Mental Health Service User Participation in Somerset

Report and recommendations

December 2010
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Acknowledgements

Somerset LINk would like to thank all those who provided the information used in this report, including Somerset County Council, NHS Somerset and the Somerset Partnership NHS Foundation Trust.

Our most particular thanks must go to the members of the LINk Mental Health Focus Group, and the mental health service users, carers, friends and interested members of the public who took the time to participate in the Voice for Your Mental Wellbeing event and in the survey that supported it.
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1. Introduction

1.1 Background to the report

In 2010, mental health service users, their carers and staff working in the sector in Somerset raised concerns with Somerset LINk that the county currently has no dedicated involvement or participation support service for those who have mental health needs and use mental health services.

These concerns highlighted a perception that:

- readily accessible opportunities for service users and carers to be involved in the design and delivery of mental health services in Somerset have been significantly reduced over the preceding couple of years;
- there is a lack of suitable provision available to enable the effective involvement of those that need support to share their experiences and are not therefore doing so; and
- some of those currently involved in using their experience to help shape service design and policy are not receiving the support that they need.

These issues raise significant equalities issues. Everybody should have equality of opportunity and the right to be involved in the planning, provision, development and evaluation of services that they use. In order to achieve this, many people with specific needs or disabilities will require specialist support to enable them to participate, have their say, be involved and help influence positive changes in service provision.

Service users and carers have a lot to contribute to services, through their experience of living with a mental health problem and using mental health services, either personally or in a caring role. This expertise is not available from any other source and therefore service users and carers should be given the opportunity and support needed to be involved and to ensure that their views are heard. It is then more likely that the services provided will meet their needs.

1.2 Ten years of local provision

‘Involve Somerset’ formally known as ‘User participation in Somerset’ had been commissioned for more than 10 years to support mental health service users, ensuring that they could be fully involved and participate in the planning, feedback and evaluation of mental health service provision in Somerset. This was done through the ‘Service Users Network’ (SUN) which brought together mental health service users and later included input from their carers.
Regular meeting were held across the county. In 2008 figures showed an average of 86 service users attending regular involvement meetings, but this had reduced to 36 by the end of 2009. It was perceived that the drop in numbers reflected the reduction in support that Involvement Co-ordinators could offer after a cut in funding. Until the end of 2009 a minimal support service was available, but a number of services had to be discontinued, including phone call reminders and co-ordinated peer support for those who needed it.

The SUN network was supported to participate in a number of forums and development groups. These included:

- Women’s Mental Health Focus Group
- Acute Care Forum
- Patient and Carer Experience Group
- Musgrove Hospital Psychiatric Liaison Team
- Mental Health Forum
- Clinical and Social Care Effectiveness Group
- Mendip Advocacy Development Group
- South Network of User Groups
- Alternatives to Admissions Steering Group

The support offered to those wishing to participate included:

- Ensuring clarity in the value and expectations of involvement opportunities were present and available;
- Support to arrange transport;
- Arranging peer support where needed;
- Providing training to enable fuller participation and representation;
- Providing an independent voice for service users and ensuring this voice was directed to the appropriate place.

The key features of this service were that it was:

- Independent of service provision;
- Involved service users and volunteers at all levels of service delivery and planning.

The Involve Somerset service was closed at the end of 2009.

Somerset LINk has entered into correspondence with Somerset County Council (SCC) in 2010 and has been informed that a planning group has been set up to look at user participation and other services across the county.

NHS Somerset (the Primary Care Trust) when similarly contacted, replied that although the NHS and the local authority had hoped to work together on the provision of a replacement for ‘Involve Somerset’, financial constraints and organisational changes had
so far made this impossible. However, the hope was expressed that work on the process would move forward in the near future.

2. Aims & Objectives of the report

The Somerset LINk has produced this report to inform commissioners and mental health service providers of the expressed local need for a participation/involvement support service. In doing so:

- it aims to provide a comprehensive reflection of local views encompassing service users, carers and professionals;
- it will include current provision and perceptions of service user and carer involvement from different perspectives and seeks to identify areas of need;
- it will use the experience and expertise of its participants to make recommendations on what is needed for Somerset to enable inclusive and effective use of mental health service user and carer involvement/participation.

3. Methodology

3.1 Gathering views

The Somerset LINk collects the views of local people regarding health and social care services in Somerset. Of such comments received during 2009-10, 30 comments were received about mental health services, and of these, 53% referred to the lack of involvement support service for those experiencing mental ill health. The Somerset LINk then formed the LINk Mental Health Focus Group (LMHFG) comprising nine volunteers with an interest in mental health services, including service users, carers and professionals.

