

# Brent Local Involvement Network Annual Report

1<sup>st</sup> April 2008 - 31<sup>st</sup> March 2009



Making a difference ... together'

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# 1. Abstract

This Annual Report is prepared for the consideration of the Office of the Secretary of State, the Care Quality Commission, Brent Council, Brent Health Select Committee, Central and North West London Hospital Trust, NHS Brent, Central and North West London Mental Health Trust CNWL, Brent Local Involvement Network participants and interested members of the public.

This report is an account of the LINK community engagement and development activities undertaken in the London borough of Brent during the period 1st April 2008 to 31st March 2009 and is based on the work of the Host organisation Hestia Housing and Support and the interim Host CIDA (Community Development Investors Agency). It summarises some of the key milestones we have achieved in supporting the establishment of an inclusive Local Involvement Network, which can serve the interests of all in the London borough of Brent. The report includes information and comments gathered from the Brent population, service users, service providers and participants of the Brent LINK.

This Annual Report offers a valuable conduit for reporting on the development of the Brent LINK and effective community engagement initiatives and the building of sustainable community development programmes for health and social care in the London borough of Brent.



Brent LINK Participants at a Recent Consultation Event

## 2. Background

### **An Introduction to Local Involvement Networks**

The Brent Local Involvement Network (LINK) is a community led network of individuals, which includes residents, service users, businesses and community organisations. The network aims to empower and enable people to have a stronger say in how local health and social care services are commissioned and delivered in the London Borough of Brent.

The legislation outlining the creation of LINKs is contained within the Local Government and Public Involvement in Health Act, 2007 (Chapter 28) with further additions outlined in the Statutory Instruments 2008 (no. 528.) These outline the remit of the LINK and the steps that must be taken before the LINK can be launched.

The remit of the Brent LINK includes:

- Promoting and supporting the involvement of people in the commissioning, provision and scrutiny of local care services
- Enabling people to monitor the standard of provision of local health and social care services
- Obtaining the views of people about their needs for, and their experiences of, local health and social care services
- Making reports and recommendations about how local care services could or ought to be improved to people responsible for commissioning, providing, managing or scrutinising local services

# 3. The Host Organisation

## Hestia Housing and Support

Hestia Housing & Support is a registered charity, established in 1970. Our vision is Empowering People, Changing Lives and our mission is to provide high quality services in partnership with users and local communities.

Hestia provides a range of support services to socially excluded groups, including people with mental health needs, people with substance misuse problems, offenders, people with disabilities and Black and Minority Ethnic groups. Hestia is a pan-London organisation working in 17 London boroughs, but predominantly in West London.

Hestia's services include Approved Premises, Registered Care, Supported Housing, Floating Support, Outreach and Community Development. We are also the LINK Host organisation for Ealing, Kensington and Chelsea and Hammersmith and Fulham.

## The Role of the 'Host' Organisation

Hestia Housing and Support is the Host organisation our role is to facilitate the work that the people involved in the LINK want to do. This includes but is not limited to:

- Capacity building and training of LINK participants in order to allow them to carry out the work of the LINK
- Working with the voluntary sector and community to promote and enable participation in the LINK
- Acting as a point of contact for the public, service providers and commissioners
- Carrying out effective administration of the LINK including writing reports and letters on behalf of the LINK
- Financial management of resources
- Servicing meetings and facilitating workshops

## Host Team Handover

Hestia took responsibility as the permanent Host organisation on the 1st of December 2008. From April 2008 to this date the LINK was supported by the Interim Host, Community Investors Development Agency (CIDA).

## Host Staffing

We have a skilled and experienced Host staff team in place. The team is comprised of:

<b>Name</b>	<b>Position</b>
Lauretta Johnnie	LINK Host Coordinator
Divya Patel	Development Officer
Carol Sealy	Administrator

In addition to the direct Host staff team. Hestia created a Head of Community Engagement post during 2009-10, to provide a strategic overview of all community engagement projects run by Hestia, including the Brent LINK.

## Host Office

The Host team office is located at:

Unit 56,  
The Designworks,  
Park Parade,  
London,  
NW10 4HT.

**Main Office:** 020 8965 0309

**Direct Line** Co-ordinator: 020 8965 9498

**Email:** [brentlink@hestia.org](mailto:brentlink@hestia.org)

**Website:** [yourbrentlink.org](http://yourbrentlink.org)

The Host acts as the contact point for all enquiries to the Brent LINK. Please get in touch if you would like more information on the Brent LINK or getting involved, or if you have any questions for us as the Host organisation.

## 4. Profile on Brent

The London Borough of Brent is a vibrant, multi-cultured borough that boasts many national landmarks such as Wembley Stadium, The Shri Swaminarayan Mandir Temple (Neasden Temple), Winston Churchill's underground bunker in Brook Road, Neasden, the University of Westminster, as well as beautiful parks and historic buildings.

