

## Select Committee on Health and Adult Social Care (HASC) – 8th July 2008

### Report of the Lead Officer to the Committee

## Establishment of a Local Involvement Network in Dudley by a Host organisation and the associated implications for HASC

## **Purpose of Report**

- 1. To inform Members on developments to date in Dudley in establishing a Local Involvement Network (LINk) and the associated implications for HASC following the consultation on the draft regulations
- 2. To consider a draft Dudley Scrutiny and Dudley LINk relationship protocol

#### **Background**

 Members considered a report in November providing a brief update on the establishment of a Local Involvement Network (LINk) in Dudley and Department for Health consultation on the regulations for the LINks. Following the consultation it has become more clear as to the implications for Health Scrutiny Committees i.e. HASC.

#### Legislative summary

- 4. There have been changes over the past few years in how health and social care services are planned and run. All of these changes aim to make services better. Ideas about how to do this were published in July 2006 in a report called 'A Stronger Local Voice' which said that there needed to be new organisations called Local Involvement Networks LINks.
- All Local Authorities with Social Services responsibility, are required to procure an organisation or "Host" to establish and support a LINk following the passing of the Local Government and Public involvement Health bill (October 2007) (Section 223). The Act also sanctions the abolition of all Patient Forums with effect from 1 April 2008.

#### The Host organisation

- 6. The "host" will support LINks to:
  - o promote and support the involvement of people in commissioning, provision and scrutiny of local care services ("care services" refers to both health and social care)
  - enable local people to monitor and review the standard of local care services and report on how they could be improved
  - o obtain the views of local people about their experience of local care services and their care needs.
- 7. The role of LINks goes beyond NHS services and extends to adult social care commissioned and provided by local government (but not to social services for young people under 18).
- 8. LINks will be required to have a clear governance structure including:
  - the process for decision-making;
  - how LINks members are authorised to act on behalf of the LINks:
  - financial arrangements;
  - · and how breaches of authority are dealt with.
- 9. Health and social care providers will be required to:
  - respond to LINks requests for information;
  - consider and respond to reports and recommendations made by LINks;
  - allow authorised representatives of LINks to enter and view premises on which care is delivered (but representatives will not be permitted to enter and view private rooms of individuals).
- 10. LINks must produce an annual report giving details of their activities, their membership and their financial arrangements.
- 11. It is expected that Local authorities will have procured host arrangements by 31 March 2008 but in those areas where this has not been possible, local authorities are subject to a "temporary duty" lasting until 31 September 2008 to ensure that there are means to support LINks activities. Temporary arrangements can include the local authority providing support to LINks or agreeing an interim contract with another organisation to provide support to LINks. The Act does not specify the consequences for local authorities if they have not procured host support by 31 September 2008.

#### Relationship between LINks and Overview and Scrutiny Committees

12. LINks will be able to refer "social care matters" to the appropriate overview and scrutiny committee. There is no obligation for the committee to act on every referral but they must acknowledge the receipt of the referral and "keep the referrer informed of the committee's actions in relation to the matter".

#### **Position in Dudley**

- 13. Processes for procuring a host organisation are currently on-going, and it is envisaged that DACHS will have contractual arrangements in place by July 2008. In the interim Dudley has a duty to ensure the LINk activities are carried out until the Host is recruited. In light of this DACHS accordingly established 'Transitional arrangements' in February in the form of a Transitional Group comprising voluntary sector and community representatives including Dudley Women's forum, Dudley Carers forum and Halesowen Asian Elderly Association and has been externally facilitated by DOSTI. The Transitional group was established in February 2008 and meets bi-monthly, its aim is to facilitate the effective development of the LINk pending appointment of the Host.
- 14. The Committee should be advised that two members from the Voluntary Sector of the Core Group have volunteered to take part in the evaluation portion of the LINk procurement process. This will involve interviewing short listed tenderers.

## **Implications for HASC**

- 15. Although LINks will be able to refer "social care matters" to the HASC, there will be no obligation for the committee to act on every referral. However there will be a requirement for HASC to acknowledge the receipt of the referral within 20 working days and "keep the referrer informed of the committee's actions in relation to the matter". It is expected that HASC all LINk referral will be directed to HASC, as the responsible body for the statutory health scrutiny function, in the first instance. Following receipt of the LINk referral, the Committee should decide whether or not the issue would be more appropriate for another Committee and refer accordingly.
- 15. When it is established, Dudley's LINk will have a close but independent relationship with HASC. The powers and duties of the LINk act as a further mechanism for HASC to help identify areas for potential scrutiny. Moreover the LINk can be used to seek evidence and information from residents and service users to inform it's work such as in-depth working group reviews. These examples demonstrate what further capacity a close relationship with the LINk could offer; the Committee may find it useful to establish a representative of the LINk as a co-opted non-voting member, in order to benefit from their regular attendance at meetings (the HASC is able to invite a representative from an organisation for their particular knowledge and/or expertise).
- Members should be advised that HASC is not the only body implicated by the powers of the LINk as some referrals of the LINk may be cross cutting in nature and would require consideration by other Select Committees e.g. Children Services. Moreover the LINk will also have the power to refer recommendations to the Council as a Health and Social care provider, and as such Cabinet or the appropriate delegated Cabinet members should be prepared to respond to the LINks administration.

