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**Meeting:** Social Care, Health and Housing Overview and Scrutiny Committee  
**Date:** 21 January 2013  
**Subject:** Approach to establishing Healthwatch Central Bedfordshire  
**Report of:** Cllr Hegley, Executive Member for Social Care, Health and Housing  
**Summary:** The report proposes an approach to establishing Healthwatch Central Bedfordshire as the local consumer champion for people who use health and social care services.

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**Advising Officer:** Julie Ogley, Director of Social Care, Health and Housing  
**Contact Officer:** James Robinson-Morley, Commissioning Manager for Long-Term Conditions and Planned Care  
**Public/Exempt:** Public  
**Wards Affected:** All  
**Function of:** Council

## **CORPORATE IMPLICATIONS**

### **Council Priorities:**

1. Promote health and wellbeing and protecting the vulnerable by creating Healthwatch Central Bedfordshire as the consumer champion for people using local health and social care services.

### **Financial:**

2. Base budget and Department of Health funding has been identified to support Healthwatch from 2013-15. The Council will assess the suitability of the proposed new company to effectively deliver the functions of Healthwatch and effective financial management by compliance with Charity Commission regulations.

### **Legal:**

3. The Council's legal obligations are outlined in the text of the report. The proposals reflect the provisions of Part 14 of the Local Government and Public Involvement in Health Act 2007 as amended by the Health Services and Social Care Act 2012. The Government has recently made regulations which specify a number of criteria that must be met by Local Healthwatch Organisations. It will be important to ensure that Healthwatch Central Bedfordshire matches these criteria.

### **Risk Management:**

4. The following risks have been identified:
  - Failure to discharge statutory responsibilities
  - Failure to identify and respond to the needs of the local community

- Failure to deliver the vision of Healthwatch Central Bedfordshire
- Failure of collaborative working
- Lack of community engagement
- Risk of service/supplier failure
- Financial risks, including continuity of funding.

These risks have been identified and appropriate mitigating action will be taken.

**Staffing (including Trades Unions):**

5. Healthwatch is to be a new legal entity which will continue functions carried out by LINK in addition to new responsibilities. TUPE regulations for relevant transfers apply when a business or undertaking or part of one transfers to a new employer or when a service provision change takes place. The employees employed by the current employer automatically become employees of the new employer when the transfer takes place. The employees affected have the right to be informed and consulted about these changes.

**Equalities/Human Rights:**

6. Public authorities have a statutory duty to advance equality of opportunity, eliminate unlawful discrimination, harassment and victimisation and foster good relations in respect of nine protected characteristics; age disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. National research demonstrates that health experiences can vary across a range of protected characteristics.
7. As part of the development of a service specification for Healthwatch an equality impact assessment has been developed. This has concluded that the specification recognises the need to promote equality and diversity to enable all service users and their representatives, irrespective of age, gender, disability and other protected characteristics to use this channel to voice problems and suggestions for improving the care they need and receive.
8. Equality and diversity requirements were considered to be well documented in the specification to ensure that the service is culturally sensitive and appropriate to the diverse needs of service users and flexible enough to meet the requirements of different people. It also has a focus on improving and widening accessibility, especially for hard to reach groups, through the use of a range of accessible routes including social media, internet, telephone and face-to-face mechanisms.
9. Consideration may need to be given to ensure mechanisms for data gathering and performance monitoring effectively track the involvement and outcomes for groups of people with protected characteristics, as well as geographical monitoring to ensure representative involvement from urban and rural areas. This would provide the necessary assurance that the local Healthwatch remains a representative voice of Central Bedfordshire residents.

## Public Health

10. Healthwatch will play a key role in gathering patient experience data and representing the health concerns and experience of local people. Healthwatch will have input into the refreshing of the Joint Strategic Needs Assessment for Central Bedfordshire to ensure that the health and wellbeing needs of local residents are identified.

## Community Safety:

11. Not Applicable.

## Sustainability:

12. Not Applicable.

## Procurement:

13. An approved waiver will be sought stating the reasons for the approach being taken, as outlined in the text of this report.