Brent has a population of 270,100 (Office of National Statistics), although 347,541 people are GP registered in the borough. There are over 5000 community and voluntary organisations, individuals and businesses located in the Borough.<sup>1</sup> Brent is one of two only two local authorities where the majority of people are from ethnic minorities as 55% of residents are from black and minority ethnic communities and over 130 languages are spoken in schools. The population is relatively young with 43% of residents under 30 and over 30,000 over the age of 65. Recently Brent has become more deprived and is now the 53<sup>rd</sup> most deprived borough in England.<sup>2</sup>

Brent is becoming the most ethnically heterogeneous borough in the country. The chances of two people in Brent being from different ethnic groups are higher than anywhere else in the country.<sup>3</sup>

### **Key Facts about Health and Well Being in Brent:**

The NHS Brent Commissioning Strategy Plan 2008 to 2013 details the following health facts about the London Borough of Brent.

- Nine year gap in male life expectancy across the borough
- Circulatory disease and cancer are the biggest killers
- One in four people in Brent smoke
- 20% of Brent's adult population are estimated to be obese
- 50% of our adult population do not take part in any form of physical exercise
- Approximately two-thirds of Brent's population are estimated as not eating the recommended amount of fruit and vegetables per week
- Teenage pregnancy levels are decreasing but from a comparatively high level
- High prevalence of diabetes and tuberculosis
- High and increasing rates of HIV
- Low uptake of some preventative services, such as smoking cessation and breast screening

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<sup>1</sup> [www.brentbrain.org.uk/brain/brainzones.nsf/zl/1?opendocument&Z=1](http://www.brentbrain.org.uk/brain/brainzones.nsf/zl/1?opendocument&Z=1)

<sup>2</sup> NHS Commissioning Strategy Plan 2008 – 2013, published by NHS Brent

<sup>3</sup> Ibid, NHS p.9

# 5. The Interim Stakeholders Committee

The Brent LINK Interim Stakeholders Committee was set up by Community Investors Development Agency (CIDA), the interim Host organisation to help set up the Brent LINK. Since becoming the permanent Host organisation, Hestia developed this group by helping them:

- Define and agree their Terms of Reference
- Widen their representation to include new voluntary sector and community groups
- Facilitate bi-weekly meetings, including a Fact Finding Meeting on the 19<sup>th</sup> December 2008 to illicit information about the progress and aspirations of the LINK
- Invite guest speakers from statutory bodies to their meetings
- Decide and agree on the LINK Governance procedures
- Start to address current issues in health and social care based on community concerns

## **Interim Stakeholders Committee members:**

Nico Pollen	Mansukh Raichura
Ann O'Neill	Maurice Hoffman
Dharampal Kaur/ Mrs Singh	Michael Adeyeye
Dr Golam Ahmed	Miranda Wixon
Dr Tony Ogefere, JP	Phil Sealy
Dr Yoginder S Maini	Prakash Mandalia
Elcena Jeffers MBE	Robert Esson
Elsie Staple	Wendy Quintyne
Ian Lee	Winston Carl Dennis
James Sayell	Suryakant Patel
Jimmy Telesford	Suzette Williamson
Ken Morjaria	Jenny Doble
Deva S Samaroo	Hussein Hersi
Kesh (Mukesh) Morjaria	Abdi Yassin
Lola Osikoya	Iqbal Mansoor

As part of our duty to establish the Brent LINK, Hestia continued facilitating this group until the official launch of the LINK.

During this time the existing Interim Stakeholder Committee acted as the Interim Executive Committee for the Brent LINK and ensured that involvement in Health and Social Care services continued during this transitional period.



## 6. Interim Host Report: London Borough of Brent

*(The following report and financial summary has been prepared by the London Borough of Brent)*

### **LINKs in Brent**

A report, 'Establishing the LINKs – Progress Report', went to Brent Council's Health Select Committee on 23<sup>rd</sup> October 2007. The report summarised the government's proposals as set out in their policy document, 'Our Health, Our Care, Our Say' and the Department of Health's two guidance documents: 'Planning Your Local Involvement Network' and 'Contracting a Host Organisation for your Local Involvement Network'.

Following Dept of Health Guidance, Brent Council established a Brent LINK Stakeholder Group. The purpose of the group was to oversee the development and launch of the Brent LINK. Group membership was drawn from existing service providers, patient forums, social care user groups, voluntary and community organisations and faith groups. Brent's Health Select Committee also nominated and elected member, Cllr Alec Castle, to sit on the stakeholder group.

The Stakeholder Group meet in December 2007, and January and July 2008. The January 2008 meeting took advantage of the Centre for Public Scrutiny's; (CiPS) scheme to provide three days of professional support for emerging LINKs. The January meeting was given over to a presentation and question and answer session by Barrie Taylor a Health Service Commissioner. Further progress reports were made to Health Select Committee in February 2008 and July 2008, 'Working with LINK'.

