



**Welcome to**

# **Plymouth HealthWatch Information Event**

**Tuesday 16th August 2011  
and  
Thursday 22nd September 2011**

**9.00 a.m. until 1.00 p.m.**

**in the Charter Room, Plymouth Guildhall**

# Agenda

- |                            |   |
|----------------------------|---|
| <b>9.00 am - 9.30 am</b>   | Arrive, coffee  |
| <b>9.30 am - 9.45 am</b>   | <b>Introductions</b> /scene setting/LA responsibilities etc.(CM)  |
| <b>9.45 am - 10.00 am</b>  | <b>Presentation: An Introduction to the Health &amp; Social Care Bill and HealthWatch</b> - (local and national) including differences to LINK, the Department of Health model (TS) |
| <b>10.00 am - 10.15 am</b> | <b>LINK overview, achievements and the transition to HealthWatch</b> - local progress and plans for moving forward (VS)   |
| <b>10.15 am - 11.00 am</b> | <b>Table Discussion 1: HealthWatch - How do we see HealthWatch developing locally? What are the challenges?</b>   |
| <b>11.00 am - 11.15 am</b> | <b>Coffee/comfort break</b>   |
| <b>11.15 am - 12.00 pm</b> | <b>Table Discussion 2: Representing local views on the Health &amp; Wellbeing Board</b>   |
| <b>12.00 pm - 12.15 pm</b> | <b>Summing up, next steps and close</b>   |

# Introductions

Scene setting  
Local Authority  
responsibilities, etc.



Craig McArdle  
Plymouth City Council

# **An Introduction to the Health & Social Care Bill and HealthWatch**

Trish Stokoe  
Development Consultant – Inclusion  
South West Development Centre

## Future Forum recommendations

- The drive for change in the NHS should be based not on Monitor's duty to 'promote' competition, which should be removed, but on citizens' power to challenge the local health service when they do not feel their service offers meaningful choices or good quality;
- Patients should have a '***right to challenge***' local health commissioners if they feel that they have not been offered real choice, or if their service is of substandard quality;

# The Government response to the Future Forum

**Strong emphasis on Health and Wellbeing Boards including ;**

- **A new duty to involve users and the public**
- **A stronger role in promoting joint commissioning and integrated provision between health, public health and social care**
- **A requirement for Clinical Commissioning Groups to involve HWBs as they develop their commissioning plans,**
- **CCG commissioning plans (and other commissioning plans) need to be in line with the Joint Health and Wellbeing Strategy**
- **A right to refer CCG plans back, or to the NHS Commissioning Board, if they are not in line with the Joint Health and Wellbeing Strategy**
- **Local authorities can determine how many elected members will be on the Board**