## RECOMMENDATION(S):

### The Committee is asked to:-

1. **Consider the approach to creating Healthwatch Central Bedfordshire as outlined in this report.**
2. **Consider co-opting a representative of Healthwatch Central Bedfordshire on to the Committee as the Local Involvement Network (LINK) will cease to exist from April 2013.**

## Background information

14. The Health and Social Care Act 2012 aims to expand and develop patient and public involvement in health and social care. Nationally, Healthwatch England has been established to give a national voice to the key issues that affect people who use health and care services. In April 2013, local Healthwatch organisations will be set up across the country to ensure that the public and service users have a voice that influences health and social care services. Through the network of local Healthwatch organisations, Healthwatch England will make sure the voices of people who use health and social care services are heard by the Secretary of State, the Care Quality Commission, the NHS Commissioning Board. Upper tier local authorities will be under a statutory duty to establish a local Healthwatch organisation as an effective replacement for the existing Local Involvement Networks (LINKs) from April 2013.
15. The main differences between LINKs and Healthwatch will be:

LINKs	Healthwatch
Influence local services	Participate in decision making via the Local Authority and Health And Wellbeing Board
Focus on community voice	Provide information and signposting to individuals in addition to a focus on community voice

Local voice	Local voice and also a national voice through Healthwatch England
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16. Under the Act, the Council will also have responsibility for commissioning Independent NHS Complaints Advocacy from 1<sup>st</sup> April 2013. In the first instance, Independent NHS Complaints Advocacy for Central Bedfordshire will be commissioned for 1 year through a regional contract with other Local Authorities and the current regional provider for Independent Complaints Advocacy (ICAS), POhWER. This will enable the Council to gather more learning about what is required from a local Independent NHS Complaints Advocacy and to inform a procurement process for a new service from 1 April 2014. This approach also provides continuity of service for patients already involved in making a complaint about NHS services at a time of considerable other change in the health and social care landscape.
17. The Department of Health (DH) describes Healthwatch as being a 'consumer champion', reflecting the Department's vision for Healthwatch to:
18.
  - (a) Provide information to the public about accessing health and social care services and exercising choice in relation to aspects of those services. This includes the signposting function currently provided by the Patient Advisory Liaison Service (PALS) becoming a function of Healthwatch from 1 April 2013.
  - (b) Make the views and experiences of people known to Healthwatch England, helping it to carry out its role as national champion
  - (c) Make recommendations to Healthwatch England to advise the Care Quality Commission to carry out special reviews or investigations into areas of concern (or, if the circumstances justify it, go direct to the CQC with their recommendations, for example if urgent action were required by the CQC)
  - (d) Promote and support the involvement of people in the monitoring, commissioning and provision of local health and social care services
  - (e) Obtain the views of people about their needs for and experience of local health and social care services and make those views known to those involved in the commissioning, provision and scrutiny of those services
  - (f) Make reports and make recommendations about how those services could or should be improved

19. Building on the role of LINKs, Healthwatch will have a duty to represent the views people of all ages who use health and social care services, including children and young people rather than just adults. Colleagues from Children's Services have been key partners in developing the approach to Healthwatch Central Bedfordshire. As part of this work, a presentation was made to the Central Bedfordshire Youth Parliament outlining Healthwatch and seeking views on how local children and young people want to be involved and represented through Healthwatch. The Youth Parliament gave a clear message to Council officers that children and young people wish to continue involvement in health and social care issues through existing programmes such as Young Inspectors and Young Commissioners. The Youth Parliament agreed that they will be part of Healthwatch and thereby ensure the views and experience of children and young people are represented through Healthwatch to the Children's Trust Board. Children's Services will also have a role in the performance management of Healthwatch.
20. The Council has a duty under the Health & Social Care Act 2012 to oversee the creation of a local Healthwatch organisation which is:
- (a) A corporate body (legal entity) carrying out statutory functions
  - (b) Not for profit
  - (c) Able to employ staff and sub-contract statutory functions (if deemed appropriate).
21. The Council will also have an ongoing responsibility for monitoring the effectiveness of Healthwatch Central Bedfordshire.

