



Brent Local Involvement Network Annual Report

1st April 2010 – 31st March 2011

Cover Photo: Wembley Stadium and the Welsh Harp/Brent Reservoir

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The Welsh Harp Conservation Group was formed in 1972 to protect the Welsh Harp/Brent Reservoir area, not only as a habitat for a variety of birdlife and rare species of flora, but in the interests of public recreation.

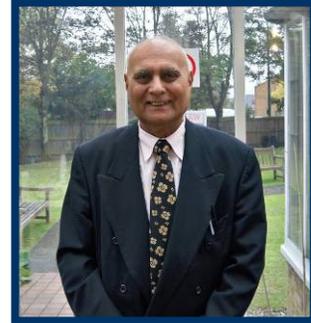
<http://www.brentres.com/>

CONTENTS

<i>Section</i>	<i>Title</i>	<i>Page</i>
1	INTRODUCTION	4
	<i>Message from the Chair</i>	4
	<i>Partner Feedback</i>	8
2	BRENT LINK: VISION, STRUCTURE & VALUES	12
	<i>Hestia's Role (Host Organisation)</i>	13
	<i>Brent LINK Organisational Structure</i>	14
	<i>Our Management Committee</i>	16
	<i>Brent LINK Values</i>	20
3	BRENT PROFILE	24
4	OUR MEMBERSHIP	27
5	DEMONSTRATING IMPACT THROUGH ACTION	31
	<i>Action Groups</i>	31
	<i>Case Studies</i>	36
	<i>Inspiring Others to Get Involved</i>	43
	<i>"What You Said, What We Did"</i>	45
6	LOOKING AHEAD: THE NEXT 12 MONTHS	49
7	OUR YEAR IN FIGURES	53
	<i>Summary of Activity</i>	55
8	OUR FINANCES	57
9	CIRCULATION OF 2010/11 BRENT LINK	60
	ANNUAL REPORT	
	REGISTRATION FORM	61

SECTION ONE: INTRODUCTION

MESSAGE FROM THE CHAIR



Welcome to Brent Local Involvement Network's 2010/11 Annual Report.

Brent Local Involvement Network (LINK) is an independent network made up of individuals, community groups, voluntary sector organisations and local businesses. We work together to improve local health and adult social care services in Brent.

We do this by:

- *Finding out what people think of their local health and social care services;*
- *Giving people a chance to suggest ideas to care professionals about improving services;*
- *Looking into specific issues of concern to the community;*
- *Making recommendations to the people who plan and run services;*
- *Asking for information about services;*
- *Carrying out visits, when necessary, to see if services are working well.*
- *Referring issues to Brent Council's Overview & Scrutiny Committee if it seems that action is not being taken.*

We are steered by a Management Committee, made up of 11 individuals and voluntary sector organisations. We also have four action groups, covering:

- *Adult Social Care*
- *Primary and Community Care*
- *Mental Health*
- *Hospital Based Issues*

In October 2010, we held our Annual General Meeting. There, we presented our 2009/10 Annual Report and noted major achievements. Key note speaker, Marcia Saunders, NHS Brent Chair, was able to provide a perspective on (the then) new NHS reform proposals and how services would be maintained and improved.

About This Report

This report highlights how Brent LINK has listened to local people over the past year and used this information to help improve local health and adult social care services.

It also demonstrates “*impact through action*”: highlighting case studies where we have engaged & participated in the planning, commissioning, delivering and monitoring of health and adult social care services in Brent.

These case studies include Brent LINK’s Wellbeing Event held in August 2010. This allowed local people to find out more about promoting mental and physical wellbeing. Voluntary sector organisations and healthcare providers were also on hand to provide expert advice. Thanks to Family Mosaic Housing Association for funding this event.

This year, we also highlight our commitment to community involvement, by including a section called “*Inspiring Others to Get Involved*”.

This recounts the story of one of our active participants and how our activities helped build his capacity to have a say in the shaping of health and adult social care services.

We hope his inspiring example will encourage other individuals and groups to get involved.

As with previous years, this year’s Annual Report contains a section on who we have engaged over the past year and also a section on where we get our money and how we spent it during 2010/11.

For the coming year, in addition to helping plan, commission and monitor health and adult social care services, our main focus will also be on preparing for *Local Healthwatch*: the new “consumer champion” being introduced as part of the Health and Social Care Bill.

At the time of writing, it is expected that October 2012 will see LINKs undertake the role of Local Healthwatch. This means an increased role for Brent LINK in areas like commissioning health & social care and devising local health profiles.

Over the next 12 months, we will be working to ensure that Brent LINK is ready for the opportunities and challenges presented by Local Healthwatch.

This transitional work will include reviewing existing structures and the training needs of Management Committee members.

Brent LINK is committed to empowering local people to have a voice in how their health and adult social care is designed and delivered.

Details of how to get involved are outlined on the back page of this Annual Report. Please remember - there are different ways to get involved and different levels of involvement. It can vary from simply joining our newsletter mailing list through to attending one of our Open Forum events or joining a Project Steering Group.

I wish to conclude by thanking my fellow Brent LINK Management Committee members for working collectively for Brent LINK and, as a Management Committee, we would like to thank Brent Council's LINK contract management staff, as well as Hestia host management for the support, expertise & resources which have enabled us to make this last year a success.

I would like to also thank the many local health and social care providers who have worked with us over the last year.

Final special thanks to the people of Brent for drawing our attention to their concerns and working in partnership to effect positive changes for all.

I believe that over the past year, Brent LINK has responded to their concerns and successfully worked to help ensure their voice is heard during the planning, commissioning and monitoring of health and social care in our borough.

Mansukhlal Gordhamdas Raichura

Chair Brent LINK 2010/11

PARTNER FEEDBACK

London Borough of Brent

Public services across the board are going through a period of unprecedented change and reorganisation. Notwithstanding, Brent Council is very pleased to have been able to develop a positive and constructive working relationship with Brent LINK during the last three years. Working with the LINK has enabled the Council and its partners to gain greater insight into the views of local people on health and social care issues.

The Council recently took the decision to extend the contract with Brent's host organisation, Hestia Housing & Support. We are now looking forward to developing an even stronger relationship with Brent LINK. Working closely with the LINK Management Committee, the Host Organisation and our local partners to steer the LINK through its final year and develop a robust model for the creation of Local HealthWatch.

Alison Elliott – Director Adult Social Care (Acting)

Owen Thompson - Head of Consultation

Andrew Davies – Policy and Performance Officer

NHS Brent

NHS Brent, including Brent Community Services, has continued to collaborate with Brent LINK. This collaboration extends to: regular Chairs meeting from both organisations, attendance at each others Board meetings and Annual General Meeting, membership of the Patient and Public Engagement Steering Group and the Brent Health and Social Care Forum and membership on the emerging Patient Participation Groups for the GP Commissioning Consortia. These are all true partnerships between NHS Brent, Brent LINK and the local community, where key themes are mutuality and respect for the strengths that each party brings to the table.

In 2010-11, Brent LINK supported a number of NHS Brent initiatives including: engagement in a workshop to improve the patient experience of primary care (leading to improvements in appointment booking in GP surgeries), sitting on the contract panel to help choose a new provider for the Urgent Care Centre at Central Middlesex Hospital, supporting workshops to improve local mental health services and consulting on the Short Term Assessment, Reablement and Rehabilitation (STARRs) Service to protect people from unnecessary hospital admissions, long hospital stays and long term residential care.

