

DECISION-MAKER:	HEALTH OVERVIEW AND SCRUTINY PANEL		
SUBJECT:	ESTABLISHMENT OF LOCAL HEALTHWATCH IN SOUTHAMPTON		
DATE OF DECISION:	19 TH JANUARY 2012		
REPORT OF:	EXECUTIVE DIRECTOR FOR HEALTH AND ADULT SOCIAL CARE		
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STATEMENT OF CONFIDENTIALITY			
None			

SUMMARY

The Health and Social Care Bill currently before Parliament requires each upper tier local authority to make arrangements for local HealthWatch. This report updates the Scrutiny Panel on developments since the previous report in June 2011. It summarises recent developments, outlines the scope envisaged for local HealthWatch, and provides an opportunity for the Scrutiny Panel to express a view on how it would wish to see HealthWatch develop in Southampton.

RECOMMENDATIONS:

- (i) That the Scrutiny Panel determines whether it wishes to express a view on how HealthWatch should be developed in Southampton.
- (ii) That the Scrutiny Panel identifies if and how it would wish to engage with local HealthWatch as it develops and once it is established

REASONS FOR REPORT RECOMMENDATIONS

1. To provide an opportunity for the Health Overview and Scrutiny Panel to express a view on the development of local HealthWatch in Southampton.

CONSULTATION

2. A range of other stakeholders are being engaged on this issue, including the shadow Southampton Health and Wellbeing Board, S-LINK, and community and user groups.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

3. The council will have a duty to establish local HealthWatch. The precise form is not being determined at this stage, but it is essential to undertake the necessary preparatory activities in order to be able to introduce local HealthWatch from April 2013.

DETAIL

4. The government intends to establish HealthWatch to be the new consumer champion for both health and adult social care. It will exist in two distinct forms – Local HealthWatch, at local level, and HealthWatch England, at national level.

HealthWatch England will be a national body that enables the collective views of the people who use NHS and adult social care services to influence national policy, advice and guidance. It will be a statutory committee of the Care Quality Commission (CQC) with a Chair who will be a non-executive director of the CQC HealthWatch England. It will have its own identity within the CQC, but be able to use the CQC's expertise and infrastructure and will be funded as part of the Department of Health's grant in aid to the CQC.

HealthWatch England will provide leadership, guidance and support to Local HealthWatch organisations. It will also provide advice to the Secretary of State, NHS Commissioning Board, Monitor and the English local authorities and they must have regard to that advice. HealthWatch England will be able to escalate concerns about health and social care services raised by Local HealthWatch to the CQC. There will be a requirement for the CQC to respond to advice from HealthWatch England.

HealthWatch England will have a strong principle of continuous dialogue with Local HealthWatch, keeping communication lines open and transparent. This will facilitate HealthWatch England's responsibility to provide national leadership and support.

The Secretary of State for Health will be required to consult HealthWatch England on the mandate for the NHS Commissioning Board.

5. Local HealthWatch will be established to give citizens and communities a stronger voice to influence and challenge how health and social care services are provided within their locality. Local HealthWatch will be an independent organisation, able to employ its own staff and volunteers, so it can become the influential and effective voice of the public. It will have to keep accounts and make its annual reports available to the public. Local HealthWatch will have to be inclusive and reflect the diversity of the community it serves. There is an explicit requirement in the Health & Social Care Bill that Local HealthWatch membership must be representative of local people and different users of services including carers.
6. At its meeting on 22nd June 2011 the Scrutiny Panel received an initial report from on the HealthWatch function set out in the Health and Adult Social Care Bill. At the time of the previous report to the Scrutiny Panel, indications were that local authorities would be required to establish local HealthWatch from July 2012. Over the summer the start date slipped to October 2012, and on 3rd January 2012 the Department of Health announced the implementation date would now be April 2013. A letter from the Director for Social Care, Local Government and Care Partnerships at the Department of Health, detailing the latest changes to the government's plans, is attached at appendix 1 to this report. In addition to giving notification of the change of date, David Behan has also announced that HealthWatch Pathfinders will

receive a degree of funding, and that there will be an additional £3.2 million nationally to assist with HealthWatch start-up costs. The new start date for HealthWatch now brings its establishment into line with the other major changes proposed in the Bill, including the formal establishment of a Health and Wellbeing Board, Clinical Commissioning Groups going live, and the transfer of public health authorities to local government.