### **Learning from Healthwatch Pathfinder experience**

22. The Health and Social Care Act 2012 is not prescriptive as to how local Healthwatch is developed and provides flexibility to Local Authorities to consider how they wish to proceed. As one of the national Pathfinder areas for Healthwatch the Council has been able to learn from other Local Authorities and key pieces of learning informing the approach to Healthwatch Central Bedfordshire include:-
- (a) Healthwatch as a network of networks which draws together data from a range of sources in order to provide members of the public with information about local services and produce a strong evidence base of customer experience to inform decisions by commissioners of local health and social care services
  - (b) Approaches in East Sussex, Norfolk and Staffordshire highlight that a collaborative approach with existing community and voluntary sector providers is key to creating a local Healthwatch organisation that can function as a network of networks.
23. The Council has also been learning from the experience of LINKs and recognises the commitment of volunteers who have given of themselves to listen to and help improve the experience of people who use local health and social care services. Legacy work has identified the following challenges faced by LINKs and which the proposals for Healthwatch Central Bedfordshire seek to take into address:
- (a) A relatively low level of engagement by the wider community and voluntary sector with LINKs

- (b) The open membership model for LINKs, along with the tripartite structure of local authority, host organisation and the LINK itself, has led to a lack of identity and accountability
- (c) Issues of LINKs national visibility and leadership may perhaps be due to the lack of a national organisation, such as Healthwatch England, to provide and to oversee and support local arrangements.

### **Vision of values of Healthwatch Central Bedfordshire**

24. Responding to this learning, the vision and values for Healthwatch Central Bedfordshire have been co-produced with stakeholders, including LINKs, through a programme of conferences, research and workshops. The vision for Healthwatch Central Bedfordshire is as, “The local consumer champion promoting choice and influencing the provision of high quality health, social care and wellbeing services for all across Central Bedfordshire”. Some of the key values underpinning the delivery of this vision are that Healthwatch will:
- (a) Have local understanding
  - (b) Represent the health and social care views and experience of Central Bedfordshire communities
  - (c) Raise issues by drawing upon a robust evidence base of customer experience
  - (d) Work in partnership
25. A group of community and voluntary organisations, including the LINK, have been working collaboratively to produce a model for Healthwatch Central Bedfordshire in line with the vision, values and also the learning from LINK and other Pathfinder areas. The Central Bedfordshire Healthwatch Pathfinder group is chaired by John Gelder, Director of Community and Voluntary Action (serving south Central Bedfordshire) and includes senior representation from:
- Autism Bedfordshire
  - Bedfordshire Clinical Commissioning Group
  - Bedfordshire Rural Communities Charity
  - Carers in Bedfordshire
  - Centre for Voluntary Services (serving north Central Bedfordshire)
  - Disability Resource Centre
  - Headway (supporting people with acquired brain injuries and their families)
  - LINK for Central Bedfordshire
  - MIND
  - Older People’s Reference Group
  - Patient Advisory Liaison Service (PALS)
  - Voluntary Organisations for Children, Young People & Families (VOCyfp)

## **Corporate model**

26. It is proposed that the group of local community and voluntary sector organisations which have been working on plans for Healthwatch Central Bedfordshire should now create a company limited by guarantee with registered charity status which will deliver the statutory Healthwatch functions to Central Bedfordshire from 1 April 2013. The benefits of this approach are deemed as:
- (a) Learning from best practice examples in East Sussex, Essex and Norfolk which have adopted a similar approach
  - (b) Drawing upon the breadth of skills and expertise within the local community and voluntary sector whereas a competitive tender route may mean the Council commissioning one organisation to provide Healthwatch functions from the existing pool of Community and Voluntary Sector organisations involved
  - (c) The opportunity to build on what already exists across the community and voluntary sector, particularly in respect of information and signposting provision
  - (d) An opportunity to improve engagement across the community and voluntary sector which LINKs legacy work had identified as a lesson to be learned moving into Healthwatch.

