



KINGSTON LOCAL INVOLVEMENT NETWORK

An assessment by the Steering Group of
the practical reasons why K-LINK is not
currently able to perform to its maximum
ability

January 2009

CONTENTS



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PERSONAL AND CONFIDENTIAL

6th January 2009

Dear Charlotte

This dossier is sent to you - and at this stage, only to you - by the entire Steering Group of Kingston Local Involvement Network - see page 16. We have tried to avoid such a long document but must resort to details in order to get our situation across. Some issues are very petty, others are of serious and paramount importance, but we are reduced to mentioning all these to show the cumulative effect which has resulted in the present sad and sorry state of affairs.

We hope that when you have read this you will understand what K-LINK has had to put up with, why we have been unable to proceed in some directions and why change is necessary on all sides.

Yours sincerely

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INTRODUCTION

3

ADMINISTRATIVE PROBLEM AREAS

5

A. START-UP

6

1. Advertisements for tender bids

6

2. Staff posts

6

3. Appointments to staff posts

6

4. Staff appointments

6

5. Paper to Kingston Health Overview Panel

7

6. Telephones

7

7. Nominations for Steering Group membership

7

B. GETTING K-LINK KNOWN TO THE PUBLIC

7

1. Logo

7

2. Website

8

3. Public Launch

8

4. Other occasions for a K-LINK presence

8

5. Information packs

8

6. KCAB Annual General Meeting

9

C. CURRENT OPERATION

9

1. Presentations

9

2. Steering Group membership

9

3. Activities

10

4. CRB checks

10

5. Legal Indemnity

11

6. Contract performance review

11

7. Office opening hours

12

8. Communication with K-LINK staff

12

9. Other documentation

12

- (i) Minutes, Marketing Strategy etc

12

	(ii) Business Development Plan	
13		
	(iii) Governance Document	
13		
D.	OTHER ISSUES - Documentary Changes	13
1.	Service Specification for the Provision of	
a Host	13	
	Organisation	
2.	Staff job descriptions	
13		

CONCLUSIONS		14
--------------------	--	----

THE WAY FORWARD?		14
-------------------------	--	----

Index

17	
List of abbreviations used	
18	

INTRODUCTION

In December 2006 Kingston Patients' Forums convened a meeting to consider how a Local Involvement Network (LINK) could be created in Kingston when the appropriate legislation was in place. The following representatives from healthcare, community care and the voluntary sector organisations were invited to attend:

Age Concern - Shane Brennan (SBr)
Kingston Community Care Services (CCS) - Phil Levick (PL)
Kingston Hospital NHS Trust (KHT) - Jane Gear (JG)
Kingston Hospital Patients' Forum - Sandra Berry (SB),
Rashid Laher (RL) Kingston Primary Care Trust (KPCT) -
Alison McMilan (AM)
Kingston PCT Patients' Forum - Gareth Jones (GJ), Richard
Burt (RB) Kingston Voluntary Action (KVA) - Maria Tunmer
(MT), Hilary Garner (HG)
Royal Borough of Kingston upon Thames (RBK) - Charlotte
Fitzgerald (CF)
(Susanna Daly (SD) attended), and
Kingston Forums Support Team - Susie Masters (AM).

Subsequent meetings of these bodies were held between March and December 2007 and in early 2008 representatives from
African Positive Outlook - Joseph Ochieng (JO)
Kingston Racial Equality Council (KREC) - Ben Owosu (BO)
Kingston Centre for Independent Living (KCIL) - Lisa Nichols
(LN)
MIND - Maria Taber (MT)
and Helen Hutson joined this Interim Group.

In January 2008 tender bids were invited for the Host organisation and Kingston Citizens Advice Bureau (KCAB) was awarded the contract in April, to take effect from 1st May 2008.

From 1st April 2008 RBK took formal responsibility for creating a LINK and the Interim Group was re-named the Transitional Group (TG).