7. The previous report indicated that a joint submission to the Department of Health had been made with Portsmouth CC, Hampshire CC and the Isle of Wight Council to be part of the Pathfinder programme, designed to develop and share learning. The Department accepted the submission, and the 4 local authorities have been working together since that date. Two joint stakeholder engagement events were organised by the SHIP Pathfinder authorities were held in November and December 2011. The feedback from these events and activities held by each of the 4 local authorities will help to inform the extent to which any of the HealthWatch elements can be jointly commissioned. As referred to above it has now been announced that Pathfinder areas will receive a small degree of financial support for developmental activities. Clarification on the level of financial support is being clarified with the Department and further details will be provided at the meeting.

Local HealthWatch Activities

8. There are to be 3 main activities to be undertaken by local HealthWatch
 - NHS complaints advocacy
 - Signposting
 - Patient and public engagement

The third of these activities is the existing work undertaken by the Local Involvement Network (S-LINK). It will be important to build on the strengths and successes of the existing LINK and not lose the enthusiasm and expertise built up by LINK members in recent years.

9. The council will made responsible for commissioning NHS complaints advocacy services for people requiring support to make a complaint. The services can either be commissioned from the new HealthWatch, or from a suitably qualified third party provider. The service is currently provided to the NHS by an external provider and the contract is scheduled to expire at the end of March 2013.
10. Local HealthWatch organisations will be responsible for providing information to service users to access health and social care services, promoting choice and acting as a point of contact for individuals, community groups and voluntary organisations when dealing with health and social care. It is recognised that significant resources are already put into providing information on health and care by a number of local organisations. One of the key challenges will be to develop a system which adds value, rather than

simply replicates, existing information sources.

11. In terms of patient and public engagement the following key activities have been identified:
- Having have a seat on the health and wellbeing board, ensuring that the views and experiences of patients, carers and other service users are taken into account when local needs assessments and strategies are prepared, such as the Joint Strategic Needs Assessment (JSNA) and the authorisation of Clinical Commissioning Groups. This will ensure that Local HealthWatch has a role in promoting public health, health improvements and in tackling health inequalities
 - Enabling people to share their views and concerns about their local health and social care services and understand that their contribution will help build a picture of where services are doing well and where they can be improved
 - Alerting HealthWatch England to concerns about specific care providers
 - Providing authoritative, evidence-based feedback to organisations responsible for commissioning or delivering local health and social care services

Helping Clinical Commissioning Groups to make sure that services really are designed to meet citizens' needs

The Role of the Local Authority

12. Local HealthWatch will be funded by local authorities, via grant from the Department of Health. The local authority will then hold local HealthWatch to account for its efficiency and effectiveness. The local authority will be free to choose how they commission local HealthWatch in order to achieve best value for money for their communities. It is expected that local authorities will work in partnership with their existing LINK, voluntary groups and community organisations when designing their approach to commissioning Local HealthWatch

Subject to the passage of the Health & Social Care Bill, local authorities will have to provide an advocacy service to people who wish to make a complaint about their experience of NHS care from April 2013. Local authorities will be able to commission the service from any provider including Local HealthWatch.

Developing a HealthWatch for Southampton

13. It will be important to commission a Southampton HealthWatch which will meet the needs and expectations of people living in the city. To help develop what this might look like, a series of consultation activities are being

undertaken, and the engagement of the Health Overview and Scrutiny Panel forms part of this process. Arrangements are being made for a discussion with the LINK steering group, and also with representatives from the voluntary sector.

