

Notice of a Meeting

Adult Services Scrutiny Committee Tuesday, 6 September 2011 at 10.00 am County Hall

Membership

Chairman - Councillor Don Seale

Deputy Chairman - Councillor Mrs Anda Fitzgerald-O'Connor

Councillors:

Jenny Hannaby

Ian Hudspeth

Peter Jones

Larry Sanders

Dr Peter Skolar

Richard Stevens

Alan Thompson

David Wilmshurst

Notes:

There will be a pre-meeting at 9:30 for all members.

Date of next meeting: 25 October 2011

What does this Committee review or scrutinise?

- Adult social services; health issues;

How can I have my say?

We welcome the views of the community on any issues in relation to the responsibilities of this Committee. Members of the public may ask to speak on any item on the agenda or may suggest matters which they would like the Committee to look at. **Requests to speak must be submitted to the Committee Officer below no later than 9 am on the working day before the date of the meeting.**

For more information about this Committee please contact:

Chairman	-	Councillor Don Seale E.Mail: don.seale@oxfordshire.gov.uk
Committee Officer	-	Simon Grove-White, Tel: (01865) 323628 simon.grove-white@oxfordshire.gov.uk



Peter G. Clark
County Solicitor

August 2011

About the County Council

The Oxfordshire County Council is made up of 74 councillors who are democratically elected every four years. The Council provides a range of services to Oxfordshire's 630,000 residents. These include:

schools	social & health care	libraries and museums
the fire service	roads	trading standards
land use	transport planning	waste management

Each year the Council manages £0.9 billion of public money in providing these services. Most decisions are taken by a Cabinet of 9 Councillors, which makes decisions about service priorities and spending. Some decisions will now be delegated to individual members of the Cabinet.

About Scrutiny

Scrutiny is about:

- Providing a challenge to the Cabinet
- Examining how well the Cabinet and the Authority are performing
- Influencing the Cabinet on decisions that affect local people
- Helping the Cabinet to develop Council policies
- Representing the community in Council decision making
- Promoting joined up working across the authority's work and with partners

Scrutiny is NOT about:

- Making day to day service decisions
- Investigating individual complaints.

What does this Committee do?

The Committee meets up to 6 times a year or more. It develops a work programme, which lists the issues it plans to investigate. These investigations can include whole committee investigations undertaken during the meeting, or reviews by a panel of members doing research and talking to lots of people outside of the meeting. Once an investigation is completed the Committee provides its advice to the Cabinet, the full Council or other scrutiny committees. Meetings are open to the public and all reports are available to the public unless exempt or confidential, when the items would be considered in closed session

If you have any special requirements (such as a large print version of these papers or special access facilities) please contact the officer named on the front page, giving as much notice as possible before the meeting

A hearing loop is available at County Hall.

AGENDA

1. **Delayed Transfers of Care (DTC)**

10:00

This is a joint item, to be attended by members of both the Adult Services and the Health Overview Scrutiny Committee.

John Dixon will lead a discussion on recent developments in addressing the problem of Delayed Transfers of Care (DTC) in Oxfordshire. Officers from the ORH, Oxfordshire PCT and Oxford Health will be present and will contribute to the discussion.

The discussion will cover current performance trends and the plans being developed to tackle the problem.

Papers for this item will be attached and distributed prior to the meeting.

2. **Apologies for Absence and Temporary Appointments**

11:00

3. **Declarations of Interest - see guidance note**

4. **Minutes (Pages 1 - 12)**

To approve the minutes of the meeting held on June 13th 2011 (**AS4**) and to note for information any matters arising on them.

5. **Speaking to or petitioning the Committee**

6. **LINK Update (Pages 13 - 16)**

11:15

Adrian Chant and Anita Higham will give an update on the Local Involvement Network.

A copy of the LINK newsletter for August 2011 is attached at (**AS6**).

7. **Director's Update**

11:30

The Director for Social and Community Services will give an update on current local and national issues followed by an opportunity for the Committee to ask questions.