An event entitled ‘A Voice for your Mental Wellbeing’ was then held on the 17th May 2010 at North Petherton Community Centre. The aims of this event, as agreed by the LMHFG, were:

- To gather views on the perceived lack of support for those with mental health needs and their carers to become involved and participate in service development and design;
- To gather more opinions about waiting times for therapy and counselling services and the perceived under-use of voluntary and private services; and
- To provide an opportunity for people with experience of using mental health services and their carers to feed their experiences and comments into the ‘Quality Accounts’ for the Somerset Partnership.
Invitations to the event were sent out to all LINk participants and advertised through the LINk website. People were given the opportunity to comment in a variety of ways prior to, and at the event. The results were then analysed.

### 3.2 Survey

In addition, a survey was sent to all Somerset LINk participants and registered organisations with an interest in mental health. 73 responses were received. The survey probed deeper into how people perceived equality of involvement opportunities relating to the need for support and also asked what an involvement service should look like. *(Appendix 1 contains the survey.)*

### 3.3 Analysis of current provision

Desk research was undertaken to obtain a full picture of the current provision for service user involvement and participation support available in Somerset from NHS Somerset and Somerset Partnership NHS Foundation Trust.

The Somerset LINk contacted the main mental health service providers in Somerset, The Somerset Partnership NHS Foundation Trust, and NHS Somerset, to ask them about the involvement opportunities they provide and how these have been managed since Involve Somerset ended in December 2009.

### 3.4 Reporting the findings

The findings are detailed below. First, the results of the examination of current provision is discussed, followed by the feedback from the ‘LINk – A Voice for your Mental Wellbeing’ event.

The final section is a detailed analysis of the results of the survey undertaken to support this report, with attendant graphs.

The report also seeks to highlight any significant differences in provision across specific geographic areas in Somerset.

The results are then summarised before making conclusions and recommendations.
4. Current provision

4.1 Somerset Partnership NHS Foundation Trust

The Somerset Partnership NHS Foundation Trust is the main provider of secondary mental health services in Somerset. Diana Rowe, Director of Operations and Deputy Chief Executive for the Trust, provided the Somerset LINk with a statement that confirmed their commitment to: “learning from the views of service users, carers, and others, and to implementing changes as appropriate.” (Full statement included as Appendix 2.)

The Somerset Partnership currently has the following opportunities to involve service users and carers and is looking into new ways to support those involved.

Governance Groups:
- Patient and Carer Experience Group
- Clinical and Social Care Effectiveness Groups

Sub-Groups (that report back to the governance groups):
- Carers and Families Steering Group
- Acute Care Forum
- Women's Development Group
- Psychological Mindfulness Working Group.
- Patient and Carer Experience group

Volunteering:
- Inpatient Peer Support Volunteering
- Carer Befriending.
- Opportunity to become a Foundation Trust member.

There are also currently discussions between the Somerset Partnership and the NHS library service about supporting short term volunteering opportunities for service users.

4.2 NHS Somerset (Primary Care Trust)

NHS Somerset is the main commissioner of primary and secondary mental health services in Somerset, and its provider arm (Somerset Community Health) provides primary mental health services through the Somerset Community Right Steps to Emotional Health and Wellbeing service.

Wayne Lewis, <title> NHS Somerset provided the LINk with information about their current involvement opportunities. (See Appendix 3 for full statement.)

- When the clients are discharged (from Somerset Community Right Steps to Emotional Health and Wellbeing) they complete a patient experience
questionnaire that is returned via a pre-paid envelope. They are then sent to the “hub” that dealt with that particular client. Comments are captured electronically and the team leader addresses any negative comments locally. A written protocol to ensure the standardisation of this process is in development.

- Right Steps are consulting with a service user as an ‘expert by experience’ to inform future practice on involvement. This could involve inclusion on a stakeholder group and involvement in recruitment.

In addition to this the Local Implementation Teams (LIT) have also involved service users and carers although these have now stopped and alternative methods of engagement are being developed. NHS Somerset stated that in the past the Mental Health LIT was well attended by a number of interested parties, including service users and their carers. However in the light of changing health policy a ‘more focussed approach to engagement’ would be sought. Virtual networks are proposed along with stakeholder events and NHS Somerset affirms that service user and carer input will be essential to their success. (See Appendix 3 for the full response.)

