

FINAL REPORT OF THE BEDFORDSHIRE HEALTH ADVISORY FORUM

**(Bedfordshire Local Involvement
Network Interim arrangements)**

1 April 2008 – September 2008

**Report of the work of the Bedfordshire Health Advisory Forum from
1 April 2008 – September 2008**

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24.4.08

23.5.08

19.6.08

24.7.08

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FOREWORD

This paper outlines the establishment and work of the Bedfordshire Health Advisory Forum (HAF) under the authority of Bedfordshire County Council (BCC). It has enabled Patient and Public Involvement (PPI) Forum members to continue their roles as representatives of both patients and the public of Bedfordshire. This role is to ensure the development and quality of healthcare meets with the patient and public aspirations for good healthcare service delivery in Bedfordshire.

The NHS, Primary Care Trust (PCT) in Bedfordshire has co-operated wholeheartedly to help the HAF achieve its aims. Although the HAF has a limited life span the volunteers that make up the membership have given very valuable service in order to maintain the momentum of work and to help fulfil The Secretary of State for Health's wish for a greater public voice in healthcare.

The activity of the HAF has been fortunate to have excellent continued support from Voluntary Action Luton and particularly the services of an experienced Forum Support Officer. The LINKs Co-ordinator Officer at BCC has enabled the transitional period to run as smoothly as possible and has added value to the process.

Bob Smith, Chair, Bedfordshire Health Advisory Forum

INTRODUCTION

The Bedfordshire Health Advisory Forum was formed in April 2008 by the Local Authority following the abolition of PPI Forums at the end of March 2008 (*Local Government & Public Involvement Act 2008*); the aim being to provide a means for Forums to complete some of the legacy work highlighted in their final Local Working Agreements with their supporting Forum Support Organisation before the establishment of the Bedfordshire LINK. It was also a means of continuing to offer a point of contact in Bedfordshire for patients and the public to raise issues of concern about health provision.

Initially it was estimated that around sixteen of the original members of the Bedfordshire PPI Forums would remain in the interim period, but the Forum Support Organisation was delighted that thirty-two members chose to remain, including a few members from the Luton & Dunstable (L&D) Hospital and Beds and Luton Partnership Trust (Mental Health) PPI Forums who have a focus in South Beds and county-wide. The Forum was also able to retain the support of the original Support Officer for Bedfordshire PPI Forums.

The Bedfordshire Health Advisory Forum first met on 24 April 2008 to agree a work programme. At the first meeting, members also elected a Chair and Vice

Chair and agreed how to manage the four areas of work monitoring, Bedfordshire PCT, Bedford Hospital, the L&D Hospital and Beds and Luton Partnership Trust and agreed a process for prioritising work referred to the Forum.

The transitional arrangements described above have meant that Bedfordshire has had a seamless transition into LINKs, which is a positive change from the upheaval and uncertainty that Forum members experienced during their time with the PPI Forums. It has built on the work of PPI Forums in Bedfordshire, which is a tribute to the volunteers who have been so committed and worked tirelessly to influence change in health provision locally.

THE ROLE OF THE BEDFORDSHIRE HEALTH ADVISORY FORUM (HAF)

In accordance with *Part 14 of the Local Government and Public Involvement in Health Act*, Bedfordshire County Council (the Local Authority) has established interim arrangements in order to ensure that transitional Local Involvement Networks (LINKs) activities are being undertaken in Bedfordshire from 1 April 2008.

AIMS AND OBJECTIVES OF the HEALTH ADVISORY FORUM

- a) Promoting and supporting the involvement of people in the commissioning, provision and scrutiny of local health services;
- b) Enabling people to monitor and review, the commissioning and provision of local health services;
- c) Obtaining the views of people about their needs for, and their experience of, local health services; and
- d) making the views of local people known and reporting and making recommendations about how local health services might be improved, to persons responsible for commissioning, providing, managing or scrutinising local health services.

