

LINK

**MAKE IT
HAPPEN!**

Engaging and responding to communities

A brief guide to Local Involvement Networks



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About this guide

Local Involvement Networks (LINks) exist in every local authority area of England to give people more influence over how their local health and social care services are planned and delivered.

This guide is for health and social care managers and explains more about LINks. It outlines how, through proactive engagement you can better understand the needs of your community.

Working with your LINk should be a key part of commissioning, running and reviewing health and social care services.

What is a LINK?

A LINk is an independent network made up of a mixture of local individuals and organisations – such as voluntary organisations and community groups.

LINK participants are all volunteers from across the community. Each brings with them different experiences and understanding of health and social care services. An individual's level of involvement in a LINk is completely up to them. For instance, they could spend a short time completing a survey, or take on a greater role and sit on a steering group.

To help them do their job, the legislation establishing LINks gives them certain powers – such as being able to make visits to health and social care services to see them in action.

Each LINk sets its own work programme by finding out what people want from their health and social care services – such as hospitals, GPs, care homes and pharmacies. It is also responsible for monitoring the care that services provide and reporting its findings.

Each local authority area has its own LINk.

Because no two areas are the same, each LINk is different in terms of the priorities it decides to concentrate on. And how it builds on the existing work of the voluntary and community groups.

The main role of LINks is to help make the care you provide better. The core strength of LINks lies in their expertise and experience, and in their independence.

"LINKs play an important role in helping to improve the health service. NHS Alliance members are committed to making the NHS great and interaction between professionals and public is core to this"

NHS Alliance



Why have LINks been introduced?

The public have told Government what they want from health and care services. They want services to: get the basics right, fit around their lives, treat them as individuals and to work with them as partners.

Health and care professionals know that to provide high quality responsive care, it is essential to understand what really matters to service users and to act upon this information.

With services having to meet higher public expectations, whilst at the same time making the most of existing resources, an ongoing conversation between you and your community is more important than ever.

LINks are a key way of listening to your community and involving them in important decisions about the commissioning and running of services.

Effective engagement throws up information that can result in innovative new ideas, improved quality and higher productivity. Your relationship with the community will also benefit.

The vision*

"Our aspiration is for patients and the public to drive the design and delivery of high quality services.

"To achieve this aspiration, every day, everyone working in the NHS needs to involve patients and the public in making decisions"

LINks are just one of a number of initiatives that aim to help achieve this vision.

* Putting people at the heart of care: The vision for public and patient experience and engagement in health and social care. Department of Health 2009.



The benefits to your service

By proactively engaging with LINk, it can help you to:

- seek out and listen to the views of more people in your community;
- receive richer feedback about what your community needs and wants from services;
- engage with communities and find out people's views in a simple and effective way;
- avoid duplication of effort;
- prioritise and direct resources towards services that local people value;
- make decisions about the commissioning and running of services.

LINks have been set up to help bring about genuine changes to health and social care services. This means working in partnership with health and care staff to maintain and improve on what already exists.

A LINk will work independently, as a critical friend, and will provide reports and recommendations based on experiences and views of the community that will help to improve services.

One role a LINk has is to feed back to the Care Quality Commission on how local trusts and councils are performing against set standards, and on how they have worked with their local LINk.

Using a LINk to reflect local services will also have a positive impact on World Class Commissioning scores.

To find details of your nearest LINk, go to **www.nhs.uk/links**.

**“Nurses can work with LINks
to ensure patients are aware
of the specialist services
available in the area.”**

Royal College of Nursing



Common Questions

How do LINks work?

LINks are likely to:

- ask people what they like and dislike about care services;
- seek ideas to help improve services;
- explore specific issues of concern to the community;
- tell those who commission, provide and manage local services what the community thinks;
- carry out visits to services to see them at work;
- work with commissioners and providers to improve, amend, reconfigure and supplement services;
- facilitate and influence consultation on new or revised commissioning and provision of services.

How can people get involved?

There are a number of ways for people to influence outcomes and drive improvement of their local services. It is up to individuals to decide how and when they want to be involved. A LINk provides many ways for people to express their views. This may involve taking a few minutes to answer a survey or giving up more time to be part of a working group.

Can I use LINks to look into issues that affect my service?