The NHS, and our partners, are going through a period of unprecedented change. Organisations are reducing the size of their staff numbers, whilst still being expected to deliver financial efficiencies and improve health outcomes. This makes our partnerships even more precious. A range of evidence shows that the results from collaboration often outweigh the outputs you would get from each individual organisation. As such, Brent LINK has an important role to play in championing the health and adult social care issues that are

important to local people - particularly those who are seldom heard. NHS Brent, working with our local GPs, still has an important role in translating these issues into improved local health services. We look forward to holding true to these values and partnerships over the coming months and beyond.

Marcia Saunders - Chair of NHS Brent

Isabelle Iny - Non Executive Director: Brent Community Services

Jo Ohlson - Brent Borough Director: NHS Brent

Marco Inzani, Assistant Director: NHS Brent

Care Quality Commission (CQC)

Involving people is central to CQC's work and Brent LINK is a very important source of information about the performance of health and social care, from the point of view of people who use services. The views and experiences of local people help to inform CQC's work in a number of ways: whether it is information about newly registered services or more established providers of health and social care services. For example, it can help us decide whether to trigger a review of compliance for a provider or to bring forward a planned review.

We would like to continue to encourage Brent LINK to send us information about local health and social care services. Local groups can send us information at any time using the online feedback form on the CQC website. We look forward to continuing to develop our relationship with Brent LINK and explore ways of working together more closely in the future.

Judith Edwards

Compliance Inspector - Care Quality Commission London

North West London Hospitals NHS Trust

We are grateful to Brent LINK for its joint working with North West London Hospitals NHS Trust and to Mansukh Raichura, the Brent LINK representative who participates in our Board meetings each month.

Mansukh also sits on the Programme Board advising on and developing the business case for our potential merger with Ealing Hospital NHS Trust. We believe merger and service reorganisation will offer a number of benefits for patients, such as high quality specialist care, larger clinical teams, investment in medicine and equipment, savings in shared management, fewer unnecessary hospital referrals and reduced duplication.

We are also grateful for Brent LINK's participation in our recent public consultation on children's services in Brent and Harrow, which resulted in strong support for the case for change and the proposals to establish two Paediatric Assessment Units at the Central Middlesex and Northwick Park Hospitals and to centralise all overnight inpatient care at Northwick Park.

Finally, we welcome LINK's support for our Quality Account, which includes information about the quality and safety of our services and our priorities for the year ahead. We particularly applaud the role Brent LINK plays as a "critical friend" that is happy to advise us on areas in which we might improve, as well as complimenting us on our efforts and initiatives.

David Cheesman

Director of Strategy - North West London Hospitals NHS Trust

SECTION TWO

BRENT LINK: VISION, STRUCTURE & VALUES

Brent LINK

Unit 56, The Designworks

Park Parade, NW10 4HT

Tel: 020 8965 0309

Fax: 020 8838 0917

Email: brentlink@hestia.org

Website: www.yourbrentlink.co.uk

Host Organisation Details

Local Involvement Networks are facilitated and supported by Host Organisations.

In Brent, the Host Organisation is Hestia Housing and Support.

Hestia is a registered charity, established in 1970. Hestia's vision is ***Empowering People, Changing Lives*** and their mission is to provide high quality services in partnership with users and local communities. Hestia is also the LINK Host organisation for Ealing, Kensington and Chelsea and Hammersmith and Fulham LINKs.

Hestia's Role

Hestia's role is to work with the elected Management Committee and wider LINK membership in designing and delivering its work programme.

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 voluntary sector and community organisations 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 in consultation with the Management Committee on behalf of the LINK
- Financial management of resources
- Servicing meetings and facilitating workshops

Hestia Housing & Support, 3rd Floor, Sovereign Court
15 – 21 Staines Road, Hounslow, Middlesex TW3 3HR

Tel: 020 8538 2940 Fax: 020 8572 5617

Email: info@hestia.org

HOST CONTACT: Carla Julien - Director of Operations

The Brent LINK Office (details on page 12) should be the first point of contact if you want to find out more about Brent LINK projects, how to join our network etc.

Brent LINK Organisational Structure

Brent LINK has a Management Committee dedicated to ensuring that individuals, organisations and communities can exert influence and affect positive change in health and social service provision in Brent. Our committee is diverse – reflecting Brent’s diverse profile - but also brings expertise in areas such as mental health, learning disability, older people and adult social care.

The Management Committee attended a workshop in 2009 to identify priority areas of work and to decide on what Action Groups would reflect and address community concerns and needs.¹

Four Action Groups were identified: Adult Social Care; Community and Primary Health Care Services, Hospital Based and Mental Health.

Staffing Arrangements

Brent LINK is supported by two staff members:

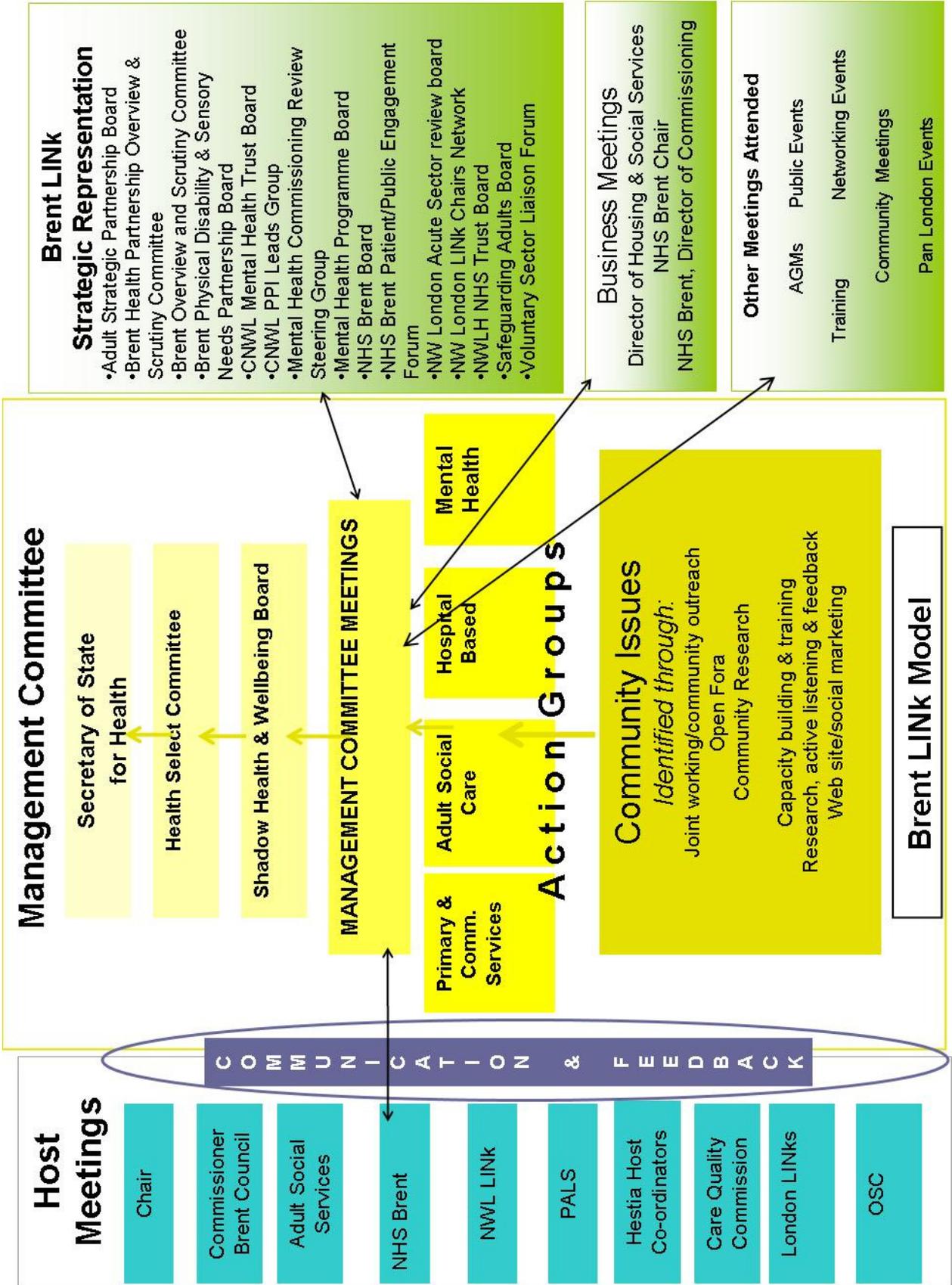


Colin Babb - LINK Co-ordinator



Carol Sealy – LINK Officer

¹ It was decided that Action Group Leads would be selected from the Management Committee.

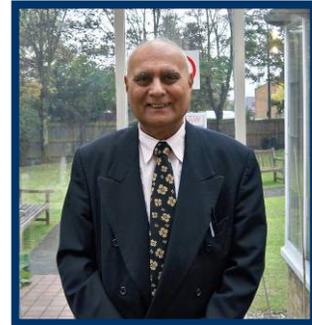


Our Management Committee

Mansukhlal Gordhamdas Raichura M.Sc

Dip.Chem. Eng - Chair

Mansukhlal always seeks to promote community health objectives. He has many years experience working with health care providers to highlight community health and social care issues. Mansukhlal has also been a Voluntary and Community Sector representative on Brent's LSP Board and currently attends Brent's Health Select Committee meetings, as Brent LINK representative.



Jimmy Telesford – Vice – Chair

Jimmy has lived his life as a disabled person. This has given him insight into the difficulties and barriers that disabled people face. Jimmy has worked with disabled people as a representative, advocate and campaigner. Jimmy believes dignity is everyone's human right.

Dr Yoginder S Maini – Vice Chair

Dr Maini is a regular user of NHS services which, he maintains, has given him a wide knowledge of services available to patients. A qualified accountant and fellow of the Life Insurance



Association, Dr Maini was awarded a PhD in Theology in 2008. He is also Founder Group Secretary of Brent Heart of Gold.

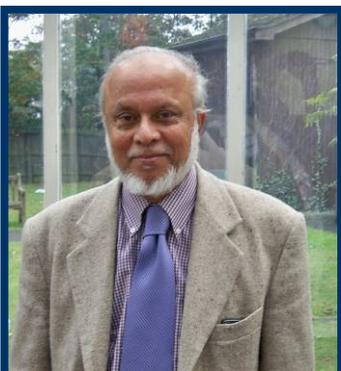
Robert Esson



Robert was born in Willesden Green, Brent. He is a Civil Engineer by profession and holds a BSc and E.Mec. An original member of NW Patients Parliament, Rob is an insulin dependent diabetic and has had both knees replaced. Rob was a part-time carer for his wife and feels he can be an advocate for groups that do not traditionally take part in community activity. Rob is also a member of Brent Association of Disabled People (BADP).

Michael Adeyeye

Michael has been actively involved in Brent's Community/Voluntary sector for nearly 30 years. He is also a Trustee of BADP and Brent African Association. Michael is also a qualified Health and Safety practitioner, with interests in promoting health and safety management in environment.



Dr Golam Ahmed

Joined the NHS in 1973 as a trainee Doctor and obtained a PGDip in ENT (ONT) from London

University and a FRCS from Glasgow University. Dr Ahmed has worked in medicine globally and is an advocate for both equitable access and quality of treatment.

Dr Tony Ogefere

Dr Ogefere is Executive Director of SIRI Behavioural Health, providing holistic therapeutic service for disadvantaged people suffering psychosocial and emotional difficulties. Dr Ogefere is also an international Counselling Psychologist and Social work Practitioner in addition to being Governor of CNWL NHS Foundation Trust.



Maurice Hoffman

Maurice is the Work Placement Advisor at Alperton Community School. He has extensive knowledge of NHS commissioning and finances. Maurice wants to contribute to Brent LINK by working with the people of Brent and providers of health and social care.



Ann O'Neill

Ann has worked for Brent Mencap for over 8 years: campaigning for better lives and opportunities for people with learning difficulties. Ann's strengths lie in her knowledge of strategic planning, strategic documents and public speaking. She sits on many strategic boards

and is a former Chair of BRAVA. Ann understands strategic issues and what they might mean in practice to Brent.

Dharampal Kaur / Mrs Singh

Mrs Singh has extensive experience of working in statutory and voluntary services. At present, Mrs Singh is a Brent Age Concern Champion for Older People and a Health Trainer. Over the years, Mrs Singh has worked as a Teacher, Governor, Volunteer Tutor (Expert Patient Programme) and Peer Mentor Volunteer. She has also attended extensive training courses in Health and Social care matters. Mrs Singh is a Life member of the Sikh Missionary Society and has also worked at Amnesty International.



Wendy Quintyne

Wendy is a Brent resident with extensive knowledge of the voluntary and community sector. She understands the vital role the sector plays in providing services: particularly to vulnerable and 'hard to reach' communities. In her, role Wendy strives to promote the well being of older people and works to make later life a healthy, fulfilling and enjoyable experience.

Brent LINKs Values

Brent LINK's mission is *'to give communities a stronger say in how their health and social care services are delivered.'* To make this happen, we have adopted a set of values which govern our work and the way in which we engage Brent's diverse communities. These values can be summarised as:

- openness and inclusivity;
- accessibility to all, including people who feel excluded, people who might need support to participate, people with caring responsibilities and people with full time jobs;
- reaching out to all communities: collecting evidence of their views and making those views known to the appropriate bodies;
- recognising that addressing the wider determinants of health (such as income and housing) are central to our role
- communicating information we receive in a constructive way to service planners, commissioners and providers;
- feeding back responses and outcomes to the wider community on a regular basis



In addition, Brent LINKs recognises that local involvement networks are about whole communities having opportunities to influence health and social care services. To facilitate this, we apply the following values to our governance arrangements:

- adopt shared principles and work together to change things for the better;
- demonstrate values by working with others for everyone's benefit;
- act responsibly and play a full part in the work;
- help people to help themselves;
- take responsibility and answer for actions;
- give everyone a say in how things are done;
- act fairly and in an unbiased way;
- share interests and common purpose with others;
- be open – don't hide it when you are not perfect;
- be honest about what you do and how to do it;
- encourage people to work together to improve their community;
- support similar work that others are doing;
- make a commitment to allow anyone to take part;
- look for opportunities to work together to strengthen accountability locally and beyond; and
- recognise that some people and groups find formal structures daunting and find ways to accommodate their needs.