## **Membership model**

27. Membership of Healthwatch Central Bedfordshire will be open to individuals who are living in, receiving care in, or caring for someone who lives or receives care in Central Bedfordshire. Membership will also be open to organisations delivering health and social care information, advice and guidance, community engagement, advocacy or research services to people living in, receiving care in, or caring for someone who lives or receives care in Central Bedfordshire.

## **Governance model**

28. A Chair and Board of Directors will be recruited as volunteers and selected by an independent appointments panel based on evidence of relevant skills and experience (strategic leadership, finance, communications, etc) against specified role descriptions. The aim of this skills-based approach is to provide a focus for Healthwatch Central Bedfordshire in hearing and representing the health and social care needs of the different communities within Central Bedfordshire. The role of the Chair and Board will be to provide the strategic leadership and governance of Healthwatch Central Bedfordshire. Healthwatch Central Bedfordshire will be accountable to:
- (a) The public through its seat on the Health and Wellbeing Board and publication of an Annual Report
  - (b) Healthwatch England through its Annual Report and contribution of public experience data to a Healthwatch England database
  - (c) The Council as the authority responsible for commissioning Healthwatch Central Bedfordshire

## **Operational model**

29. A paid Executive role will be recruited which will be responsible for the resourcing and delivery of the core functions of Healthwatch Central Bedfordshire which have been identified as:
  - (a) **Local insight** – gathering local experience data from customers/patients and providers of health and social care services.
  - (b) **Local voice** - using the data gathered to represent the customer voice in decisions about local health and social care services.
  - (c) **Signposting and information** – building on and coordinating existing signposting and information provision to enable the communities of Central Bedfordshire to access health and social care services
30. Healthwatch Central Bedfordshire will share back office functions (HR/Payroll, ICT, etc) with existing voluntary organisations where appropriate to avoid duplication, maximise partnership working and support value for money.
31. All staff and volunteers of Healthwatch Central Bedfordshire will have clear specified role descriptions to ensure a credible, professional and skills based approach to the work of the organisation.
32. The Committee is asked to consider co-opting a representative of Healthwatch Central Bedfordshire in view current LINK arrangements ending in March 2013.

## **Funding**

33. The Council will receive non-ringfenced funding for Healthwatch Central Bedfordshire including the PALS signposting function from April 2013 to March 2015 in addition to current LINK funding within the Council's base budget.

## **Monitoring**

34. Healthwatch Central Bedfordshire will be grant funded and this funding will be awarded on the basis that Healthwatch Central Bedfordshire is able to carry out its functions effectively. The Council, including Children's Services, will have responsibility for performance managing Healthwatch Central Bedfordshire and will monitor the work of Healthwatch on a quarterly basis against the service level agreement produced by the Council which sets out the key outcomes, outputs and performance indicators for Healthwatch Central Bedfordshire. Secondary regulations for Healthwatch are expected in December 2012 and a Quality Framework will be issued by Healthwatch England in January 2013 which will form a key part of monitoring arrangements between the Council and Healthwatch Central Bedfordshire.
35. In the event that there is any serious deficiency in Healthwatch Central Bedfordshire's performance, the Council would agree a recovery plan with the provider which would set targets and timescales for improvements deemed necessary by the Council. The continuation of funding may be dependent on acceptance of and progress against the recovery plan.
36. In the unlikely event of service failure, the Council would have the option to terminate the service level agreement and go to the market to find an alternative provider.



### **Managing risk**

37. A contingency plan is in place to go to the market to procure a local Healthwatch organisation. The risks to this approach are timescales and the probability that the Council would commission one organisation from the broader skill-pool of community and voluntary organisations currently involved in developing the proposed model for Healthwatch Central Bedfordshire.

### **Conclusion and Next Steps**

38. The collaborative approach taken to creating Healthwatch Central Bedfordshire provides an opportunity to build on existing provision and respond to some of the weaknesses of previous models for public engagement in health and social care by creating a Healthwatch that has been developed and owned by existing organisations including LINK members.
39. This proposal for establishing of Healthwatch Central Bedfordshire will be put before the Council's Executive Committee on 5 February 2013.
40. Subject to the Executive's decision, the Council will work with the newly created company, or go to the market, to ensure a functional Healthwatch Central Bedfordshire by 1 April 2013.