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**Barnsley
LINK**

NEWSLETTER

WINTER 2011 / 2012

IMPROVING HEALTH & SOCIAL CARE SERVICES IN BARNSLEY

Restructure of Barnsley LINK

Barnsley Local Involvement Network (LINK) has been undergoing a restructure due to Barnsley Arena, LINK's lead host being de-commissioned in September 2011.

As of the 1st of October 2011 Voluntray Action Barnsley, one of the three hosts of the LINK, has taken on the lead host role working with Barnardos for the remainder of the contract. Barnsley Arena's LINK Worker Carianne Stones who supports

service users and carers is still available for support and has been tupied over to work with the Voluntary Action Barnsley LINK Team.

Carriane can in future be contacted at carriane.stones@vabarnsley.org.uk

Tel: 01226 320106. Please note Carianne will be on maternity leave from the 31st January 2011 – other LINK Development Officer contact details are listed on the back page of this bulletin.

HealthWatch 2013

HealthWatch Update

Subject to the Health and Social Care Bill being passed through Parliament, HealthWatch will be the new customer champion for both health and adult social care. It will exist in two distinct forms - Local HealthWatch, at local level, and HealthWatch England, at national level.

The following key messages about HealthWatch have been jointly created by the Department of Health and the Advisory Group to HealthWatch England Programme Board.

Local HealthWatch

What is it?

Subject to the Parliamentary passage of the Health and Social Care Bill, Local HealthWatch will be established in April 2013. Until then Local Involvement Networks (LINKs) will continue to operate.

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.

What will it do?

“HealthWatch is the consumer champion for health and social care services , giving a voice to local people, community and voluntary groups to influence the way their services are planned, purchased and provided” National Association of LINK Members (NALM) 2011.

“We all recognise that for HealthWatch to be effective it will also need to contribute to improving health outcomes and community wellbeing, as well as being a driver in better service delivery, user accountability and satisfaction” Patrick Vernon, Chair of HealthWatch Advisory Group – October 2011.

- Local HealthWatch will evolve from existing LINKs but with additional functions and powers of advocacy, signposting and complaints.

- 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

- 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/complaints procedures are currently provided by Primary Care Trusts (PCTs), as part of their Patient Advice and Liaison Services (PALS) responsibilities. In future, this service will be commissioned either through the Local Authority or Local Healthwatch

- 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 their community's 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.

News from Barnsley HealthWatch Co-ordinator - Nora Everitt



If you would like to help plan for HealthWatch in Barnsley, please look at the chart below which describes different ways that you could be involved.



No decision will be made about a HealthWatch service provider without this. If you would like to help plan for HealthWatch in Barnsley please contact: Nora Everitt, HealthWatch Co-ordinator on 01226 775991 or by email: noraeveritt@barnsley.gov.uk

For more information and regular updates on HealthWatch 2013 please visit us at www.barnsleylink.co.uk

Barnsley's Health and Wellbeing Board

Barnsley LINK informed members on the proposals to establish a Health and Wellbeing Board for Barnsley.

Members responded to this consultation through the LINK's How We Do Things sub group meeting held on the 3rd of November 2011.

LINK members not present at the meeting were also given the opportunity to comment via the LINK website, Social Media, Post and E-mail requesting a response before the 17th of November 2011, allowing time for the feedback documentation to be produced and sent to BMBC by close of business on the 25th of November 2011.

LINK feedback has been included with Voluntary Action Barnsley's response, as the lead host for Barnsley LINK, and named as a consultee.

Within their formal response LINK members made the following recommendations:

- The membership which currently asks for a HealthWatch representative should be changed to HealthWatch / LINK representative so LINK members are involved during this transition period and from the early stages of the shadow board arrangements, thus allowing for involvement and clear guidance and understanding of the processes being put in place.
- LINK members also felt clarification needed to be gained as to who would attend as a LINK representative and what skills, experience and competencies

would be suited to the role. (However, we have learned through recent updates some training and support will be offered by National HealthWatch in the coming year)

- Due to the membership selection being mostly made up of strategic personnel LINK members also wished to know what support would be made available to the HealthWatch / LINK representative and suggested that an extra seat be provided for HealthWatch / LINK on the board to form this support.

The information gathered during this consultation exercise for the Health and Wellbeing Board was presented to the council's cabinet on the 7th of December 2011 and the full council meeting on the 5th of January 2012.

Further updates received by LINK regarding the Health and Wellbeing board will be published on the LINK website and available in other formats upon request as it becomes available.