Names Of Authorised Representatives (For Enter & View):

Mansukh Raichura - Chair	Jimmy Telesford - Vice Chair
Dr Yoginder S Maini - Vice Chair	Robert Esson
Michael Adeyeye	Dr Golam Ahmed
Dr Tony Ogefere	Ann O'Neill
Dharampal Kaur/Mrs Singh	Wendy Quintyne
Carol Sealy – Host	

Names of individuals involved in making relevant decisions²

Mansukhlal Raichura	Shadow Health & Wellbeing Board Health Overview Scrutiny Committee NHS Brent & Harrow CNWL Mental Health Trust Board NWL LINK Chairs Network NWLH NHS Trust Board meeting CQC Link Advisory Group
Mr Maurice Hoffman	
Ann O'Neill	Safeguarding Adults Board
Dharampal Kaur/Mrs Singh	Brent Disabled Users Forum

² as defined in Section 2 (1) (a), 2 (2) (a)-(h) and 2 (3) (c) (i) and (ii) of the Local Involvement Networks Regulations 2008.

Key Strategic Meetings Attended:

- Adult Strategic Partnership Board
- LB Brent Health Partnership Overview & Scrutiny Committee
- LB Brent Overview and Scrutiny Committee
- Brent Physical Disability & Sensory Needs Partnership Board
- CNWL Mental Health Trust Board
- CNWL PPI Leads Group
- Mental Health Commissioning Review Steering Group
- Mental Health Programme Board
- NHS Brent Board meeting
- NHS Brent Patient and Public Engagement Forum
- North West London Acute Sector review board
- NWL LINK Chairs Network
- NWLH NHS Trust Board meeting
- Safeguarding Adults Board
- Voluntary Sector Liaison Forum

SECTION THREE: *BRENT PROFILE*³

THE PEOPLE OF BRENT

Brent is one of only two local authorities serving a population where the majority of people are from ethnic minorities, and these groups are increasing faster than any other. Our population is growing and dynamic. Brent's population forecast by the Greater London Authority (GLA) in 2010 was approximately 280,000, although Council-commissioned research suggests that this figure could be over 15,000 higher and is growing steadily.

Almost a quarter of residents are under 19 years old. The GLA predict that Brent's population will increase by roughly 10,000 people every ten years. Brent's population is predicted to be 284,412 by 2014. The highest growth is expected to occur in Tokyington as a result of the Wembley stadium development which is projected to increase by 10,000 by the year 2031.

HEALTH AND WELLBEING IN BRENT

Over the last ten years, rates of deaths from all causes have decreased for both men and women and are lower than the England average. Circulatory diseases, including heart disease and stroke, and cancers are the most common cause of death in Brent. There are significant health inequalities, linked to location, gender, level of deprivation and ethnicity. The most deprived wards in the South of the borough have a

³ Source: NHS Brent Public Health Annual Report 2009/10

higher death rate, and lower life expectancy than the less deprived wards in the North of the borough.



**Colleagues from Brent Community Services attending Brent LINK Wellbeing Event
August 2010**

Brent has one of the highest rates of diabetes (5.16%) and TB (93.6 per 100,000) in London and in England. Smoking is the single greatest cause of preventable illness and premature death. Obesity is the second most significant contributory factor to ill health and preventable disease. Brent has one of the lowest adult physical activity rates in England with 56% reporting they do not participate in any sporting or physical activity and only 18% taking exercise on 3 occasions a week for 30 minutes.

ACCESS TO SERVICES

There were 359,115⁴ patients registered with Brent GPs as at June 2011. Patient turnover at approximately 20% per annum is high. The number of WTE GPs per 100,000 population weighted by age and need was 68.8 per 100,000 in 2006. This is higher than the England rate of 61.8 per 100,000 and the 15th highest in London. Analysis of primary care within Brent shows a higher percentage of smaller practices as compared with national averages.

70% of Brent Practices are one and two handed practices compared to 54% in London and 42% in England. Satisfaction with access to a GP is below the national average. Brent ranks 135th out of 150 PCTs with respect to patient satisfaction of opening hours and for overall satisfaction, Brent ranks 142nd out of 150 PCTs. In a recent survey conducted by IPSOS MORI 83% of respondents said that they were able to get an appointment with a GP within 48 hours compared to 86% nationally and 77% said they were satisfied with opening hours compared with 84% nationally. Many patients would welcome increased opening hours. However, the GP Patient Survey response rate is low compared to the national average.

⁴ Source: "Update on GP Commissioning Report" LB Brent Health Partnership & Overview Committee, June 2011

SECTION FOUR: *OUR MEMBERSHIP*

Sign up of Participants

By the end of the reported year, we had **668** signed up participants to Brent LINK and 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 in becoming involved.

What follows is an analysis of the Brent LINK participant demographics. It illustrates the diverse spread of participants and Brent LINK is proud to have reached out to so many different groups of people in our diverse borough.

Participant Analysis:

Gender	%
Number of Females	44
Number of Males	39
Declined to answer	17

Age Group	%
16-21	2
22-29	6
30-44	19
45-59	24
60-74	26
75+	7
Declined to answer	16

Disability	%
Yes	17
No	57
Declined to answer	26

Sexual Orientation	%
Heterosexual	51
Gay	0.5
Lesbian	0
Bisexual	0
Declined to answer	45.5
Other	3

Religion/Faith	%
Buddhist	0
Christian	26
Hindu	18
Jewish	1.5
Muslim	12
Sikh	9.5
Other	4
Declined	25
None	4

Ethnicity	%
Asian or Asian British- Indian	31.2
Asian or Asian British – Pakistani	4.7
Asian or Asian Other	1.8
Black or Black British- African	9.4
Black or Black British- Caribbean	12.4
Black or Black British- Other	1.2
Chinese	0
Mixed White & Asian	0.2
Mixed White & Black African	0.93
Mixed White & Black Caribbean	0.93
Mixed Other	0.93
Other	1.61
White British	10.9

White Irish	3.1
White Other	2.5
Declined to answer	18.2

Interested Groups

By the end of the reported year, we had **222** participants belonging to interested groups.

Interested Group Monitoring Information Analysis:

Gender	%
Number of Females	43
Number of Males	37
Declined to answer	20

Age Group	%
16-21	4
22-29	6
30-44	19
45-59	23
60-74	25
75+	7
Declined to answer	16

Disability	%
Yes	17
No	56
Declined to answer	27

Sexual Orientation	%
Heterosexual	50
Gay	0.5
Lesbian	0
Bisexual	0.31

Declined to answer	45.69
Other	3.5

Religion/Faith	%
Buddhist	0.31
Christian	28.7
Hindu	16.3
Jewish	1.5
Muslim	11
Sikh	8.8
Other	4.2
Declined	24.99
None	4.2

Ethnicity	%
Asian or Asian British- Indian	31.2
Asian or Asian British – Pakistani	4.6
Asian or Asian Other	1.8
Black or Black British- African	9.4
Black or Black British- Caribbean	12.4
Black or Black British- Other	1.2
Chinese	0
Mixed White & Asian	0.15
Mixed White & Black African	0.93
Mixed White & Black Caribbean	0.93
Mixed Other	0.93
Other	1.6
White British	10.9
White Irish	3.12
White Other	2.50
Declined to answer	18.34

SECTION FIVE: *DEMONSTRATING IMPACT THROUGH ACTION*

ACTION GROUPS

In order to focus resources on specific issues, Brent LINK has established four Action Groups. These cover: Adult Social Care, Community & Primary Care Services, Hospital Based issues and Mental Health. Key activities are outlined below.

