

**From:** Lorraine Denoris, National Programme Director – HealthWatch Implementation LGA

**To:** Local Authority HealthWatch Pathfinder leads  
Health & Wellbeing Board National Learning Set (Public Engagement Theme)  
Healthwatch/LINK Transitional Regional Leads

**CC:** Sandie Dunne – LGA Senior Accountable Officer  
Rose Doran – LGA Senior Policy Officer  
Dave Shields – LGA Associate  
John Wilderspin – Department of Health  
John Lewis – DH/ DRD East of England  
Sam Hudson – NHS Institute  
Emma Easton – Regional Voices

17 January 2012

**LGA/DH Healthwatch Implementation Programme: Offer of Support to Local Authorities**

Dear colleague

You will have seen by now the Secretary of State's announcement on Healthwatch and subsequent letter from David Behan dated 3<sup>rd</sup> January 2012. (Gateway Ref 17068, Link: [New start date and more funding announced for local Healthwatch bodies | Department of Health](#))

These documents cover three key developments;

1. a new start date for Local Healthwatch
2. funding made available for the Healthwatch pathfinders
3. new funding of £3.2m for start up costs for Local Healthwatch

The announcement reinforces the critical leadership role that local government now has in establishing effective Local Healthwatch organisations within their communities.

In recognition of this important role, the Local Government Association has established a new Healthwatch implementation programme. As part of this programme, the Department of Health is sponsoring the Local Government Association (offering LA leadership), Regional Voices (providing the learning and acting as the 'spine' that brings this together), and the NHS Institute (methodologies in accelerated learning), to support local authorities and their delivery partners to continue to develop local Healthwatch. The programme is intended to encourage an incremental approach to developing local Healthwatch and has been designed in response to feedback received from local government colleagues and other stakeholders over recent months.

It is intended to address three core objectives:

1. to extract, develop and disseminate learning generated by the pathfinders, working in partnership with the NHS Institute, Regional Voices and DH to ensure that the products are developed and shared in a way that meets the operational requirements for the implementation of Local HealthWatch across pathfinders and beyond
2. to identify any barriers to successful implementation of commissioning strategies and seek to share practical tools and ideas for making effective progress

3. to support the DH Regional Leads, cascade learning to all local authority commissioning leads and facilitating the establishment of networks based on local health economies and the principles of localism

Led by LGA, this work programme will equip local authorities to make the most of the opportunity presented by changes in the national timetable for establishing local Healthwatch and complement work being carried out by DH and strategic partners to support learning sets for LINKs.

The LGA team members are:

- **Sandie Dunne, LGA Senior Responsible Officer**
- **Lorraine Denoris, Programme Director – strategic co-ordination**
- **Dave Shields, LGA Associate – local field research**

Brief biographies are provided in Appendix 1 together with their contact details

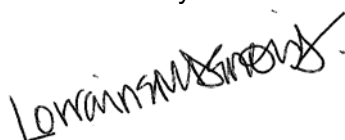
Given timescales and the limited amount of resources available we will initially work with pathfinder local authorities in order to establish the most effective way of gathering and sharing good practice across the whole local government community. The availability of DH resources (£5k for each pathfinder) in Q4 of 2011/12 to Healthwatch pathfinders (through the local authority) will enable the LGA/DH Healthwatch Implementation Programme Team to accelerate learning across a wider cross-section of local authorities.

An essential communications tool is the LGA's community of practice and we would suggest that local Healthwatch commissioning leads join that community looking at Health & Wellbeing Boards. If there is sufficient interest we could consider the establishment of a smaller private community just for those commissioning local Healthwatch.

There are some enormous challenges facing local government at present especially in relation to Local Healthwatch. However, we recognise that there are some really innovative and creative solutions being developed that could be shared more widely. A list of some of the key issues the programme will seek to address is attached at Appendix 2. Your feedback on whether we are covering the correct issues would be very helpful along with any suggestions on how we can best support your developing work and address any blockages.