Between January and May, the Interim Group and its successor worked to create a framework so that Kingston LINK (K-LINK) could be up and running as quickly as possible. A marketing strategy was commissioned by RBK and agreed by the Group, a date in July was chosen for the Public Launch, other arrangements were set in motion for this event and a group started work on the draft constitution. During the spring of 2008, while accepting the lack of clear guidance from the Department of Health concerning the nature, structure and governance of LINKs generally, there was overall consensus among members of the Interim and then Transitional Groups

about how a LINK could work in Kingston. The Group fully understood the importance of the need for local decision-making in the creation of all LINKs.

The K-LINK Coordinator started work on Monday 7th July and the Public Launch took place on Thursday 10th July. More than 100 people attended; over 30 people completed membership application forms and subsequently ten nominations were received for membership of the Steering Group. The first meeting of the Steering Group was held on Wednesday 13th August 2008 and the draft constitution was considered. Subsequent changes were made to this document by RBK and KCAB; it was finally approved by the Steering Group on Monday 11th September and signed at a meeting of Kingston Health Overview Panel (HOP) on Tuesday 16th September 2008.

It has not been easy to reconcile the different interpretations of the respective roles of a LINK and its Host which are held by RBK, KCAB and the Steering Group, however. KCAB has consistently maintained that problems are occurring because of K-LINK interference with line management, while K-LINK has noted that KCAB has a misguided impression of the role of a Host as a support agency for the LINK.

For K-LINK, these difficulties have been compounded by administrative inadequacies demonstrated by KCAB and sometimes also by RBK. The former were therefore reported on in the contract review document submitted by K-LINK in November.

In an attempt to clarify the respective roles, a meeting was held on Monday 10th November between two members of the KCAB Trustees Board, its Chief Executive Officer and the Chair and one Vice Chair of K-LINK. It was agreed that K-LINK would step back for four weeks and let KCAB manage the staff workload, based on the Steering Group's minuted directions, and subsequently produce a progress report. The SG played their part, but no report has yet been forthcoming.

Instead, on 3rd December a communication was sent to all members of the Steering Group except the Chair over the name of Peter Gray, Chair of KCAB Trustees Board. This communication gave an erroneous interpretation of K-LINK actions by stating that: 'Although our discussions were cordial and helpful, a fundamental problem was uncovered, in that Sandra and Michael stated that the Steering Group does not accept RBK's interpretation of the legislation and DOH guidance on LINKs, which in turn means that you do not accept or recognise the contract between RBK and KCABS.' This statement was totally incorrect; Peter Gray then invited Steering Group (SG) members to send any comments they may have

concerning the relationship between the Host and the SG directly to KCAB for circulation to its Board members.

The SG unanimously took the view that they preferred not to become involved in claim and counter claim and to let KCAB Trustees Board members make their own decisions. Subsequently the SG did give some information and examples in the hope that the Trustees would see some of the problems encountered.

Since their response to Mr Gray on 10th December, a volume of email messages have passed between KCAB, RBK and K-LINK, including one on Thursday 18th December from KCAB telling the SG members that the Department of Health (DoH) and RBK had suggested the 'current' SG should put a hold on all activities and not communicate with the staff or the host pending a further meeting.

There were several demands from KCAB for meeting dates, with no clear reasons given as to why these were necessary, but eventually resulting in an explanation from Richard Morgan (KCAB Treasurer) on 19th December that: *'I believe a major issue is 221 compliance and a 31 December 2008 deadline which has been raised by the DH. However, neither Pippa nor I are the sources of any further information on this.'* Before this date, no mention of a 221 compliance deadline had ever been made to the Steering Group by either RBK or KCAB.

RBK has subsequently written further about 221 compliance, but the extent to which there are genuine problems may be debatable. What seems very clear to the Steering Group is that while meetings and discussions have taken place over the past few weeks between RBK, KCAB and DoH, none have occurred between RBK and K-LINK. This has produced a biased impression on the part of RBK about the activities, aims and achievements of the LINK which in all fairness needs to be rectified so that the commissioning body has a balanced view of the work of both Host and LINK.

This is the reason why this dossier has been prepared, considered and approved by the Steering Group on 6th January 2009.