14. There are a number of activities which the council will need to undertake in order to secure its HealthWatch service. These include:
 - Completion of stakeholder engagement
 - Analysis of feedback from the engagement activities
 - Development of tendering specification in light of final Health and Social Care Act, and feedback from engagement
 - Publication of tenders
 - Analysis of tenders procured and award of contract

15. In view of the fact the revised introduction timetable was announced in the week that this report is being written, further work is now being undertaken to develop a revised timetable for delivery.

16. One of the key ways that local HealthWatch will differ from Local Involvement Networks is that the legislation will require each local HealthWatch to become a “body corporate”. This is very different from the existing local involvement network set up, where the LINK has no legal status. 5 types of legal entity are emerging as possible vehicles for local HealthWatch:
 - Charitable company limited by guarantee
 - Charitable incorporated organisation
 - Community interest company
 - Industrial and provident society
 - Non-charitable not for profit company

It will be for the Council ultimately to select the most appropriate form. The final choice will be informed by the final nature of the business being commissioned, expected outcomes from local HealthWatch, and local market conditions.

17. Establishing appropriate governance arrangements will be key to the long-term success and viability of HealthWatch Southampton. It will be accountable to local people, the council, and to HealthWatch England. The detail of the governance arrangements will need to be developed over the coming months, but key issues for consideration will include membership arrangements, the operation of the governing body, and arrangements for joint working in respect of services which are jointly commissioned with other local authorities.

Conclusion

18. The current details released by the government on establishing local HealthWatch should, subject to the passage and enactment of the Health and Social Care Bill, enable local authorities to create their local HealthWatch organisations to begin functioning from April 2013. The local challenge is to establish a HealthWatch that is relevant to local people, builds on the experience gained through both Patient and Public Involvement Forums and Local Involvement Networks, has robust and sustainable governance mechanisms, and identifies and exploits opportunities to add value to the system, either by joint working with other local authorities or with other organisations representing local patients and service users.

FINANCIAL/RESOURCE IMPLICATIONS

Capital

19. None.

Revenue

20. Local Healthwatch will commence from April 2013. The ongoing funding to support Healthwatch is derived from several strands. These are outlined as...
- Existing funding LINKs, currently held within the Council budget - £140,000pa
 - New funding from Department of Health in respect of
 - PCT PALS – Estimated at £120,000 a year from 13/14.
 - NHS complaints advocacy service - Estimated at £60,000 a year from 13/14.
 - PCT DOLS (Deprivation of Liberty Safeguards) - Estimated at £7,000 a year from 13/14.

The Department of Health will clarify the final funding for local HealthWatch in December 2012 for 2013/14.

In respect of 2012/13 the DoH have announced that non-recurrent funding will be available to support the set up of the Local Healthwatch. For Southampton it has been announced that £6,500 will be available in respect of PCT DOLS whilst an estimated £15,000 will be available for the set up of Healthwatch, (this figure is still to be confirmed by the DoH.).

Property

21. None.

Other

22. Southampton Voluntary Services holds the contract for hosting S-LINK . In the light of the delay to introduce local HealthWatch, arrangements will need to be agreed for the continuation of hosting the LINK.

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

23. The Health and Social Care Bill currently before Parliament requires all upper tier local authorities to make arrangements for local HealthWatch.

Other Legal Implications:

24. None.

POLICY FRAMEWORK IMPLICATIONS

25. None.

SUPPORTING DOCUMENTATION

Appendices

1.	Letter from David Behan, Director for Social Care, Local Government and Care Partnerships at the Department of Health, dated 3 rd January 2012.
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Documents In Members' Rooms

1.	None
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Background Documents

Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)
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1.	None.	
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Background documents available for inspection at:

FORWARD PLAN No: N/A KEY DECISION? No

WARDS/COMMUNITIES AFFECTED:	None
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