Barnsley LINK achieves HealthWatch Pathfinder Status

In August 2011, the Department of Health announced that 75 HealthWatch pathfinders have been selected to test different approaches to the proposed Local HealthWatch functions. These are partnerships of local authorities, LINKs and other relevant organizations.

HealthWatch Pathfinders will be a crucial part of the work to prepare for the establishment of HealthWatch from October 2012.

Barnsley Metropolitan Borough Council (BMBC) led on this proposal and submitted funded plans for 2011-2012 in partnership with Barnsley LINK members (and host organisations).

The proposal submitted to the Department of Health included the following information in line with their guidance:

Reflect how the LINK and local authority can and will take forward the government's vision that the Local HealthWatch builds on LINKs' functions and add the building blocks of the new local HealthWatch functions in readiness for April 2013.

Balancing relationships, where retaining existing relationships e.g community members and voluntary organisations, is as important as building new ones with GP Consortia, local health and wellbeing boards and HealthWatch England as it emerges in the new landscape.

The Local HealthWatch pathfinders will explore how best to champion patients' views and experiences, promote the integration of local services and improve choice for patients through advice and access to information.

In July 2011 The LINK team were advised that Barnsley had been successful in achieving HealthWatch Pathfinder status and as a result the following groups were formed to organise the transitional arrangements from LINK to HealthWatch. These groups are led by BMBC who have appointed a new HealthWatch Co-ordinator – Nora Everitt (NoraEveritt@barnsley.gov.uk) and work in partnership with LINK representatives and other statutory

partners responsible for health and social care services.

HealthWatch Planning Group

This group meets monthly to share information on HealthWatch developments locally and nationally and uses data collated to inform the commissioning / tendering process in anticipation of Local HealthWatch April 2013.

Equality Impact Assessment Sub Group

This sub group meets monthly it was set up to look at the Equality Impacts of Local HealthWatch 2013 and has been collating and analyzing equality data and looking at how to ensure Local HealthWatch is representative of the whole community.

Barnsley LINK facilitated 3 meetings for the EIA sub group and produced a report with the findings and recommendations from these meetings.

Rapid Response Sub Group

This sub group will meet as and when required and was set up to give quick feedback and 'drive' the way the HW Pathfinder work is planned and delivered.



If you would like more information on these groups or the transitional work being undertaken, or if you would like to get involved please contact the LINK team on the number provided at the back of this newsletter.

LINK Sub Group News

How We Do Things

This sub group continues to look at the governance arrangements of the LINK, and in order to take part in our HealthWatch Pathfinder work members are now concentrating on transitional work and guidance coming through from the Department of Health and the Care Quality Commission, where HealthWatch England will sit and local HealthWatch will feed into.

Local vision for HealthWatch developments are discussed in this sub group and with partners via the groups mentioned earlier under HealthWatch Update and also fed back to the wider LINK membership at Full LINK Meetings.

- 2 members of this sub group have been selected to become LINK representatives on the HealthWatch Planning group mentioned earlier, which meets monthly.

We have also worked with the Clinical Commissioning Group (Barnsley People's First) and been invited to send a LINK representative to their Patient Council, which will be working with their patient and public involvement groups belonging to each GP practice.

This group have also looked at how LINK members can develop better understanding of the public health aspects of local health and well being and presentations have been made to full LINK meetings from:

- North Trent Cardiac User Network
- Dr Frances Clements – Consultant

in Public Health Medicine, NHS Barnsley/BMBC

For information from their presentations please view our LINK website.

Regional events, along with the Yorkshire & Humber Regional LINK Network meetings and bulletins are also utilised to keep us up to date with how HealthWatch will fit in locally.

Minding the Gap events have been attended - one of them to look at "Strengthening the role of the Vol Sector in JSNA and commissioning in the Yorkshire and Humber". The information gathered has helped to inform the response to Barnsley's Health and Well Being Board Terms of Reference and membership consultation, mentioned earlier.

In recent months this group have developed and agreed the following policies and procedures:

- Volunteer Expense Policy
- Care Quality Commission Communication Protocol and Public Statement
- Standing Agenda for LINK and CQC Meetings



Taking Up Issues and Going To Look at Services

2011 has been an excellent year for the Taking Up Issues and Going To Look at services sub groups, who have seen much of their good work come to fruition.

During 2011/2012 the LINK attended 32 outreach events collating community views on Health and Social Care Services, which enabled them to identify a range of new issues and priorities for the group.

