

Health Select Committee 31st March 2009

Report from the Director of Policy & Regeneration

For Action Wards Affected:

Brent Local Involvement Network

1.0 Summary

1.1 The Brent Local Involvement Network has agreed governance arrangements and is now up and running and working on health and social care issues of interest to its members. A management committee will be elected by the middle of May 2009. Given that the LINk is now active, it is important that the Health Select Committee agrees how it will deal with referrals that the LINk could potentially make. It was also agreed when the Committee received its last update from the LINk to receive another update at the meeting in March 2009.

2.0 Recommendations

2.1 The Health Select Committee should consider and agree the referral arrangement proposed, plus the other ways of working set out in appendix 1 to this report. The Committee should also consider the update on the Brent LINk that is provided by the host organisations, Hestia Housing and Support.

3.0 Detail

3.1 The Brent Local Involvement Network has agreed governance arrangements since the last update to the Health Select Committee and is now on the verge of electing a management committee. It is also starting to work on health and social care issues of concern and could, in theory, begin referring issues to overview and scrutiny.

3.2 Therefore it is important that the Health Select Committee agrees how it will respond should a referral be made. Appendix 1 to this paper contains some ideas on working arrangements between the LINk and overview and scrutiny. With regard to formal referrals the paper says:

Referral Arrangements – LINks have the power to make formal referrals to overview and scrutiny. To keep arrangements between the LINk and overview and scrutiny simple, the Health Select Committee will take the lead on working with the LINk. In the first instance, all referrals from the LINk will be considered by the chair of the Health Select Committee and he (in consultation with officers from the Local Democracy Team) will decide which committee is best placed to consider the referral.

Referrals should be made in writing or by email to the chair of the Health Select Committee with a copy to the Policy and Performance Officer. Once it is decided which committee should consider the referral, the relevant committee chair will write to the LINk within 20 working days acknowledging receipt of the referral and informing them that it will be considered at the next meeting of the committee. Once the referral has been considered, the chair will write to the LINk to let them know what action will be taken.

- 3.3 This process has been kept deliberately simple so the LINk is clear what to expect when a referral is made. In order to maintain good working relationships all referrals should at least be considered by either the Health Select Committee or the Overview and Scrutiny Committee, even if the committees decide not to do anything further. However, it should not be for the chair alone to decide to take no further action.
- 3.4 The paper at appendix 1 also suggests other ways to build working relationships, such as sharing work programmes and involving LINk members in task groups. The Health Select Committee should consider these ideas and confirm which it would like to take forward.
- In addition, Hestia Housing and Support, the LINk host organisation, has provided an update on the LINk work that has happened since December 2008. The committee should consider this update and comment on the report attached at appendix 2.
- 4.0 Financial Implications
- 5.0 Legal Implications
- 6.0 Diversity Implications
- 7.0 Staffing/Accommodation Implications (if appropriate)
- 7.1 None

Background Papers

Appendix 1 - Overview and Scrutiny and Local Involvement Networks – Working together in Brent

Appendix 2 - Brent Local Involvement Network (Brent LINk): An Update Report

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