## **Dudley Scrutiny and Dudley LINk relationship Protocol**

17. A draft protocol setting out guidelines that govern the relationship between the general Scrutiny function and Dudley LINk has been developed for comments by the Committee in light of the recent Department of Health guidance and best practice both nationally and locally and is attached at appendix 1 for comments by members.

#### **Finance**

18. Dudley has been allocated approximately £500,000 by the Department of Health over a three year period commencing 1 April 2008 to procure a Host organisation in order to establish a LINk in the borough.

#### Law

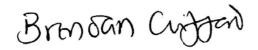
- 19. The Local Government and Public involvement in Health Act (223), which received royal accent October 2007, requires each social services authority to procure an organisation or "host" to establish and support a Local Involvement Network (LINks) in each local authority area.
- 20. The relevant statutory provisions regarding the Council's Constitution are contained in Part 11 of the Local Government Act 2000, together with Regulations, Orders and Statutory Guidance issued by the Secretary of State.

## **Equality Impact**

21. The aims and principles of LINks can be seen as contributing to the equality agenda in its pursuit of improving care for all. This implies a challenge to ensure that services meet the needs of all sectors of the community to make this an even greater reality in Dudley.

#### Recommendations

- 22. It is recommended that:
  - Select Committee notes the progress towards establishing a LINk in Dudley
  - Select Committee comment as appropriate on the guidelines to govern the relationship between the Scrutiny function at Dudley and the Dudley LINk attached at Appendix 1 (this will need to be discussed further with the LINk once the Host has been procured).
  - Select Committee consider the proposal to co-opt (or invite on rolling basis) a non-voting member of the eventual LINk on to the Committee and make decisions as appropriate.



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## **List of Background Papers**

A Stronger Local Voice: A Framework for Creating a Stronger Local Voice in the Development of Health and Social Care Services. Department of Health June 2006.

The Local Government and Public Involvement in Health Bill 2007

Next steps in the development of Local Involvement Networks. Report of the Lead Officer to the HASC July 2007

Getting Ready for LINks. Department of Health August 2007

'Have your say' a Consultation on the regulations for Local Involvement Networks (LINks), Report of the Lead Officer to the HASC November 2007

#### Appendix 1

# <u>Dudley Scrutiny and Dudley Local Involvement Network (LINk) relationship</u> <u>Protocol (memorandum of understanding)</u>

The following are guidelines to govern the relationship between the Scrutiny function at Dudley Council and the Dudley LINk. On a day-to-day basis it would be beneficial to all parties for there to be relaxed and informal dialogue based on good relations and a common interest in the improvement of health and social care services in the Borough.

In terms of the Scrutiny function at Dudley MBC the first point of contact would be Chair of the Select Committee Health and Adult Social care via the Principal Health Scrutiny Officer.

In terms of the LINk the first point of contact would be the LINks Co-coordinator/Officer via the eventual Host organisation.

In the interests of continuous development this document will be subject to systematic review and revision.

#### Formal Dialogue

The LINk and appropriate Scrutiny Councillors will meet together at least once per year for a discussion about the year ahead and a reflection on the year before. This meeting will be hosted and administered alternatively between the Scrutiny function at Dudley and the LINk. This meeting will also be used to consider the different work programmes for the forthcoming year.

#### Work Programme Planning

At the meeting referred to above, work planning discussions will take place. Whilst the final decision over work items remain with each group such a dialogue could avoid duplication of effort. It could also ensure that the appropriate body undertakes work more suited to its skills. It is noted, however that some work items will be undertaken by both bodies such as consultation exercises. If appropriate, any evidence gathering on such issues could be undertaken in partnership although responses would come from each individual group.

#### Referrals to Scrutiny from the LINk

If the LINk wishes to refer an item for the consideration of Scrutiny it will be co-ordinated through the LINk administration and shall be provided with the following:

- 1) A description of the item of work
- 2) Reasons why the LINk thinks Scrutiny needs to consider the item of work
- 3) Why the LINk thinks it more appropriate that Scrutiny considers the item of work rather than the LINk considering it
- 4) Any evidence that the LINk has already considered prior to the referral to Scrutiny.

The LINk will receive an acknowledgement of the referral within 20 working days.

The HASC, in discussion with other relevant Councillors and the LINk, will then consider the referral and decide whether to undertake the piece of work or refer it to the appropriate Select Committee. Should Scrutiny decide not to undertake the piece of work full reasons will be given to the LINk. The decision will be final and all outcomes will of LINk referrals to Scrutiny will be detailed in the LINk Annual report.

The LINk under the Local Involvement Networks Regulations 2008 will also be required to publish any decision taken to refer a matter to Scrutiny at Dudley MBC.

#### Recommendations of the LINk

If a recommendation is made regarding Council services it should be sent to the appropriate Cabinet Member along with a copy to HASC.

## Joint working

Any joint working will be agreed on an issue by issue basis and shall come from each organisation independently.

The HASC may request the LINk to visit appropriate premises and seek evidence and information from residents and service users.

## Power of entry

As detailed in the legislative framework for LINKs certain trained members will have the power of entry into health and social care buildings. This is a power that Scrutiny does not have and as such it would be good practice for the LINk to share the outcomes of such visits to Scrutiny.

#### Committee papers

Any Committee papers shall be shared between Scrutiny and the LINk, including annual reports produced. This shall be in a format agreed by Scrutiny and the LINk.