The priorities of a LINk should be informed by the views of the community. This would not stop a service commissioning a LINk to do additional work if the Network was willing to do this. Health and care professionals are free to ask their LINk

to undertake work on their behalf, but this is at the discretion of the LINk and would depend if it fits with the LINk's focus and local need.

Can LINks members enter and view any service?

Only an authorised representative of a LINk can enter and view services.

To protect users of services and the smooth delivery of care there are specific safeguards in place. For example: an authorised representative must have undergone a Criminal Records Bureau check. Providers also have the right to refuse entry if they believe it will interrupt the smooth delivery of care. Some premises are exempt, such as parts of a care home which are not communal

areas (e.g. a resident's bedroom) and premises or parts of premises used as residential accommodation for employees.

A Code of Conduct for LINks' visits has been produced by the Department of Health. To find out more, read the 'Further information' section at the end of this document.

Can I join a LINk?

Yes, although certain NHS bodies cannot join a LINk – these include National Health Service trusts, NHS foundation trusts, Primary Care Trusts and Strategic Health Authorities – the people who work for them are free to join a LINk, as long as there is no conflict of interest. If there is a potential conflict of interest it should be declared to the LINk.



LINks at work – case study

NHS Tees (encompassing NHS Hartlepool, NHS Middlesbrough, NHS Redcar and Cleveland and NHS Stockton on Tees) wanted to have an understanding of what local people wanted from its Out of Hours service. It called upon the expertise of the four LINks in the region as part of wider communication and engagement activity to help inform decision-making for future service planning.

All four LINks agreed to take part. Initially the LINks supported the PCT in surveying the local population to find out the views and preferences of the community on Out of Hours service provision. These findings were then used by NHS Tees to create a report which informed the development of a service specification for Out of Hours.

This was sent to the LINks for their input as part of interpretation of the results to ensure that the PCT's future planning matched the identified needs of local people. Focus groups and meetings were held to develop three key question areas to be included in dialogue sessions with potential future service providers as part of the procurement process.

The LINks assisted NHS Tees in creating a local picture of what people wanted from the service and by interpreting the results; NHS Tees can ensure that these views impact the selection of service providers and in developing future services.

Working closely with the four LINks has supported NHS Tees to have a community wide dialogue about people's experience of and needs from local services and to help them feed back to communities about how those views have helped shape decisions.

“Open engagement with patients and communities is essential in helping PCTs commission services that reflect the needs, priorities and aspirations of their populations”

Gary Belfield, Director of Commissioning, World Class Commissioning



Key facts about LINks

- Every local authority area with responsibility for social services has a LINk
- Anyone can join a LINk including individuals and representatives of charities and community groups
- LINks are independent and not part of local government or the NHS
- A LINk's remit covers all the health and social care services in an area that are commissioned by the NHS and local authorities and includes independent providers of publicly funded services. The only services that are excluded are children's social services
- Under the law, LINks can:
 - ask health and social care commissioners for information about their services and expect a response;
 - issue reports or make recommendations about a service and receive a response within 20 working days;
 - refer matters to the local council's Overview and Scrutiny Committee;
 - enter certain services and view the care provided. Please see the Code of Conduct on visiting services for more information **www.dh.gov.uk/links**
- Each Network is independent and supported by an organisation called a host. The government has made £84million available to fund LINks between 2008/2009 and 2010/2011.



LINks at work – case study

NHS Sutton and Merton works closely with both the Sutton and Merton LINks, to ensure that services are shaped with local needs in mind. These relationships have been successful in bringing about visible changes to services and influencing the commissioning process.

For example, the local Breast Screening Services have changed to reflect issues raised by Merton LINk about access for the visually impaired.

Screening information is now available in large print and Braille to address this and the website has been made more accessible. Work is also underway to support the referral process from GP to screening.

In Sutton, a report by the LINk investigating the unmet health needs of migrant communities helped to support a funding bid which will provide assistance to help newly arrived communities access health services.

Both LINks play a continued role in educating health service managers about the issues on the frontline, and are in constant contact with the PCT to communicate any concerns.

Contacting a LINk

Every person's views and experiences of health and social care is valuable. If you provide or manage a service, do tell the people you care for about LINks.

If you provide or commission health or social care services, it is good practice to get in touch with your LINk. There are many ways to locate your nearest LINk and find more information.