ROLE OF HEALTH ADVISORY FORUM

- To meet on a regular basis during the interim period;
- To undertake the above activities (a-d) in line with LINKs regulations 2008.
- To agree a structure for the Health Advisory Forum (HAF) meetings (including appointment of Chair / Vice Chair and other roles and responsibilities);
- To produce a work plan for the HAF, using the legacy work documents left by the Bedfordshire PCT, Bedford Hospital, Bedfordshire & Luton Partnership Trust and Luton and Dunstable Hospital Foundation Trust PPI Forums';
- To provide a point of contact for Bedfordshire patients and the public to raise concerns and issues about local health provision;

- To use the HAF's *Prioritisation Criteria* to decide how to progress or refer new work brought to the attention of the HAF;
- To agree a process for inspecting and viewing health bases and provision and prepare reports with any recommendations to the relevant service provider (*NHS Trust, NHS FT, a PCT and a local authority*);
- To work in partnership with local Overview and Scrutiny functions to address issues regarding local health services.
- To continue to maintain and develop networks with community and voluntary sector health and social care groups;
- To attend any relevant meetings (*e.g with the Trusts, Practice Based Commissioning Groups, etc*), seminars and events as required and prepare notes and share information as appropriate with the HAF;
- To record and maintain information that HAF members feel can be passed on to the Host organisation to assist with the development of Local Involvement Networks (LINKs) in Bedfordshire;
- To prepare a report of Forum activities at the end of the interim period for both the service providers described above and for the appointed Host organisation for LINKs.

April 2008

Chair: Bob Smith
Vice Chair : Josie McLean

- | | | |
|-----------|------------------|------------------|
| 1 | Lorna | Alveranga |
| 2 | Norma | Bartlett |
| 3 | Carl | Bernard |
| 4 | Ann | Brown |
| 5 | Crystal | Burgoyne |
| 6 | Barbara | Burrows |
| 7 | Terence | Darlow |
| 8 | Doreen | Davis |
| 9 | Ernie | Davis |
| 10 | Janet | Dennis |
| 11 | Arthur | Dennis |
| 12 | Joyce | Dynes |
| 13 | Iris | Eldridge |
| 14 | Monika | Elliott |
| 15 | Franca | Garrick |
| 16 | Trevor | Gash |
| 17 | Ronald | George |
| 18 | Raymond | Gunning |
| 19 | Arthur | Hoggard |
| 20 | Brian | Jones |
| 21 | Josie | McLean |
| 22 | Margaret | Meek |
| 23 | Catherine | Moorhouse |
| 24 | Douglas | Ovenden |
| 25 | Kamaljit | Patti |
| 26 | Glen | Pullen |
| 27 | Paulette | Rennie |
| 28 | Sandra | Ridgway |
| 29 | Charles | Robbins |
| 30 | Anne | Roberts |
| 31 | Bob | Smith |
| 32 | Graham | Ward |

**BEDFORDSHIRE
HEALTH
ADVISORY
FORUM**

Membership

A Code of Conduct for Bedfordshire Health Advisory Members

This Code of Conduct sets out what you can expect from the Forum Support Organisation and the Local Authority and what they expect from you as a Forum member.

If the Forum Support Organisation (FSO) does not meet your expectations please speak to us about your concerns. You can also use our **Complaints Policy**.

The FSO has a **Standards of Conduct policy** which sets out what will happen if a Forum member does not meet the appropriate standards. Both these documents are available on request from the Forum Support Officer and are an adaptation of procedures produced for PPI Forums.

Adherence to 'Public Service Values' has always been integral to membership of the PPI Forums and we felt it appropriate to adopt this for the Bedfordshire Health Advisory Forum also. This Code of Conduct helpfully clarifies and sets out the details of that existing duty. Adherence to the Code of Conduct is therefore a condition of Forum membership and breaches of the Code could lead to action being brought under the FSO's Standards of Conduct policy.

I understand that as a Forum member I will:

Personal Conduct

- seek out and listen to the views of patients, carers and the public, especially those individuals and groups whose voices are not usually heard
- raise issues for consideration by the Forum which are based on evidence from patients or the public which demonstrate this is a matter of wider concern
- act and conduct myself in a reasonable and responsible way to any staff or volunteers or members of the public I work with or meet as a Forum member
- not deal with individual or confidential matters but always act with reference to the Forum.
- make sure that people are aware of who can deal with complaints about personal or individual treatment, such as PALS or ICAS
- never disclose confidential and sensitive information unless there is a legal duty to do so for example in the interests of patient safety
- aim to attend training and other opportunities to develop my understanding of Forum work
- let the FSO know of any changes to my employment or personal circumstances which could affect my membership of the Forum

- declare any conflict of interest, or anything that might be seen by other people as a conflict of interest, as soon as it arises and keep the Register of Interests up to date
- not accept gifts or hospitality which could be seen as trying to influence the decisions, independence or activities of the forum
- comply with relevant legislation including equal opportunities, discrimination, human rights, Patients Forums, data protection and freedom of information and the NHS