Regardless of the philosophies behind the creation of LINKs and Hosts, the Steering Group has tried through the contract performance review document to convey to RBK that the levels of efficiency and competence in supporting the LINK were not as high as they should be. No feedback has been received from RBK concerning these issues. It should also be noted that not all the criticism is levelled at KCAB; there are also instances where RBK could have performed better.

To this end, the next section spells out in detail the administrative areas which have concerned the Steering Group and which have contributed to the perceived necessity for them to become involved with day-to-day staff management in order to get the job done.

ADMINISTRATIVE PROBLEM AREAS

It is hoped that by giving more information here than was possible in the contract performance review document it will become clear why the Steering Group does not feel it is being well supported. Four major areas are identified, each with its own important issues. While several items may seem trivial in themselves, it should be recognised that it is the cumulative effect of so many blunders and shortcomings that has generated the lack of trust.

A. START-UP

1. Advertisements for tender bids (RBK)

The RBK Contracts Manager (SD) went on holiday over the New Year period and the Interim Group expected that on her return the advertisements would have been placed in the media. This did not happen; the advertisements did not appear until the end of January, resulting in delay for the interviews etc and therefore missing the 1st April start for the Host.

2. Staff posts

At a meeting on May 6th between Pippa Mackie (PM), Sue Irving (SI), MT, BO, JO and SB, PM stated categorically that all three posts would be full-time (in contradiction to the KCAB tender bid). In fact, one post is full-time, the other two are part-time.

3. Appointments to staff posts

Drafts of the advertisement and job descriptions for the staff posts were circulated to the TG for comment.

- o The advertisement quoted full-time posts.
- o The job descriptions were inordinately long (six pages for the Coordinator), inaccurate (references to 'trustees' for instance), the part-time nature of the Office Manager and Outreach Worker posts was not mentioned and the documents were poorly presented.

Despite having asked for comments, PM said any delay because of changing them would be the responsibility of the TG Chair.

The ads went in wrongly and still late.

4. Staff appointments

- o The closing date for receipt of applications was noon on 28th May 2008. At 15:36 on 27th May, applicants and interested parties were sent an email amending this deadline to 12 pm on 30th May. The notification was via an open email message where all the personal addresses were visible to all other candidates. When asked why the deadline had been extended, PM stated that it was because the Job Descriptions were late. The Job Descriptions had, however, been emailed to KCAB on 16th June by Maria Tunmer (KVA) - twelve days before the original deadline for applications.
- o Though the interviews for staff were held in June, they were not given immediate start dates even though one at least (SM) could begin straightaway. The reason given was that work needed to be done to create K-LINK office space - it is not clear to the SG Chairs what this work amounted to since the space looks the same as it had done in May.
- o SM had to ask specifically if she could start before the Public Launch so that she could be involved in the work for this.

5. Paper to Kingston Health Overview Panel (RBK)

In early June a paper was sent over Charlotte Fitzgerald's (CF) name to members of the Health Overview Panel giving a misleading account of K-LINK's creation and work. CF had not seen it before circulation and gave a more accurate report to the HOP meeting on 10th June.

6. Telephones

- o A phone number was needed in June which could be included in the Public Launch recruitment literature. When asked about phone installations for K-LINK, PM said it would not happen until someone was in post to use them. It was therefore necessary to buy a mobile phone in order to provide telephone contact information on the recruitment leaflets and posters.
- o In December 2008 the original leaflets needed to be scrapped and new ones printed to replace the mobile number with a landline number.
- o When the Coordinator (SM) did start on 7th July the phone had not been installed.

7. Nominations for Steering Group membership

The procedure for creating a Steering Group is laid down in the K-LINK Constitution, which was formally ratified and signed in September 2008. At the time of the Public Launch, the draft constitution referred to a membership of between five and nine. Ten nominations were received, which could have led to an election for nine places. PM felt an election to be unnecessary and advised SB to talk to two of the nominees and ask them to stand down. Despite knowing very little about them, PM identified two candidates who she felt should be asked to withdraw. These two, however, were people who had been valuable members of Kingston Patients' Forums and SB did not choose to take this course of action. Rather, the matter was referred to the Inaugural Meeting of the SG, which decided to increase the maximum number of members from 9 to 10, also eliminating the need for an election at that stage.

