REPORT TO: Healthy Halton Policy and Performance Board

DATE: 16 September 2008

REPORTING OFFICER: Strategic Director, Health and Community

SUBJECT: The relationship between HHPPB and Halton's

Local Involvement Network (LINk)

WARDS: Boroughwide

1.0 PURPOSE OF THE REPORT

1.1 To identify the implications of the LINks' powers for Overview and Scrutiny Committees.

2.0 RECOMMENDATION: That

(1) the Executive Board and Full Council be requested to agree the appointment of a LINk representative (name to be confirmed once LINk formalised), as a non-voting co-optee on the Policy and Performance Board for a period of one year, commencing from the date approval is given.

3.0 SUPPORTING INFORMATION

Why are LINks being set up?

3.1 There have been many different ways for people to have a say in health services over the years. Recent work, however, undertaken by the Department of Health suggested that people should have 'more choice and a louder voice' in local health and social care systems. The 'Local Government and Public Involvement in Health Act' in 2007, therefore, placed a statutory duty on all local authorities with social care responsibilities to contract a Host organisation to establish a LINk.

Key characteristics of Local Involvement Networks (LINks)

- 3.2 LINks have been designed to involve a diverse and inclusive body of people in shaping the services and priorities of health and social care bodies in their areas. Their main functions are as follows: -
 - To collate the views and experiences of patients and the public with a view to influencing commissioning, provision, monitoring and regulation. This will include identifying gaps in service provision as well as whether serivces are effectively addressing need.
 - Operating as an independent network they will seek to bring together a broad range of people from interested individuals, local user groups, advocacy groups and voluntary and community sector

- (VCS) organisations. Their structure and function will develop in accordance with the needs and characteristics of Halton.
- Anyone can be part of a LINk and the LINk should represent everyone in the local community. The LINk will need to be inclusive, flexible and participative, with its members drawn from as broad a range of the local population as possible, and with a particular emphasis on including unheard voices and vulnerable groups.

What relationship will the LINk have with HHPPB?

3.3 The LINk will be able to refer on to the HHPPB any matter that it considers should be drawn to the HHPPB's attention for further scrutiny. The HHPPB will have a duty to acknowledge the referral and respond within 20 days. If the HHPPB decides to exercise its powers on the matter it should state clearly in its response, taking into account the information supplied by the LINk, what action it will take and why. The LINk should be kept informed of progress. Clearly it would be beneficial for both bodies that the HHPPB and the LINk work in parallel and to this end the Host of the LINk will be expected to avoid duplication of work streams. The guidance 'Changing for the better' will provide a common framework across the Halton LINk and HHPPB for ensuring service developments are appropriate and effective.

4.0 POLICY IMPLICATIONS

4.1 Legislation establishing LINks falls under The Local Government and Public Involvement In Health Act 2007. This Act is part of a much broader range of policy initiatives designed to devolve more power to local government and from local government to local communities. Realising this agenda will entail a significant shift towards a more robust, inclusive and comprehensive approach to public engagement as well as greater status and influence being given to scrutiny.

5.0 OTHER IMPLICATIONS

5.1 None applicable.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

Children and Young People in Halton

6.1 None applicable.

Employment, Learning and Skills in Halton

6.2 None applicable.

A Healthy Halton

6.3 Establishing a formal relationship between LINk and Healthy Halton PPB will strengthen the Council's ability to monitor and review progress on reducing health inequalities.

A Safer Halton

6.4 None applicable.

Halton's Urban Renewal

6.5 None applicable.

7.0 RISK ANALYSIS

7.1 Failure to respond appropriately to requests for information and referrals would result in the HHPPB contravening current legislation.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 The procedures and processes described in this report will enable a much broader range of people to contribute and influence scrutiny and commissioning decisions.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

9.1 There are no background papers under the meaning of the Act.