This will include discussion of the actions in place to reduce the number of adult social care clients using care homes, and progress on proposals for the Oxfordshire Care Partnership.

The Cabinet Member for Adult Services will also attend for this item.

8. Transforming Adult Social Care Review

12:30

6 months on from the formal end of the programme in March, John Dixon, Deputy Director of Adult Social Care, will update the committee on progress made towards embedding the changes.

9. Forward Plan

13:00

This item will include discussion of the Service and Resource planning meeting of the committee on December 15th 2011.

13.15 Close of Meeting

Declarations of Interest

This note briefly summarises the position on interests which you must declare at the meeting. Please refer to the Members' Code of Conduct in Part 9.1 of the Constitution for a fuller description.

The duty to declare ...

You must always declare any "personal interest" in a matter under consideration, i.e. where the matter affects (either positively or negatively):

- (i) any of the financial and other interests which you are required to notify for inclusion in the statutory Register of Members' Interests; or
- (ii) your own well-being or financial position or that of any member of your family or any person with whom you have a close association more than it would affect other people in the County.

Whose interests are included ...

"Member of your family" in (ii) above includes spouses and partners and other relatives' spouses and partners, and extends to the employment and investment interests of relatives and friends and their involvement in other bodies of various descriptions. For a full list of what "relative" covers, please see the Code of Conduct.

When and what to declare ...

The best time to make any declaration is under the agenda item "Declarations of Interest". Under the Code you must declare not later than at the start of the item concerned or (if different) as soon as the interest "becomes apparent".

In making a declaration you must state the nature of the interest.

Taking part if you have an interest ...

Having made a declaration you may still take part in the debate and vote on the matter unless your personal interest is also a "prejudicial" interest.

"Prejudicial" interests ...

A prejudicial interest is one which a member of the public knowing the relevant facts would think so significant as to be likely to affect your judgment of the public interest.

What to do if your interest is prejudicial ...

If you have a prejudicial interest in any matter under consideration, you may remain in the room but only for the purpose of making representations, answering questions or giving evidence relating to the matter under consideration, provided that the public are also allowed to attend the meeting for the same purpose, whether under a statutory right or otherwise.

Exceptions ...

There are a few circumstances where you may regard yourself as not having a prejudicial interest or may participate even though you may have one. These, together with other rules about participation in the case of a prejudicial interest, are set out in paragraphs 10 – 12 of the Code.

Seeking Advice ...

It is your responsibility to decide whether any of these provisions apply to you in particular circumstances, but you may wish to seek the advice of the Monitoring Officer before the meeting.

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ADULT SERVICES SCRUTINY COMMITTEE

MINUTES of the meeting held on Monday, 13 June 2011 commencing at 2.30 pm and finishing at 5.25 pm

Present:

Voting Members: Councillor Don Seale – in the Chair

Councillor Mrs Anda Fitzgerald-O'Connor (Deputy Chairman)

Councillor Jenny Hannaby

Councillor Ian Hudspeth

Councillor Peter Jones

Councillor Larry Sanders

Councillor Dr Peter Skolar

Councillor Richard Stevens

Councillor Alan Thompson

Councillor David Wilmshurst

Other Members in Attendance:

By Invitation:

Officers:

Whole of meeting

Part of meeting

Agenda Item Officer Attending

The Scrutiny Committee considered the matters, reports and recommendations contained or referred to in the agenda for the meeting [, together with a schedule of addenda tabled at the meeting/the following additional documents:] and agreed as set out below. Copies of the agenda and reports [agenda, reports and schedule/additional documents] are attached to the signed Minutes.

137/11 ELECTION OF THE CHAIRMAN FOR THE 2011/12 COUNCIL YEAR

(Agenda No. 1)

It was resolved to elect Councillor Don Seale as Chairman for the current year.

138/11 ELECTION OF THE DEPUTY CHAIRMAN FOR THE 2011/12 COUNCIL YEAR

(Agenda No. 2)

Councillor Anda Fitzgerald was elected to Deputy Chairman for the current year.

