
Meeting: Social Care, Health and Housing Overview and Scrutiny Committee
Date: 10 September 2012
Subject: BEDFORDSHIRE LINK Report
Report of: Operations Manager, Bedfordshire LINK (covering Central Bedfordshire)
Summary: The report is to update Members on the key work items and issues the LINK is engaged with for consideration and information as required.

Advising Officer: Bob Smith (LINK Chairman) and Charlotte Bonser (LINK Host)
Contact Officer: Charlotte Bonser
Public/Exempt: Public
Wards Affected: All

CORPORATE IMPLICATIONS

Council Priorities:

1. Promote health and wellbeing and protecting the vulnerable;
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Financial:

2. Not applicable.

Legal:

3. Not applicable.

Risk Management:

4. Not applicable.

Staffing (including Trades Unions):
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5. Not Applicable.

Equalities/Human Rights:

6. Not applicable.

Public Health

7. Not applicable.

Community Safety:

8. Not applicable.

Sustainability:

9. Not applicable.

Procurement:

10. Not applicable.

RECOMMENDATION:

The Committee is asked to consider and comment on the report as appropriate.

Background

11. The LINK report is an update on work items in progress or issues that have come to light over the course of the last year; the findings of which will be passed to Healthwatch.
12. The report looks at LINK progress on organising visits to the six care/nursing homes in Central Bedfordshire and provides feedback on the visit to the Coronary Care Ward at Bedford Hospital. The report also outlines the need for further clarification on local commissioning and patient choice and an update on LINK involvement in the transition to Healthwatch.

Progress with visits to care/nursing homes in Central Bedfordshire

13. The LINK is presently in the process of arranging visits to the six care/nursing homes in Central Bedfordshire, which has proved quite challenging in terms of making contact with the homes and clarifying the roles and responsibilities of the LINK in comparison to the role of the Care Quality Commission and the Council's Compliance Team.
14. The LINK has assured the homes that it is undertaking the visits purely from a layman's perspective and not as inspectors. It has also been made clear that we are looking at all aspects of the residents/carers experience and will comment on positive findings as well as on areas that may need improving. Because the LINK has had a great deal of time to prepare for the visits, members are confident in the task ahead and about their role, code of conduct aspects and reporting back procedures. The procedures followed to book the visits are very clear involving a telephone call to the home followed by written confirmation, further information about the LINK and a poster for the home to notify all at the home of the impending visit.
15. Three visits have now been confirmed, and we intend to complete six visits by the end of September. The first visit takes place on 17 August.

LINK Findings from visits to Bedford Hospital Coronary Care Ward

16. The first of the LINK visits to Bedford Hospital, Coronary Ward (Godber) received a good report from visiting members. This is an extract from the report:

“a caring, well-run unit, where the needs of the patient are seen as paramount. One can only commend the staff, medical, nursing and ancillary for performing a difficult job during trying times and doing it with such professionalism and diligence.”

It was good to note that attention is paid to ensuring patients have water at easy reach at all times and that patients commented on their satisfaction with the food in hospital. The report will now be checked for factual accuracy and then will be available to the Committee and for public consumption. The next visit planned is to the orthopaedic ward at Bedford Hospital.

Patient experience of patient choice and local commissioning

17. The LINK has been logging issues to do with pain clinics and ear, nose and throat referral where patients in Central Bedfordshire, (West Mid Beds/Leighton Buzzard in particular) , have tried to access patient choice in terms of where they receive treatment for a particular condition. In some instances patients have been told by their GPs that they can only access treatment from a particular clinic because of local commissioning arrangements.
18. LINK would like to understand the guidance underpinning the various practice based commissioning groups who operate within each locality concerning commissioning of services. In particular the LINK would like to understand guidance relating to collaboration with neighbouring commissioners to meet the promise of patient choice as set out in the NHS constitution.
19. The LINK has therefore written to John Rooke as Chief Executive to the Bedfordshire Clinical Commissioning Group seeking guidance on this issue.

An update on LINK involvement in the transition to Healthwatch

20. The progression towards creating a Central Healthwatch has moved on fairly rapidly over the last few months as there is a move to create a Shadow Healthwatch in line with the Local Authority's/LINK status of being a Healthwatch Pathfinder area. The LINK has worked closely with the Council on many aspects of this process.
21. The LINK has been involved in the Healthwatch Transition Steering Group for some months now, given feedback to capture LINK legacy, and has contributed to discussions at both the Council's Seminar on scrutiny development for health and social care supported by the Centre for Public Scrutiny and the recent stakeholder event looking at the operating models for Healthwatch.
22. The draft report following the 360 degree review of LINKs through questionnaires to the LINK Board, LINK membership and key stakeholders is being finalised. LINK Board members recently met with the Healthwatch Interim Lead, Sharon Ward to ensure that the draft report had captured the key points of what they felt should not be lost from the LINK structures and processes.
23. The HealthWatch Transition Steering Group meets at the end of August to commence producing the specification for the Central Bedfordshire Healthwatch.

Appendices:

None

Background papers and their location (open to public inspection):

None