B. GETTING K-LINK KNOWN TO THE PUBLIC

1. Logo

In December 2007 it was suggested to SD that a start should be made on the creation of a logo so that it would be available for an April start. She said No - that it was the Host's responsibility to do this, despite the cost clearly being met from the Start Up budget available from 1st January 2008.

On April 22nd SD reaffirmed to the Transitional Group that because of their national backup KCAB would get the logo designed, possibly free.

The Transitional Group Chair enquired on May 16th about progress on the logo design since the public launch was only 6 weeks away; she was told that CAB was not responding and if we knew someone who could do it then we should go ahead and ask him.

2. Website

In May PM signed up to and paid for a website called www.kingstonlink.org.uk. A Local Information Network had recently been created in Kingston, however, so there could have been confusion for users.

The TG Chair pointed out that the Local Involvement Network is abbreviated K-LINK and suggested also that there was no real need for a .org site. A meeting of the Transitional Group at Neville House on May 16th confirmed that the website should be www.K-LINK.whatever, not www.kingstonlink.org.uk.

3. Public Launch

KCAB has stated in the contract performance review that it suggested several dates which could be suitable for

the Public Launch. Those dates were: Carnival Weekend (August Bank Holiday), Freshers' Week (September) and Black Awareness Month (October). However, the TG had made a decision on 22nd April as to the preferred date - Thursday 10th July - for the following reasons:

- a. it was felt K-LINK should be operative as soon as possible,
- b. it would not be productive to hold a public launch during holiday months, and
- c. the Host would have been in post several months and could therefore assist in the organisation.

Later discussion produced a reaction that none of the three events suggested by KCAB bore much relevance to the work of the LINK anyway and as such would have served to dilute the message of the Public Launch.

No-one from the KCAB Trustees Board attended the K-LINK Public Launch.

4. Other occasions for a K-LINK presence

KCAB has suggested occasions when a K-LINK presence could be useful, such as the three identified above plus others which have been notified to the Host by KPCT and/or KVA. Some were felt to be suitable, others less so, but in several cases there was not sufficient manpower available to make it possible. The staff were asked to send apologies to the organisers as appropriate.

5. Information packs

In the absence of activity by the Host, the SG decided that information packs should be created which could be distributed to statutory and voluntary groups in Kingston, surgeries, libraries etc and thus inform as many people as possible about K-LINK, including hard-to-reach groups. These packs would include posters, leaflets, newsletters and contact information plus a letter from the SG Chair inviting anyone to ask for a visual presentation if this was felt to be helpful.

As a result of this lack of Host activity, the SG Publicity Group - including Host members - has designed all the documents and left them with the staff to have printed/copied and be circulated. Since the SG is no longer allowed to talk to the staff it is not known how this work is proceeding; the deadline for production and circulation, however, has passed.

6. KCAB Annual General Meeting

Demonstrating the misconception of the different roles, a member of the KCAB Trustees Board told their AGM that 'having K-LINK on board would enable KCAB to reach further into the community'.

C. CURRENT OPERATION

1. Presentations

- o On Thursday 19th June PM and SB met at Neville House. PM referred to a request from Kingston Adult Health & Wellbeing Board for a K-LINK representative and a presentation at their next meeting; she assumed the TG would want Susie Masters (SM) to do this. SB said not; that presentations would be done by K-LINK members, not by the staff, and that the members were the public face of K-LINK.
- o In September SD approached SM directly and asked her to share in a presentation to social care managers on Wednesday 8th October. Despite the conversation above, PM gave permission for this to happen.
- o The policy was confirmed by the SG at a meeting on 6th October 2008, when it was agreed that the chair should be contacted in the first instance regarding any presentations or meetings; that he/she would consider the request and then delegate the task but the Steering Group would always have ownership of the content.
- o Again, despite the stated K-LINK policy, in late October and early November Sue Conder (SC) visited four local organisations and interviewed members of staff. Her reports from these visits were circulated to SG members, who noted that not only was there no indication who had done the visits and why, but that certain of the problems raised by those visited could easily have been addressed by SG members, though SC herself did not know the answers.