Valuing Diversity

- treat all people with respect and act in a way which does not discriminate against or exclude anyone

Working in the Forum

- commit to playing an active role in the Forum, contributing to meetings and being involved with working groups and other projects
- prepare for meetings and events and send apologies when I cannot attend or will be late
- ensure that when I am unavailable for Forum work or meetings that I let the chair of the Forum or the FSO know as soon as possible
- listen to and respect the views and experiences of other Forum members, and support fellow members to contribute to the Forum's work
- present and promote other relevant views, which may not always be the same as my own

Collective responsibility

- not work against the majority view of the Forum once a decision has been democratically taken, but I may request that my viewpoint, if it differs, is recorded in the minutes.
- only carry out work and go on visits in line with the action plan agreed by the Forum
- have the Forum's general agreement before speaking, writing or attending meetings on behalf of the Forum
- ensure that when I am representing the Forum at a meeting or event, that I am speaking on behalf of the Forum and not myself

- report back to other Forum members when I attend anything on the Forum's behalf

I understand that the Forum Support Organisation will seek to provide me with:

- help to carry out my work on the Forum
- appropriate materials to carry out my Forum activities
- advice and support in dealing with any difficulties I am having and guidance with situations that are new to me
- appropriate re-imburement for the help I need to take a full part in the Forum's work such as interpreter, translations, advocate, child care, and travel
- an introduction to the Forum when I join which will include meeting the relevant people and getting the right information including annual reports, work plans and minutes of previous meetings
- training in the skills I need to be a Forum member
- correct and up to date information, sent to me in a way (such as email or post) and format that I have agreed
- an appropriate level of insurance when taking part in Forum activities
- appropriate ID to be shown when reasonably required

Appendix I - The Seven (Nolan) Principles of Public Life

(which apply to Forum members)

Selflessness

Holders of public office should take decisions solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family, or their friends.

Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties.

Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

Openness

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

Leadership

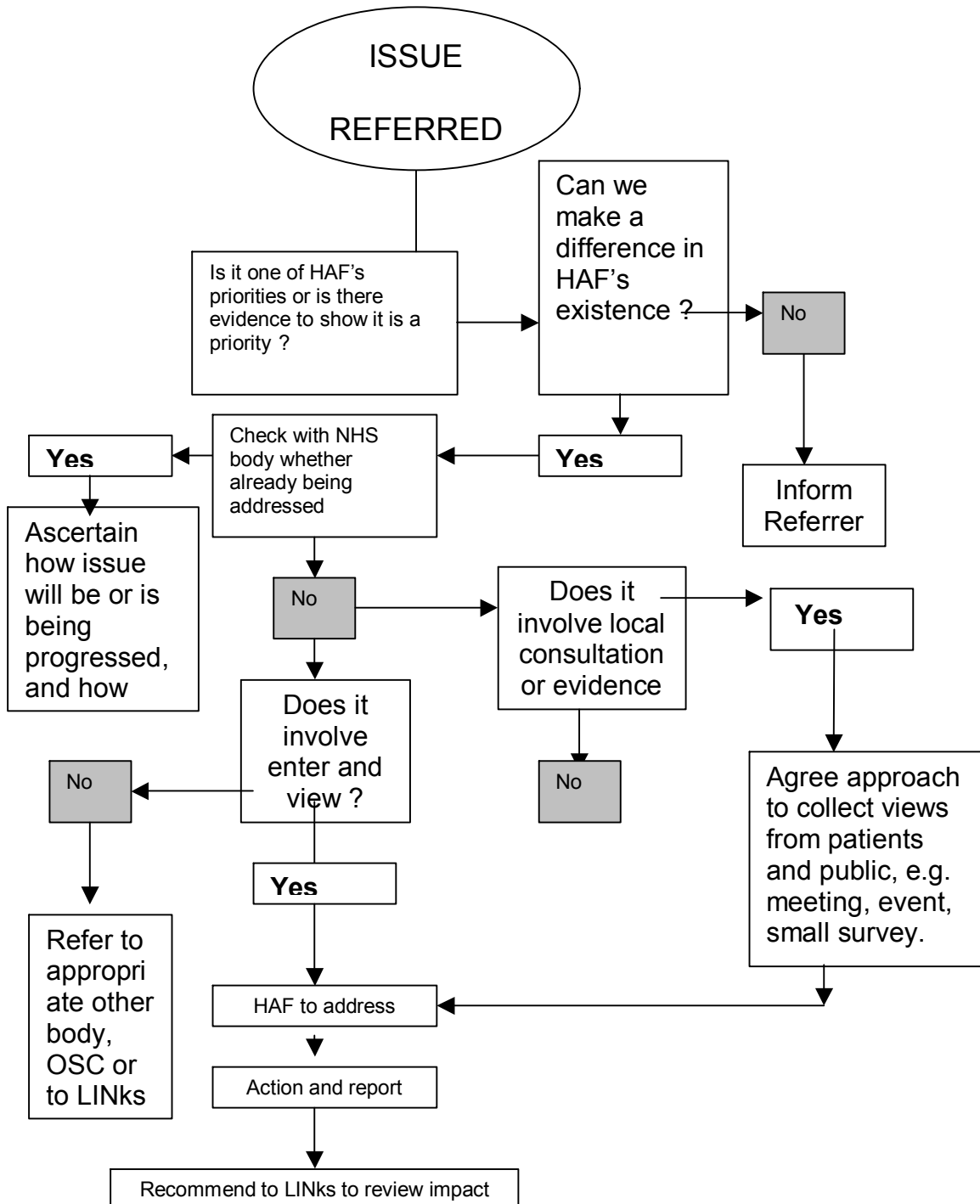
Holders of public office should promote and support these principles by leadership and example.