This sub group has also seen some great successes with the work already being carried out, which has helped make this transitional year a rewarding one, both for the group members and the general public affected by the issues explored.

Specialist Weighing Equipment for the Disabled

Specialist Weighing Equipment for the disabled will be available at 8 of the 9 LIFT Centres in Barnsley and should be in place by the end of March 2012.

This has been made possible due to the dedication and the commitment of the Taking Up Issues sub group who worked in partnership with the Barnsley Access Select Committee, and the Physical Disability Expert Partnership to bring to light the issues patients were having when trying to access weighing services for the disabled.

The Going to Look at Services Sub group will be following up this piece of work after March 2012 with a range of Enter and View Visits to see what impact the provision of the equipment has had on the service, and for the service users. Barnsley LINK will follow up their findings with an evaluation which will be presented in 2011/2012 Barnsley LINK annual report.

Self Directed Support in the Current Economic Climate 2011

Pressure from the new coalition government and the resulting Local Authority Budget Cuts have made this year a particularly difficult year for those accessing Self Directed Support services and receiving Individual Budgets and Direct Payments.

Through community outreach and engagement, with third sector community and voluntary organisations, the Taking Up Issues sub group found that many service users were having their payments stopped or substantially reduced due to the Local Authority tightening up the eligibility criteria for accessing direct payments, in order to help make savings.

To understand further why this was happening and to enable service users to have their say a LINK meeting was called on the 18th of May 2011 with the Assistant Executive Director for Personalisation and the Assistant Executive Director for Vulnerable Adults.

This was a very informative meeting where service users, carers and organisations representing service users and carers were able to air their views and get answers to questions which had previously been unanswered, mostly concerning:

- Referral pathways, when self directed support had been withdrawn or declined,
- Communication
- Complaints / Appeals process

Service users were also able to understand that the local authority and Adult and Communities Directorate had some difficult decisions to make on where to make efficiencies and cuts under very prescriptive circumstances.

To pull together the information learned on the day and to clarify peoples concerns the Taking Up Issues sub group produced a report [Accessing Self Directed Support in the Current Economic Climate 2011](#) which was submitted to the Assistant Executive Director for Personalisation and the Assistant Executive Director for Vulnerable Adults in July 2011.

In response to the report a further meeting was called with the LINK and DIAL to respond verbally to the key findings and recommendations made within the report and action the next steps to embark upon a process of change regarding communication and the service users journey including clear guidance on how to make a complaint if the service user did not agree with a decision made.

As a result a small focus group was formed which saw representation from service users, carers, DIAL, Penderals Trust, Barnsley LINK and the self directed

support team, who in their first meeting on the 10th of November 2011 looked at the current communications featured on the BMBC website and available in the form of an introduction/information pack to new clients, with a view to improve and change the contents to reflect current need.

This work is still ongoing for the Taking Up Issues sub group but an impact has been made which is that the information pack will give more information regarding the three areas identified within the first meeting and the Accessing Self Directed Support in the Current Economic Climate 2011 Report. In addition employers responsibility will be more clearly defined within the pack. To read this report or for more information on this work please contact [Caroline Makinson](#).

The next step will be for the focus group to meet again to look at the guidance which is currently being written to inform the service user journey when completing assessment.



Access to Local Pain Management Services

Have you had problems accessing Pain Management Services locally?

If so Barnsley LINK would like to hear from you.

Members of the public have been approaching Barnsley LINK and the Taking Up Issues sub group with concerns regarding access to Pain Management Services locally.

Ashville Medical Centre, Kendray and Pain Management Solutions provided a service where GPs could refer patients through a choose and book system as part of the extended choice/free choice network, however in June 2011 this was stopped, and GPs were informed that referrals to the clinic were no longer an option.

As a result service users have been experiencing:

- Delays in their treatment
- Long waiting lists for local pain management services i.e. Barnsley District General Hospital
- Difficulty in attending appointments out of area due to financial, logistical and health restraints
- Communication between GPs and patients failing and alternative referral pathways not being offered to some patients
- Service users wellbeing is being affected by pursuing complaints in a bid to access services with little feedback being received

The Taking Up Issues sub group has written to the Chief Operating Officer at NHS Barnsley advising of community concerns and have been informed of the following:

- Due to the Extended Choice Network / Free Choice Network finishing on the 30th of June 2011 a system through which GPs referred patients to pain management services, GPs will be unable to refer into the service provided by Pain Management Solutions unless a formal contract is in place.
- NHS Barnsley never had a contract with Pain Management Solutions and as a result did not see a need for the capacity that this provider provides.