The SG should have been informed of the intended visits in advance and given the option of attending or not - time and effort would have been saved if the agreed procedure had been followed.

2. Steering Group membership

- o With the K-LINK Transitional Group, NHS and RBK employees attended meetings by invitation. However, the K-LINK constitution clearly states that membership of the SG is open to anyone and that a Declaration of Interest should be made if this was appropriate to an agenda item.

RBK reviewed and amended the K-LINK Constitution before the final version was signed in September.

Nonetheless, during the autumn it became known that pressure was being put on the member employed by Community Care Services (PL) and the member employed by KPCT (AM) to leave the SG on the grounds that they were not entitled to be there. No contact was made with anyone from the SG about this. While it is clear from government advice that prescribed bodies are not allowed

to be part of LINKs to maintain independence, it does not say that employees cannot be members of LINKs and Steering Groups. However, PL and AM had always accepted the need for a Declaration of Interest if necessary.

- o The implication of the legislation was not the only concern of the SG however - the question of why the information was not passed to the Steering Group to act upon, rather than the two individuals concerned being approached directly by an officer of the LA and told they should not be members was alarming. It was unprofessional that the Chair/Vice Chairs should have had to find out what was going on regarding membership of the K-LINK Steering Group by an indirect and circuitous route.

When PM was asked why she had not talked to SB about this instead of going directly to PL and AM, she replied 'Because Susannah told me to do it and she is the boss.'

3. Activities

Local Involvement Networks explained (DoH, November 2007) states clearly that from the start LINKs must be able to build on the work done by Patients' Forums. This was a logical stance to take, and meant that LINKs had a basis on which to start work immediately. Guidance from the NHS National Centre for Involvement is also clear in that it is expected this work should provide the basis for development of LINK work. The workplans of the Kingston Patients' Forums were approved annually in public and updated throughout the year when other issues were raised. RBK and the Kingston NHS Trusts had always expressed enthusiasm and, indeed, gratitude for the work done by Kingston Patients' Forums up to the end of March 2008.

The attitude taken by RBK subsequently, however, and passed on to KCAB, has been that the remit of the Patients' Forums to

- monitor and review local NHS services
- monitor how well the local NHS is meeting its duty to involve and consult the public
- inspect premises used by NHS patients
- collect information, identify trends and make reports to the decision-makers, and
- promote the involvement of the public in decisions and consultations on health matters

was totally different from that of a LINK and hence irrelevant. The view of the SG, however, is that the skills and expertise necessary to carry out the above are eminently flexible enough to include social care provision.

4. CRB checks

The contract states clearly that CRB checks will need to be obtained by the Host for K-LINK members undertaking inspection visits. It has always been clear, therefore, that those members taking part in the Cleanliness & Hygiene, Catering & Nutrition, and Privacy & Dignity projects will need to be cleared, and possibly others. The people involved are not just those on the Steering Group, but Associate Members as well.

Nothing has been done by the Host about organising these checks, despite the three groups announcing the dates for their initial planning meetings and KCAB being asked to start the CRB process. PM confirmed that Citizens' Advice could not process the checks and SD said the same for RBK. PM took no further action.

On 29th and 30th October, therefore, the SG Chair spent a considerable period of time researching Umbrella Organisations who could do this work for LINKs, found one which could be possible and passed all the information to SM for progressing. The urgency of getting moving was stressed. Nothing happened.

On 10th December the SG asked SB to enquire again about the progress in getting the CRB checks done. PM replied that a protocol for visiting and entering needed to be in place first; she asked if the paid staff and she could assist on this. SB queried the need for a protocol, accepted PM's offer, suggested she draft one, and asked again about the position regarding CRB checks. No reply has yet been received.

5. Legal Indemnity (?RBK)

DoH bulletin *Issue 9 Getting ready for LINKs, Jan 2008*, states that: 'It will be for local authorities to determine their own policies regarding LINKs and indemnity. Authorities may choose to indemnify certain LINKs' members directly or stipulate that host organisations must make arrangements to do so as part of their LINK's contract.'