WORK PRIORITISATION CRITERIA

This is a process for prioritisation for unforeseen and unexpected work items referred to the members of the Health Advisory Forum.

Criteria for prioritisation might be :

- The ability to make a distinct and positive impact within the life-span of HAF ;
- Issues that are timely and relevant, and not under review elsewhere



EXTERNAL MEETINGS/ACTIVITIES

Meeting	Date	Members Involved	Outcome/Result
Panel for the appointment of Putnoe GP	24 April – 12 May 08	Barbara Burrows	Lay representation on panel.
Stakeholder Meeting – Townsend Court – Home for those with mental health issues	6 May 08	Iris Eldridge Monika Elliott	Information gathering
Oral Health Seminar	13 May 08	Ray Gunning	Information gathering
Stakeholder Meeting – MH	20 May 08	Iris Eldridge Barbara Burrows	Information gathering
Dunstable Medical Public Meetings	3 June 08 8 July 08	Raymond Gunning Monika Elliott Crystal Burgoyne	Attending on behalf of HAF
Meeting with Chief Executive, Bedford Hospital	10 June 08	Josie McLean Arthur Dennis	HAF's continuation on Hospital committees
Meeting with Deputy CE & Nursing Director L&D Hospital	10 June 08	Raymond Gunning Trevor Gash	Hospital issues and reconfiguration of A&E when Hemel Hempstead Hospital closed.
Response to EoE SHA Consultation	Sub-group meeting 11 June 08	Bob Smith Franca Garrick Ann Brown Sandra Ridgway Crystal Burgoyne	To formulate a response for HAF
Meeting with Carrie Catlin – Mental Health provision, South Beds	13 June 08	Iris Eldridge Ann Brown	Information gathering
Meeting with Georgette Fitzgerald – Mental Health provision Weller Wing	16 June 08	Iris Eldridge Ann Brown	Information gathering
Monitoring visit to L&D Kitchens	18 June 08	Crystal Burgoyne Sandra Ridgway	View & Inspect

Monitoring visit to HMP Bedford	1 July 08	Catherine Moorhouse Terry Darlow	Enter & View healthcare
Festival for Older People, Bedford Corn Exchange	2 July 08	Sandra Ridgway Crystal Burgoyne Kamljit Patti Norma Bartlett Terry Darlow	Community engagement
Monitoring visit to Poplars – Adult MH Residential home	3 July 08	Iris Eldridge Norma Barlett	Enter & View healthcare
Continence Strategy Meeting	8 July 08	Norma Bartlett	Lay representation
GP Monitoring visit – Cranfield	9 July 08	Janet Dennis Doug Ovenden	Enter & View
Monitoring visit to Nurse Training, Bedford Hospital	9 July 08	Catherine Moorhouse Norma Bartlett	Enter & View
Monitoring visit to Acute Assessment Unit	14 July 08	Arthur Hoggard Arthur Dennis Bob Smith	Enter & View
Meeting with Lorna Liverpool, Service Director Mid Beds – MH	18 July 08	Iris Eldridge Charles Robbins	Information gathering
GP Monitoring visit – Asplands Medical Centre	25 July 08	Bob Smith Monika Elliott	Enter & View
GP Monitoring visit - Biggleswade Health Centre	29 July 08	Norma Bartlett Bob Smith	Enter & View

