



Report of the Director of Adult Social Services

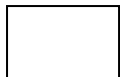
Health Scrutiny Board

Date: 16th September 2008

Subject: The Leeds Local Involvement Network (LINK) – Update

Electoral Wards Affected:

All



Ward Members consulted
(referred to in report)

Specific Implications For:

Equality and Diversity

Community Cohesion

Narrowing the Gap

Executive Summary

1. Following passage of the Local Government and Public Involvement in Health Act on 30th October 2007, the Department of Health funded local authorities to procure an independent organisation to act as Host for the future LINK in their area.
2. Scrutiny has a role in overseeing the Host procurement process. The Health and Adult Social Care Board received a first briefing on developments in Leeds to establish a Local Involvement Network (LINK) for health and social care at its October 2007 meeting.
3. This was followed by a further update in January 2008 and verbal reports have been given subsequently. This report outlines the process which the Council established in order to secure best value and looks forward to what can be expected of Host and LINK with particular reference to the relationship with the scrutiny function.
4. The procurement process has recently concluded with award of a three year contract to the Shaw Trust who will be represented at the meeting.
5. In the meantime, as required by legislation, the City Council enabled an independent LINK Preparatory Group to undertake transitional functions and prepare for the LINK proper.
6. LINK involvement will cover both health and social care and will therefore have implications for both the Scrutiny Boards covering these areas as part of the LINK's role is to promote and support public and patient involvement in the commissioning, provision and scrutiny of local care services. Protocols for relationship between the LINK and the Council's scrutiny function will need to be agreed.

1.0 Purpose Of This Report

- 1.1 This report is to report the award of the Host contract and to enable the Board to consider matters relating to the development of the LINK and future relationships with LINK and the Host Organisation.

2.0 Background Information

- 2.1 The background to LINKs was contained in a report to the October meeting of the Board. The latest Department of Health leaflet explaining LINKs to the public is attached as Appendix.3
- 2.2 The Local Government and Public Involvement in Health Act in on 30th October 2007 provided for the winding up of the Commission for Patient and Public Involvement on 31st March 2008, signifying the end of Patient and Public Involvement Forums. Local Authorities with Social Services responsibilities are required to commission an organisation to act as Host for the Local Involvement Network (LINK) in their area. The LINK replaces local Forums and also extends to social care. Brief details of the Act are contained in Appendix 1 and Appendix 2 has website references for further information.
- 2.3 The Department of Health provided all relevant local authorities with £10,000 to meet consultation and procurement costs and announced the individual allocations for local LINKs in December 2007. Leeds is to receive slightly over £300,000 per annum for the next three years. However these allocations are not ring fenced and form part of the Area Based Grant which Local Authorities are entitled to spend as they wish in pursuit of their statutory and agreed objectives. The Council's policy on the Area Based Grant has been to make allocations for Year 1 according to expectation but to seek opportunities in Years 2 and 3 to review allocations for duplication and more effective spend. However the Council has also recognised that a number of 3 year contracts have to be made using the ABG.
- 2.4 The Department of Health also initially insisted that the exercise should be led independently of Social Services, but later came to the view that this was not practicable since many authorities had no other source of expertise in this field.

3.0 Procurement Process for the Leeds LINK

- 3.1 An Advisory Group was set up in June 2007 with representatives from the Council, local NHS involvement leads, the Patient and Public Involvement Forum, the Service Users and Carers Alliance and the VCF sector. As the procurement process began, potential VCF bidders withdrew and the Advisory Group became a Project Team. It was agreed to follow the restricted procedure (two stage process) according to EU regulations. The tender inviting Expressions of Interest was advertised in the Official Journal of the EU, in the local press, through the Voluntary Action Leeds newsletter, and on the Council's contracts website. By the closing date of 31st December, 8 expressions of interest had been received including three local organisations.
- 3.2 A city-wide event for patient, service user and carer groups was hosted in the Civic Hall on 4th December to publicise the new LINK arrangement and gain views on its development in Leeds. The event was well attended by local organisations and individuals, including elected Members and the then Chair of the Scrutiny Board.