However in light of their response Barnsley LINK have been informed that after the recent publication of the Any Qualified Provider guidance from the Department of Health, NHS Barnsley is considering a review of their position.

Taking Up Issues have responded to this statement using their powers of 20 days and have asked for an update on NHS Barnsley's position and a response on community access issues.

During 2009/2010 Barnsley LINK collated various comments and questions relating to accessing GP Services in Barnsley, and comments were further supported by the findings published in the National Patient Surveys of 2009/2010. Over the past 12 months the Taking Up Issues and Going To Look at Services Sub groups have worked closely with NHS Barnsley Commissioners, GPs and the GP Commissioning Consortia's to address these issues and the following outcomes and impacts have been achieved:

- Three Enter and View visits were carried out to GP practices, chosen from the results of the National Patient Survey and comments collated.
- Reports and recommendations were made to the individual GPs visited, on areas for improvement and good practice shared.
- The report and recommendations were shared with all link members, partners and NHS Barnsley and the GP Clinical Commissioning Consortias, with a positive response from all parties to the recommendations made. To view the full Accessing GP Services Report and the key findings and recommendations, please visit:
www.barnsleylink.co.uk/informationandbulletins/reportsandrecommendations
- LINK Presentation given to Barnsley People's First Clinical Commissioning Consortia (BPFCCG) GP Consortia's monthly meeting in

July 2011 - LINK have offered to collate patients' views on behalf of GPs using a txtool campaign and hope that this scheme will help GPs to further fulfil their statutory requirement set out by the Care Quality Commission of Patient and Public Involvement

- A further Enter & View visit to one of the GPs was carried out with the outcome that further disabled parking spaces are now available at that practice, communication and information for patients about their GP services are improved with more visual displays in the waiting areas.
- LINK have will continue to promote and advise of the opportunity to all LINK members to take part in local patient groups – so far 8 LINK members have signed up to their local GP practices.
- LINK Development Officers have been invited to join the boroughwide Patient Council, run by the BPFCCG, which is being set up to oversee the local patient groups belonging to that consortia.



Children and Young People

Barnsley LINK would like to welcome Natalie Ashton, the new addition to the LINK team. Working from Barnardos with the Children and Young People Sub Group.

Natalie has been employed to take on the role of LINK project worker and has worked within the Barnardos team for the past 4 years, on Family group conferencing, consulting on the Playbuilder project and on various play schemes.



She has been assigned to the LINK for the remainder of its contract, in the place of Helen Pine who in October 2011 moved onto pastures new securing a senior position at the YMCA in Grimsby.

The LINK team would like to thank Helen for all of her hard work and dedication to the LINK and wish her well in her new post.

Children and Young People Sub Group

Barnsley LINK recognises that children and young people are service users too and as such they have the right to influence the decisions that affect them and have their opinions taken into account.

This has been facilitated through the Children and Young Peoples Sub Group.

Barnardos Voices facilitators of the Children and Young Peoples Sub Group

The previous LINK worker, Helen Pine, did lots of good work in the community over the last year, along with the younger LINK members.

Both Helen and most of the young people have moved on now, either to new jobs or university/college. But their work included a peer research project 'Outreach Work...'

Outreach Work

- Gatherings at New Street clinic within the dental dept, a session in A&E at Barnsley hospital and a variety of youth and scout groups amongst others.
- Lots of views were obtained at Barnsley college during the consultation held there.
- There were also some fun sessions held over the summer at various local galas and summer fairs. Where the childrens views were obtained while they took part in den building or arts and crafts.

Speak Up Report

The Speak Up report was put together by the young people based on the findings of the peer research project.

This identified the 5 health issues that children and young people in Barnsley found most important.

These were:

- Active living – Talking about the physical activity young people take.
- Alcohol and drugs – Finding out how young people really feel about drugs and alcohol.
- Emotional health and well-being – Children and young people feel that mental health should be talked about.
- Sexual health – Young people state that not everyone is doing it!
- General health – Find out why children and young people feel GPs should try to include them more.

It includes lots of interesting facts and useful contacts.

If you would like a copy, it can be found on the LINK website or contact me on the number below for a paper copy.

This was research included in the report which is being distributed amongst young people of an appropriate age via doctors surgery's and outreach events.