Meeting	Member/s involved	
Bedfordshire Adult Health and Social Care Overview & Scrutiny Committee	Bob Smith Arthur Hoggard	
PEC (Professional Executive meetings)	Monika Elliott	
PPI Meeting, Bedfordshire PCT	Franca Garrick	
Horizon Health Practice Based Commissioning meetings	Janet Dennis	
Bedfordshire Primary Care Development Meetings	Bob Smith	
Bedfordshire Single Point of Contact meetings	Raymond Gunning	
Chiltern Vale Practice Based Commissioning Group	Norma Bartlett Ray Gunning	
PCT Continence Strategy Group	Norma Bartlett	
Beds PCT Provider Committee	Barbara Burrows	
Bedford Hospital Trust Board	Arthur Dennis	
Bedford Hospital Patients Panel	Arthur Dennis	
Beds & Luton Mental Health Partnership – stakeholder meetings	Iris Eldridge	
L& D Hospital Peat L&D NICE Guidance Implementation Committee, L&D Clinical Ethics Committee, L&D representative Group, L& D Patient Experience Committee	Raymond Gunning	

To: All Members of Bedfordshire Health Advisory Forum

May 2008

Dear Member

QUESTIONNAIRE ON COMMUNITY NETWORKS

I should be grateful if you would complete this short questionnaire outlining your interests and current involvement in community networks. This information will be used to progress the work of the Health Advisory Forum and will be passed onto the appointed Host organisation for Bedfordshire LINKs (Local Involvement Networks), unless you indicate otherwise (see 6 h) below).

Thank you for your co-operation.

- 1. Name:
- 2. Telephone no:
- 3. Email address:

4. **What areas of health and social care particularly interest you?**

Please indicate in tick box(es) below as appropriate.

HEALTH

SOCIAL CARE

- | | |
|---|---|
| a) Primary Care <input type="checkbox"/> | g) Physical Disabilities <input type="checkbox"/> |
| b) Acute Care <input type="checkbox"/> | h) Domestic Violence <input type="checkbox"/> |
| c) Mental Health <input type="checkbox"/> | i) Substance Misuse <input type="checkbox"/> |
| d) Learning Disabilities <input type="checkbox"/> | j) Carers <input type="checkbox"/> |
| e) Older People <input type="checkbox"/> | k) Older People <input type="checkbox"/> |
| f) Younger People & Children <input type="checkbox"/> | l) Younger People (not children) <input type="checkbox"/> |

5. **Which community and voluntary groups do you belong to and what position, if any, do you hold within these groups?**

Group	Position <i>(if relevant)</i>

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6. How would you wish to participate in LINKs (Local Involvement Networks) when it is operational in Bedfordshire?

a) **As an individual ?** Yes No
(Please tick as appropriate)

b) **Through one of the groups mentioned above. (Please give details)**

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c) **I would like to be put in contact with the following voluntary/community groups:**

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[Please tick box(es) as appropriate]

- d) I would like to be consulted when it involves an area I am interested in *(as indicated under 4. above)*
- e) I would like to participate in meetings relevant to my area of interest/s
- f) I would like to be part of a group that undertakes enter and view visits to health and social care bases (monitoring). *I understand that this will require me to undergo training and to be checked by the Criminal Record Bureau (crb).*
- g) I would like to be involved in research and mapping exercises for my areas of interest.
- h) I do not wish to be involved in LINKs

7. How do you wish to be kept informed?

a) I wish to be kept informed of LINKs activities by *(Please tick as appropriate):*

- i) e-mail
- ii) regular newsletters or bulletins
- iii) the website
- iv) attendance at public meetings and events

v) post (*if essential*)

Please return completed questionnaire by **no later than Tuesday, 3 June 2008** to:
Charlotte Bonser, Forum Support Officer, Health Advisory Forum, Voluntary Action
Luton, 15 New Bedford Road, Luton, LU1 1SA
E-mail: charlotte.bonserppi@mail.com Tel: 01582 733418
An electronic version of this questionnaire is available on request.

THE ANALYSIS OF THIS QUESTIONNAIRE IS APPENDED TO THIS REPORT.

CONCLUSIONS AND RECOMMENDATIONS

The Bedfordshire Health Advisory Forum has enabled a smooth transition from PPI Forums to the interim arrangements for Bedfordshire Local Involvement Networks, and has maintained its networks with the statutory bodies and communities which bodes well for the final transition into Bedfordshire LINKs.