- 3.3 On a more technical level there were separate discussions around contractual issues including the possible application of TUPE. On this matter, following legal advice circulated from the Department of Health in December 2007 and after consultation with the Council's Legal Services, the conclusion from the Council's point of view was that TUPE did not apply.
- 3.4 Also in December a LINK Reference Group was established for Patient and Public Involvement members and representatives of Service Users and Carers.
- 3.5 An Evaluation Team was selected including one PPI member and one representative of social care service users. Using a consensus method and working on previously agreed scoring criteria the Evaluation Team, supported by the Corporate Procurement Unit, recommended a short list of five organisations, two of which were from Leeds. However one shortlisted national organisation then sent notice of withdrawal from all its local LINK bids.
- 3.6 The Project Team prepared a service specification which was commented on and agreed by the Project Team and Reference Group. The specification also went through an equality assessment. The specification included a timetable of milestones to enable the establishment of the LINK by September 2008.
- 3.7 A Project Board was convened, chaired by the Head of Corporate Procurement and including the Deputy Director of Social Services, a PCT Executive Director, the Council's Equality Strategy Manager and two representatives of patients and service users (not those on the Evaluation Team). The Board approved the specification and shortlist.
- 3.8 Four shortlisted organisations, two from Leeds and two external, were invited to prepare tenders with a closing date of April 9th. One local organisation was granted permission to withdraw from the process because of capacity.
- 3.9 Three tenders were received and evaluated against the agreed criteria. The LINK is a new concept whose essence will be as much in the development as the specification. Both tendering and evaluation were complex matters. Following the initial evaluation the Project Board decided that the two leading tenders required further clarification. The subsequent interviewing process meant that the evaluation took longer than expected and the final recommendation could not be included in the Council's revised Forward Plan until the beginning of August at which point it was agreed that the contract for Hosting the new Local Involvement Network should be awarded to the Shaw Trust. Further details about commencement of the contract and initial arrangements will be given at the Board meeting.

4.0 Shaw Trust

- 4.1 The Shaw Trust is a national charity with 25 years experience of supporting people with disabilities and people with a disadvantage especially into employment. There is already a branch of this service in Leeds. In recent years the Trust has become increasingly active in representation and advocacy and from 2003 was a major contractor to the Commission for Patient and Public Involvement for the support of over 40 PPI Forums, the predecessors of the LINKs. The Trust therefore brings considerable experience to the task while recognising that LINKs will be completely different. Indeed the Trust was itself involved in working with the Department of Health in recommending changes to the Forum system and has been successful in winning a number of other Host contracts, including Wakefield.

5.0 Consultation and Engagement

- 5.1 The Project Team sought to distribute information about the LINK widely within Leeds and to make information available on the internet from different local websites. Information has been made available on audio tape and Braille where requested. This work was supported by the NHS Trusts in Leeds which have simultaneously been developing their own involvement networks.
- 5.2 The Service User, Carer and Patient Reference Group met for the first time on 19th December and continued to meet until the March, providing advice and contributing to work such as the equality impact assessment. The group provided nominees for the Project Team and Procurement Board, to be drawn equally from NHS patient representatives and users of Social Care services. The group also looked to the future and agreed the direction and scope of transitional arrangements.

6.0 Transitional Arrangements

- 6.1 The Act instructs Local Authorities to make transitional arrangements where there will not be a Host or LINK operative by the time the current PPI Forums are wound up at the end of March. This transitional period expires on 30th September.
- 6.2 Leeds was fortunate in having an active and involved section of the community supported by local organisations, the NHS and former PPI Forum members to assist with this task. The LINK Reference Group agreed to become an independent LINK Preparatory Group and elected a Chair from the Service User and Carer Alliance, supported by a former PPI Forum Member. The City Council, anticipating guidance which subsequently appeared from the Department of Health, sought and secured an independent VCF organisation not connected with the bidding to support the Preparatory Group and an agreement was made with Leeds Older People's Forum. This is funded out of the Department of Health LINK allocation and is now expected to last until mid September.
- 6.3 The Preparatory Group has met approximately on a monthly basis, has created subgroups and pursued a number of issues. However these have been limited because of the transitional nature of the group. The Group has discussed future governance possibilities but has also recognised that it will not necessarily become the Steering Group of the new LINK because governance arrangements and scope of the LINK will be for the Host organisation to develop along with old and new LINK members as it moves towards a firm and agreed structure.

7.0 Regulations for the LINK

- 7.1 Regulations relating to the LINK were issued in March/April 2008. These included the necessity for providers of health and social care (other than the care of children looked after by the local authority) to allow visiting by LINK representatives within stated parameters and on an agreed basis. There is a requirement that local authority and NHS contracts with independent providers include this facility.
- 7.2 A formal Code of Conduct for LINK visitors was issued in July 2008. The Code explains the legal responsibilities and duties; sets out good practice in terms of preparing for a visit; provides advice for authorised representatives at the time of their visit (including conduct); and covers what LINKs should consider once a visit has finished (including how to share information).