139/11 APOLOGIES FOR ABSENCE AND TEMPORARY APPOINTMENTS

(Agenda No. 3)

none

140/11 DECLARATIONS OF INTEREST - SEE GUIDANCE NOTE

(Agenda No. 4)

Councillor Skolar declared an interest by virtue of having a relative living in a care home outside of Oxfordshire.

Councillor Hannaby declared an interest as a trustee of Wantage Nursing Home.

141/11 MINUTES

(Agenda No. 5)

Minutes of the meeting held on 9 May 2011 were agreed and signed. Minutes of the meeting held on 26 April 2011 were agreed with amendments recorded and signed off.

142/11 DIRECTOR'S UPDATE

(Agenda No. 6)

The Director of Social and Community Services gave an update on current key issues for Adult Services.

Local issues:

The Director gave the following update on local issues:

Winterbourne View Hospital

There is a police investigation so there are limits on what we can say.

Winterbourne View is a specialist hospital for people with learning disabilities and mental health issues, run by a large national provider, Castlebeck. OCC has responsibility for specialist hospital placements for LD, on behalf of the PCT, through the pooled budget and lead commissioning arrangements. Hospitals are regulated and monitored by the Care Quality Commission.

The hospital supports people experiencing a period of serious mental illness. This often manifests itself in challenging behaviour that poses serious risk to the person and others. People are either detained under the mental health act following assessment by 2 approved doctors and an Approved Mental Health Professional, or they may agree to voluntary admission. The hospitals provide assessment and treatment and employ therapists including psychiatrists and psychologists. No

placement should be permanent, though the length of time taken for people to recover enough for a safe discharge varies considerably

Oxfordshire commissions 9 inpatient beds in Oxford from Ridgeway Partnership. These are procured and closely monitored by the Council.

OCC's policy is to minimise the use of out of area hospital placements, and they are only used for temporary placements when no local bed is available that can meet the needs. In the last 18 months Oxfordshire has made 3 placements at Winterbourne View. No patients are there now. Oxfordshire currently has 3 placements at other Castlebeck hospitals,

The Learning Disability Teams are part commissioned/part provided by the Council. Admissions to specialist hospitals are often urgent, may be out of hours. The psychiatrist in the Learning Disability Team normally seeks an available bed to meet the clinical needs identified, close to Oxfordshire if possible. A limited number of large national providers are used, of whom we have previous experience. Poor reports from the Care Quality Commission would exclude a provider. There was no evidence provided to us before 13th May that there were concerns about Castlebeck as a company or about Winterbourne View as a hospital.

Patients and families are involved in decisions. The Council funds the placement through the pooled budget. Once placed, the care manager, (often with a nurse and psychiatrist in the LD Team) monitors the placement, progress towards recovery, and plans for discharge or a move back to an inpatient bed in Oxfordshire. Regular contact is made and reviews held to ensure the person's needs are met and they are happy.

Questions we are looking at:

- We cannot replicate the role of the regulator, but what are the key indicators that we could check in out of area placements?
- Should we work with other PCTs to establish an approved provider list?
- Can we do more to enable service users and families to identify concerns and raise them with us?

Southern Cross

My summary of the situation is based on an answer that Councillor Fatemian will give to a question from Councillor Larry Sanders at Council tomorrow.

Southern Cross is one of the largest care home providers in the country. They are responsible for 31,000 beds across the country. Their financial problems appear to come from a business decision taken several years ago where they disposed of their property assets.

There are six Southern Cross homes in Oxfordshire with a total of nearly 230 beds. This council supports 136 residents in these homes with there being a further 38 private residents: a total of 174. We have been following the situation in a number of ways: firstly at a national level through the Association of Directors for Adult Social

Services, and secondly at a local level through contact with Southern Cross' Area Manager for Oxfordshire.

There has also been the usual media speculation that naturally follows a situation such as this. The President of ADASS (Peter Hay) has appealed for calm in the media coverage of this issue. It is important to stress that there are thousands of residents and their families who will be worrying about what might happen to them.

