**HEALTHWATCH**

**BACKGROUND**

HealthWatch will be the new consumer champion for both health and adult social care.  It will exist in two distinct forms – HealthWatch England, at national level from October 2012 and Local HealthWatch by April 2013.

**HealthWatch England**

**What is it?**

* HealthWatch England will be launched in October 2012
* HealthWatch England will be a national body that enables the collective views of the people who use NHS and adult social care services to influence national policy, advice and guidance
* It will be a statutory committee of the Care Quality Commission (CQC) with a Chair who will be a non-executive director of the CQC
* HealthWatch England will have its own identity within the CQC, but be able to use the CQC’s expertise and infrastructure
* HealthWatch England will be funded as part of the Department of Health’s grant in aid to the CQC

**What will it do?**

* HealthWatch England will provide leadership, guidance and support to Local HealthWatch organisations
* HealthWatch England will provide advice to the Secretary of State, NHS Commissioning Board, Monitor and the English local authorities and they must have regard to that advice
* HealthWatch England will be able to escalate concerns about health and social care services raised by Local HealthWatch to the CQC
* There will be a requirement for the CQC to respond to advice from HealthWatch England
* HealthWatch England will have a strong principle of continuous dialogue with Local HealthWatch, keeping communication lines open and transparent. This will facilitate HealthWatch England’s responsibility to provide national leadership and support
* The Secretary of State for Health will be required to consult HealthWatch England on the mandate for the NHS Commissioning Board
* HealthWatch England will be required to make an annual report to Parliament

**Local Lancashire HealthWatch**

**What is it?**

* A Local HealthWatch will be an independent organisation, able to employ its own staff and 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
* The aim of Local HealthWatch will be to give citizens and communities a stronger voice to influence and challenge how health and social care services are provided within their locality
* The duty to involve the public in the planning and development of health services, as set out in section 242 of the NHS Act.
* Local HealthWatch will be established in April 2013. Until then Local Involvement Networks (LINks) will continue to operate as usual

**What will it do?**

* Local HealthWatch will have a seat on the new health and wellbeing boards, 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) and the authorisation of Clinical Commissioning Groups. This will ensure that Local HealthWatch has a role in promoting public health, health improvements and in tackling health inequalities
* Local HealthWatch will 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
* Local HealthWatch will be able to alert HealthWatch England to concerns about specific care providers
* Local HealthWatch will provide people with information about what to do when things go wrong; this includes either signposting people to, or providing, advocacy for people who want to complain about NHS services
* Some signposting is currently provided by Primary Care Trusts (PCTs), as part of their Patient Advice and Liaison Services (PALS) responsibilities. Local HealthWatch will provide, or signpost people to, information about local health and care services and how to access them
* Local HealthWatch will provide authoritative, evidence-based feedback to organisations responsible for commissioning or delivering local health and social care services
* Local HealthWatch can help Clinical Commissioning Groups to make sure that services really are designed to meet citizens’ needs
* Local HealthWatch will have to be inclusive and reflect the diversity of the community it serves. There is an explicit requirement in the Health & Social Care Bill that Local HealthWatch membership must be representative of local people and different users of services including carers

**Local HealthWatch and Local Involment Networks (LINks)**

* Local HealthWatch will evolve from existing LINks but with additional functions and powers
* Local HealthWatch will build on the good practice of LINks, establishing relationships with local authorities, Clinical Commissioning Groups (CCGs), patient representative groups, the local voluntary and community sector and service providers to ensure it is inclusive and truly representative of the community it serves

**LANCASHIRE HEALTHWATCH**

Lancashire County Council has a responsibility to ensure that Lancashire has its own Local HealthWatch by 1st April 2013.

As no Local HealthWatch structure is currently in place, Lancashire County Council are seeking a Host organisation to maintain the work of the current Local Involvement Network (LINk) and build an organisation called Local Lancashire HealthWatch which will operate within the County Council footprint. The contract will be awarded to the organisation who most convincingly demonstrates how it will work with citizens, representing the twelve districts of Lancashire through Community HealthWatch Gateways.

**What needs to happen in Lancashire?**

Local HealthWatch will have to be inclusive and reflect the diversity of Lancashire. There is an explicit requirement in the Health & Social Care Bill that Local HealthWatch membership must be representative of local people and different users of services including carers. The intention is to utilise existing infrastructures and methods of engagement with local communities.

**The vision for Lancashire**

Local HealthWatch board representatives should reflect local issues by being comprised of one or more district based HealthWatch groups (Community HealthWatch Gateways). These groups would hold regular meetings and be open and known to individuals and organisations operating within these localities. Nominations for the board should therefore be elected and drawn from representatives from existing local communities and / or patient / service user groups across the County.

The proposed reporting structure is as follows:



Contract start date and funding for Lancashire HealthWatch

The contract awarded will start no later than 1st July 2012 and a Lancashire Health Watch to be up and running by the 1st April 2013. Lancashire County Council as the top tier authority is responsible for commissioning Lancashire HealthWatch and have therefore made £60,000 available for the building an effective and inclusive Lancashire HealthWatch. The final figure for the running of a Lancashire HealthWatch will not be known till later in the year.

**RECOMMENDATION**

The Shadow Health and Wellbeing Board members are asked to note the progress being made on developing a Lancashire HealthWatch.