Invitations to quote for the for an interim host contract were sent out in May 2008. CIDA, who were offered the contract as Brent LINK's interim host organisation was in place from June 2008 to December 2008. Subsequent meetings of the stakeholder group took place under the auspices of CIDA.

### **Dept of Health Interim Grant**

The Department of Health made available an interim grant of £10k to local authorities to assist with the development costs of establishing the LINKs. The grant was made in the 2007/08 financial year but the Dept of Health ultimately authorised the carry-over of remaining monies into the following financial year – 2008/09. Brent Council effectively matched the grant and spent a total of £18,950. This expenditure covered, procurement and legal charges, as well as consultation and meetings, (e.g. refreshment, hall hire etc) charges. A full financial breakdown appears in section 13 of this report.

# 7. Interim Host Report: CIDA Community Investors Development Agency

*(The following report and financial summary has been prepared by Community Investors Development Agency)*

## **Interim arrangements and Summary of resources expended in the period (Jun - Nov 2008)**

After a detailed and in-depth competitive tendering process, Community Investors Development Agency, who had previously provided support to some of the Patient and Public Involvement Forums in Brent, were appointed as Interim Host in June 2008 to cover the Interim LINK Arrangements in Brent.

Health and social care issues identified by the PPI Forums which served Brent and in other ways were monitored in the period as far as possible. These included:

- Mental health issues and changes to the Care Programme Approach (CPA)
- Impact of Brent PCT Cost Savings Plan on health services for local residents
- Cross borough/cross-LINK issues (e.g. CNWL Foundation Trust and North West London Hospital NHS Trust)
- Accountability of Foundation Trusts to LINKs
- Follow up to review of Overseas Visitors Policy and implementation of NHS Eligibility Criteria across Brent and neighbouring boroughs
- Continuation of activities carried out by Forums in reviewing health services e.g. Cleanliness Inspections, Hand Hygiene audits, Hospital Catering Survey, Non-Emergency Patient Transport information. Potential for introducing 'Mystery Shopper Programme' to range of health and social care settings
- Commissioning of health and social care services in Brent and how LINKs might positively influence this for the interests of local people

*Health and social care issues taken up in the period:* a letter was written to Marcia Saunders at Brent Primary Care Trust with regard to monitoring of standards of treatment of older people.

Meetings and stakeholder events were held and an Interim Steering Group was set up. This was chaired by Mansukh Raichura and included former PPI Forum members and others from the local community and groups. Governance documents began to be developed, training and induction sessions were held, LINKs E-bulletins were compiled and sent out to individual and group contacts as well as wider stakeholders, updating them on LINK

development and local and national health and social care issues, consultations, news and events. Work was also done to promote awareness and understanding of the LINK amongst health and social care bodies, Health Scrutiny and regulators.

The areas of work covered by the Interim Host LINK support team in the period June – November 2008 required 2 full-time staff posts on outreach and development, plus support from CIDA Professional & Technical Support and Business Support teams to be actively responsible for the development, establishment and support of the emerging LINK. Total human resource cost including development staff cost and outreach in the period amounted to £52,078. Overheads and other direct expenditure for the Interim Host LINK activity in the period amounting to £18,800 was expended on: *general overheads (£6,605)* covering meeting facilities, office premises and volunteer management system cost; *Media development and information/marketing costs (£12,195)* covering stationary and postages, production of press and publicity materials including e-bulletin.

## 8. Why our work is needed

It is well known fact that there are some examples of extreme health and social care inequalities in the London Borough of Brent. A metaphor often used to look at the inequalities in health in the Borough is the Bakerloo Line which runs from the north to the south of the borough. If you get on the train at Queens Park and travel through Kensal green, Willesden Junction, Harlesden, Stonebridge Park, Wembley Central, South Kenton and travel through to Kenton, your journey will reflect some disparity between the South and North of the borough: those who live in the south have a life expectancy rate that is ten years below those in the north.

Harlesden has the lowest life expectancy for men (71.6 years) and women (78.4 years) compared to Northwick Park, where male life expectancy is 9.4 years higher at 81.0 years. For women there is a difference of 7.1 years life expectancy between Harlesden (78.6) and Fryent - near Kenton (85.6). It is a major concern that the life expectancy between the most deprived and most affluent areas in the borough is increasing.<sup>4</sup>

Brent NHS report that in the next 10 years the BME population is expected to increase to 60% of the population. The largest increase is expected to be from the Asian population. This increase in population will have implications for the demand in healthcare as Asian groups tend to have higher rates of diabetes and heart attacks and develop diseases about 10 years earlier than white ethnic groups in general.<sup>5</sup>

LINKs provide an opportunity for commissioners and service providers to hear directly the needs and concerns of the people using their services. In a vibrant and diverse borough like Brent, it is important that everyone has their voice heard, so that service design is able to capture everyone's need. LINKs provide an opportunity to create an ongoing dialogue between community groups and individuals and those designing and delivering services.

