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Dear Member

SHADOW HEALTH AND WELLBEING BOARD - THURSDAY, 5 JULY 2012

I am now able to enclose, for consideration at the Thursday, 5 July 2012 meeting of the Shadow Health and Wellbeing Board, the following reports that were unavailable when the agenda was printed.

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Yours sincerely

Kay Heywood Clerk

Agenda Item 9



Shadow Health and Wellbeing Board Meeting Thursday, 5 July 2012

Healthwatch Update

- 1. What are we trying to achieve for our communities?
- 1.1 The Government's health and social care reforms are centred on the fundamental principle that patients and the public must be at the heart of everything our health and social care services do.

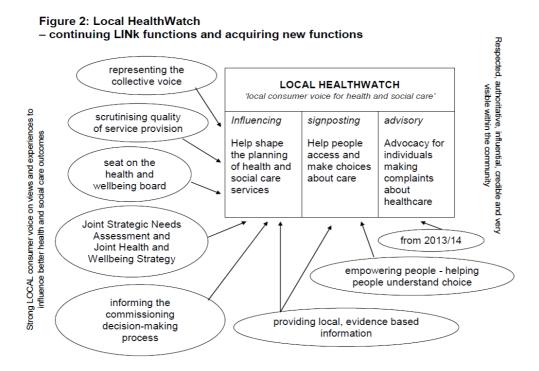
The Government has acknowledged that there have been a number of different arrangements for involving people in health and social care over recent years and has expressed an intention to build on what is working well but also establish new structures that will bring even greater benefits to local people.

As part of this each Local Authority has a statutory responsibility establish a local Healthwatch as a new independent consumer champion for patients, carers and all those using health and social care services, as well as the wider public.

- 1.2 Healthwatch is being described as an evolution from the existing Local Involvement Networks (LINks). Healthwatch will give people real influence over decisions made about local services; it will support individuals as well as engaging communities; and Healthwatch England will ensure that consumer voice has influence not only locally but nationally too through Healthwatch England.
- 1.3 Healthwatch England will be a statutory committee within the Care Quality Commission (CQC). It will:
 - be an independent consumer champion
 - provide leadership, advice and support to Local Healthwatch
 - provide advice to the NHS Commissioning Board and the Secretary of State
 - receive concerns from local Healthwatches and have the power to propose a CQC investigation of poor services.
- 1.4 Locally Healthwatch will be required to provide the following functions:
 - Influencing helping to shape the planning of health and social services by:
 - o representing local voices;
 - scrutinising the quality of service provision
 - o having a seat on the local Health and Wellbeing Board
 - o informing the commissioning decision-making process
 - o providing local, evidence-based information
 - Signposting providing information to help people access and make choices about services by:
 - o empowering people by helping them understand choice

- Advisory advocating and holding to account by:
 - o championing quality and supporting people on issues and concerns
 - requiring commissioners and providers of services to be under a duty to have 'due regard' to local Healthwatch's findings.

These functions are shown in figure 2 below from the Department of Health's Healthwatch Transition Plan.



2. How is this to be implemented?

- 2.1 Guidance is clear that Healthwatch needs to build on the existing local LINk. But local Healthwatch has to be a body corporate a separate independent legal entity registered as a social enterprise and capable of employing staff.
- 2.2.1 Torbay has an active LINk currently implemented with support from 3 local staff (2 FTE). It has 720 individual and organisational members, an Executive Group of 8 volunteers and a growing network of sub-groups of volunteers with specific specialisms such as research, quality monitoring, enter and view, community engagement, events etc. Over the past 2 years the Torbay LINk has supported 100s of individuals and has led or been involved in 29 substantial pieces of engagement and research drawing upon public and patients concerns (see Appendix 1 for a summary.

The current LINk has undergone a restructuring in the past 6 months to prepare its volunteers for their future role and responsibilities within Healthwatch. The current volunteers have recently registered LINks as a Community Interest Company so they might tender or receive grantaid to deliver Healthwatch Torbay.

2.3 While the remit for Healthwatch is determined nationally by legislation there is

flexibility in the way it is implemented locally. The Council established and has been working with a Healthwatch Transition Group over the last 2 years to create an action plan and identify some key elements for the Healthwatch specification. This group is made up of representatives from LINk, Torbay and Southern Devon Health and Care NHS Trust, South Devon and Torbay GP Clinical Commissioning Group, South Devon Healthcare NHS Trust, Care Quality Commission, Torbay Council (Members/Overview & Scrutiny /Supporting People/contract manager), Community and Voluntary Action Torbay, Carer's Evaluator, Citizen's Advice Bureau and Speak Out Torbay.

2.4 The Transition Group successfully applied for Healthwatch Pathfinder status in 2011. This has enabled the Transition Group to implement a mapping exercise to identify the best structure of engagement and influence for Healthwatch Torbay. The mapping exercise identified 79 organisations involved in engagement activities on health and social care in the Bay. It identified lots of good work that goes unrecorded, services that the general public and patients are not aware of, and in some cases duplication due to a lack of a coordinating body.