- Search under your postcode or area name to find your nearest LINk on **www.nhs.uk/links**
- You can also find your nearest LINk online. Many LINks have their own websites with information on recent projects, members and contacts

- If you're already involved in a LINk, you can register on the LINks Exchange **www.lx.nhs.uk** to access a list of individual LINks websites
- Alternatively, contact your local authority with responsibility for social services.

Further information

A range of information has been produced to support the way LINks work with the NHS and social care services. If you manage, provide or commission services you might be particularly interested in:

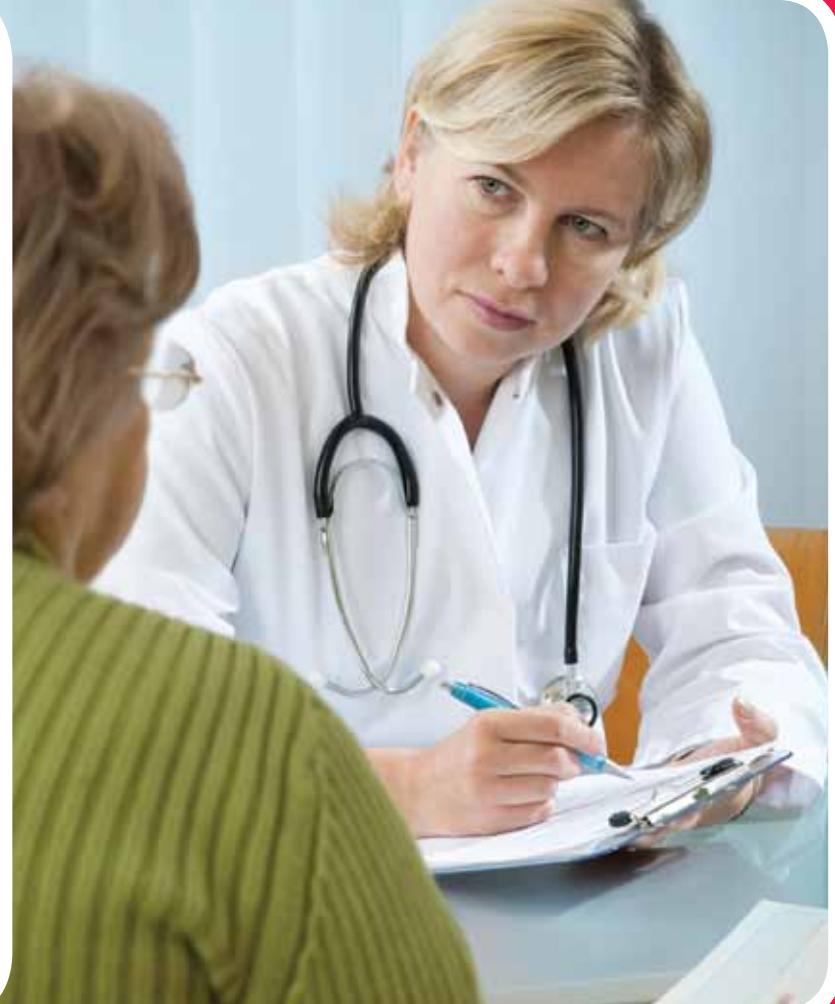
- **Code of Conduct for LINks' Visits:**

To help ensure that visits by authorised LINks' representatives are carried out appropriately, a Code of Conduct has been published. Informed by best practice, as well as the views of service users and providers, the code aims to ensure that visits are proportionate, reasonable and do not impact on the rights of people who use services

- **LINks Legislation:** The Local Government and Public Involvement in Health Act 2007 sets out the role and function of LINks www.dh.gov.uk/links
- **LINks Directions:** To ensure that independent providers are covered by LINks, the commissioners of health and social care services have been directed by government to amend all contracts post 1st April 2008 with independent providers. These amendments relate to allowing LINks representatives to enter and view services, as well as providing LINks with information relating to services they might run which are publicly funded. Further information on these and other resources can be found by visiting www.dh.gov.uk/links

- **Overview and Scrutiny Committees (OSC):** LINks and OSCs have different, but complementary roles. For instance, LINks have powers to 'enter and view' places where services are provided, whereas OSCs have powers to call senior NHS or local authority staff to meetings to explain decisions and proposals. Unlike the participants of LINks, elected councillors serving on OSCs are local politicians who fulfil their role within the wider context of the council's corporate objectives and external partnerships.

Please also visit **www.dh.gov.uk/ppe** for more information on getting the public involved in health and care services.





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