Adult Social Care Action Group

Group Aims:

- Help and improve Adult Social Care provision in Brent
- Make Social Care services more user focussed, by feeding back the views of social care service users to people who deliver those services
- Work strategically with Commissioners and Providers of Social Care services

The Action Group have been working on the following issues:

- Direct Payments
- Centre for Independent Living
- Social Care Charges
- Personalisation and Transformation of Services
- Waiting time for assessments
- Freedom Passes
- Public sector cuts and effects on services
- Support for Carers and Families
- Adult Social Care Customer Journey
- “One Stop Shop” closures
- Stonebridge Day Centre
- Changes to Safeguarding Team



**Management Committee Member at a Group Workshop, Brent LINK Well Being Event
August 2010**

Future Plans

The Action Group aims to provide briefing, seminars and information in partnership with Brent Social Services and other agencies on Personalisation and conduct *Enter and View* visits. Ann O'Neill, Action Group Lead will be the Brent LINK representative on the Adult Strategic Partnership Board, so as to increase strategic involvement in designing and commissioning services.

Primary and Community Care Action Group

Group Aims:

- Communicating Primary Health and Social Care service user issues to relevant service providers & Commissioners;
- Use *enter and view* powers, where appropriate, to collate service user perspective views and experiences;
- Seek the best ways of working with lead officers & Commissioners of Primary Health & Community Care services providers;
- Assist or advise in communication between services users and providers.

The Action Group have been working on the following issues:

- Urgent Care Centre at Central Middlesex Hospital
- Surgeries closure & patient dispersion
- NHS Health Check programme
- GP List validation programme
- Clusters' Patients & public participation group - development work
- Separation of Brent Community Service and into an Integrated Care Organisation
- NHS-Reform Bill – Development of GP Consortia

Future Plans

Monitor impact of reduced PCT staffing levels on the quality of care commissioned & provided. Continue voicing service user concerns and views to commissioners and service providers. Facilitate patient and public participation and involvement in planning, development, commissioning of NHS services.

Hospital Based Action Group

Group Aims:

- Discuss and take action on issues pertaining to Hospital Services i.e. Northwick Park, Central Middlesex or any Hospital Based Service commissioned by NHS Brent;
- Work closely with North West London Trust Board and Care Quality Commission.

The Action Group has been working on the following issues:

- Monitoring changes to Children's Services
- North West London Trust's 2009/10 Quality Accounts
- A&E targets
- Low levels of patient satisfaction
- Merger of Ealing Hospital & NWLH Trusts.

Future Plans

Continue monitoring quality of care provided. Also, lobbying to raise service user issues with health care providers. Ensure that service user concerns and aspirations are integral to any future Trust mergers. Contribute to acute care reconfiguration and NWL Sector's saving plans.

Mental Health Action Group

Group Aims:

Discuss and take action on Mental Health issues in Brent and help improve the quality of Mental Health provision within Brent. This includes:

- Establishing a working relationship with service providers to ensure that service users needs are being met;
- Gaining understanding of the link between Local Authority service providers and Commissioners;
- Interfacing between enhancement services such as Improving Access to Psychological Therapies (IAPT) and Community Development workers (CDW); working to ensure that any such services meet the needs of service users;
- Influencing the design of IAPT and CDW services in partnership with Commissioners;
- Conducting Research;
- Promoting Positive Mental Health in the Community.



The Action Group has been working on the following issues:

- Belvedere House: Successful lobbying to ensure that patient consultation was integral to service reconfiguration plans;
- 2009/10 Quality Account for NWLHT and CNWL;
- Establishing working relationships and partnerships with mental health service providers.

Future Plans

- To continue positive working relationship with current and new service providers;
- To engage with service users, service providers and other stakeholders: mapping out, identifying and addressing gaps in service provision;

- To work in partnership with mental health service providers in the development of a Mental Health Network.

CASE STUDIES

The following case studies highlight how Brent LINK has worked to empower local people to have a say and/or influence health and adult social care services in Brent.

CASE STUDY: Community Consultation Exercise on the Liberating the NHS White Paper, September - October 2010

Summary:

During September - October 2010, Brent LINK engaged local communities in Brent: seeking views on Government's plans for the future of the NHS, outlined in the *Equality and Excellence: Liberating the NHS*, White Paper.

To ensure representation from Brent's diverse communities, Brent LINK organised a range of local community based events. These included:

- *Coffee mornings on 2nd, 16th & 30th September 2010*
- *'Street Talk' – street outreach and listening to the public*
- *Management Committee meeting 1st October 2010*
- *White Paper Information and Public Consultation Event in partnership with NHS Brent 23rd September*

A number of speakers attended the *Information and Public Consultation Event* including Chief Executive NHS Brent, London Borough of Brent Director of

Social Care, GLA Assembly Member for Brent/Harrow and Hestia Chief Executive.

Brent LINK was able to use its local network to collate a diverse range of community responses to the Government's proposals. These were summarised and sent to the Secretary of State for Health, as Brent LINK's contribution to the overall White Paper consultation.

Key Outcomes:

- Local communities were able to have a voice in shaping future healthcare services;
- Brent LINK was able to provide fora for health & social care commissioners/providers to engage with local communities;
- Brent LINK was able to raise its profile amongst local community health projects and local health economy;
- Brent LINK was able to engage a wide range of communities due to the flexible "menu" of community engagement options (e.g. 'Street Talk' – community outreach engaged young people and other groups typically not engaged in community engagement activity).

Case Study: Brent LINK Wellbeing Event, August 2010

Summary:

The event aimed to promote healthy lifestyles, minds and bodies and included a range of free interactive stalls including: fresh juice bar, dance workshops, "family maths workshops", free treatments,

interactive kids corner, men's health, community health promotion and free Henna designs (see picture below).

Stalls included NHS Brent, Brent Association of Disabled People, Brent Mencap, Brent Mind, Brent Community Services, British Heart Foundation, Health Promotion, Brent Dentistry and Anthony Nolan Trust.

Key Outcomes:

- Participants were able to access practical advice and tips on promoting their physical and mental wellbeing;
- Brent LINK was able to provide a forum for health & social care providers to engage with local communities;
- Brent LINK was able to raise its profile amongst local community health projects and local health economy.



Participant receives free henna design at Brent LINK Wellbeing Event



Mayor of Brent receiving shoulder massage at Brent LINK Wellbeing Event

Case study: “Navigating Mental Health Services” Seminar, October 2010

Summary

On 14 October 2010, Brent LiNk organised a “Navigating Mental Health Services” service user event at Willesden Library. This was part of a wider strategic review of mental health services in Brent, undertaken by NHS Brent.

The “Navigating Mental Health Services” event offered service users, carers, their families and voluntary organisations an opportunity to:

- discuss experiences of – and difficulties with – accessing mental health services
- identify ways of addressing issues raised
- identify how services need to work in future to enable individuals to move towards recovery utilising a range of resources

Forty five individuals attended the event, including service users, carers, representatives from community & voluntary sector. Commissioning arms of NHS Brent and Brent Mental Health Services also attended.

To focus discussion, participants divided into three groups; addressing acute services, community services and primary care service provision.

