

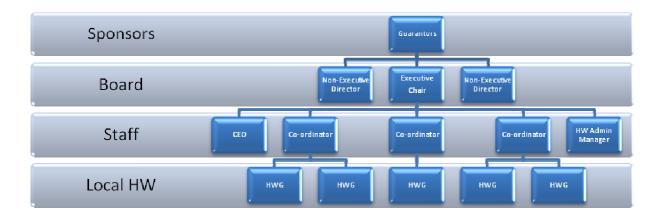
Background

The Local Government and Public Involvement in Health Act 2007 introduced a way for individuals and communities to become involved in the planning, commissioning, and delivery of health and social care. This role has been provided since 2008 through a service known as the Local Involvement Network (LINk).

Building on LINks, the Health and Social Care Act 2012 creates Healthwatch as the new independent consumer champion for health, public health and social care. Each top tier Local Authority is required to establish a local Healthwatch by 01 April 2013. Until then LINks will continue to operate as usual. It will exist in two distinct forms – at a local level as Healthwatch Cambridgeshire, and as Healthwatch England at national level. Healthwatch England was established on 01 October 2012.

Healthwatch Cambridgeshire will give citizens and communities a stronger voice to influence and challenge how health and social care services are provided within their locality. It will be the local consumer voice for the whole county including children and young people, working age adults, parents, older people and people with disabilities on health, public health and social care issues. It will also provide a voice for out of area users of health, public health and social care, for example tertiary hospitals and care homes. Healthwatch Cambridgeshire will support health, public health and social care services by working with and listening to local people, their views and experiences of using services. It will build on the work already done by Cambridgeshire LINk and can have additional functions and powers – providing or signposting people to information to help them make choices about health and care services.

The local Healthwatch will be an independent organisation, able to employ its own staff and involve volunteers, so it can become the influential and effective voice of the public. It will have to keep accounts and make its annual reports available to the public. In Cambridgeshire, this will be set up as a Company Limited by Guarantee (CLG) with the indicative governance structure.



The National Requirements for a Local Healthwatch

Department of Health guidance states that a Local Healthwatch will:

- § Have a seat on the statutory Health and Wellbeing Board, ensuring that the views and experiences of patients, carers and other service users are taken into account when local needs assessments and strategies are prepared, such as the Joint Strategic Needs Assessment (JSNA)
- § Enable people to share their views and concerns about their local health and social care services and understand that their contribution will help build a picture of where services are doing well and where they can be improved
- § Be able to alert Healthwatch England or Care Quality Commission (CQC) where appropriate, to concerns about specific care providers, health or social care matters
- § Provide people with information about their choices and what to do when things go wrong
- § Sign-post people to information about local health and care services and how to access them
- § Give authoritative, evidence-based feedback to organisations responsible for commissioning or delivering local health and social care services
- § It may help and support Clinical Commissioning Groups (CCGs) to make sure that services really are designed to meet citizens' needs
- Be inclusive and reflect the diversity of the community it serves. (It is an explicit requirement of the Health and Social Care Act 2012 that membership is representative of local people and of different users of services, including carers and hard to reach groups from across the whole County.)

Cambridgeshire Healthwatch Vision

In fulfilling the national requirements we require Healthwatch Cambridgeshire to:

- § Be representative of the local community it serves
- § Engage and represent the community it serves with particular emphasis on seldom heard groups
- Engage with commissioners (including Local Commissioning Groups and Clinical Commissioning Groups), providers and communities when changes to service provisions are planned or public health issues addressed
- S Carry out visits, to enter, view and observe health and social care activities in order to assess the nature and quality of services and obtain the views of people using those services
- S Work closely with the County Council Adults Wellbeing and Health Overview and Scrutiny Committee and Children and Young People Overview and Scrutiny Committee, to share intelligence, work plans and refer issues when appropriate
- § Be accountable to the Council for its performance and its use of public funds

Healthwatch will need to demonstrate that:

- It has an open and transparent recognised structure for making decisions and enabling local people to influence what it does (e.g. internal processes, work prioritisation, recommendations, impact analysis) and acts in accordance with the Nolan principles of standards in public life.
- § It has good governance and management arrangements in place including processes to maintain robust accounts of how it has used its funds.
- § It can demonstrate accountability to the local community for the way it takes decisions through adoption and use of good governance principles including transparency, independence and lay leadership.
- § It has a strong volunteering culture, values people and skills and has a set of competencies that enables it to deliver its statutory roles

Healthwatch Cambridgeshire will be:

- Independent people tell us that it is important that Healthwatch Cambridgeshire must be seen as being independent from the County Council and health, public health and social care services and will be a free-standing body which is respected for its independence and trusted by residents and stakeholders.
- Clearly recognised a body with a clear identity which is strong and distinctive from existing local organisations. It will embrace and utilise the Healthwatch brand and identity developed at national level.
- **Credible** local people, commissioners and partners are able to trust the reliability of information, the ability to influence and the evidence underpinning its work
- **User-focused** relentlessly championing the voice of the patient and service user in the health and social care system
- **Inclusive** an organisation which finds ways to work with the many different patient and service user representative groups across Cambridgeshire
- **Well-connected** able to signpost people to good quality information to help them make choices about health and social care; with access to established networks to gather comprehensive patient and service user views.
- **Evidence based** a body which uses evidence to underpin its priorities and target its efforts
- **Competent** an organisation that can demonstrate the relevant skills and competencies required to deliver its functions including new technologies
- Influential able to make an impact on the local commissioning of health and social care; complement other inspection regimes; and support patients and residents with signposting to information about the quality of local health services
- Flexible an organisation which can work in partnership with key decision-makers (including Cambridgeshire County Council, District Councils, Cambridgeshire and Peterborough Clinical Commissioning Group, the Health and Wellbeing Board, the

Voluntary Sector and other bodies at strategic level) while still being able to listen to individual patient concerns, represent them effectively, and challenge those same decision-making bodies when necessary.