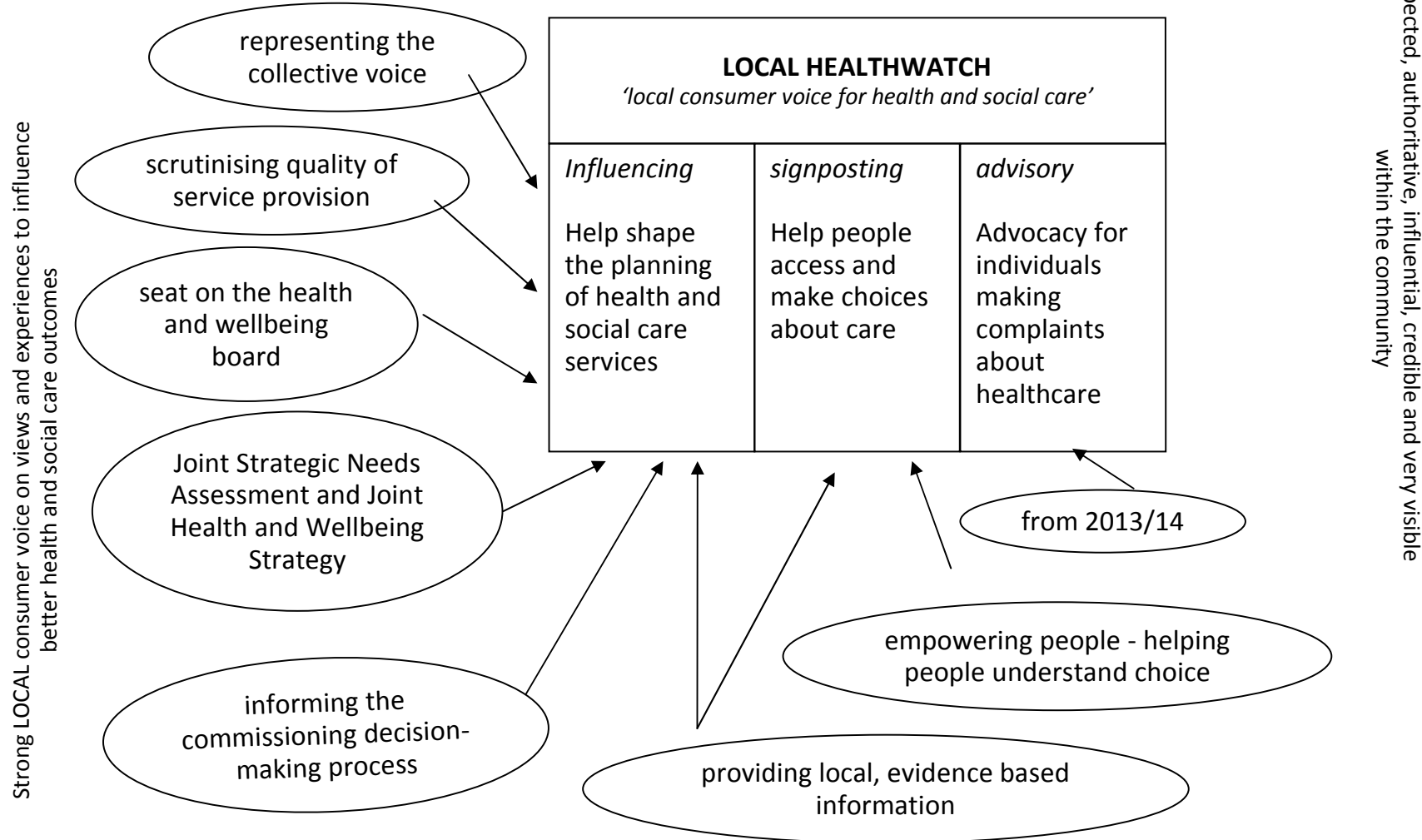
# Local HealthWatch

- *'The consumer champion of health and social care'*

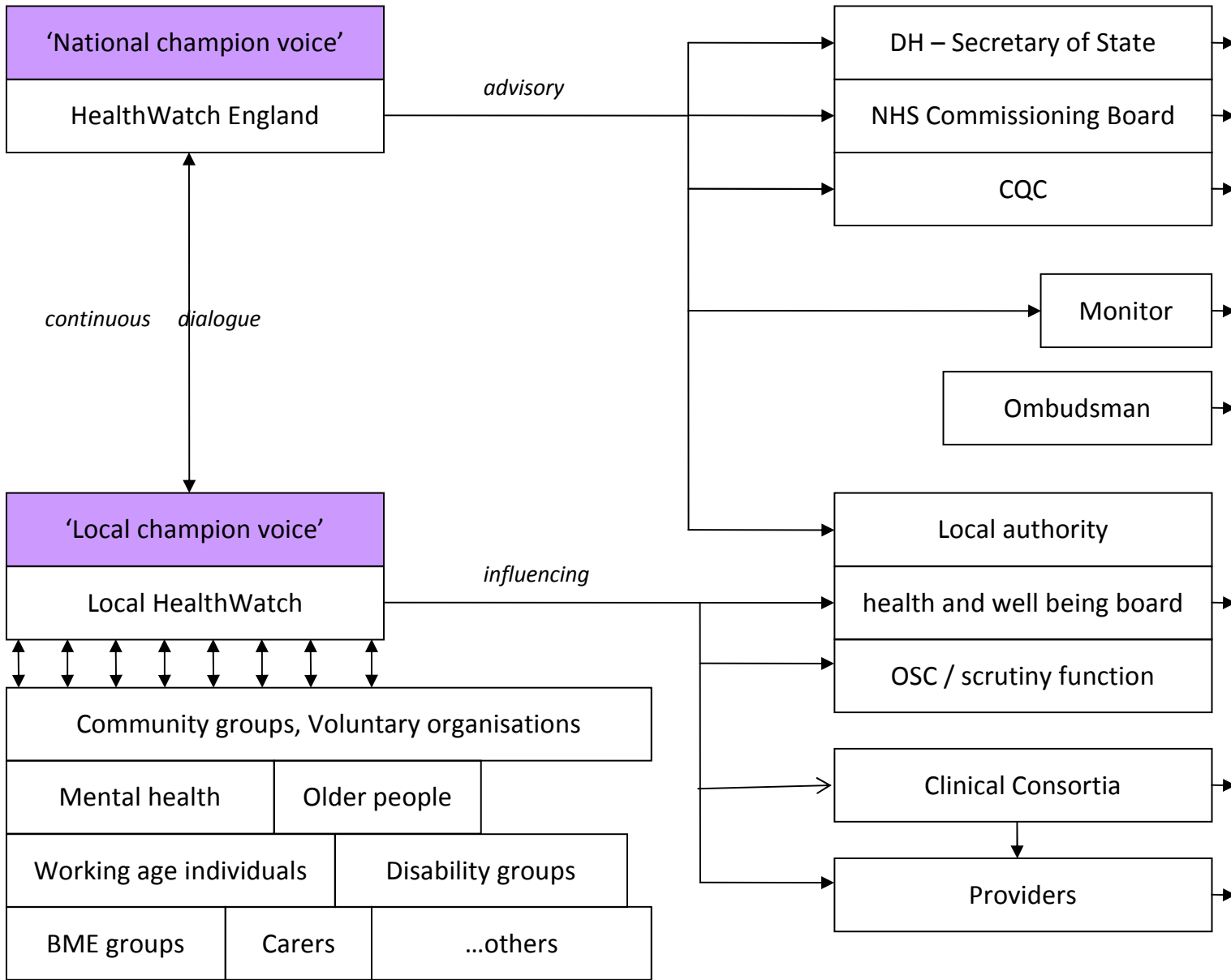
3 main elements:

- **1) Decision-making** – strong, independent local consumer voice. Presenting the collective community voice on Health and Well-Being Boards and elsewhere
- **2) Signposting** – help individuals access information and thus exercise choice.... From October 2012
- **3) NHS healthcare advocacy** by 2013 – responsible for NHS complaints advocacy
- Formally established from October 2012- councils will probably be able to choose how to fund eg whether to grant fund or use contracts and tendering
- **Must be 'Bodies corporate'**

# Roles and responsibilities of Local HealthWatch



The public and patient voice - their views and experiences - influencing better health and social care outcomes



Arrangements will ensure sharing of information to involve, consult and protect the public

# Heads Up

- LHW Pathfinders to be contacted this week
- Nationally 75/157 proposed
- Regionally 8/16
- LHW Pathfinders will be officially published in August 2011
- National learning event for Pathfinders in the autumn
- Use of Regional network meeting to establish Action Learning sets to disseminate work from Pathfinders and share and spread good practice

# Heads Up

- Local authorities will be issued with a narrative that will describe the basic specification for LHW ( gateway clearance )
- September meeting to gain input from and support to Local Government in the development of policy and guidance on healthwatch.
- National Programme Board has already started work on this and a specific piece of 'task and finish' work has been commissioned by Joan Sadler. Chair of National Programme Board

## October 2012

- **Monitor** starts to take on its new regulatory functions
- **HealthWatch England** and **Local HealthWatch** are established

## April 2013

- SHAs and PCTs are abolished and the **NHS Commissioning Board** takes on its *full functions*
- **Health Education England** takes over SHAs' responsibilities for education and training
- The **NHS Trust Development Authority** takes over SHA responsibilities for the FT pipeline and for the overall governance of NHS Trusts
- **Public Health England** is established
- A full system of *clinical commissioning groups* is established. But the NHS Commissioning Board will not authorise groups to take on their responsibilities until they are ready
- **LHW takes on advocacy function**

## Transition: timetable for change

### October 2011

- NHS Commissioning Board established in shadow form as a special health authority
- SHA cluster arrangements in place

### During 2012

- **Health Education England** and the **NHS Trust Development Authority** are established as *Special Health Authorities*, but in shadow form, without full functions

### April 2012

- The next step in extending the choice of Any Qualified Provider, which will be phased in gradually

### By October 2012

- **NHS Commissioning Board** is established as an independent statutory body, but initially only carries out limited functions – in particular, establishing and authorising clinical commissioning groups

## **April 2014**

- Our expectation is that the remaining NHS trusts will be authorised as foundation trusts by April 2014. But if any trust is not ready, it will continue to work towards FT status under new management arrangements