John Dixon, Deputy Director for Adult Social Care last met Southern Cross' Area Manager for Oxfordshire on 20th May and will again meet him on 28th June. Councillor Fatemian also spoke to their Area Manager at the Directorate's Annual Commissioning Conference on 20th May. Both NHS Oxfordshire and AgeUK are aware of the situation and the County Council's Media & Communications Team has liaised on press enquiries. Our understanding is that all parties are working on the basis of continuity of care for the residents.

At this moment there is no indication that homes may close and Southern Cross continue to work on their business restructuring. We will continue to monitor the situation during the coming months and will update you should there be any changes. Despite the above we are looking at Contingency Plans for the 'what if' scenario. Those plans include:

- Looking at vacancies within other care homes in Oxfordshire. There does appear to be a number of available beds in the system to help meet demand.
- We are aware of a number of new beds that will come onto the market in the coming months.
- We are looking at the dependency of those people in Southern Cross homes to see how they might match up to the vacant beds.
- We will continue to put the needs of residents and their families as our first priority and if changes are needed going forward, we will use the information we have to plan in the best possible way.
- Should any home close, and I would like to reiterate that on the information currently available to us that we do not expect this to happen, then we have a duty to assist ALL clients who needed support in obtaining alternative sources of care that best meets their needs.

People in placements are regularly monitored in terms of their health and social care needs but it is not for the local authority to replicate the regulator's (the Care Quality Commission) role to monitor the quality of service provision.

In a response to a question from the Chairman it was confirmed that the decision to send a person to the treatment hospital is made by a psychiatrist and an approved mental health social worker and would have involved the families and carers of the person concerned as appropriate.

Councillor Hannaby commented that good monitoring is especially important if we are relying on large companies to deliver services and also the importance of supporting families to voice concerns if need be. The Director confirmed that we have very good monitoring procedures for local services and that although we have good contact with

out of area placements it is inevitably much harder to monitor services that are further away or spot purchased.

The programme raised a lot of issues and it was suggested that two areas of focus might be whether we should be working with the PCT to agree an approved provider list and what further support we put in place for service user, their families and carers to raise concerns.

There were concerns voiced about the reliability of the CQC following their failure in this case and it was questioned how much we should rely on their assessments of quality both in current service provision and commissioning plans going forward.

2.

Councillor Skolar supported the view that it was not justifiable for the Council to duplicate work that is already the responsibility of the CQC. John Jackson agreed to provide a more detailed response to Councillor Skolar in reply to his question about patients needing a longer period of stay at the hospital.

It was agreed that Sarah Carter would circulate to the Committee a statement made by Paul Burstow, Minister of State for Health, on the matter which describes the CQC's response, including an acknowledgement that they should have acted sooner and the actions that are being taken to look at processes, and inspections on other Castlebeck services.

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143/11 CONTINUING HEALTH CARE

(Agenda No. 7)

This item was part of an agreed follow up to questions on this subject posed at earlier meetings. Members were provided with some legal guidance and this session was intended to enable further questions and clarification on how it is applied locally.

Councillor Sanders initially commented that he thinks the law has been clarified by a number of legal cases such as Coughlin as was described in the legal guidance paper provided by Nick Graham. However Cllr Sanders questioned whether staff are sufficiently aware of the law. He also expressed the view that the NHS guidance on the matter is "misleading" and he was concerned that OCC staff allow themselves to be misguided by this. In his view this meant there was a risk that there are people entitled to continuing care who are not getting it.

Cllr Skolar said he was not confident that calculations of those receiving continuing care had always been accurate making it difficult to establish a true picture. But also that the NHS is targeting continuing care to achieve savings and questioned what we are doing to ensure people are getting continuing care when they should be.

John Jackson replied that there is a panel that sits including staff from OCC to decide who is entitled and the decision is based on what is law and policy in this area. He agreed that NHS were looking to find savings in this area but this was focused on where people were receiving continuing care but were not entitled to it.