The interim period has given members the opportunity to continue valuable scrutiny of health provision and to mull over the concept of LINKs, and how they as individuals, and as part of their wider networks, can be involved in this new initiative.

Many PPI Forum members were uncertain about LINKs; much of the early information from the DH and from the Early Adopter Projects gave little direction and was vague. It is evident also that around the country the local authorities and appointed host organisations have found the National Involvement Centre's guidance and website patient citizens and host exchange forums very necessary because of developing governance and to learn from good practice. However, thirty-two members of the Bedfordshire PPI Forums and members of the L&D Hospital and Mental Health PPI Forums chose to remain to progress LINKs for the county. In Bedfordshire members were:

- invited to be part of the Local Authority's LINKs Steering Project Group;
- they attended stakeholder events held by the Forum Support Organisation and the Local Authority;
- involved locally at each stage of the process and were kept informed of developments for LINKs;
- supported by their original Support Organisation, contracted by the Local Authority to manage the process and
- allowed to carry out some of the legacy work left by the PPI Forums.

The Forum's successful working and completion of its work programme is primarily to do with the commitment of the volunteers involved but also to the group being very focussed. The Forum produced :

- clear aims and objectives
- a prioritisation criteria for deciding on work items
- a manageable work programme
- a general code of conduct
- a traditional committee structure led by a Chair and Vice Chair and a democratic voting process where there is a difference in opinion over an issue

The work programme was democratically decided by the Forum appointing a sub-group of the members from each Trust area, namely Bedfordshire PCT, Mental Health Trust and the Hospital Trusts for Bedford Hospital and the L&D Hospital. This way of working meant that :

- information relevant to more than one Trust or where issues crossed over could be shared and followed up more quickly than if separate forums had existed.
- Members were able to get involved in work items outside their usual area of interest and work with new or different members
- The numbers involved in the Forum has meant that a varied and a good number of enter and view visits, including familiarisation and update meetings have taken place.

As good working relationships with Trust leads had already been established by the PPI Forums, contacting and arranging visits to view and inspect have been easy to organise for the Health Advisory Forum. This has shown that it was important not to have a gap in patient and public scrutiny of health services between the demise of PPI Forums and the establishment of LINKs. The interim or transitional phase has allowed the concept of LINKs to be introduced gradually into the arena of patient and public involvement. There is, however, now the issue of integrating the social care community involvement, which has to date been overseen by the Local Authority, and to bring social care commissioners and providers up to speed with the system of monitoring currently carried out in healthcare. This is going to be a steep learning curve for all those involved in the LINKs process.

In fact the issue of commissioning and provider services will be a challenge for LINKs, because the NHS and social care services contract with many independent providers and the stronghold position of Practice Based GP Commissioning Consortia means that the Bedfordshire LINK will have to build relationships and protocols for working with these groups. If visits to enter and view are undertaken within mutually acceptable protocols then there is no reason why these relationships cannot prove successful and useful to the commissioners, providers and ultimately to the wider community.

With the emergence of various patient groups within practices and aligned to Trusts and set up in the community, it will be important for LINKs to liaise with groups so that they can have a stronger local voice and the backing of the wider community of LINKs if the need arises. It will also prevent the situation happening currently where individuals are being asked to sit on various health groups and committees as lay representatives; in many cases they are representing themselves and not seeking the views of the patients and public and feeding back to a wider community.

It will also require co-ordination with the health and social care regulators, perhaps the regulators could assist the process by publishing their major visit schedules, therefore assisting LINKs to avoid duplicating visits and having to undergo a system of major checking before embarking on visits. It is also important for each LINK to learn from each other and share information and experience; it is therefore important that information shared on the various LINKs exchange websites is kept up-to-date.

GLOSSARY OF TERMS

CRB	-	Criminal Record Bureau
DH	-	Department of Health
FSO		Forum Support Office or Forum Support Officer
HAF	-	Health Advisory Forum
HMP	-	Her Majesty's Prison
ICAS	-	Independent Complaints Advocacy Service
L&D Hospital	-	Luton and Dunstable Hospital
LINKs	-	Local Involvement Networks
MH	-	Mental Health
NHS FT		National Health Service Foundation Trust
PALs	-	Patient Advisory Liaison Service
PBC	-	Practice Based Commissioning
PCT	-	Primary Care Trust
PPI Forums	-	Patient and Public Involvement in Health

