

Health Partnerships Overview and Scrutiny Committee 27th November 2012

Report from the Director of Strategy Partnership & Improvement

Wards Affected: ALL

Establishing a Local Healthwatch for Brent

1.0 Summary

1.1 The purpose of this report is to set out how the council will implement the requirements of The Health and Social Care Act 2012 in relation to the creation of a local Healthwatch and Complaints Advocacy Service. The act requires the council to establish local Healthwatch by April 2013.

2.0 Recommendations

2.1 The Health Partnerships Overview and Scrutiny Committee are recommended to note the contents of this report.

3.0 Implementation of Healthwatch

- 3.1 The Health and Social Care Act 2012 has made provision for the establishment of Healthwatch, which will be the new consumer champion for publicly funded health and social care. This includes local Healthwatch working at a local level, and Healthwatch England working nationally.
- 3.2 Local Authorities have a statutory duty to ensure there is an effective and efficient local Healthwatch in their area by April 2013.

Background

- 3.3 In April 2007, as a requirement of the Local Government and Public Involvement in Health Act, Local Involvement Networks (LINks) were established in each local authority area.
- 3.4 The aim of LINks were to promote and support the involvement of people in the commissioning, provision and scrutiny of local care needs; obtain the views of people about their needs for, and their experiences of, care services, including services provided as part of the health services and services provided as part of the social services functions of the local authority; and, report and make recommendations on these findings, in order to make improvements to services. The role of the local authority was to commission a Host organisation to support the role of the LINk.
- 3.5 The government, through the Health and Social Care Act has directed that, from April 2013, the LINk will be replaced by Healthwatch.

The role and structure of Healthwatch

3.6 The Department of Health website includes information about the role of local Healthwatch. It says local Healthwatch will:

• have a seat on the new statutory health and wellbeing boards, ensuring that the views and experiences of patients, carers and other service users are taken into account when local needs assessments and strategies are prepared, such as the Joint Strategic Needs Assessment (JSNA) and the authorisation of Clinical Commissioning Groups

• enable people to share their views and concerns about their local health and social care services and understand that their contribution will help build a picture of where services are doing well and where they can be improved

• be able to alert Healthwatch England, or CQC where appropriate, to concerns about specific care providers, health or social care matters

• provide people with information about their choices and what to do when things go wrong

• signpost people to information about local health and care services and how to access them

• give authoritative, evidence-based feedback to organisations responsible for commissioning or delivering local health and social care services

• (LHW may) help and support Clinical Commissioning Groups to make sure that services really are designed to meet citizens' needs

• be inclusive and reflect the diversity of the community it serves.

Further details on the role of a Healthwatch are included in Appendix 1.

3.7 Healthwatch will differ from the LINk in that it will be a corporate body, carrying out statutory functions. As a corporate body, Healthwatch will be able to employ staff, in addition to involving volunteers in their work. Healthwatch

will be able to contract out some functions while remaining accountable for the public funding they receive.

3.8 The 2012 Act amends the 2007 Act to provide that the body contracted to be the local Healthwatch must be a 'body corporate' (i.e. a legal entity), which must be a social enterprise. There is no legal definition of a Social Enterprise, but the Department of Health's current view is that this means a 'businesses with primarily social objectives whose surpluses are principally reinvested for that purpose in the business or in the community'. Further national regulations are expected, which may give a clearer, more formal definition.

Establishing a Local Healthwatch in Brent

- 3.9 Local Healthwatch will be funded by local authorities and held to account by them for their ability to operate effectively and be value for money. The Act states that local authorities will have a local Healthwatch organisation in their area from April 2013, but will have the flexibility to choose how they commission it to achieve best value for money for their communities.
- 3.10 The council is currently undertaking a two stage competitive procurement process in accordance with Contract Standing Orders. This will enable us to meet our duty while ensuring fairness, transparency and best value for money for residents by properly considering all interested providers. The council advertised for expressions of interest on October 18th and is now about to enter into the second stage of the procurement process.
- 3.11 The council held a consultation event on 23rd October for residents, members of community and voluntary groups and Councillors. The event was attended by over 70 people.
- 3.12 The responses to the consultation highlighted a number of key overarching priorities:
 - A Good and Credible Organisation
 - Communication and Local Knowledge
 - Engagement with community, local groups and partners
 - Utilise Existing Intelligence
 - Good Research
 - Influence services (GPs and Hospitals)
 - Accessible Advice Service
- 3.13 Participants were also asked to indicate their preferences between 30 different priority outcomes that could be taken to indicate a successful local health watch. The priority outcomes identified were:
 - It works closely and deeply with the community
 - Healthwatch consults residents and community/voluntary groups about its plans
 - It gathers information to understand people's views of the health and social care services they receive

- Works with other neighbouring Healthwatch Organisations for joined up approach
- It has plenty of trained and skilled volunteer advisors
- People are able to comment on what Healthwatch is doing
- It builds a large membership of residents and community/voluntary groups
- People are able to gain access to advice service through different methods that suit them
- Information service is regarded as accessible by all users
- People are aware of the Advice Service
- It has open and transparent systems.
- 3.14 The results of the consultation were used to inform the final specification for the contract which was developed based on the Department of Health, Healthwatch England and LGA jointly produced *Developing Effective Local Healthwatch*¹ document and the work undertaken by pathfinder authorities such as Newham Council. The *Developing Effective Local Healthwatch* is referred to by the LGA community of practice as their 'quality framework' the key success features of a local Healthwatch which are set out in this document are attached at Appendix 2.
- 3.15 A proposed timetable for the next stages of the procurement process is set out below.

The procurement timetable: second stage	
Issue Invitation to Tender	27 th November 2012
Deadline for Tender submissions	21 st December 2012
Panel evaluations decision by	15 th January 2012
Contract award report presented to Chief Officer	22nd January 2013
Notification issued to all tenderers and begin voluntary minimum 10 day standstill period	26 th February 2013
Debriefing of unsuccessful bidders	27 th February 2012
Contract implementation	1 st March 2013

4.0 Financial Implications

4.1 None

5.0 Legal Implications

- 5.1 If a Healthwatch is not developed and established by April 2013, Brent will not be complying with its statutory obligations under the Health and Social Care Act 2012.
- 5.2 Any procurement processes will need to be in accordance with statutory

¹ Developing effective local Healthwatch a jointly produced by LGA, Healthwatch England and Department of Health

Provisions, including the regulations which have not yet been released, and guidance and take into consideration feedback from consultation with all relevant stakeholders. In addition, Contract Standing Orders concerning services contracts will need to be followed.

6.0 Diversity Implications

6.1 An Equalities Impact assessment will be carried out in relation to the procurement of Healthwatch, to be informed by feedback from a range of service user representatives in addition to the consultation event.

7.0 Staffing/Accommodation Implications (if appropriate)

7.1 None

Background Papers

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