Often deprivation is tied in to low take up of services within different areas and communities. In order to address this it is important that local people get to have a say about the way their health and social care services are designed and run, so that providers are able to deliver a relevant service to their service users.

Hestia Housing and Support, as the Host organisation to the Brent LINK believes that building working relationships and facilitating dialogue between the people who design and provide health services and the local community, provides positive outcomes for everyone; and this value informs the work of the LINK in Brent.

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<sup>4</sup> Ibid NHS, page 11

<sup>5</sup> Ibid NHS, page 9

## 9. What you told us

### Key Issues Identified and Being Addressed

Since taking over the Host contract in December 2009, the Host has been facilitating bi-weekly meetings to allow the Interim LINK Stakeholders Committee to develop the LINK and continue discussing issues. The Host had a duty to build the LINK and develop LINK structures, whilst the participants wanted to have a space to discuss their concerns. The meetings were therefore two-fold. The first half of the meeting focussed on planning, governance and the development of the LINK. The second part of the meeting was called 'Burning Issues' where participants discussed their concerns and priorities about health and social care in the borough. During the 'Burning Issues' part of the meeting we used a facilitative technique called 'Open Space Technology' (see overview below). This facilitative technique encourages individuals to take charge of the issues that are important for them and plan for quick action.

By using Open Space Technology LINK Participants and the Interim Stakeholder Committee identified three key concerns:

- Responding to the proposed charging policy by Brent Council for Social Care services
- Improving access to provision of home improvement equipment for homeowners (older people, disabled people and vulnerable people)
- Establishing long-term advocacy services relating to health and social care service access and provision for vulnerable groups in Brent

### Open Space Technology: an Overview

Open Space technology is a format for holding meetings that allows people decide their own priorities and work plans based on democratic and fair principles. It also groups to address more than one issue at a time. No one gets left out and no-one is forced to do anything they don't want to do.

Open space is good for involving large and diverse groups, it enables people to have creative thinking around an issue and explore different perspectives using open and collective decisions. This process develops better working relationships between participants and helps build a sense of community and ownership.

#### How it works

- Participants gather (in circle /concentric circles) to receive verbal outline of meeting (have leader packs available)

- Those with a 'burning issue' they are willing to take responsibility for taking forward write it on A4 paper, hold it up and read it out.
- When all 'burning issues' / agenda items have been raised each takes their paper and posts it onto the agenda wall.
- Time is given for other participants to view agenda items and choose which discussion / action group they will take part in.
- Those running a session take up a table / an area and let the wider group know where they are.
- Group meetings begin, notes captured – handed in to facilitator at end of session to be written up.
- The person raising the issue, lead on the issue, often beginning with a thought shower and a series of questions they needed answers for.

There were three priorities identified in 2008-9:

## **Case Study 1: Responding to the proposed charging policy by Brent Council for Social Care services.**

### Background

This issue arose out of proposed new charges for day care services, re-enablement care charges and extra care sheltered care charges. (See 'Proposed changes to charges for day care, re-enablement care and extra sheltered care.' (Published by Brent Council.) The public consultation period was between 15<sup>th</sup> December 08 and 19<sup>th</sup> January 2009.

A steering group consisting of members from the community with backgrounds in working with older people, people with disabilities and concerned citizens was formed. The group agreed to conduct research on the issues involved and bring the information to another session. At the following meeting they agreed to draft a letter to Gareth Daniel, CEO of Brent Council requesting that the consultation on the changes in charges be reviewed as they felt it did not comply with certain national and borough led policy guidelines.

A recommendation was issued to the CEO who forwarded this information to Martin Cheeseman OBE, Director of Housing and Community Care who then agreed to meet with the LINK to respond to our questions. A meeting was planned for the 6th of April 2009 with the Brent LINK participants, the Director of Housing and Community Care as well as the Deputy Director. (Outcomes of this meeting will be reported fully in next year's report, as they do not fall into this year's reporting period.) The meeting was seen to be successful with the Director requesting to meet with the LINK quarterly to include them in the planning processes of charging and other relevant issues.

Brent LINK participants were also provided the opportunity to comment on the Executive Report and continue to maintain an open dialogue with the Director and his team.

The LINK was also successful in incorporating a number of local voluntary and community groups in being involved and providing commentary on their views with regards to charging for social care. This issue is ongoing and the group continue to meet regularly to discuss it.

## **Case Study 2: Improving access to provision of home improvement equipment for home owners (older people, disabled people and vulnerable people.)**

### **Background**

LINK participants felt that access to adaptations such as showers / toilet for elderly disabled people and home improvements for vulnerable people in private sector housing was not easy. Examples given were problems with kitchens, ceiling and adaptations needed in laundry area, etc. This poses health risk issues.

Participants discussed between them who may be able to help with these issues. Possible groups included Supporting People teams, Association of Disabled People, Trading Standards, Brent Social Services and Age Concern.