Key Outcomes:

- A report was written and sent to mental health commissioners, outlining service user recommendations in areas such as user information, community outreach activity, improved links between GPs and mental health providers and community engagement;
- User feedback helped shape content and priorities for 2011/12 mental health commissioning intentions (including service redesign proposals);
- The event helped raise awareness amongst commissioners of practical service user issues (e.g. time taken to travel to services);
- The event also increased service user knowledge of issues and national policy.

Case Study: Brent LINK Adult Social Care Open Forum, December 2010

Summary:

On 16th December 2010, Brent LINK held an *Adult Social Care Open Forum* for service users, individuals, carers, their families, community & voluntary sector organisations.

The event provided a platform for Brent LINK to provide feedback on how London Borough of Brent was responding to proposed public sector cuts and the subsequent impact on Adult Social Care Services.

Brent LINK was also able to collate a summary of key community concerns and feed these back to LB Brent.

Key Outcomes:

Brent LINK was able to provide feedback to individuals, voluntary sector and community organisations on LB Brent's spending cuts and implications for adult social care services.

Brent LINK was also able to feedback local peoples' experience of adult social care services including: benefits, discharge from hospital, support for Carers, role of voluntary sector organisations, lack of service information/advice and the "Personalisation Agenda". This feed back was used to inform the 2011/12 commissioning cycle.

Inspiring Others to Get Involved



Dave is an active Brent LINK participant who has attended several Brent LINK events. Here, he tells his story to a Brent LINK staff member...



When did you first get involved with Brent LINK activities?

Around June 2010.

How?

I found out about the Brent LINK's community training programme. I got in touch and signed up for some training including mental health awareness, computer training and effective meeting skills.

Have you attended any of the community engagement events organised by Brent LINK?

Yes. I attended their consultation event: allowing individuals and organisations to comment on the *Liberating the NHS* Government White paper. I also attended an Open Forum Public Meeting, discussing mental health issues.

What did you like about the community engagement events?

Three main things. Firstly, they were a great ways to find out about issues. I am Vice Chair of a local pensioner's organisation. By attending the Brent LINK events, I was able to find out about local health and social care issues and feed these back to our members - some of whom had said that they were "starved of information".

Secondly, the events allowed me to submit views and opinions to decision makers and people who shape health and adult social care service In Brent.

For example, I knew that as part of its NHS White Paper consultation, Brent LINK was collating local organisations' views and sending them to the Secretary of State for Health. I just felt that being part of a wider network increased the chance of our voice being heard.

Finally, the events were a great way to connect with Brent LINK's extensive local network and to find out about different groups and tap into networks with similar issues.

What's really made a difference?

The *Effective Meeting Skills Training* has been really helpful for my work with my organisation.

What would you like you see Brent LINK provide for the future?

More training would be great.

“WHAT YOU SAID, WHAT WE DID”



Over the past year, Brent LINK has attended many community events, fora and meetings.

The following section highlights the issues we identified through our community engagement activity and what we did in response.

What You Said	What We Did
<p>Community Training</p> <p>Brent LINK members felt that targeted training in key areas would build their ability to have a voice in shaping health and adult social care</p>	<p>Brent LINK sought member views and subsequently developed a training programme including:</p> <ul style="list-style-type: none"> • <i>Enter & View</i> • IT skills • Active Citizenship <i>i.e. Getting community voices heard in decision making</i> • Mental Health Act
<p>Consultation</p> <p>Brent LINK members wanted to express their views on NHS proposals contained in the “<i>Liberating the NHS</i>” – Government White Paper</p>	<p>Brent LINK held a series of “<i>Liberating the NHS</i>” consultation events including:</p> <ul style="list-style-type: none"> • Public consultation event • Information coffee mornings • Community outreach • Street outreach <p>Community responses were</p>

What You Said	What We Did
	submitted to Sec State Health, NHS Brent and other stakeholders
<p>Cross Borough & Sub Regional Work</p> <p>Brent LINK members wanted information on sub-regional LINK Best Practice</p>	<p>Brent LINK initiated and continues to attend sub-regional NWL LINK Chairs Meetings. Subsequently, Brent LINK Chairs and Host (Hestia) meet regularly to discuss and take action on sub-regional issues.</p>
<p>Information</p> <p>LINK members wanted locally accessible and relevant information on physical and mental well being.</p>	<p>Brent LINK successfully bid for a £7,000 grant to host the 2010 Brent Well-being Day. This took place in August 2010 attracting 300 members. Highlights included:</p> <ul style="list-style-type: none"> • Dissemination of information about health and social care service providers • Free alternative therapies. • Healthy buffet and juice bar.
<p>Brent LINK Adult Social Care Open Forum</p> <p>Members of the public wanted their views, concerns and aspirations about health and social care heard by</p>	<p>Brent LINK held an Open Forum Event attended by over 50 people. It allowed the public to scrutinise commissioning decisions of senior commissioners from NHS Brent and LB Brent (more on page 41).</p>

What You Said	What We Did
providers.	
<p>Brent LINK Youth Forum</p> <p>Young people wanted a platform to articulate their health concerns and aspirations.</p>	<p>Brent LINK:</p> <ul style="list-style-type: none"> • Facilitated six youth forum meetings • Held an Open Forum with young people and youth stakeholders • Encouraged and supported young people to get involved • Worked to ensure youth issues were addressed by Management Committee and Action Groups.
<p>Targeted Outreach</p> <p>Local Specialist agencies expressed concern at health issues affecting local homeless people.</p>	<p>Brent LINK worked in partnership with St Mungos to engage with homeless people in Brent. This included:</p> <ul style="list-style-type: none"> • Targeted outreach “tapping into” <i>St Mungos</i> local networks • Facilitated coffee morning allowing service users to express views and concerns about health and adult social care. <p>Concerns were fed back to Action Groups who discussed with relevant Lead Officers and specialist GP practice serving transient</p>

What You Said	What We Did
	communities.
<p>Strategic Meetings with Heads of Services</p> <p>Members wanted Brent LINK to be more “plugged in” i.e. bringing patient perspective to strategic decision making and shaping health and adult social care in the Borough.</p>	<p>Brent LINK undertook a partnership development programme. Key successes included:</p> <ul style="list-style-type: none"> • Invitation to join Mental Health Commissioning Review • Invitation to join Adult Strategy Partnership Board • Invitation to sit on the Commissioning Tendering Panel for Urgent Care Centre, Central Middlesex Hospital • Strategic meetings with Brent Adult Community Services
<p>The LINK received a large number of calls from people who had concerns about elements of the “Personalisation Agenda”.</p>	<p>Brent LINK held an Open Forum Event attended by over 50 people. This included an opportunity for the public to pose questions and concerns to senior commissioners from NHS Brent and LB Brent about personalisation. Brent LINK members continue to bring Personalisation issues to Action Group meetings during 2011/12.</p>

SECTION SIX

LOOKING AHEAD: THE NEXT 12 MONTHS

2010/11 was a busy and successful period for Brent LINK. For the next 12 months, we aim to build upon this success and develop activity in a number of key areas:

Youth Engagement

Brent LINKs recognises the need to ensure that it reaches out to a broader range of the community and that getting them involved will be a critical success factor.

For the coming year, we will be designing and delivering a youth engagement outreach programme.

This will initially entail engaging young people and youth organisations: identifying young people's health issues and their experience of health and adult social care services – either as patient, service user, carer or family member.