8.0 Regional and National Support

- 8.1 During the procurement process the Project Team has kept in touch with developments in the region and elsewhere. The Care Services Improvement Partnership (CSIP) set up a regional network for local authorities during the procurement process and has now transferred this support to Host organisations. The Department of Health has itself been keen to offer support and there are a number of national websites with information, guidance documents and the opportunity to share and comment on issues. The Shaw Trust will join the Leeds LINK to the Community Voices Network.
- 8.2 There has been considerable discussion about the desirability of national branding for Local Involvement Networks. There seems to be most consensus about having some core statements and products which prevent LINKs having to reinvent statements of purpose, vision or values. The Department of Health is also keen to ensure that these statements are communicated effectively. It is therefore developing a visual identity that LINKs can tailor, as it will be used by more than one area, but which will also maintain a level of consistency in order to build public recognition and trust. There will also be a communications toolkit that will provide LINKs with tools they can use to engage their communities.

9.0 Implications for Council Policy And Governance

- 9.1 The Local Authority will have responsibility for assigning the contract for the Host and performance managing it over its three year period. Although the Host will eventually be primarily accountable to the LINK itself, a mechanism will be needed for formally reporting on contract performance mainly around technical issues and probity issues. However there could also be a troubleshooting role and it may also be that an offer of support and liaison from the statutory agencies would be welcomed by the LINK and the Host.
- 9.2 However the independence of the LINK is protected in the legislation. The local authority is not permitted to influence the LINK through management of the contract.
- 9.3 Implementation of the Council's Duty of Involvement will need to take account of the LINK and offer it support and information, particularly in relation to social care and the proposed Equality Assembly. The specification for the Host encourages it to support the LINK in looking at broader health as well as at service issues.
- 9.4 Section 226 of the Local Government and Public Involvement in Health Act empowers the LINK to refer social care matters to the relevant Local Authority Scrutiny Committee. The referral must be acknowledged (within 20 working days) and the referrer kept informed of any action but the scrutiny committee is not obliged to take up issues referred to it by the LINK. Under Section 227 the LINK is also required to send its Annual Report to the Local Authority Scrutiny system.

10.0 Legal And Resource Implications

- 10.1 The City Council is required by law to commission a Host for the LINK. The Host is accountable to the local authority in terms of performance to contract but its major accountability is to the LINK which is itself broadly accountable to the Secretary of State for Health.

10.2 The LINK is funded by the Department of Health through the Area Based Grant and the financial allocation for the LINK is detailed in Paragraph 2.3.

11.0 Comments

11.1 The LINK process has been complex and occasionally fraught. It is clear that in order to win support for the LINK concept, the Department of Health loaded it with expectations which caused considerable anxiety both for local authorities and for local communities. In particular many PPI Forum members remained unconvinced that the LINK would provide any better a model than the one which they were developing. The concept remained contested until the legislation was almost complete and provision for transitional arrangements was included only at the last moment. However once the legislation was passed, the Department has tended to hold off and enable local arrangements to develop; this made the process easier for everyone. However if the Department had recognised a little earlier that the scheme required a longer implementation timetable than they had originally anticipated, local processes could probably have been developed more smoothly.

11.2 It is hoped that by the time of this meeting the work of all concerned in the Host procurement process will be beginning to show fruit. As stated in a previous report, this work could not have been successfully carried out without the active support of partners from the NHS, the VCF sector, and from patient, service user and carer groups and particular tribute must be paid to the latter, who put aside their dissatisfaction about the past (in the case of PPI Forum Members) and their anxieties about the future of involvement in order to play a constructive role in the preparation. This is especially true of those who have given their time and commitment to being members of the procurement exercise and to participating in the LINK Preparatory Group.

12.0 Conclusions

12.1 Despite some unforeseeable delays, the Council has been able to complete a satisfactory procurement process within the required timescale. The appointment of the Shaw Trust can be expected to add a fresh dimension to existing involvement structures in Leeds which will offer broader connections with other areas and some economies of scale. At the same time the local Host will have a full commitment to the local LINK.