If you would like a copy of Speak Up, or if you think this is something you or a group you get involved with would like to contribute to, contact Natalie Ashton at Barnardos Voices on 01226 298748 or click this link. www.barnsleylink.co.uk



South West Yorkshire Partnership 
NHS Foundation Trust

NEW OSTEOPOROSIS SCANNER IMPROVING PATIENT EXPERIENCE IN BARNESLEY

Date: 23 December 2011

People in Barnsley who require a scan for osteoporosis are benefitting from an improved experience due to the arrival of a new high-tech Axial DXA scanner at Mount Vernon Hospital.

Osteoporosis is the most common disease of the bone and its incidence is rising rapidly as the population increases. Over 300,000 patients are admitted to hospitals in the UK with fragility fractures each year, costing the NHS around £2 billion.

Osteoporosis is diagnosed on the level of bone mass, which is measured as Bone Mineral Density (BMD). The World Health Organisation and The International Osteoporosis Foundation recommend that the diagnosis of osteoporosis is done using a dual energy X-ray absorptiometry (DXA) scanner.

The new DXA scanner, GE Prodigy machine, is being used by the falls and osteoporosis team, which is provided by South West Yorkshire Partnership NHS Foundation Trust.

The new scanner offers a lateral view enabling the team to diagnose vertebral fractures and monitor any new fractures allowing sign posting to the best treatment options for the patient.

By recognising fractures at this early stage patients are less likely to need another appointment for an x-ray reducing the amount of exposure to radiation and the anxiety follow-up appointments may cause.

James Townsend, business operations officer in the community management team, added, "This is a cost effective service, which in turn reduces the pressure on secondary care resources and offers patients convenient and appropriate healthcare solutions within the community. The service is provided by the osteoporosis nurse specialist working with the support of a consultant physician, the falls and bone health service, and is already accepting direct referrals from both primary and secondary care."

The new scanner has been in place for just a few weeks, but already staff have noticed a significant improvement in the service they offer.



Jan Kitchen, falls and osteoporosis co-ordinator, trying out the scanner with James Townsend and Linda Campbell, osteoporosis nurse specialist.

BARNSELY RESIDENTS URGED TO HAVE A SMOKE FREE NEW YEAR

Date: 23 December 2011

We all know smoking is bad for our health, but did you realise how bad it was for your bank balance? Someone who smokes 20 cigarettes a day will spend more than 40 thousand pounds over the next 20 years on cigarettes alone!

With the help of your local NHS stop smoking service you can quit the habit for good and within a few weeks you'll already notice a difference in your health and bank balance.

Figures show you're four times more likely to quit smoking for good if you use NHS stop smoking services and as soon as you stop your body will begin to repair the damage caused by cigarettes, so it's never too late.

The Barnsley stop smoking team is part of the local health improvement service, which is provided by the South West Yorkshire Partnership NHS Foundation Trust. The team offers free friendly support and advice on stop smoking medications.

Specialist stop smoking advisor Sylvia Speight said, "Recent figures show Barnsley has one of the worst track records in the UK for the number of people who smoke – with 20% of local deaths in the over 35 age group attributed to smoking. But it's never too late to stop, with the body having an amazing ability

to repair damage and reduce the risk of serious illness. At the same time as having an impact on your health people often forget the long term cost of smoking. £6 a day may not seem a massive amount to a 20 a day smoker, but when you stop to think about how much you spend on cigarettes every week/month/year...or even over a lifetime...it's shocking."

So why not put quitting smoking at the top of your New Year's resolution list!

If you live in Barnsley, and want to know more about this free service contact the specialist stop smoking service on 01226 737077, or visit www.stopsmokingbarnsley.nhs.uk



Share your news with the LINK

Want to share your news or promote an event?

Then contact Caroline Makinson on 01226 320106 or
e-mail: caroline.makinson@vabarnsley.org.uk

If you are interested in finding out more about the LINK,
then why not attend one of our Full LINK meetings?

These meetings are held quarterly to discuss the work of the LINK and are
open to anyone who would like to attend.

Join us

If you would like to know more about the LINK or get involved in our sub-groups please
visit our website at www.barnsleylink.co.uk and join us. Alternatively contact
Caroline Makinson on 01226 320106 or complete and return the form below to:

FREEPOST RSAG-AJUA-GUSK
Voluntary Action Barnsley (LINK)
The Core
County Way
Barnsley S70 2JW



I am interested in joining Barnsley LINK -
My contact details are as follows:

Full Name:

Tel No:

Mob:.....

Email Address:.....

Join mailing list

General comment box

Working in partnership



Contact Details

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“If you require this in alternative formats/language contact us and we will endeavour to arrange this for you.”



Ask questions and get answers!

For general enquiries please contact :

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