As well as developing activities based upon these uses, we will also regularly feedback this information to London Borough of Brent's Shadow Health & Wellbeing Board (and other relevant partnerships). In this way, the information can influence and inform service commissioning, planning and delivery.

We will also provide feedback to the young people we consult i.e. outlining to them how their input was used. To assist this feedback (and as part of our overall youth engagement) we will also be increasing our social networking presence. We will be updating our Facebook page and creating a new Twitter account. We will also be revising our website and looking into providing information updates via mobile 'phone SMS/text.

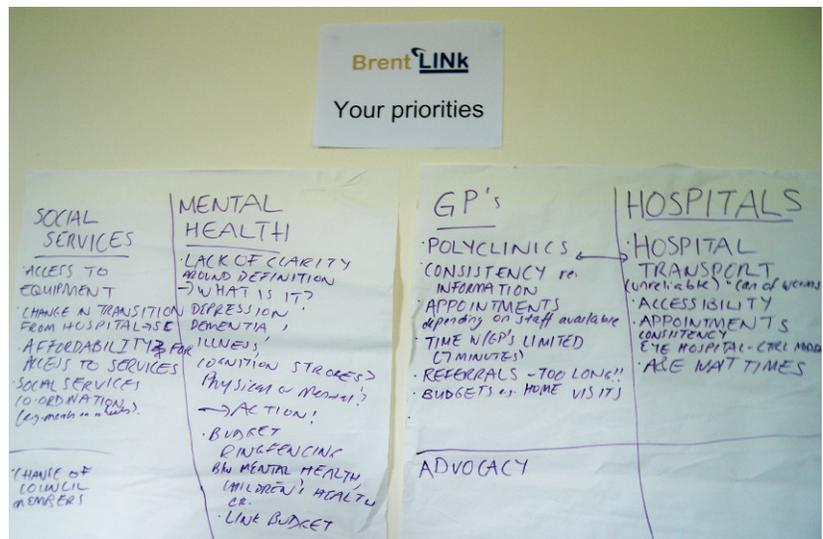
Improved Performance Management Systems

Another 2011/12 priority will be to improve our performance management systems. We will ensure that the activities we develop are based upon community need and that our targets are SMART (*i.e. Specific, Measurable, Achievable, Realistic and Time bound*).

To this end, we will be producing quarterly action plans based upon issues raised through engagement with our network and the wider community.

This performance management will also apply to our Action Groups.

They will have quarterly action plans which will enable us to focus the energies, expertise and enthusiasm of Action Group members.



Developing Stronger Local Relationships with Care Quality Commission (CQC)

For the coming year, we will be building upon the already positive relationship we have with CQC. We will achieve this through regular partnership meetings which will ensure coordination of our respective inspection programmes and in particular, CQC compliance regarding our “enter and view” documentation and methodology.

This partnership working will include passing information about local experiences to CQC when we consider that this is the best route to achieve improvements in local services.

We will also continue to seek the advice of CQC on our ***Enter and View*** programme: helping to ensure that, when the programme becomes operational during the first half of 2011/12, it reflects CQC best practice.

Readiness for Local HealthWatch

A main focus for Brent LINK for the coming year will be preparation for *Local Healthwatch*. Local Healthwatch is the new “consumer champion” being introduced as part of the Health and Social Care Bill. At the time of writing, it is expected that LINKs will undertake the role of Local Healthwatch from October 2012. This potentially means an increased role for Brent LINK in areas like commissioning health and social care, patient advocacy and devising local health profiles.

Over the next 12 months, we will be making sure that Brent LINK is ready for this new role by, for example, reviewing the “menu” of community involvement

opportunities that we offer and also by ensuring that our activities are based on evidence from people's views.

This will also entail closer working with London Borough of Brent and NHS Brent as we begin to map out arrangements for devising local health profiles.

We will also be reviewing existing Brent LINK structures and the training needs of our Management Committee members so that we are prepared for the opportunities and challenges presented by Local Healthwatch.

We will keep our network informed about these developments via public meetings, our newsletter, website and Twitter account.

SECTION SEVEN: *OUR YEAR IN FIGURES*

The Reach of Brent LINK & the Level of People's Participation

A member of the public can register with Brent LINK as an individual member or a group. The definition of a Brent LINK member is as follows:-

A **Brent LINK member** is a person or group that makes a commitment to take part on a regular basis in the development and implementation of the roles of the LINK, and to provide information to and collect information from a local community or a specific group within a community.

A LINK member is different from a participant:-

A **LINK participant** is a person, group or organisation that wants to influence the bigger picture through the roles of the LINK, even though they may not be in a position to participate on a regular basis. A participant may be interested in a single issue, may take an active role in specific pieces of work that relate to their areas of interest, or they may take a less active role by answering surveys or providing information or a view on behalf of an interest group.

Informed Participants: are groups or individuals who register their interest in the LINK and receive information, whether general updates and/or thematic interest.

This includes those who interact with our website and social networking sites.

Occasional Participants: are informed participants (individuals or groups) who also respond to a particular LINK issue, or attend a workshop or meeting on a specific topic. For example, someone who became involved in a task and

finish piece of work around a specific issue (such as the Brent LINK Wellbeing Event) and had no further involvement with the LINK on any other work streams and requested to revert back to receiving the newsletter only. This could also be someone who requests to receive themed information and comes along to an occasional meeting 1 -2 times a year.

Active Participants: are groups or individuals who have a high level of participation (i.e. someone who takes part in activity at least once a month), for example by attending introduction to LINK workshops, accessing training to build up skills in representation and/or visiting services, becoming involved in action group activities or representing Brent LINK externally.

Within each of these levels, **people with a social care interest** are those with experience of using social care services or a specific interest in social care. They may also have an interest in health care.

Group participants are people who are acting as a representative for one or more organisation(s) or interest group(s). **Individual participants** are those who are not acting in this way.

Level of participation	Total	Of which		
		People with a social care interest	Individual participants	Interest group participants
Informed participants	558	234	387	171
Occasional participants	89	39	50	39
Active participants	21	14	11	10

SUMMARY OF ACTIVITY

Requests for Information in 2010-11	
How many requests for information were made by Brent LINK?	11
Of these, how many of the requests for information were answered within 20 working days?	9
How many related to social care?	1
Enter and View in 2010-11	
How many enter and view visits did Brent LINK make?	0
How many enter and view visits related to health care?	0
How many enter and view visits related to social care?	0
How many enter and view visits were announced?	0
How many enter and view visits were unannounced?	0
Reports and Recommendations in 2010-11	
How many reports and/or recommendations were made by Brent LINK to commissioners of health and adult social care services?	6

How many of these reports and/or recommendations have been acknowledged in the required timescale?	4
Of the reports and/or recommendations acknowledged, how many have led, or are leading to, service review?	2
Of the reports and/or recommendations that led to service review, how many have led to service change?	1
How many reports/recommendations related to health services?	6
How many reports/recommendations related to social care?	1
Referrals to OSCs⁵ in 2010-11	
How many referrals were made by Brent LINK to an Overview & Scrutiny Committee (OSC)?	0
How many of these referrals did the OSC acknowledge?	n/a
How many of these referrals led to service change?	n/a

⁵ Brent LINK regularly attends Brent Health Partnership OSC meetings and raises and makes contributions to the service user issues. This has pre-empted formal Brent LINK referrals to OSC.