Participants agreed to do some research on twelve main organisations and the services and information they provided. Each participant took responsibility for two organisations. They spent a week contacting and then collating the information. Information was sent to the office and kept together. Participants then met at the office to compile the information into carer's packs. Participants have agreed to continue adding to these packs as information comes through. It is hoped that this can be a source of information that can be reproduced for people requesting the information.

## **Case Study 3: Establishing long term advocacy services relating to Health and Social Care Service access and provision for all vulnerable groups in Brent**

### **Background**

It was felt that there was a lack of advocacy services available for vulnerable groups in Brent. There was also a feeling that advocacy services, if available, were not clearly marketed or promoted. There was no clarity around what services were available and to whom. Further research was required as to how to acquire existing services and bring about new services.

Participants in this group wanted to take this up as a long term research project. Initially focusing focused on three main issues:

- What is advocacy?
- What services are currently available?
- Where are the gaps in service provision?
- Where can we find resources to fill those gaps?

Participants are continuing to explore this issue and will take further action in 2009-10.



## 10. What we did

In order to ensure that the Brent LINK was fully inclusive we recognised our main role was to advertise the Brent LINK in the borough of Brent and beyond. To do this we used a variety of methods and media to help spread the word about the Brent LINK. The following examples detail some of the ways in which information has been disseminated throughout the borough:

- Design and print of Brent LINK leaflets
- Production of promotional material and banners for public events
- Flyers to all libraries, hospitals, dentists, doctors surgeries and health centres in the borough
- Distributed information to shops and businesses
- E-bulletins and updates
- Mail outs to members of the public
- Press releases to local press
- Articles in newsletters including Age Concern and BrAVA (Brent Voluntary Action) Newsletters
- Posted information about Brent LINK on websites
- Face to face consultation on the street and at events
- Advertisement about a public event in a national ethnic minority newspaper
- Sent information out through council and voluntary databases
- Design and distribution of first Brent LINK newsletter to participants & the wider public
- Meetings with local radio stations

As well as the above, the Brent LINK Host team have been visiting groups, attending conferences and making presentations at a number of different events and meetings across the borough. Meetings with key voluntary sector organisations include:

- Met with the CEO BrAVA – Brent Voluntary Action discussed areas of collaboration and how to feed into the LSP
- Brent Association of Disabled People the CEO is interested in having a representative on the Brent LINK Management Committee
- Brent Health Trusts
- Brent Social Services
- Brent Heart of Gold
- Association of Muslims with Disabilities
- Mosaic LGBT Youth (Kilburn Youth Centre)
- Age Concern
- Nubian Life

### Brent LINK Web Site

The Brent LINK web site is live and development is underway. You can find us on: [www.yourbrentlink.org](http://www.yourbrentlink.org)

## Sign up of New Participants

By the end of the reported year we had 433 newly signed up participants to the Brent LINK since we took over as the Host organisation in December and have reached out to many more people through our outreach work and public events. We have also met with statutory and voluntary agencies that have expressed an interest to become involved.

Brent LINK is proud to have reached out to different groups of people in the borough. What follows is an analysis of the Brent LINK participant demographics, which illustrates the diverse spread of participants in the LINK:

### Participant Monitoring Information Analysis:

Gender	%
Number of Females	42
Number of Males	42
Declined to answer	16

Age Group	%
16-21	3
22-29	6
30-44	16
45-59	24
60-74	31
75+	9
Declined to answer	11

Disability	%
Yes	13
No	63
Declined to answer	24

Sexual Orientation	%
Heterosexual	54
Gay	0
Lesbian	0
Bisexual	0
Declined to answer	46

Religion/Faith	%
Buddhist	0
Christian	25
Hindu	22
Jewish	2
Muslim	12
Sikh	14
Other	4
Declined	21

Ethnicity	%
Asian or Asian British- Indian	44
Asian or Asian British – Pakistani	5
Asian or Asian Other	1
Black or Black British- African	9
Black or Black British- Caribbean	9
Black or Black British- Other	0
Chinese	0
Mixed White & Asian	0
Mixed White & Black African	1
Mixed White & Black Caribbean	1
Other	1
White British	10
White Irish	2
White Other	2
Declined to answer	15

## Public Events

As well as marketing and promotion of the Brent LINK, as part of our public education programme we have hosted public events to develop and promote awareness of the LINK. These include:

**1. Public Information Day** - 18th February at the Patidar Centre London Road, Wembley. This event was organised by the LINK Host team in partnership with LB Brent, NHS Brent, Age Concern, Brent Association of Disabled People and BrAVA. Over 75 people attended on the day, to gain more information on the Brent LINK and participate in some of the four workshops available:

- NHS Brent – Stroke and Trauma Consultation
- Age Concern Brent – Proposed Changes to Charges for Day Care
- BRAVA – Local Strategic Partnership – What is it?
- Brent Overview and Scrutiny – Linking the LINK
- Hestia (Host) – Consulting on the LINK Governance and the Election Process

**2. Two Public Information Events:** on Tuesday 3rd March 2009 at Willesden Green Library Centre and Wednesday 4th March 2009 at the Willesden Clinic in partnership with Nubian Life.