PM was asked on 10th December 2008 what the position is with K-LINK; no reply has yet been received. So far as they know, members currently attending meetings on behalf of the LINK have no indemnity cover.

6. Contract performance review

On 28th September PM sent a blank form to SB called *Report on K-LINK to RBK - November 2008* which she asked to be completed by the SG at their meeting on 6th October. SB responded by suggesting the KCAB section should be completed first so that this could be tabled and noted and used to complete the K-LINK section alongside.

PM said that she had designed the form, which had then been approved by SD at RBK. The SG found this a strange

procedure for a document reviewing the performance of the Host and agreed unanimously that the title of the form should more properly be **'Report to RBK on the performance of KCAB as Host of the K-LINK contract'** since it was the performance of the Host that was being reviewed, not that of the LINK.

When the form was re-presented to the meeting both the KCAB and the K-LINK sections had been completed. The SG therefore asked for a revision of the report as soon as possible, with the Steering Group's comments column left blank. SG members were asked to submit their comments quickly on whether KCAB had achieved what they said they had, the document was considered at the Steering Group meeting on 11th November, and the final report produced as soon as possible thereafter and sent to PM and CF. When the form was given back to the SG, the KCAB summary page was blank; the completed version was only made available to K-LINK on request and after its submission to RBK.

7. Office opening hours

A request was made in September for the SG to be notified of the hours at which the K-LINK office was open for business. However, the information that was sent to the Chair related to one specific week only; further requests have still not generated a list of times when the K-LINK staff may be contacted by either the public or K-LINK members.

It has been stated several times that with three staff it should be possible to keep the office open between normal business hours on five days of the week. Attempts to contact staff on several occasions suggest that this is not happening, and it has been noted that at least two of the three K-LINK staff start work at 8 am.

No information has been made available as to holiday arrangements, either over the Christmas/New Year period or as staff annual leave entitlements.

8. Communication with K-LINK staff

It has always seemed perfectly clear to members of the Steering Group that they would need to have access to their staff in order to carry out the work of the LINK. During August, however, PM told the Chair not to have direct contact but to channel everything through her. Acting through an intermediary in this way seemed to be both time-wasting and inefficient and did not eliminate the need to communicate with staff members on occasion.

On Thursday 18th December (as mentioned above) PM told SG members that the DoH and RBK had suggested the 'current' SG should put a hold on all activities and not communicate with the staff or the host pending a further

meeting. (No clear reasons were given for this suggestion - nor is it known why the SG was referred to as 'current'.)

9. Other documentation

(i) Minutes, Marketing Strategy etc

Early in its lifetime, RL asked PM to ensure that copies of all relevant documentation leading up to the creation of K-LINK were passed to KCAB by RBK. However, at the meeting held on 10th November both PM and Julie Reay (JR - member of KCAB Trustees Board and invited member of K-LINK Steering Group) said that they had never seen the Marketing Strategy. When it was sent to them by SB subsequently, JR commented: 'This is a very interesting document and has identified a great deal of issues that are clearly important to K-LINK in setting up and formulating its identity. I can now see why you focussed in on producing a poster as a key objective and action.'

(ii) Business Development Plan

From time to time KCAB has made reference to a Business Development Plan and the need for K-LINK to have one. No reasons have been given as to either why it is felt to be necessary or how one could/should be created, nor is there reference to any such document in government guidelines. K-LINK SG cannot as yet see the need for this but has not rejected the suggestion; indeed, its own document **CARRYING OUT THE AIM AND OBJECTS** **Suggestions on the way forward** could form the basis for a strategic plan for the way forward.

(iii) Governance Document

The Constitution is the K-LINK governance document. If further written procedures are legally required, rather than merely stopping K-LINK activity and ignoring the SG, the Host could/should be preparing drafts of these for consideration by the SG. All the information necessary is available either in the Minutes of SG meetings or in the files.