SECTION EIGHT: *OUR FINANCES*

Brent LINK Financial Summary: Hestia (April 2010 to 31st March 2011)

The following is a breakdown of the LINK and Host Accounts combined:

Brent LINK	Income	Expenditure	Variance
LINK activities	30160.00	27252.00	2908.00 ^a
Host / Running costs	143593.00	137542.00	6051.00 ^b
Family Mosaic Award	6981.00	6981.00	0.00
TOTAL	180734.00	171775.00	8959.00

The following is a breakdown of the LINK and Host Accounts:

LINK Summarised Statement

Description	Allocation: (£)	Expended: (£)	Variance: (£)
Development costs:			
Printing and Publication	2500.00		
Stationery and Post	900.00		
Advertising	750.00		
Library	200.00		
Sub-Total	4350.00	10703.00	- 6353.00
Communication and Engagement:			
Radio	1200.00		
Entertainment (music & catering)	1700.00		
Freephone	300.00		
Incentives	500.00		
Web conferencing	300.00		
Translation/Interpretation / BSL/Audio/Braille	4500.00		
Crèche Service	500.00		
Website Development	2000.00		
Sub-Total	11000.00	3700.00	7300.00
Consultation Research / Projects:			
Commissioning user survey	2000.00		
External Facilitators	1000.00		
Sub-Total	3000.00	2625.00	375.00

Expenses for LINK participants:

Travel	1680.00		
Subsistence	1680.00		
Carer costs	500.00		
Child care	500.00		
Payments	750.00		
Sub-Total	5110.00	764.00	4346.00

Training for LINK Participants:	3200.00		
Sub-Total	3200.00	3878.00	- 678.00

Venue for activities:	3500.00		
Sub-Total	3500.00	5582.00	- 2082.00

Total Allocation:	30160.00		
Amount Expended :		27252.00	
Surplus on the disbursed Grant			2908.00

Host Summarised Statement

Description	Allocation: (£)	Expended: (£)	Variance: (£)
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Staff costs ^c:

Salaries, Employers NI, Pensions Agency and Staff Travels			
Sub -Total	112536.00	106242.00	6294.00

Administration Costs

Office Costs: Office costs, Office Rental Phone and Post, Sundry Costs, Depreciation & IT Consumables.			
Sub-Total	11208.00	9130.00	2078.00

Building/Household Costs

Council Tax, Portable Appliance Testing Cleaning Material			
Sub-Total	0.00	1002.00	- 1002.00

Recharged Cost Management Charges Insurance Charge Recruitment Charge Training Charge			
Sub – total	19849.00	21168.00	- 1319.00

Total Allocation:	143593.00		
Amount Expended:		137542.00	
Overall Surplus on the disbursed Grant:			6051.00

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.

A – Any unspent income for LINK activities will be carried over into 2011/12, for use by the Brent LINK.

B- Any unspent income for Host activities will not be carried over into 2011/12.

C - Senior manager salary cost within the service group is not included.

SECTION NINE: *CIRCULATION OF BRENT LINK 2010/11 ANNUAL REPORT*

Brent LINK's 2010/11 Annual Report will be circulated to signed up Brent Participants and made available to the general public on Brent LINK's website www.yourbrentlink.org

Selected achievements from the 2010/11 Annual Report will also be posted via Brent LINK Twitter account: <http://twitter.com/BrentLINK#> throughout 2011/12.

An "Easy read" version will be published summer 2011 for people with learning difficulties or limited proficiency in English.

A copy of the Brent LINK Annual Report will be sent to:

The Secretary of State for Health

The Care Quality Commission

The London Borough of Brent

LB Brent Health Partnership Overview & Scrutiny Committee

NHS Brent

Central & North West London Foundation Trust

NW London Hospital Trust

Copies will also be made available via:

Brent LINK Office upon request

Local Libraries and Community Centres

Brent LINK meetings, events and outreach activity

Registration Form

If you would like to join Brent LINK
Please complete the following **FREE** registration form

Return your completed forms in the **FREEPOST** envelope provided

Brent Local Involvement Network –
IT'S YOUR LINK!

How to get in touch and involved with Brent LINK

If you would like to receive information, be invited to events, get involved, join our Action Groups or help us help you to make a difference, join us. Anyone who lives or works in Brent can get involved.

Please complete the attached registration form or contact the Brent LINK Team for information on:

 Brent LINK
Hestia Housing and Support
Unit 56
The Designworks
Park Parade
London
NW10 4HT

 Main Office: 0208 965 0309

 brentlink@hestia.org

 www.yourbrentlink.org



Brent LINK Registration Form

London Borough of Brent Local Involvement Network –
IT'S YOUR LINK!

Please tick the boxes below (as appropriate) and complete the contact details:

I am interested in:

- Registering to become involved in the LINK
- Volunteering for the LINK (e.g. administration and activities)
- I would like to be kept informed about the LINK

Name: _____

Contact Address: _____

Tel: _____ Mobile: _____

Email: _____

How would you prefer to receive information and updates about the LINK:

Email Post Telephone Mobile

If you require assistance to complete this form please telephone the Brent LINK team on 020 8965 0309 or email on brentlink@hestia.org

Please complete and return in the **FREEPOST** envelope provided

Brent LINK Registration Form (continued)

Please answer the following questions	Yes	No
Are you a user of health and/or social care services in the borough?		
Are you a carer for someone who uses health and/or social care services in the borough?		
Do you work in the borough of Brent?		
Are you a resident of the borough?		
Are you registering an interest in the LINK on behalf of an organisation or group?		

Your organisation or group name (if applicable): _____

Are you interested in any particular services or issues?

Adult Social Care

Older People

Mental health

Disability

Carers'

Hospital services

Health and social care issues in neighbouring boroughs

Primary and community health services e.g. GPs, community nursing, therapies, dentists, pharmacists, optometrists

Other (please state below):

Signed

Date

Please complete and return in the FREEPOST envelope provided

Brent LINK VOLUNTARY MONITORING INFO*

*(This is to ensure the LINK is reaching out to everyone)

Please mark a cross in the box that describes you:

Male Female

Please mark a cross in the box for your age:

16 – 21 22 – 29 30 – 44 45 – 59

60 – 74 75+

Do you consider yourself to have a disability?

Yes No Declined to answer

Would you define yourself as:

Heterosexual Gay Lesbian Bi-sexual

Other Declined to answer

Please tick the box that describes your faith or religion:

None Hindu Sikh Muslim

Christian Jewish Buddhist

Declined to answer Any other religion

Please state other religion here:

How would you describe your ethnic background?

White British

White Irish

White Other

Mixed – White & Black Caribbean

Mixed – Other

Mixed White & Black African

Mixed – White & Asian

Asian or Asian British – Indian

Asian or Asian British – Pakistani

Asian or Asian British – Bangladeshi

Asian or Asian British – Other

Black or Black British – Caribbean

Black or Black British – African

Black or Black British – Other

Chinese

Other

Declined to answer



Have your say...

Please tell us about the experiences you have had as patient, service user and/or carer an issue you may have become aware of in relation to Health or Social Care Services in the London Borough of Brent

Please complete and return in the **FREEPOST** envelope provided



Have your say ...

Please tell us about the experiences you have had as patient, service user and/or carer an issue you may have become aware of in relation to Health or Social Care Services in the London Borough of Brent

Please complete and return in the **FREEPOST** envelope provided