Plans are underway for a **Mind and Body Fair** (Health and Social Care Fair) in the early part of 2009 – 10.

## **Inclusivity: Contacting the Brent Community**

The Brent LINK Host team believe the term ‘hard to reach’ is a redundant term which whilst it encapsulates the feel of the groups being hard to reach it also holds the connotation the groups are purposefully ‘hiding’ from or ‘invisible’ to the sectors that try to reach each group. We are aware that individuals and groups are out there and we have to be creative in our community engagement methods to ensure an inclusive LINK.

In response to this need the Host team has spoken to most of the main community organisations in the Borough, empowered and encouraged their participants to invite the Host team to speak at or attend meetings. We have:

- Advertised events in local newspapers, newsletters and web sites.
- Distributed information to all health centres, doctors’ surgeries, youth centres, libraries and one stop shops in Brent
- Tapped into already existing networks.

Party style ‘flyers’ are being developed to reach new audiences and information has been distributed throughout the borough. All information is easy to read and large print formats are always available.

## **Working with Service Providers and Commissioning Agencies**

The Brent LINK Host team have worked to build relationships and strategic representation in the borough for the LINK. We have been in regular contact with a number of leads within the Local Authority and NHS Brent to define opportunities for the LINK to be represented and work with existing structures in Brent including:

- Owen Thompson Head of Consultation and Local Authority Lead for the LINK, London Borough of Brent the Consultation team including the Local Area Forums
- Chair of NHS Brent Marcia Saunders and other Non-Executive Directors. The Chair is keen to set up regular contact between Brent LINK and NHS Brent
- Presented a report to the Overview and Scrutiny Committee
- Health Select Committee – designed Joint working protocols – further discussion will take place when the management committee is formed

- The Acute Services Review Project Board (NHS Brent)
- Representation at the Patient and Public Engagement Steering group. This group wish to have a member of the LINK Management Committee on their group when elected
- Met with representatives from the Patient Advice Liaison Service (PALS)
- Marco Inzani (NHS Brent) to look at areas of partnership working
- Participating in a meeting with NHS Brent, Brent Council and PALS to discuss priorities, areas of joint work, synergies and collaboration
- Meetings with NWLH Patient & Public Involvement & Partnership Committee
- Meeting with NICE (National Institute of Clinical and Health Excellence) Public Involvement team to discuss joint working protocols

## **Governance Structures and Procedures of the LINK**

Through bi-weekly business meetings from December 2009 to March 2009 the Brent LINK Interim Stakeholders Committee developed and agreed the Governance Procedures for the Brent LINK. A signed copy of the documents have been sent to Owen Thompson, LINK Lead & Head of Consultation at Brent Local Authority. The governance we have developed in consultation with our participants covers all of the areas required by the Local Government and Public Involvement in Health Act, (2007), including:

- A comprehensive set of rules outlining the decision making procedures of the Brent LINK
- Procedures for determining how the Brent LINK's resources will be spent
- Procedures for holding public and special interest meetings
- A procedure for the formation of special interest standing committees and working groups
- An equality and diversity statement
- Procedures defining the election process of Management Committee and the voting process
- The procedure for selecting and authorising representatives of the LINK to enter and view health and social care service premises
- A procedure for dealing with conflicts of interest
- A confidentiality procedure
- Terms of reference and role descriptions for members of the Management Committee and other LINK participants
- A code of conduct for LINK participants
- A procedure for dealing with breaches in procedure

## **Training and Capacity Building**

The Host aim to support the learning and development of Brent LINK participants. We see this as integral to the development of the LINK. Capacity building was achieved by creating a rolling programme of training and public education which keeps participants up to date with current developments as

we as support and empower them to make change happen. We also offer cross-borough training which enables Brent LINK participants to liaise with LINK participants in other boroughs across West London. Training we have offered to LINK participants so far has included:

- Current issues in health and social care – including the duty to involve, individualisation and the Healthcare for London proposals
- Public accountability, decision making and planning processes within LINKs
- The commissioning cycle – including World Class Commissioning, the Local Strategic Partnership and Joint Strategic Needs Assessments
- Writing reports and influencing change within statutory services
- Ongoing one-to-one support to participants, access to the office and the services of the Brent LINK host team
- Developing briefing documents around health and social care

## **Official Launch of the Brent LINK**

The Brent LINK was officially launched on the 10<sup>th</sup> of March 2009 following the ratification of the Governance Procedures developed by Interim LINK Stakeholders' Steering Group and an official letter being sent to Brent Local Authority.

# 11. Brent LINK Election

Once the Brent LINK governance procedures were agreed the Host organisation began to run an election campaign for the new Brent LINK Management Committee.

## Key Election Dates for 2009:

- Training & Information Seminars for people considering standing for nomination were held on the 25th & 30th March
- A hustings event on the 22nd April
- Votes publicly counted on the 15th May, and independently scrutinised by Mr David Apparicio JP.