Nick Graham made the point, not specific to Oxfordshire, that generally PCTs have tightened up on this and as a result Local Authorities have lost out. And he commented that the case law has not helped LAs as it has confirmed that PCTs have responsibility for assessing continuing care in the first instance and LAs only have

limited ability to challenge and in fact even in this sense the courts are reluctant to decide if the process used to reach the decision is reasonable. However the assessment must be based on the law and although uncommon if other methods of dispute resolution do not work there is legally no reason why LA could not challenge NHS in court.

John Jackson said that staff are able to get advice from Nick if required and also that Age UK offer a dispute resolution service that could be used in these circumstances.

The Committee were informed that Sarah Walters has taken over from Sandra Stapley as the officer within the Council responsible for making decisions regarding continuing care cases.

On the request of Cllr Sanders it was AGREED that the committee would be provided with statistics and a trajectory of continuing care cases over a period to give insight into the volume of continuing care cases and any changes in numbers over time.

144/11 NHS HEALTH REFORMS

(Agenda No. 8)

Jonathan McWilliam gave a general update on the developments for the new NHS clustering arrangements which, from 1 June, replaced PCTs with a single cluster board for Oxfordshire and Buckinghamshire. The cluster board will meet quarterly. Sonia Mills has been appointed to manage this cluster. All of Oxfordshire PCTs formal business will be handled by the cluster. Risk and governance issues are being managed by the cluster.

Under the new arrangement there is likely to be one GP consortia covering Oxfordshire with the exception of Thame and Shrivenham. The Consortia will run with 6 localities and these will align with district boundaries with Cherwell and South Oxfordshire split into two.

Responsibility for public health will transition to County Council in 2013. Currently the shape of what this will look like is in place but there is very little detail and more information will need to be provided nationally before taking this forward at a local level.

Jonathan McWilliam gave a brief update on the government's listening exercise: the future forum which reported during the course of the meeting.

In response to a question from Cllr Hannaby, Johnathan McWilliam confirmed that Members will have rights of audience at PCT cluster meetings and commented that Health and Wellbeing Boards will be constituted as a sub committee of the County Council and would therefore be subject to OCC Constitution. Area consortia arrangements for Thame were given as aligning with Buckinghamshire and for Shrivenham, Swindon.

Cllr Skolar commented that although there are other counties that are further along this process than us there is definitely a widely held view that Oxfordshire

demonstrates best practice in terms of joint management arrangements and the use of pooled budgets.

John Jackson commented that we would like to see GP commissioning going forward as a way of challenging things in the acute sector. He also reminded everyone that we do already have a Health and Wellbeing Partnership board here even if this is a different format to what will supercede it under the new proposals.

145/11 OXFORDSHIRE CARE PARTNERSHIP

(Agenda No. 9)

John Jackson gave a presentation to the Committee highlighting the Oxfordshire Care Partnership proposed contract variations. After the presentation John Jackson gave answers to questions from Members of the Committee as follows:

There was a discussion around the implications of transferring ownership of the freehold from the County Council. John Jackson confirmed that there will be a formal report giving the details of these proposals presented to the Committee later in the year once it has been before the Cabinet.

146/11 LINK UPDATE

(Agenda No. 10)

Adrian Chant gave a brief update from the Oxfordshire LINK.

The transfer to ORCC took place on 1 May and although there were some reductions in numbers of staff the LINK is now established at ORCC and is set to carry on with the core work.

The Committee's attention was drawn to the recently published social care hearsay report which was circulated at the meeting. Quarterly updates will continue to be produced on this piece of work.

There was a suggestion that the resources of LINK to visit and monitor care homes could be supplemented with the involvement of Committee Members. The Chairman noted that it was important to maintain the LINK's independence if this suggestion were to be taken forward.

147/11 REPORT ON VISITS TO CARE HOMES

(Agenda No. 11)

The committee received a report from the Oxfordshire LINK giving feedback on the visits that have taken place to assess the standards of care homes funded by Oxfordshire County Council.

The report was presented by the LINK Liaison members who conducted the visits.

