior to its statutory delivery date in October 2012.
- 2.4 In order to deliver on this ambition, an extensive and thorough engagement process with all stakeholder groups and the public has been undertaken since May 2011. The engagement activities included a number of meetings, 2 surveys launched back in June, 4 focus groups with LINK members, voluntary and community sector representatives, front line social care and NHS staff and care users. We also held a very successful stakeholder event on 7 October 2011, during which the future shape of Warwickshire HealthWatch was discussed in more detail.
- 2.5 As a result of these activities, the following core principles of the future shape and function of Warwickshire HealthWatch (WHW) have been identified:
- (1) WHW should be impartial and trusted in the local community. It will be commissioned and performance managed by the Local Authority in such a way as to preserve its ability to independently carry out its functions, and the County Council as the funder will support its development as an independent organisation which is able to add real value to the decisions that are made about health and social care services on behalf of local residents.
 - (2) The structure of WHW must be simple and its activities focussed. WHW will be able to demonstrate high quality prioritising and decision-making through the use of clear processes and an evidence base not influenced by the vested interests of other organisations, groups or individuals.
 - (3) WHW must be a well-managed high quality organisation with knowledge and integrity at its core. It must have a strong, visible and respected leadership. Those involved in its leadership will have clearly defined roles and responsibilities and be held to account for their performance. They will have appropriate skills, knowledge and experience to ensure WHW is able to reflect and meet the needs of all residents across the areas it covers.
 - (4) WHW must be well-known. It will have a high profile supported by a clear brand and identity that makes it as easy as possible for people to find it and access its services. The name HealthWatch will be recognised as having a national identity, but locally it will be made clear that social care is within its remit.

- (5) WHW should be inclusive of all sections of the community, it should be a representative voice of the population it will serve. It will champion and support local patient and user groups and it will avoid structures that make it harder for people to become involved.
- (6) WHW must be recognised as a single point of access to information and support to access health and social care services, the statutory route for the public, patients, service users and carers to express views and/ or seek advice about health and care.
- (7) WHW will work effectively with other statutory organisations, supporting and influencing them in their decision making in relation to planning, improving, or commissioning care services. It will have consistent representation on partnerships influencing policy and service change locally. It will be a recognised part of the Health and Wellbeing Board with a significant contribution to the Joint Strategic Needs Assessment (JSNA) and will do this through the presentation of intelligent and robust data and evidence.
- (8) WHW will have a good understanding of local voluntary and community groups and organisations, with whom it will cooperate to improve care and health outcomes for Warwickshire residents.
- (9) WHW must reach out to those groups and individuals who want to contribute and allow them to express their aspirations and views.
- (10) WHW should effectively coordinate engagement activities around care services, so that it is able to provide robust, accurate and timely information in relation to its performance, good and bad practices and the needs of the local population.
- (11) WHW will have a robust recruitment process in place for its staff and volunteers, it will provide robust training to them and will manage their activities effectively which will enable care users have their voices heard and make appropriate choices in relation to their care needs.
- (12) From April 2013, WHW will provide quality advocacy services and will be clear about the level and type of support it will provide to ensure best outcomes for care users.

2.6 Those who responded to the engagement discussion around the future shape of Warwickshire HealthWatch have clearly described aspirations for the new organisation as one that could co-ordinate the provision of advice, support, information, engagement and advocacy. Its services would be locally accessible, free and impartial. It will have effective governance to ensure it can deliver services of the highest quality. It will develop a strong sense of corporate identity and have a clear and sustainable business model that will enable it to deliver work that goes beyond the proposed immediate HealthWatch functions.

2.7 To achieve these aspirations a contract specification is being created in such a way as to encourage partnerships and creativity. As the commissioner of Local HealthWatch, Warwickshire County Council will need to stimulate the market by further engagement with potential providers and support them in the establishment of a shadow form of Warwickshire HealthWatch. Overleaf is the proposed timetable for the implementation of the shadow HealthWatch.

ACTIONS	TIMESCALES
Possible legal and procurement structures/ models for WHW determined	December 2011
Draft service and contract specification	December 2011
Finalised service and contract specification	January 2012
Procurement commencement	February 2012
Shadow HealthWatch established	July 2012

The above is an indicative timeline; dates are subject to potential delays in democratic and procurement processes as well as confirmation of funding from central Government.

- 2.8 As it is expected that Warwickshire HealthWatch will deliver on a number of functions, it has been necessary to explore various models for this new corporate body. The fact that it must be a corporate body in itself suggests a wide variety of structures each of which has its advantages and disadvantages. It appears that the most suitable format due to its object being for the public benefit will be either a charitable company limited by guarantee, or a community interest company, or a social enterprise. However, in addition to the actual legal organisational model, a partnership arrangement has to be considered in relation to the delivery of the multiple services Warwickshire HealthWatch will be required to provide via as many access routes as possible. It is unlikely that there is currently a single supplier who could meet all of these requirements. Further time is needed to consider The range of models that might be available and appropriate, and advice will then be sought from the County Council's Legal and Procurement Services, with a view to a comprehensive proposition report being considered by the Cabinet in early 2012.

3 Key risks and issues for consideration

- 3.1 Funding for local HealthWatch will be provided for local authorities in the same way as for LINKs, i.e. as part of a Government formula grant, to enable them to tender for the service. Although there are indications that there will be extra funding provided additionally to that currently available to LINKs, the level of it is yet to be determined. The Department of Health has conducted a consultation to determine the level of additional funding allocation to be made available to local authorities, outcomes of which should be known early next year.
- 3.2 There is also an issue of transfer of funds from the existing Primary Care Trust's Patients Advice and Liaison Service (PALS) to cover for the signposting and advice element of HealthWatch's service. This is being currently considered in conjunction with the Health Transition Strategic and Delivery Teams, led by the Health Transition Finance Manager.

- 3.3 Another issue which relates to the actual function and remit of Warwickshire HealthWatch is that current proposals risk ignoring the voice of child social care users. The Health and Social Care Bill sets out plans to establish local and national HealthWatch organisations to gather views of patients and use their feedback to promote better outcomes in health for all and in social care for adults only. Similarly to the above, the Bill does not include provision of advocacy support services to social care users, but requires local HealthWatch organisations to provide advocacy services only to patients of the NHS.
- 3.4 It has been made clear throughout the engagement process and a high level Equality Impact Assessment that there is a need to ensure close coherence with advice, information and advocacy arrangements secured through adult social care.
- 3.5 Finally, it is uncertain how the local market will respond to the commissioning process, and whether it will establish an appropriate local HealthWatch provider for Warwickshire. Therefore, it is imperative that the Localities and Partnerships Team produces a quality service and contract specification and works closely with stakeholders to ensure its sound development and performance.

4 Conclusions and Next Steps

- 4.1 There is a clear desire among all stakeholders, including the public, for a high quality local HealthWatch provider which will have an influential role of a **coordinator** of the care engagement activity, an **assessor** of local needs, an **arbiter** who provides a robust and accurate argument and data and a **conduit** between the local population and the local and national decision and policy makers.
- 4.2 In order to achieve this ambition and ensure best outcomes in health and social care for all in Warwickshire, the Committee is asked to give its views on the approach to establish Warwickshire HealthWatch, as specified above, and to consider the above recommendations and proposals.

Background Papers

1. HealthWatch Transition Plan – Department of Health. March 2011:
http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_126325.pdf

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