D. OTHER ISSUES - Documentary Changes

1. Service Specification for the Provision of a Host Organisation

The Draft Service Specification which was shown to the Interim Group states that: 'The host will be responsible for the establishment, maintenance and support for a LINK in the Royal Borough of Kingston to

carry out the following activities: ...' The Group felt this to be satisfactory.

However, the version sent out to bodies wishing to tender, says: 'The host will be responsible for the establishment, maintenance and support for a LINK in the Royal Borough of Kingston **and will carry out** the following activities: ...' There is a clear shift in emphasis between these two documents which would give a very different message to potential Hosts as to their role.

When RBK changed the draft the Interim Group should have been informed of the (major) change and invited to comment.

2. **Staff job descriptions**

Events in October 2008 suggest that the K-LINK Coordinator was not given the job description which had been recommended by members of the Transitional Group. The version available to SB reads that the Coordinator will: 'Represent the Steering Group and/or K-LINK **when agreed** and as appropriate', while that quoted by PM says: 'Represent the Steering Group, as appropriate, at statutory, non-statutory, voluntary and commercial organisations, professional bodies and institutions.'

CONCLUSIONS

Research by the National Association of LINK Members (NALM) into how Hosts and LINKs are settling down across the country has already identified difficulties in some cases. There are areas where the independence of the LINK is being challenged by its Host and/or its Local Authority, and cases of Hosts/LAs attempting to direct their LINK. In the majority of cases, the problem relationships are with 'new' Hosts, and are not occurring where the Host has had experience of Patients' Forums and hence of public involvement in care provision.

Obviously it is impossible to confirm how much of the misinterpretation of the respective roles has been passed from RBK to KCAB and how much has come from KCAB itself. Nor is it clear how well KCAB has kept RBK informed of K-LINK's activities. It would seem sensible that if RBK does not understand what K-LINK is doing, and KCAB cannot explain, then the most practical solution is for RBK to ask K-LINK directly.

In Kingston, however, even if the roles of Host and LINK had been clearly understood and agreed from the start, the level of support service provided by KCAB has not been to a satisfactory standard. This in itself was sufficiently important for the Steering Group to take the stance it has done in communicating and working with the K-LINK staff. It should be clearly noted that the inefficiencies have not

occurred with the staff but with the Host; the K-LINK employees are working to the best of their ability.

For Kingston residents to have the LINK they deserve, there need to be some major changes. Some of these are considered in the next section.

THE WAY FORWARD?

The guidance is clear, the Act is clear, the Statutory Instruments are clear and the Regulations are clear. A LINK sets the broad strategy - 'the steer' - and the Host performs the work - 'supports and facilitates' - through the paid staff. The Host reports, the Steering Group comments and steers and the circle resumes. If this routine is performed as it should, results are achieved and the LINK moves forward to the dynamic goal of shaping the health and social care provided to the local population.

Using this framework, it would therefore be beneficial if Kingston Local Involvement Network and Kingston Citizens Advice Bureau could take the following steps to work together in achieving the Aim and Objects of the LINK:

1. The K-LINK office needs to be staffed at times when members and the public may wish to meet with the staff - these 'opening hours' need to be notified to the SG.
2. Steering Group members need to resist becoming involved in the actual work and avoid the accusation of 'trying to be the Host'.
3. The Host needs to improve its level of efficiency so that the SG feels confident that their work will be dealt with properly.
4. The parties need to establish ways of working together, including
 - a. KCAB needs to keep K-LINK informed of what they are doing and if it deviates from the agreed procedure then corrective action must be instituted.
 - b. The SG needs to keep the Host informed of attendance at meetings of outside bodies, eg KPCT and KHT Board meetings and other work in committee.
 - c. The Host needs to provide information on general national trends, procedures and changes when necessary.
5. The guidance states that the Host must find ways of involving the people in participating in K-LINK and

serving on the Steering Group. They have not done so to date, though the SG has. KCAB needs to do this in future and the SG should be consulted and advised as they do the work. The Host is accountable to K-LINK for all its work in supporting and facilitating K-LINK.