148/11 CLOSE OF MEETING
(Agenda No. 12)

..... in the Chair

Date of signing

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www.oxfordshirelink.org.uk

Your Voice on Health & Social Care

Oxfordshire LINK Newsletter

August 2011

Dear Reader,

Welcome to the first edition of our new-look newsletter. You are receiving this as you are one of over a thousand participants in Oxfordshire LINK. You may recall from previous news that the LINK team have now transferred to a new Host organisation, Oxfordshire Rural Community Council. Our contact details can be found on the back of this newsletter. We hope you enjoy reading about Oxfordshire LINK and how we are working to improve the health and social care services that you, your family, friends and colleagues use.



Message from the Chair of Oxfordshire LINK

Welcome to the latest edition of the LINK newsletter. Firstly, as the newly elected Chair of Oxfordshire LINK, I would like to thank the former members of the Stewardship Group and in particular Dermot Roaf for their unstinting efforts and commitment in guiding LINK so ably into position ready for the transition to HealthWatch in 2012.

The staff too have worked hard to deliver key projects which include the highly successful Hearsay! events as part of innovative consultation in the local Community. Inevitably, as part of change and shifting budgets we have sadly had to say 'goodbye' to Man Lui

Clark and Nancy Darke and we thank them too for their hard work and influence on projects and marketing.

The LINK is now working closely with Oxfordshire Rural Community Council as the new host and we have restructured the decision-making process with Priority and Finance Groups, together with an overarching 'Core Group'.

In recognising the success of certain project work completed during the year by LINK volunteers, the aim is to be more proactive within the network and to look for creative partnerships with others in the community.

We are mindful of the Government's guidance to the NHS for Health and Social Care and will continue to work hard to talk with and listen to individuals in the community putting people central to the commissioning process. With this in mind I urge you to join LINK to help with this massive task and make use of the opportunity to shape services in the future.

Sue Butterworth



Inside this issue:

LINK Core Group

Annual Report

LINK Projects

Hearsay! Report

Personal Budgets

Podiatry Booklet

New Website

Contact Details

Oxfordshire LINK host team

[Adrian Chant](#)
[Locality Manager](#)

[Nicky Robinson](#)
[Development Officer](#)

[Sue Marshall](#)
[Development Officer](#)

Update on the work of the LINK

LINK Core Group – what is it? What does it do?

The first meeting of the new 'Core Group' was a great success, with people who have been a part of LINK projects coming along to hear how they can become more involved.

Core Group members are participants in a project group, working in partnership with the LINK or representing other organisations in the LINK network. The purpose of the

Group is to oversee and support the work of the wider LINK. From within the Core Group have been drawn Priorities and Finance Groups which will take responsibility for a part of the LINK budget and help to determine which project proposals are taken forward.

As a focal point for LINK members, the Core Group acts

as the channel for communications between the various project activities and provides networking opportunities for LINK participants.



LINK Core Group – Meeting in Public

If you actively participate in the work of the LINK, we are inviting you to attend the next Core Group meeting, on the **21st September**, where you can share information with others and hear about new or ongoing projects which are being taken forward this year.

This will be a 'meeting in

public' where you are welcome to come along to observe the meeting and find out more about the work of the LINK and perhaps join a project group, if we are looking at something of interest to you and the services which you receive. Please phone the LINK office for more information and directions to the venue.

**LINK Core Group Meeting:
Wednesday 21st September
at Witney Methodist Church
High Street, Witney
Oxon OX28 6HG
6.30pm (networking &
refreshments) for 7.00pm
start, to 9.00pm**

Annual Report 2010–11

The LINK Annual Report for 2010-11 has been recently published.

It contains articles on the work carried out over the past year to help improve *your* Health and Social Care services. Inside, you will find information and the results of LINK project work;

how we involved the Community, all our HEARSAY! engagement events; 'Have a Say' Fund Awards and much more.

The report can be read on the [LINK website](#), or for a hard copy, please contact the LINK office.



Do you have an idea for a LINK project?

We want local people to have a voice and make a change. The main remit of the LINK is to gather information about local health and social care services - ideas, suggestions for improvement, what is working well and what isn't - and to feed this information back to the people who are providing the services.