The development of high quality Local Healthwatch organisations that are able to demonstrate credibility alongside the relevant skills and competencies to deliver a challenging range of functions is critical to the success of the governments' reform agenda. It is really important that we learn from and build on our experiences with LINK and other recent patient engagement organisations. This is a challenge that many local authorities are already capable of meeting; the aim of this package is to promote that good practice, share ideas and learning and to assist those who need additional support in a timely and effective way. I look forward to working with you.

Yours sincerely



Lorraine Denoris  
National Programme Director – Healthwatch Implementation

## **Appendix 1 Team Member Biographies**

### **Sandie Dunne**

Head of Programmes, Environment, Housing and Community Wellbeing

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Sandie Dunne is Head of Programmes for Community Wellbeing, Environment and Housing at the Local Government Group.

Sandie has led national programmes of improvement and sector led support including 'Ageing Well' which focused on delivering better outcomes for older people and 'Partnerships' a place based approach to partnership working and leadership of place.

Sandie is passionate about individuals and communities finding their voice and exercising choices and has worked in the public sector for many years leading on service transformation and performance improvement including work with Central and Local Government, the NHS, Fire and Rescue Service, Police and Crown Prosecution Service and the Third (voluntary) Sector. She also works on a voluntary basis as a mentor to chief executives in the Third Sector as part of the LGA's 'Leaders Together' scheme, and is Chair of Governors at a local primary school and Vice Chair of an Interim Executive Board at a partner school.

Sandie has worked with Local Authorities, Central Government including DWP, DCLG and DH, the NHS, Fire and Rescue Service and Police and Crown Prosecution Service on a national level working with Top Teams to develop their leadership capacity, designing and leading Leadership Academies working with both senior officers and political leaders., and has been a member of the Equality and Human Rights Commission Advisory Panel.

Sandie's previous role was as Head of Business Services for the London Borough of Camden from January 1999 to June 2005 delivering a wide range of corporate services across all service areas and responsible for transformational change management at a corporate and service delivery level.

From 1995-1998 Sandie worked as a Principal Policy Officer in local government on areas including Democratic Renewal, Community Consultation and Equalities. She also undertook a number of large-scale community consultation projects working with business partners, voluntary sector and government bodies and was policy advisor on a number of ALG networks. From 1987-1994 Sandie was a Service Manager in Local Government (Finance) and from 1984-1986 Sandie worked in the Department of Health as a civil servant.

Sandie's additional professional activities include being a mentor to third/voluntary sector managers, an Executive Coach, Chair of Governors and Executive Board Member (Education).

Sandie has a BA Honours (Oxon) in Politics, Philosophy and Economics (2:1), a Diploma in Management Studies, an MSc in Research and Social Analysis and an MA with Merit and Distinction (Tavistock and Portman NHS Trust) in Consultation Skills. Sandie is an accredited MSP and PRINCE II practitioner in programme management and a Qualified Executive Coach.

**Lorraine Denoris**

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Lorraine has been seconded from the NHS to head up a national Healthwatch implementation programme for the LGA following the reforms announced in the NHS and Social Care Bill. The programme is jointly sponsored by the LGA and Department of Health.

She joined NHS Eastern and Coastal Kent in 2009 as Director of Communications and Citizen Engagement, after working four years at the Healthcare Commission where she was Head of Patient and Public Engagement.

In the last 8 months, she has led a successful pilot programme of work with Clinical Commissioning Groups across the South East Coast region to embed good Patient and Public Engagement practice across their activities as they move towards authorisation. She has also been acting as Patient and Public Engagement advisor to the National Director Patient and Public Affairs at the Department of Health and leading the establishment of Healthwatch at Kent County Council.

Before this she worked as a consultant at the Office for Public Management (OPM). Whilst there she specialised in third sector, community development, equalities diversity and human rights, providing consultancy support on stakeholder engagement to a range of public and voluntary sector organisations including the Home Office, Office of the Deputy Prime Minister, Haringey, Lambeth and Camden Boroughs and the commission for Patient and Public Involvement in health.

Prior to this she was Deputy Director with the London Boroughs Grant Unit. Lorraine has also worked as a Senior Policy Advisor with the London Borough of Brent and Head of Research at the Inland Revenue Staff Federation.