On the basis of this the aim is to enable Healthwatch Torbay to become the interface to these activities - a 'one stop shop' for all influencing, signposting and advisory activities related to health and social care issues with a high level of public awareness. Healthwatch Torbay will act like a department store with a series of concessions within. Healthwatch will not do any of the activities already being provided, but will signpost residents to them and will bridge the gaps when necessary. It will work with all providers – from the private and voluntary and community sectors - and will encourage engagement that reaches a quality standard. Healthwatch should become a household name and enable residents to get the support they need when they need it.

The specification written for Healthwatch Torbay will be quite specific in its delivery aims and will draw upon this pathfinder work.

2.5 Funding for Healthwatch will be provided through:

The DCLG Business Rates Retention Scheme - BRRS (which replaces the Council Formula Grant from 2012/13). Local Authorities are encouraged to continue to set aside for Healthwatch the funding previously earmarked for LINks. This was £120,000 a year in Torbay. But this funding is not ringfenced.

An additional provision of £40,928 (indicative) per year is coming from Government (route yet to be defined) to cover the signposting and advisory functions of Healthwatch that were not previously covered by LINks.

Please note: An additional £50,775 (indicative) of funding per year is being provided for the NHS independent complaints advocacy service. This service is unlikely to be delivered by Healthwatch but may be commissioned via Healthwatch. Healthwatch will have a role in signposting patients to this service even if it is not providing or sub-contracting it.

Based on the above, and given current spending cuts, the following funding is proposed for the first 3 years of Healthwatch Torbay:

	BRRS	Additional allocation	Total
2013/14	£100,000-£120,000	£41,000	£141,000-£161,000
2014/15	£90,000	£41,000	£131,000
2015/15	£80,000	£41,000	£121,000
	£270,000-£290,000	£123,000	£393,000-£413,000

It is anticipated that the budget for Healthwatch will grow, probably substantially, over these three years but the volunteers are committed to seeking income generation opportunities to make the organisation sustainable. Examples of this would be charging local providers for engagement and research activities.

2.6 The Local Authority has the option to procure this service or grant aid this to an organisation that can demonstrate it has a unique capacity to deliver Healthwatch Torbay.

The Transition Group have identified the following key characteristics for Healthwatch Torbay. It needs to be:

- Independent of providers and statutory organisations;
- Have the ability to establish good relationships and communicate with a diverse range of local individuals and groups;
- Effective in demonstrating evidence (shown by competence and history);
- Have the ability to attract and retain volunteers;
- Have good partnership management and ability to robustly challenge when necessary;
- Able to respond quickly to change;
- Have an in-depth knowledge of health and social care in the Torbay area
- 2.7 The Transition Group have recommended a grant aid process to the existing Torbay LINk and a number of other authorities have taken this route as they have considered it to be the most efficient way to ensure Healthwatch builds on the work to date. This is an option in Torbay.

The Council procurement team, however, feel a grant aid process based on the above characteristics could be open to challenge. The procurement team believe the above characteristics could be evidenced by a number of organisations and it may be difficult for the Torbay LINk to evidence that it has a unique capacity to deliver Healthwatch. This paper therefore recommends a procurement process. The timetable for this process is proposed as follows:

Timeline	Action
August 2012	Tender process starts
October 2012	Intention to award notice
January 2013	Contract starts
April 2013	Legal start date for Local Healthwatch

3. Relationship to Community Plan

- 3.1 Heathwatch will directly contribute to the overall vision of the Community Plan (2011-2013) of Healthy, Prosperous and Happy Communities.
- 3.2 Specifically the work of Healthwatch will enable appropriate services to be provided that enable residents to:
 - Live in healthier communities and have happy, independent and healthy lives;
 - Ensure every child and young person in Torbay lives in safety and good health, is well educated, enjoys their childhood and contributes positively to community life:
 - Support families to care for their children.
- 3.3 Additionally Healthwatch will contribute to the need to find efficiencies in service provision. An underlying priority for the implementation of the community plan in the current environment.

4. Recommendations for decision

- 4.1 That the Health and Wellbeing Board support the budget for Healthwatch Torbay as outlined above and for their support to be communicated to the Full Council who will determine the final budget figure.
- 4.2 That the member organisations of the Health and Wellbeing Board are mindful of the role identified for Healthwatch as a coordinating and support function for all engagement on health and social care issues in the Bay.
- 4.3 That the member organisations of the Health and Wellbeing Board are mindful of the possibilities of commissioning independent research and engagement activity from Healthwatch and that this activity is crucial to delivering a robust and effective Healthwatch Torbay.
- 4.4 That the Health and Wellbeing Board support the initiation of a procurement process for Healthwatch Torbay forthwith.

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