## **April 2016**

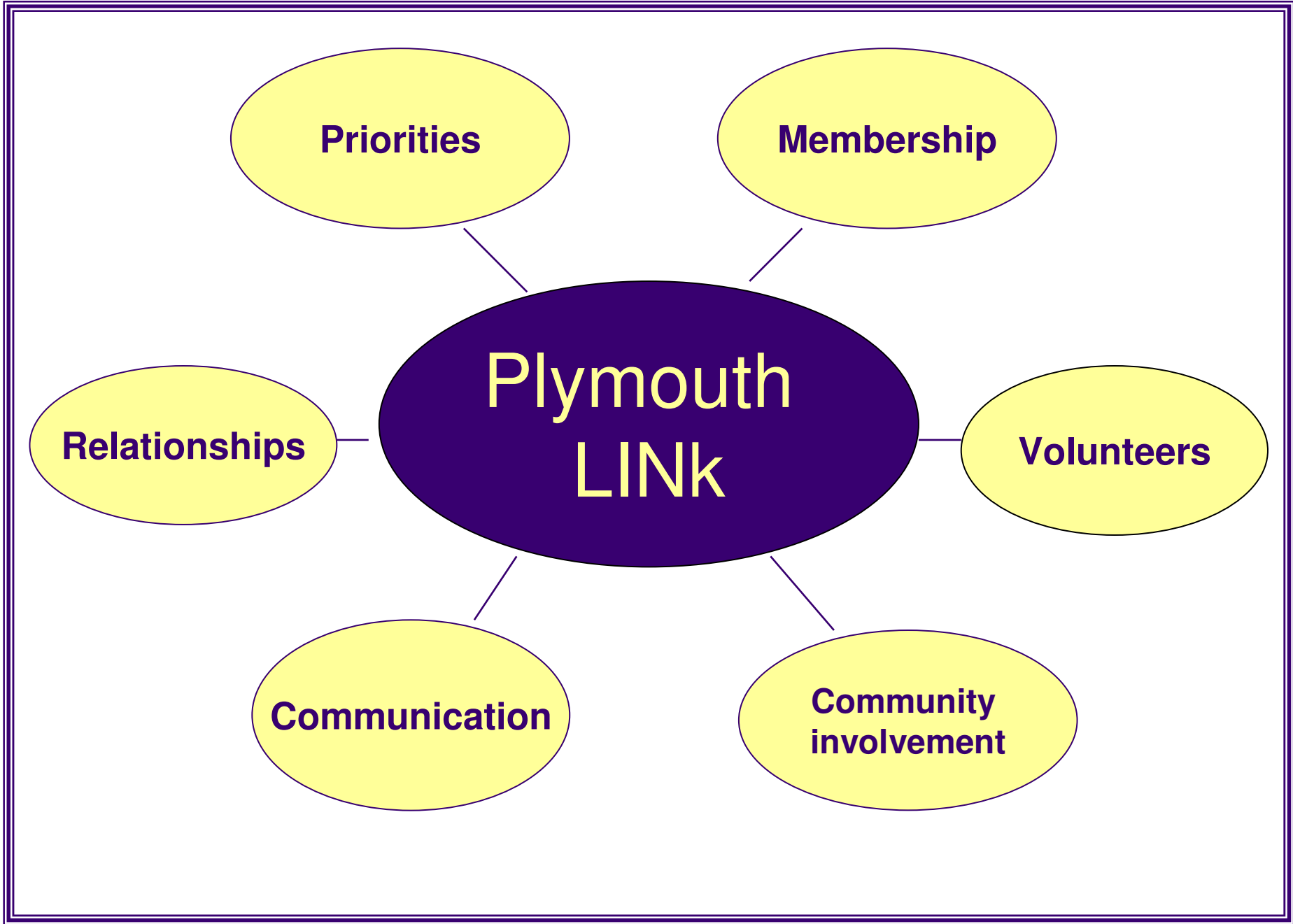
- Monitor's transitional powers of oversight over foundation trusts will be reviewed (except for newly authorised FTs, where Monitor's oversight will continue until two years after the authorisation date if that is later)

# **Plymouth LINK and the transition to HealthWatch**



**Vicky Shipway  
Manager**

**Plymouth LINK Support Team**



**Priorities**

**Membership**

**Plymouth  
LINK**

**Relationships**

**Volunteers**

**Communication**

**Community  
involvement**

# Success

- **Information**
- **Access to Services**
- **Discharge from hospital**
- **Cleanliness**
- **Staff training**

# Being HealthWatch

- **Business as usual**
- **Transition plan**
  - Development group
  - Communication and consultation
  - Relationships
  - Changing
- **Pathfinder**

# We need your help . . .

Table Discussion 1 (10.15 am - 11.00 am)

**How do we see HealthWatch developing locally and what are the challenges?**

Table Discussion 2 (11.15 am - 12.00 pm)

**How will HealthWatch represent views on the Health and Wellbeing Board?**