We want to enable local groups and individuals to carry out Projects to make changes to their

health and social care. You may wish to canvas young mothers in a particular area about access to children's health services. You may want to do some work looking at signage in your local hospital for people with a visual impairment. The ideas are endless!

With the support of our experienced Development Team, you will be guided through the process. If you would like to put a proposal to the LINK to carry out a

project, please contact [Nicky](#) or [Sue](#) for more information and to obtain a Project Pack.



Social Care Hearsay! 2011

The second annual 'Hearsay!' engagement event for those who use adult social care services, was held earlier this year to find out if things had changed for the better and to ask guests what they wanted Social & Community Services to improve or change during the year.

Everything that was said at the

event and brought to our attention beforehand, was examined in detail and 5 key priorities were drawn up. These were: information & communications; standard of care at home; funding for care; standards in care homes & individual needs with regard to Personal Budgets. All are outlined in the 2011 Hearsay! Report, together with an action plan from

the Council on how they will implement the recommendations made by our guests for the forthcoming year. The report is available to read on our [website](#) or to receive a copy by post please contact [Sue](#) at the LINK office.

"I got a lot more that I expected to get out of coming today"
- Hearsay! guest

Personal Budgets

Following a LINK project from last year to understand people's experience of the new system of Personal Budgets, the LINK agreed to conduct a follow-up piece of research with the aim of understanding the experience of

Black and Minority Ethnic (BME) clients in receipt of a Personal Budget. Alongside in-depth interviews with BME clients, this new project contacted many of the participants in the 2010 study to

find out how things have changed over the past year. The research is shortly to be submitted to the Director of Social and Community Services for a response to the recommendations contained within the report.

Podiatry Booklet – Out Now!

HELP! Where can I go if I've got a corn?

Do you need to access foot care services in Oxfordshire?

Following public comments regarding a lack of knowledge about services and alternative treatments available, the 'Standing Firm' booklet has been created by Oxfordshire LINK to provide advice on every aspect of foot care, helping you to get the right care at the right time.

It contains specific information about where you can go to access the services. **Page 15** For a copy of the booklet please contact [Nicky](#)



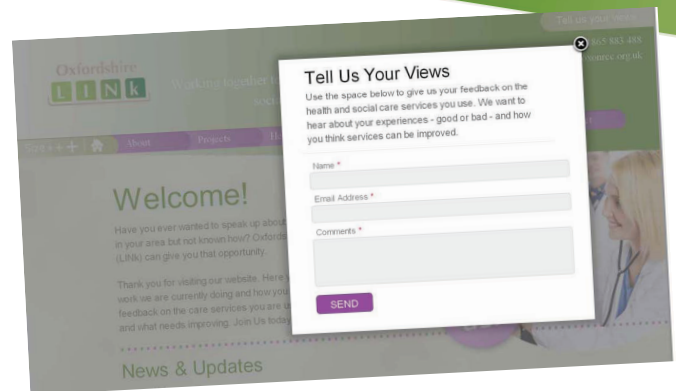
Launch of new LINK website

Following the move to Oxfordshire Rural Community Council, the LINK Host team have been working to produce a new website, in collaboration with local designers **onthelevel interactive**

Please do have a look around the new site - there is a wealth of reports and information being added about your local LINK and services, together with straightforward means of joining the local LINK community, becoming more involved with LINK projects and

'Having Your Say' about the health and social care you receive. Any comments submitted will be recorded and can provide evidence for future project proposals.

The new site will be launched towards the end of August - let us know what you think.



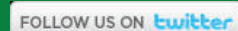
www.oxfordshirelink.org.uk

For further information about the work of Oxfordshire LINK, or anything mentioned in this newsletter, please do not hesitate to [contact us](mailto:LINK@oxonrcc.org.uk):

Oxfordshire Local Involvement Network
 Jericho Farm
 Worton, Witney
 Oxfordshire
 OX29 4SZ
 01865 883488
LINK@oxonrcc.org.uk



We're on the Web



Look out for our next Newsletter coming in December!