**Dave Shields**

LGA Associate, Local Field Research

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Until becoming self-employed in the summer Dave had worked for Southampton City Council as its Health & Wellbeing Strategy Manager for 18 years. Previously Dave worked for the London Boroughs of Hammersmith & Fulham (1986-88) and then Greenwich (1988-93) Based in Southampton's Health & Adult Social Care Directorate Dave's role involved supporting the development of the City's Health & Wellbeing Partnership and overseeing implementation of a jointly agreed strategy and relevant targets within Southampton's Local Area Agreement. He was actively engaged in a number of local area-based regeneration programmes within Southampton in order to establish and sustain community-owned health projects. He helped

pioneer the ground-breaking 'participatory budget' initiative in the Thornhill area of the City in partnership with local residents, Southampton City PCT and the local NDC Board (Thornhill Plus You).

More recently still he worked closely with the Council's elected Members in leading the Council's work on shaping and developing the City's Local Involvement Network. The experience and insight gained from this – followed by a year's secondment to the Department of Health to support LINKs across the South East region in 2009-10 – was used to lead development (with a consortium of neighbouring local authorities) of a successful local Healthwatch pathfinder programme. He has worked closely with the DH and other national agencies (such as the CQC, LGA, CfPS and, ADASS) on the national *HealthWatch* Advisory group.

Throughout his career in local government, Dave has drawn inspiration from the Healthy Cities movement and he was a trustee of the UK Health For All Network from 1999 to 2003

## **Appendix 2. CHALLENGES FOR LOCAL AUTHORITY COMMISSIONERS**

### **Local HealthWatch: Focusing on Outcomes for Local People**

Key Question: How will the local authority support and develop the local HealthWatch contribution – as a strategic partner – on the health and wellbeing board?

*Supplementary Questions:*

1. What high level outcomes need to be included in a performance management framework?
2. Are there any specific performance measures/outputs that should be included in the commissioning framework for local *HealthWatch*?

### **Local HealthWatch: Financial Arrangements**

Key Question: How will the local authority make effective use of its national funding allocation for investing in local HealthWatch as part of the health and wellbeing board's statutory duty to promote patient and public involvement?

### **Local HealthWatch: Key Roles and Functions**

Key Question: how will the local authority determine what an effective and user-centred local HealthWatch should look like?

*Supplementary Questions:*

1. Does the role currently provided by the LINK provide a sound building block for the new HealthWatch?
2. Are there other local systems for involving and engaging patients and social service users that also need to be reflected [or involved/included] in the model for HealthWatch?
3. How can the local authority ensure continuing co-production (with existing LINKs, the VCS as well as with other partners) in all these plans?
4. How should the local authority ensure development of local HealthWatch and a leadership capacity to equip it for the new challenges?
5. Specifically, how should local Healthwatch be supported to address issues of diversity, inequality and serving people in vulnerable circumstances?
6. How might local HealthWatch signposting services be developed and what competencies might be expected of a provider of these?
7. Should the local authority commission a statutory NHS complaints advocacy service as a key component of local HealthWatch or from a specialist third party provider along similar lines as at present?
8. Should the local authority enter into agreement with other local authorities in commissioning a statutory NHS complaints advocacy service in order to achieve high quality outcomes and economies of scale?

**Local HealthWatch: Governance and Operating Framework**

Key Question: How will the local authority manage a mutually complex set of local relationships, in partnership with the new local *HealthWatch*, bearing in mind its role both as the commissioning/funding agency and as subject of scrutiny in respect of its adult social care responsibilities?

*Supplementary Questions*

1. Does it make sense to consider sub-contracting some elements of local HealthWatch where this can add value?

**Local HealthWatch: Credibility to local people**

Key Question: How will the local authority support development of local *HealthWatch* as a credible and independent local voice for NHS, social care and public health?

**Local HealthWatch: Managing the Transition**

Key Question: How will the local authority continue to support its LINK and/or maintain existing arrangements with its host organisation during the period up to March 2013?

Supplementary question

What's the best way to ensure the successful transition of [effective people/volunteers who are currently involved with LINKs], the LINK core work and LINK knowledge base into the new organisation?