Bath & North East Somerset Council			
MEETING:	Wellbeing Policy Development and Scrutiny Panel		
MEETING DATE:	29 th July 2011	AGENDA ITEM NUMBER	
TITLE:	Healthwatch status report		
WARD:	ALL		
AN OPEN PUBLIC ITEM LIKELY TO BE TAKEN IN EXEMPT SESSION			
List of attachments to this report:			

Appendix 1: Healthwatch in B&NES aims, vision and principles.

Appendix 2: Joined up involvement.

1 THE ISSUE

- 1.1 Recent developments in policy, first described within *Equity and Excellence Liberating the NHS*, have outlined a new duty on local authorities to ensure the provision of Healthwatch. Healthwatch is a development in public involvement and will be a new body that replaces the existing Local Involvement Networks. It is expected that the Health and Social Care Bill currently progressing through parliament will confirm the regulations for Healthwatch. In Bath and North East Somerset activity has been taking place throughout May to July in preparation for the future commissioning of Healthwatch. Officers are working towards an implementation date of October 2012.
- 1.2 This paper provides an update to overview and scrutiny members on work to date and the agreed principles upon which Healthwatch is now being progressed.

2 RECOMMENDATION

2.1 Members are asked to comment on the information presented within the report, to note the key issues and to endorse the direction of travel indicated.

3 FINANCIAL IMPLICATIONS

3.1 The funding envelope for Healthwatch has not yet been established and will need to be identified before the procurement process commences.

4 THE REPORT

4.1 The current 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 care services do. 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. As part of this intent the Health and Social care Bill currently going through parliament has provision in it for the establishment of Healthwatch.

- 4.2 Healthwatch is being described as an evolution from the existing Local Involvement Networks (LINK) and is expected to give people real influence over decisions made about local services. It can best be described as a consumer champion whose role is to champion the views and experiences of patients, people using services, carers and the wider public. It should be noted that the term Healthwatch covers both health and social care and it will support individuals as well as engaging communities.
- 4.3 The Health and Social Care Bill specifies two elements to the proposed structure. These are Healthwatch England a national body operating within the Care Quality Commission providing leadership to local Healthwatch and advising the NHS commissioning Board and local Healthwatch acting as consumer champion for local people regarding health and social care. Local Healthwatch has 3 principle responsibilities:
 - To Influence: helping shape the planning of health and social care services;
 - To inform: providing information about health and social care services and supporting people in choice;
 - To advocate: acting as a watchdog pursuing people's interests with local providers.
- 4.4 Healthwatch is different from LINk and has new responsibilities. Healthwatch will need to do all that LINk currently does and has the same powers that LINk currently enjoys but It also has new duties to provide information and support people in choice. During the latest policy amendments released in the Governments response to the NHS Future Forum recommendations this aspect was not highlighted and clarification is being sought as to the continuation of this particular element. Healthwatch will also have a seat on the new health and wellbeing boards and will operate as a health and wellbeing board member.
- 4.5 Local authorities have the freedom to choose how Healthwatch may be provided and it is the intention to commission the provision of Healthwatch in B&NES from a suitable provider as assessed through an open procurement process. To determine what would be an appropriate specification for Bath and North East Somerset a public consultation process took place between May and July. Stakeholders included the partnership board, LINk, the health and wellbeing network (including service users and carers), voluntary sector providers, GPs, council and NHS officers. A seminar was held with partnership board members, three public meetings took place, information was published in Connect, the council magazine which is delivered to every household and public pages were created on the council website where all documents were made available for scrutiny.
- 4.6 The purpose of the consultation was to agree the vision for Healthwatch and to set the principles upon which procurement will now take place.
- 4.7 The vision was approved by the partnership board at its seminar and subsequent public meeting on June 15th. The vision was supported by all stakeholders in subsequent meetings.

- 4.8 At the final public meeting on July 5th. The findings of the consultation were presented and were supported as being a fair account of the issues raised during the consultation and as an appropriate set of information to take forward into the procurement process. This document is included at Appendix 1.
- 4.9 Of particular note is the recognition that we do not want Healthwatch to be a separate entity which is stand alone. To do so would duplicate existing involvement structures and would not achieve the potential for collaboration and added value. There is already an existing structure of stakeholder advice, support and advocacy groups and it is intended that Healthwatch acts as a coordinating force to bring the inputs from these groups together and to consolidate the consumer voice for health and social care. Some opinions are emerging that suggests Healthwatch may operate as a brand or kite mark whilst other views favour a managed network.
- 4.10 During the consultation there has been strong recognition for a joined up agenda between the three elements of health and social care development: Healthwatch as the consumer voice, scrutiny as the democratic body that oversees local developments and the health and wellbeing board as local strategic commissioners overseeing health and wellbeing plans and the quality of local provision. The vision is to collaborate on an agreed set of priorities whereby each element of the local system can focus on a common agenda of interest. During the consultation this was symbolised via discussion on the 'Healthwatch house' and the triangle of involvement. These slides are included at Appendix 2. With these aims in mind there has been consensus on the desirability of Healthwatch having strong links and integration with scrutiny and the request that a representative of Healthwatch is included within the membership of the panel. It is proposed that this is further explored in advance of Healthwatch coming into operation from October 2012.

5 RISK MANAGEMENT

5.1 There are risks that the councils duty to establish a service is not met or that stakeholders are not engaged sufficiently in the design and establishment of the service leading to lack of ownership and support. Project management is underway and consultation has taken place to control and manage these risks.

6 EQUALITIES

6.1 Healthwatch aims to engage all sections of the community to be influential in shaping services and working towards reducing inequalities. The consultation on Healthwatch has included equalities perspectives.

7 CONSULTATION

7.1 A public consultation has been undertaken as described within the main report. A similar report taken to the partnership board on June 15th was made available to the Section 151 Finance Officer and Monitoring Officer.

8 ISSUES TO CONSIDER IN REACHING THE DECISION

8.1 Social Inclusion; Customer Focus;

Contact person	Derek Thorne Assistant Director Comms & Corporate Affairs NHS B&NES	
Background papers	The Healthwatch Transition plan: DH Publication	
Please contact the report author if you need to access this report in an		

alternative format