- **Self-aware** an organisation which actively seeks feedback on its own performance and critically assesses its strengths and weaknesses.
- **Accountable** working to a clear set of standards against which the local authority and the residents it serves can appreciate its success.
- Good value for money an organisation that makes the best use of its resources by seeking to avoid duplication with other bodies in the local authority area and, where possible, working creatively with them to deliver the most cost effective solutions to achieve its chosen priorities.

Healthwatch Cambridgeshire Functions

Healthwatch Cambridgeshire will carry out its functions in accordance with the Health and Social Care Act 2012 and relevant legislation and regulations. It is envisaged Healthwatch Cambridgeshire will fulfil a number of key functions which are detailed below but subject to national and local guidance.

Function 1 – Providing advice and information about access to services and support for making informed choices:

- Develop and deliver effectively an accountability policy aimed at ensuring that
 Healthwatch Cambridgeshire understands how local people prefer to seek and
 receive information; that information is up to date, relevant, impartial and accurate;
 and that people can have access to this information regardless of background,
 disability, age, etc.
- Develop access to, capacity to provide and analytical capacity for currently available information e.g. NHS Choices
- Develop the availability of good quality information in the formats that people want and in the places that people go and make best use of partnerships and collaboration to achieve this
- Develop a 'triangulation' system to ensure that feedback about the quality, effectiveness and availability of information informs the future development of information and advice systems
- Develop and maintain a clear 'whole-system' view of the health and social care 'landscape' in Cambridgeshire
- Board members, staff, volunteers and representatives will need to be aware of the adult and child safeguarding procedures as current.

Function 2 – Making the views and experiences of people known to Healthwatch England (HWE) and provide a steer to help it carry out its role as national champion:

- Develop a plan for timely two-way information flows and clarity of accountability between HWE and Healthwatch Cambridgeshire
- Develop a process for informing HWE of local matters relevant to wider public health agendas and ensure that such involvement is more than just 'a conversation'

• Foster its own independence.

Function 3 – Recommending investigation or special review of services via Healthwatch England or direct to the Care Quality Commission:

- Agree and establish an ongoing dialogue with Healthwatch England
- Develop good information governance
- Ensure that urgent concerns are escalated effectively
- Work to NHS Constitution (Health) and 'Think Local, Act Personal' (Social Care).

Function 4 - Promoting and supporting the involvement of people in the commissioning and provision of local care services:

- Develop 'easy to reach' facilities and capacity local people will know how to contact Healthwatch Cambridgeshire
- Develop an understanding of and strategies for inclusion of all groups in the Cambridgeshire local community and to ensure that groups and networks are kept up to date with Healthwatch Cambridgeshire plans and how they can be involved
- Develop effective collaboration and involvement with existing networks
- Develop suitable arrangements for the practical support and training for board members, staff and volunteers
- Develop and support the integration of the Enter and View process into Healthwatch Cambridgeshire in accordance with current legislation including a quality assurance mechanism. Volunteers will be safely recruited, trained, CRB checked and supported in accordance with this legislation
- Develop an effective programme of community dialogue activity
- Develop the 'critical friend' role with the Health and Wellbeing Board.

Function 5 – Gathering views and understanding the experiences of patients and the public:

- Information that is currently collected separately needs to be co-ordinated, consolidated and analysed in order to get a wide understanding of local views and experiences of health and social care services
- Develop strategies for identifying and engaging with those who don't generally come forward
- Develop processes for making decisions over the effectiveness of information gathering, how this is used and opportunities for publicising information
- Develop collaboration and co-ordination with CQC leading to improved dialogue
- Develop capacity and expertise for the interpretation of data and information
- Develop methods to collate evidence and information to support recommendations to Healthwatch England/CQC.

Function 6 – Making people's views known:

- Development of a shared information structure with other organisations to avoid duplication
- Develop systematic methods for gathering views (local and national sources)
- Develop responsiveness, reporting back processes and making the publishing of findings fully accessible
- Develop a systematic approach to analysing gathered community views and provide ongoing feedback to CQC
- Develop a strong representational role on decision making bodies, relevant scrutiny committees and other quality assurance groups such as the proposed Quality Surveillance Groups.

Function 7 – Provide access to the NHS Complaints Advocacy Service (to be confirmed):

• Ensure effective signposting to the NHS Complaints Advocacy Service

Performance Measures

Performance measures and targets will be developed and agreed with the council. Targets will be developed where appropriate. Areas to be covered will include but not necessarily limited to:

- Size and scope of Volunteer workforce and impact
- Representativeness of local community
- Media profile
- Volumes and nature of enquiries and signposting activity (TBC)
- Timeliness of responses
- Customer satisfaction
- Numbers and characteristics of customers assisted through Healthwatch Cambridgeshire (TBC)
- Accessibility
- Numbers of reports and recommendations produced and the outcomes of these
- Numbers and nature of enter and view visits undertaken and the outcomes of these
- Annual Report and Audited Accounts