

From [london-link-reps@hotmail.co.uk](mailto:london-link-reps@hotmail.co.uk)

## Notes from the HealthWatch Advisory Group meeting November 8th 2011

---

Mike Hewins (Eastern Representative), with edits by Anita Higham (SE Representative) and Nick Kennedy (London Representative)

---

### **Changes to Health Bill proposed by Lords.**

The House of Lords is still considering clause 4 but is expected to reach Part 5 in a week or less. Part 5 is about HealthWatch and much of it about HWE.

A generally held view is that LAs and stakeholder partners will find ways of protecting LHW independence, within the proposed framework in which LAs fund and set up their LHW. Waiting for possible, but mostly thought unlikely, changes to the Bill is discouraged. It is advised to proceed with forward planning for October 1st 2012, for the start of each LA's statutory Local HealthWatch.

### **Impact of Reported Changes at DH.**

Downsizing at DH, together with the impact of some Health reforms, have brought about some changes in the previous week. John Wilderspin, National Director of Health and Wellbeing Board implementation, will be the new chair of the HealthWatch Programme Board, combining it with that of the H&W-B Programme Board. Our Advisory Group meeting was extensively briefed on the changes and their impact [see later].

Before the meeting, the group of LINKs representatives met and talked with John Wilderspin. His aim appears to be:

- [1] To give much clearer and stronger direction to HealthWatch [HW], leading to faster progress, and
- [2] To link development of Local HWs closely to the development of Health & Wellbeing Boards. LHW development will also be cross linked to the DH's "Patient and Public Experience" group's existing work. Some think that he may involve LAs more closely in all HW development.

*SE rep's view is that she is fully persuaded that he has a very clear understanding of the HealthWatch task - championing the Public as it demands accountability from an improved and integrated system of Health and Social Care.*

In a presentation to the HealthWatch Advisory Group, Andrew Larter [DH's new team leader for both HW and H&W-B], explained to us that the HW Programme Board will now integrate with that part of DH responsible for H&W Boards, under David Behan, who is Director General for Local Government and Social Care [mental health, Learning Disability, voluntary sector, children & families, PPE]. This is a deliberate integration of functions and is seen by DH as a positive and essential step in supporting the development of LHWs.

Andrew Larter talked of adding to extended Programme Board three CEOs from LAs and also, in the immediate future, offering more advice to LAs to guide HW thinking. There is a strong feeling in the Advisory Group that many, if not most, LAs are making too little progress in setting up LHW. This appears to be shared by DH members.

Several LINK Chairs/Vice-Chairs, however, are concerned that those LAs which are already taking steps to set up LHWs, such as Oxfordshire, Essex and South Gloucester, might be moving away from the prevailing current LINK model of self management by the volunteers.

### **HealthWatch England (HWE) AND LHW Matters**

Recruitment of the HWE Chair and of its board is in progress - it remains unknown as to whether the Board members will be appointed or elected.

Various recommendations from the HWAG for LHW are likely to be approved by the HealthWatch Programme Board in the near future and should be available to all by end of year. These arise from Task & Finish sub-groups; they will, for example, describe what a good LHW will look like. Do not expect low level operational guidance on running LHW or setting it up. Recommendations, are tactical in nature and could be used, for example, to develop performance criteria for a LHW or set aspirations for a high performance LHW.

A significant and recent change of language is that DH now talks of LINKs **transforming** into LHW. No longer are the words '**transitioning**' or '**evolving**' used and the emphasis is on the need for change. Phrases such as "**no automatic rite of passage**" for volunteers from LINK to LHW are used.

New task and Finish groups will be established entitled 'Equality + Diversity' [to include children and young people's work] and 'Signposting + Advocacy'.

There is to be a 24 hour HWAG workshop (November 21/22) in Birmingham about 'Governance'.

Most members of Advisory Group continue to express strong dissatisfaction that no help has been forthcoming from the DH for either LHW structural options or funding

[e.g. grant in aid (which is a listed option in the transition plan), social enterprise forms, etc], or about a clearer description and understanding of a "corporate body".

Even more dissatisfaction was expressed by Advisory Board Members at the DH's failure fully to develop LHW Pathfinder and general LINK Action Learning Sets despite promises, and despite the Programme Board stressing the urgency for this back in July. Members criticised the generous funding for the development of Health & Well Being Boards and for the new CCG functions and contrasted it with the complete lack of funding for LHW Pathfinders. The DH apologised fulsomely (again) for the continuing delay in setting up Learning Sets and Networks, but declined to explain why it was happening. Andrew Larter indicated that there would be a merging of Health & Well-Being Board Learning Sets/Networks with those needed for LHW Pathfinders. Members emphasized the need, and sense, for much stronger linking of H&W Boards' learning with that for LHWs. The fundamental synergy between the two was stressed.

### **Miscellaneous**

The Health & Well Being Board national learning network has agreed five work themes.

Funding for LINKs for April 2012 to October 2012 is to be included within the 2012-2013 Area Grant, which combines and replaces the individual DH grants of previous years. We were informed that LAs already have this information by letter, but no money is being ring-fenced.