6. The SG will continue to meet monthly; weekly meetings between the Co-ordinator and the SG Chair (or designated Vice Chair) need to be held to review work in progress and achievements.
7. The Host needs to encourage visits to the K-LINK office by SG, Associate and Affiliate members by arrangement to discuss and decide on project progress, visits and to exchange general information. Suitable office space should be provided for such visits, preferably in a self-contained room and not open space in the general office.

Above all, both parties need to change. There must be no more retreating behind recrimination, no more blocking of activity on the grounds of perceived legal problems, no more petty and divisive behaviour. There needs to be open and frank discussion - including participation from RBK when it is felt necessary to request this - and no deliberate by-passing of the Steering Group to communicate with individuals. There needs to be a clear-cut modus operandi to perform what all parties were established to do.

This Summary has been agreed and signed by members of Kingston Local Involvement Network (K-LINK) Steering Group.



Sandra Berry
Chair



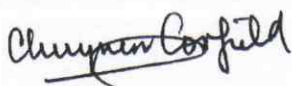
Michael Gore
Vice Chair



Helen Hutson
Vice Chair



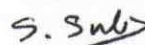
Rashid Laher
Vice Chair



Chuyuen Corfield
Member



Polly Healy
Member



Sadia Subhan
Member

INDEX

	Page
Activities	10
ADMINISTRATIVE PROBLEM AREAS	5
Appointments to staff posts	6
Business Development Plan	13
Communication with K-LINK staff	12
CONCLUSIONS	14
Contract performance review	11
CRB checks	10
CURRENT OPERATION	9
FORWARD - THE WAY?	14
GETTING K-LINK KNOWN TO THE PUBLIC	7
Governance Document	13
Information packs	8
INTRODUCTION	3
KCAB Annual General Meeting	9
Kingston Health Overview Panel - Paper to	
7	
K-LINK presence - other occasions for a	8
Launch - Public	8
Legal Indemnity	11
Logo	7
Minutes, Marketing Strategy etc	12
Nominations for Steering Group membership	7
Office opening hours	12
Other documentation	12
OTHER ISSUES - Documentary Changes	13
Presentations	9
Service Specification for the Provision of a Host	
Organisation 13	
Staff appointments	6
Staff job descriptions	13
Staff posts	6
START-UP	6
Steering Group membership	9
Telephones	7
Tender bids - advertisements for	6
Website	8

LIST OF ABBREVIATIONS USED

Organisations:

CCS	RBK Community Care Services
DH/DoH	Department of Health
HOP	(Kingston) Health Overview Panel
KCAB	Kingston Citizens Advice Bureau
KCIL	Kingston Council for Independent Living
KHT	Kingston Hospital NHS Trust
K-LINK	Kingston Local Involvement Network
KPCT	Kingston Primary Care Trust
KREC	Kingston Racial Equality Council
KVA	Kingston Voluntary Action
LINK	Local Involvement Network
RBK	Royal Borough of Kingston upon Thames
TG	Transitional Group

People:

AM	Alison McMilan (KPCT)
AM	Alison McMilan (K-LINK Steering Group Member)
CF	Charlotte Fitzgerald (RBK)
GJ	Gareth Jones (Kingston Primary Care Patients Forum)
HG	Hilary Garner (KVA)
LN	Lisa Nichols (KCIL)
MG	Michael Gore (K-LINK Steering Group Vice Chair)
MT	Maria Taber (MIND)
MT	Maria Tunmer (KVA)
PH	Polly Healy (K-LINK Steering Group Member)
PL	Phil Levick (CCS)
PL	Phil Levick (K-LINK Steering Group Member)
RB	Richard Burt (Kingston Primary Care Patients Forum)
RL	Rashid Laher (K-LINK Steering Group Vice Chair)
SB	Sandra Berry (K-LINK Steering Group Chair)
SBr	Shane Brennan (Age Concern)
SC	Sue Conder (K-LINK Outreach Worker)
SD	Susanna Daly (RBK)
SM	Susie Masters (K-LINK Coordinator)
SS	Sadia Subhan (K-LINK Steering Group Member)
TK	Trisha Kelly (K-LINK Office Manager)