

Scrutiny Board (Health and Wellbeing and Adult Social Care)

Healthwatch workshops 23 and 30 July 2012

What is Healthwatch?

- Healthwatch is the new consumer champion for both health and social care.
- Its prime role is to influence commissioners and outcomes for patients – using patient and public involvement as a tool to this end.

Process

We held two workshops:

- To feed into the tender process for Healthwatch
- To develop ideas for future working together with Healthwatch

Each workshop comprised briefings on the context for Healthwatch and the developing tender process, with group discussions on the way forward and next steps.

Notes from discussions and group work:

What do we want local Healthwatch to be?

- “representative” – but need to be clear what this means – groups? Ages? Ethnicity? Geography?
- a body that does not duplicate others
- able to tap into and take forward LINK work and networks
- “the go to agency of choice for bodies seeking patient and public views, eg CCGs
- the focal point for information and advice
- accountable
- “Independent” – of the Council etc
- well linked with the Scrutiny Board for Health And Wellbeing and Adult Social Care – should a Member from this sit on Healthwatch?
- A good communicator as it needs to try and ensure that (all of) the citizens of Leeds are aware of what it is and what it does
- Effective at raising awareness of its role among patients, patient groups, and the general public.
- Effective at influencing quality in the NHS
- Not too large a governing body as to be unwieldy.

What do we want local Healthwatch to do?

- Build on LINKs role and networks – encourage LINK Members to get involved in Healthwatch
- Find creative ways to involve in a wider range of people eg young people, minority ethnic groups, 3rd sector
- If appropriate, incorporate other providers and other existing provision in the Healthwatch brand (eg 3rd sector information providers)
- “Add value” – focussing on outcomes and improving the patient experience rather than rather than (just) data-gathering
- Influence the Health and Wellbeing Strategy, which itself will flow from the Joint Strategic Needs Assessment
- Recognise and manage conflicts of interest
- Manage expectations – be realistic!
- Able to spot themes and patterns and bring them to the attention of appropriate bodies eg the providers, CQC, the Health and Wellbeing Board, the Scrutiny Board for Health And Wellbeing and Adult Social Care
- Build effective partnerships with elected members, for example Area Committees.
- Engage more with communities
- Bring together information on people’s experience of using complaints processes
- Help people with early stages of their complaints – if capacity
- Align (some of) their work with the City’s health priorities such as reducing obesity and health inequalities; promote the public health agenda.
- Link with other statutory and other organisations that commission or provide services that influence the wider health determinants.

There was a recognition that things take time – the CHC achieved impact and recognition partly because it was around for 30 years. It is important to be realistic about what can be achieved how fast.

There was a concern that LINKs may lose members and momentum in the transition period.

There was also a concern about risks due to the very tight timescales, which had arisen from central government’s changes to specifications and processes.

It was noted that scrutineers generally suffer from the lack of a budget for research and effectively rely on the capacity of the body(s) scrutinised to provide information – no easy answer was forthcoming

Specifics that we would like to contribute to the tender for bids to provide the Healthwatch service– which is to be evaluated on quality rather than price

Questions for tender bidders which could form part of the qualitative tender evaluation process and tap into their creativity and innovation:

Please state what ideas you have on:

- How will you address the challenge of raising awareness of Healthwatch's role?
- How would you plan to develop and grow a "representative" body?
- How will you be inclusive of the "harder to reach/hear" groups?
- How can you demonstrate that you will recruit officers who have a genuine interest in health and social care?
- How will you assure the independence of Healthwatch so that it is able robustly to challenge the Council as a service provider and commissioner?
- How will you determine the priorities of the new body?
- How will you build partnership relationships eg with the Scrutiny Board (Health And Wellbeing and Adult Social Care)
- (If appropriate) how will you demonstrate skills in complaints advocacy and resource providing support at all stages of a complaint?

The issue of the Healthwatch Leeds governing body was discussed in terms of who would be a member and in what capacity. The potential role for a member of Scrutiny, the Director of Public Health and Elected Members (portfolio holder) was briefly discussed.

Additions to draft Healthwatch values and behaviours requested by the Members of the Scrutiny Board:

Values: Empowering people and communities – and the voluntary sector
Behaviours: focusing on integrated care pathway outcomes.

Ideas for working together with Local Healthwatch

- Exchange our schedules of meetings
- July meeting (annually) to consider programme ideas and prioritise together. Agree who can best do what - could be stages along the commissioning route, Review of a condition/patient pathway, etc.
- Sustain the practice of having 2 co-optees from Link on Scrutiny Board – and ask Healthwatch to reciprocate. Create a spec of what are the expectations of co-optees.

APPENDIX 1

- Proactively invite Healthwatch members to observe a Scrutiny Board meeting (and vice versa), explain expectations/what they will be expected to do, and hold brief social event at the end
- Hold a Scrutiny Board meeting at Healthwatch premises?
- Make joint visits to organisations eg to hear staff concerns after CQC has flagged up a possible issue,
- Possible joint workshops
- Possible protocol (short) to capture ideas for good working relationships – no existing protocols.

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