13.0 Recommendations

13.1 The Board is requested to note the information in this report and to make such comment as it deems appropriate.

13.2 The Board is also requested to ask officers to consult with the LINK Host in order to formulate suitable proposals for the connection between the Scrutiny function and the LINK.

Background Documents

Listed at Appendix 2.

APPENDIX 1 LOCAL GOVERNMENT AND PUBLIC INVOLVEMENT IN HEALTH ACT Part 14: Patient and Public Involvement in Health and Social Care

Procurement of “hosts” - Section 221 requires each social services authority to procure an organisation or “host” to establish and support a Local Involvement Network (LINKs) in each local authority area. The “host” will support LINKs to:

- promote and support the involvement of people in commissioning, provision and scrutiny of local care services (“care services” refers to both health and social care)
- enable local people to monitor and review the standard of local care services and report on how they could be improved
- obtain the views of local people about their experience of local care services and their care needs.

The responsibilities of LINKs can be amended by regulation by the Secretary of State but that they can only be added to not taken away, as was possible in the original Bill. The Act outlines the bodies that are not permitted to provide such support or become a LINK: they are local authorities; NHS trusts; NHS foundation trusts; primary care trusts or strategic health authorities.

Local Involvement Networks (LINKs) – LINKs will be required to have a clear governance structure including: the process for decision-making; how LINKs members are authorised to act on behalf of the LINKs; financial arrangements; and how breaches of authority are dealt with.

Health and social care providers will be required to: respond to LINKs requests for information; consider and respond to reports and recommendations made by LINKs; allow authorised representatives of LINKs to enter and view premises on which care is delivered (but representatives will not be permitted to enter and view private rooms of individuals).

LINKs must produce an annual report giving details of their activities, their membership and their financial arrangements.

Relationship between LINKs and overview and scrutiny committees – LINKs are able to refer “social care matters” to the appropriate overview. There is no obligation for the committee to act on every referral but they must acknowledge the receipt of the referral and “keep the referrer informed of the committee’s actions in relation to the matter”.

Transitional arrangements – Local authorities will be expected to procure host arrangements by 31 March 2008 but in those areas where this has not been possible, local authorities will be subject to “temporary duty” lasting until 31 September 2008 to ensure that there are means to support LINKs activities. Temporary arrangements could include the local authority providing support to LINKs or agreeing an interim contract with another organisation to provide support to LINKs. The Act does not specify the consequences for local authorities if they have not procured host support by 31 September 2007.

Abolition of the Commission for Patient and Public Involvement in Health and Patients’ Forums – The Act abolishes the CPPIH and all Patients’ Forums with effect from 1 April 2008. All property, rights and liabilities of Patients’ Forum will transfer to the Secretary of State for Health. Furthermore, any legal proceedings may be continued by the Secretary of State. Before they are abolished, they will be required to prepare a report of “anything being done by the Patients’ Forum”.

Duty to involve service users (Section 233) – All NHS bodies, including strategic health authorities, must make arrangements to involve service users and/or their representatives in the planning, delivery, development and decision-making in relation to health services. Furthermore, all health bodies must publish a report (believed to be annual although this is not specified in the Act) giving details of the consultation it has carried out or proposes to carry out before making commissioning decisions. It must also report on “the influence the results of any relevant consultation had had on such matters”.

APPENDIX 2

Website links

A Stronger Local Voice July 2006 – the original consultation document setting out intentions.

http://www.dh.gov.uk/prod_consum_dh/idcplg?IdcService=GET_FILE&dID=20130&Rendition=Web

Government Response to comments on A Stronger Local Voice December 2006

http://www.dh.gov.uk/prod_consum_dh/idcplg?IdcService=SS_GET_PAGE&siteId=en&ssTargetNodeId=566&ssDocName=DH_062839

House of Commons Select Committee on Health report and the government response can be downloaded via:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_075501

Getting Ready for Links Guidance Documents August 2007

Planning your Local Involvement Network

Contracting a Host for your Local Involvement Network

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_077266

The **NHS national centre for involvement** has a section on LINks and Department of Health **LINks bulletins** so far can be downloaded from

<http://www.nhscentreforinvolvement.nhs.uk/index.cfm?Content=142>

LINks exchange

A network for sharing best practice and supporting and developing those implementing Local Involvement Networks (LINks). Access is currently by accepted registration only.

<http://www.lx.nhs.uk/>

APPENDIX 3

Stronger Voice Better Care The LINK Explained

.pdf document attached.