



# Bath and North East Somerset Local Involvement Network

## Report to B&NES Wellbeing Policy Development & Scrutiny Panel, 29 July 2011

### 1. NHS B&NES Clinical Priorities Policy

The LINK was given a presentation on the PCT's proposed policy on Clinical Priorities. It has agreed to participate in the Impact Assessment for Homeopathy Services, which is one of the services covered by this policy. The LINK looks forward to further involvement in the public consultation on both this and the overall Clinical Priorities policy, and would be happy to work with the PDS Panel in this area.

### 2. HealthWatch

Since we last made a report to the HOSC in March, the Future Forum on the Health & Social Care Bill has reported.

The Future Forum made the following recommendations relating to HealthWatch -

- Local HealthWatch organisations should continue to be commissioned by local authorities, and should refer any disputes over the performance management of their contracts to their Health & Well Being Boards and/or to HealthWatch England.
- Expectations as to what local Healthwatch will be responsible for are too great, particularly given that their funding is likely to be limited. Local Healthwatch should have a dual role of patient advocacy (the powerful consumer champion in the system), and scrutiny and challenge of organisations in the health and wellbeing system.
- Local HealthWatches should be represented on governance committee of HealthWatch England ("HWE").
- HWE should have a "Citizens' Panel" to oversee delivery of Choice agenda.
- Commissioners and Providers should have a duty to have "due regard" to Local HealthWatches'.
- Health & Well Being Boards and *Monitor* should have a new duty to involve users and the public.

In its response to the Future Forum's recommendations, the Government has so far announced that there would be an explicit requirement that Local HealthWatches' membership must be representative of different users, including carers.

From the amendments seen so far, there seems to have been no substantive change to the Local HealthWatch part of the Bill. In particular, we are unsure whether the functions of Local HealthWatches will still include the originally intended patient information role to support the Patient Choice agenda. However, further amendments may be introduced or proposed during the Lords Committee stage, and much of the operational detail and changes in direction could be implemented through secondary legislation when the Bill itself has passed into law as an Act of Parliament.

### **3. LINK's Funding for 2011-12**

Following our report to the 15 March meeting of the HOSP, we have learnt that the LINK's funding for July 2011-March 2012 will be £65,280. This, of course, includes all the costs of the Host's support to the LINK. The original contract ran to June 2011, so the amount here relates to the nine-month period from then to March 2012. This renewal of the contract was agreed before it was announced that LINKs would continue until October 2012, and arrangements for this new additional period have not yet been discussed.

The amount for 2011-12 represents a 16% reduction in the amount provided in previous years, and this seems a reasonable and fair reduction in view of underspends in those years, and in view of the financial stringencies faced by local authorities.

### **4. Out-of-Hours Access to GP Services**

The LINK received a letter from an elderly B&NES resident, outlining the difficulty she had experienced in attempting to see a GP late in the evening. She phoned the out-of-hours service and described her symptoms, and was then asked to get herself to the GP service provided at the RUH. She did not have access to her own transport and had no family or friends nearby on whom she could rely. Public transport at that time of day was not an option. She told us that she explained this to the GP who had taken her call, and that she was replied to with exasperation and made to feel guilty about her inability to get to the hospital. In the end, a GP visited her at home and prescribed medication for her. The LINK wrote to the PCT about this, and it was explained that this was a problem that only cropped up in a very small number of cases, and that it was insufficient in scale for special transport arrangements to be routinely provided. The LINK discussed this case, and noted that appropriate arrangements were made for the patient to be seen by a GP. However, it feels that patients should not be put in a position of feeling that they are being "difficult" in such circumstances, and that there should be a routine enquiry made as to their ability to travel to get medical attention. There are a number of circumstances where this could be difficult, including lone parents of very young children, as well as the increasing number of elderly people. The LINK feels that such people can face significant problems from the growing tendency to centralise health services, and thus take them further away from people's homes. There is a danger that changes that save costs for the NHS could result in increased cost and real difficulties for patients. The LINK intends to continue monitoring this area.

### **5. Cancer Networks**

LINK Members expressed concern at the original plans to abolish Cancer Networks, and wrote to Don Foster MP to convey this concern to him. Mr Foster replied that he had great sympathy with this view, and that he had passed this letter on to the Secretary of State for Health. On 19 May, it was announced that the life of Cancer Networks would be extended until 2013, and Mr Foster wrote again to the LINK, enclosing a copy of a letter from the

Secretary of State responding specifically to the B&NES LINK's letter. In this, he noted the LINK's concerns and reaffirmed the governments funding support for Cancer Networks until 2013. The LINK is still concerned that this support should not finish in 2013.

## **6. Quality Accounts**

The LINK has provided responses to the Quality Accounts of the following NHS Provider organisations:

- Avon & Wiltshire Mental Health Partnership Trust
- Royal United Hospital Bath
- Royal National Hospital for Rheumatic Diseases
- Great Western Ambulance Trust
- Dorothy House
- The new Social Enterprise organisation for Health and Social Care Community Services.

## **7. Other Involvement**

- In April, the LINK Chair, with the Host's Manager, attended a meeting to discuss the development of the new Health & Well Being Board.
- LINK Members have participated in interviews to select the Director of Finance and Non-Executive Directors for the new Community Services Social Enterprise.

Diana Hall Hall  
**Chair, B&NES Local Involvement Network**  
18 July 2011