Successful nomination and recruitment to the Management Group will be reported in the 2009-10 Annual report as this has taken place shortly following the year end on the 31<sup>st</sup> March 2009.

The Host team would like to thank the all nominees and their supporters for their hard work, determination and commitment in this campaign. We endeavour to continue working relationships with nominees as there will be many future opportunities to work with and feed into Brent LINK. We would also like to thank the Interim Stakeholders Steering Committee all of whom were volunteers who have shown commitment to getting the LINK developed to this point.

# 12. What we achieved

## Developing an approach for effective engagement

Since becoming the Host of the LINK in December 2009 the Hestia Host team successfully recruited 433 fully signed up participants. We remain in touch with participants via e-bulletins, newsletters, informal contact, public events and a number of other methods.

The step into active citizenship and engaging in mechanisms that will influence service design and provision is one that often requires support and encouragement, especially for those who may feel disenfranchised and disillusioned with previous systems of support and engagement. We have encouraged people to engage in consultations for the first time and endeavoured to make engagement easy and provide people with a number of options for having a say.

The Brent LINK has worked to be accessible and inclusive, as demonstrated in the make up of the LINK Management committee and participants. As well as supporting community leaders and people with extensive experience of engagement, the Host and current participants have built confidence in new members through discussions, one to one support and training and encouraged members to participate effectively by going out into the public and community and speaking to groups and individuals; giving the public a chance to have their questions answered on the LINK by those already involved.

We have also looked beyond the borough and initiated North West London LINK Host Network meetings with other Host Organisations.

## Strategic Representation in the Borough

The LINK is represented on a number of Boards & Forums including:

- Acute Services Review Project Patient and Public Panel
- NHS Brent Patient and Public Engagement Steering group
- NWL Hosts Network
- NWL Hospitals Patient and Public Involvement & Partnership Committee

Plans are being developed to work in partnership with Brent Council, Adult Social Services and NHS Brent on a Consultation and Engagement Strategy for 2009-10 as well as build on a number of other areas of strategic representation now possible with an elected body steering the LINK.



## Mapping Services and Identifying Priorities

The Brent LINK Host team has undertaken various strands of mapping and information gathering from local residents, service providers and the voluntary sector to identify and start to address the different needs and demands of the local community. This has been done by:

- Hosting a number of public consultation events
- Interviews with the statutory sector, voluntary sector, businesses and services providers
- Gathering information through one to one interviews and meetings, including impromptu meetings.
- Information gathering at bi-weekly 'Burning Issues' meetings facilitated by the Host team.
- Attending community events

The Brent LINK Development Officer has also delivered information seminars and workshops in the borough to elicit key information from participants and supporters.

Brent LINK is already having a positive impact in the borough of Brent. The wider community is starting to engage at a real level and we have a number of capable and committed participants giving their time to help make the LINK an effective vehicle for people to influence service design and provision.

## Annual Health Check Commentaries

In March 2008-9 the Brent LINK started a process of consultation and information giving with the participation of NHS Brent and the Healthcare Commission (under the remit now covered by the Care Quality Commission) to allow people to successfully feed into the Annual Health Check process for NHS Brent, North West London Hospital Trust and Central North West London NHS Foundation Trust. Outcomes will be reported fully in next year's report.

# 13. Income and Expenditure

a) Brent LINK Financial Summary: Hestia Housing and Support (December 08 to financial year end.)

## LINK Summarised Statement

Description	Allocation: (£)	Expended: (£)	Variance: (£)
<b>Development costs:</b>			
Printing and Publication	833.33		
Stationery and Post	300.00		
Advertising	250.00		
Library	<u>66.67</u>		
<b>Sub-Total</b>	<b><u>1450.00</u></b>	<b>999.00</b>	<b>451.00</b>
<b>Communication and Engagement:</b>			
Radio	400.00		
Entertainment (music & catering)	566.67		
FreePhone / freepost	100.00		
Incentives	166.67		
Web conferencing	100.00		
Translation/Interpretation / BSL/Audio/Braille	500.00		
Crèche Service	166.67		
Website Development	<u>666.67</u>		
<b>Sub-Total</b>	<b><u>3666.68</u></b>	<b>125.00</b>	<b>3541.68</b>
<b>Consultation Research / Projects:</b>			
Commissioning user survey	666.67		
External Facilitators	<u>333.33</u>		
<b>Sub-Total</b>	<b><u>1000.00</u></b>	<b>0.00</b>	<b>1000.00</b>
<b>Expenses for LINK participants:</b>			
Travel	560.00		
Subsistence	560.00		
Carer costs	166.67		
Child care	166.67		
Payments	<u>250.00</u>		
<b>Sub-Total</b>	<b><u>1703.34</u></b>	<b>14.00</b>	<b>1689.34</b>
<b>Training for LINK Participants:</b>	<u>1066.67</u>		
<b>Sub-Total</b>	<b><u>1066.67</u></b>	<b>100.00</b>	<b>966.67</b>
<b>Venue for activities:</b>	<u>1166.67</u>		
<b>Sub-Total</b>	<b><u>1166.67</u></b>	<b>280.00</b>	<b>886.67</b>
<b>Total Allocation:</b>	<b>10,053.36</b>		
<b>Amount Expended</b>		<b>1518.00</b>	
<b>Surplus on the disbursed Grant</b>			<b>8535.00</b>

## Host Summarised Statement

Description	Allocation: (£)	Expended: (£)	Variance: (£)
<b>Staff costs:</b>			
Salaries, Employers NI, Pensions And Staff Travels	41636.57	35353.00 <sup>a</sup>	6284.00
<b>Administration Costs</b>			
Office Costs: Office costs, Office Rental Phone and Post, Set-up fees, Sundry Costs & IT Consumables.	6227.43	8473.00	-2246.00
<b>Total Allocation:</b>	47864.00		
<b>Amount Expended:</b>		43826.00	
<b>Overall Surplus on the disbursed Grant:</b>			4038.00

Brent LINK	Income	Expenditure	Variance
LINK activities	10053.00	1518.00	8535.00 <sup>b</sup>
Host / Running costs	47864.00	43826.00	4038.00
<b>TOTAL</b>	<b>57917.00</b>	<b>45344.00</b>	<b>12573.00</b>

### NOTES:

- This summary was extracted from the Brent LINK year end Management Accounts which are in the process of being externally audited at the date of publication.

- Figures for expenditure are to the nearest whole number.

<sup>a</sup>Expenditure for salary reported includes central management charge (including HR, Finance and associated costs.) Senior manager salary cost within the service group is not included.

<sup>b</sup>All unspent income for LINK activities will be carried over into 2009-10 for use by the Brent LINK.

**b) Brent Council Interim Development Costs:**

<b>LINK Project Expenditure Brent Council</b>			
<b>Item</b>	<b>Expenditure</b>	<b>Interim Grant</b>	<b>Balance</b>
Stakeholder Group Refreshments	<b>76.4</b>	<b>10,000</b>	<b>9,923.60</b>
Procurement - December Charges	<b>354.17</b>		<b>9,569.43</b>
Legal Charges - April 2008	<b>1,179.00</b>		<b>8,390.43</b>
Legal Charges - July 2008	<b>1,165.40</b>		<b>7,225.03</b>
Meeting Expenses (3rd July refreshments)	<b>41.6</b>		<b>7,183.43</b>
Procurement - June 2008 Charges	<b>952</b>		<b>6,231.43</b>
Stakeholder Group Refreshments - August 2008	<b>84</b>		<b>6,147.43</b>
Procurement Charges - July 2008	<b>1,722.67</b>		<b>4,424.76</b>
Procurement Charges - August 2008	<b>1,989.00</b>		<b>2,435.76</b>
Stakeholder Refreshments - Sept Meeting	<b>76.00</b>		<b>2,359.76</b>
People Centre / Public Notice in the Guardian	<b>2,315.00</b>		<b>44.76</b>
Procurement Charges - Sept 2008	<b>5,135.33</b>		<b>-5,090.57</b>
Procurement charges - Feb 2008	<b>56.67</b>		<b>-5,147.24</b>
Procurement charges - October 2008	<b>1,464.47</b>		<b>-6,611.71</b>
Procurement charges - Nov 2008	<b>457.87</b>		<b>-7,069.58</b>
Procurement charges - Dec 2008	<b>136.00</b>		<b>-7,205.58</b>
Stakeholder Consultation	<b>1,261.75</b>		<b>-8,467.33</b>
Procurement FOI charges	<b>482.80</b>		<b>-8,950.13</b>
<b>Total</b>	<b>18950.13</b>		

# 14. Conclusion

We believe that Brent deserves a LINK that helps to promote excellence in health and social care service delivery and commissioning in Brent. We want a LINK that doesn't leave people out, that communicates effectively, listens to what people have to say and is able to take action, based on community-led evidence and in partnership with everyone in the borough.

We have adopted a facilitative approach to try and create an open, inclusive LINK in Brent, concentrating on capacity building, promotion of the LINK and building positive working relationships with the participants, Health Trusts and Adult Social Services and our Commissioners. Brent LINK is reaching out to the local population and has started dealing with issues that matter to them.

The Brent LINK has now been officially launched, has a newly elected Management Committee, which is reflective of the inclusive nature and intention of the LINK. We are all confident that the Brent LINK will be a great success.

We would like to thank our colleagues, the voluntary groups, community groups and charities within Brent that have offered valuable advice and support and in particular, the Brent LINK Participants and Management Committee members for all their dedication and hard work. We would also like to thank the Commissioners and staff at NHS Brent and members of staff from the Brent Local Authority. We look forward to another year of creative community engagement and partnership work with the residents, community groups and organisations of Brent.