5. Consultation

Consultation was undertaken both before the event ‘LINk – A Voice for your Mental Wellbeing’ and following this event (covering the period May 2010 – September 2010). When the consultation period was ended, all comments received were grouped under three main headings:

5.1. Comments given to the LINk relating to a generic or specialised involvement support service:

- Provision should be specific to mental health so that people with common interests have an opportunity to support each other.
- There should be the opportunity to meet and gain peer support from others who want to get involved.
- I’d like to meet others who have mental health experiences so they might understand me and not judge me.
- If a generic service to support the involvement of vulnerable individuals was established it would need a large enough team to focus on different specialisms and needs. Involvement Support Officers should be available in specific areas, for example; long term health conditions; learning disabilities; mental health; young and at risk.

5.2. Comments given to the LINk on what any new service should do:

- A worker is needed to help service users build networks.
- An involvement support service should collect feedback from users and carers about service quality.
- An involvement service should enable people to have an accessible signpost to involvement opportunities and support to access them.
- The support to participate needs to be independent of service providers.
- There should be service user involvement in staff recruitment.
- Service users should have the opportunity to be supported to feed into staff appraisals.
- There should be help getting to meetings; both the cost of transport and arranging it.
- Support for friends at meetings.
- There is a desperate need for a mental health network or forum for participation.

5.3. Other comments:

- More notice and management of change needed when a service changes provider or ends.
- Any new service needs to be cost effective and not just cost efficient.
- Having been supported to be involved in two working groups, I was suddenly left with no support. No-one was there to help me after a difficult meeting and no-one helped me understand things for the groups or helped me to get there.
- I no longer feel supported with what I was involved in. I also feel my involvement is no longer valued.

The consultation showed a clear preference for an involvement service independent of service providers and commissioning bodies, to avoid conflict of interest and ensure objectivity in its views and recommendations.

Attendees at the consultation event also felt that any involvement support service should have a clear mechanism for recording and sharing feedback, both to service providers and commissioners. It should include formal agreements with service providers or existing involvement networks.

6. The Survey

(See Appendix 1 for the full survey.)

The survey was available online and paper copies were also distributed to all Somerset LINk participants and organisations who had indicated a preference to receive information via the post.

73 responses were received. The majority were from those currently using mental health services in Somerset. The smallest group of respondents were carers. Fig 1. shows this in more detail.
Tell us about yourself

When interpreting the data it is recognised that as respondents were able to choose more than one option when answering some questions it has resulted in percentages adding up to greater than 100.

73 is a healthy number of participants overall, but when cross referencing data sets the numbers can be very small and must be treated with caution.

6.1 Geographical spread

Fig. 2 (below) shows the location of respondents across Somerset. In general, the spread is relatively even.
6.2 Available opportunities

Fig.3 The chart below shows that the majority of respondents who answered the question ‘Do you feel there is less or more opportunity for mental health service users to be involved and have your say now than 3 years ago?’ felt that there are significantly fewer opportunities now than there were in 2007.

Involvement opportunities 2007 - 2010

However, this data is most interesting when you compare the views of service users and carers to those of professionals working in mental health services. Numbers are too small to graph reliably, but it is clear that the views expressed by the two groups diverge to a significant degree. When the figures expressed above are filtered to show just the opinion of professionals, of the 21 answering this question more than 75% thought there were actually more or similar opportunities in 2010 than in 2007. Only 4 professionals thought there were less and one didn’t know.

This considerable difference in perception is of concern. Either there are opportunities that are not being communicated effectively to service users, or professionals are unaware of the current situation regarding support for those wishing to become involved.
Examining these figures by geographical area indicates that opportunities for involvement are fewer in the Taunton Deane and Sedgemoor areas.

6.3 Available support

The graph below (Fig.4) shows how far respondents are aware of the range of support available to participate in involvement activities.

**What support do you believe is available?**

![Graph showing support options]

Overall, it is clear that the majority of respondents are unaware of any support available to assist them in full participation. However, when looked at in more detail, once again there is a difference in perception between service users, the majority of whom are unaware of support, and professionals who consider Somerset Partnership to offer the necessary service.

It is difficult to look at this geographically because of the small numbers involved, but it is clear that those in West Somerset rely on Mind in Taunton & West Somerset (MindTWS) to offer them support in a way not reflected in other areas of the county.
6.4 What is the best way to involve service users and their carers?

![Graph showing the best way to involve users & carers]

**Fig 5** above shows, in numbers, how all groups answered the question relating to the best way to involve service users and their carers in the design and development of mental health services in Somerset.

Once again, although there is broad agreement across all groups of respondents, when broken down the difference between service users and carers views and those of professionals is significant in two main areas. Service users are keen to be involved at Board level and would like to have meaningful input into staff recruitment and training. These areas are far less popular with staff and professionals especially in relation to offering roles at Board level. This may be partly due to the hierarchical and elected structures of public sector organisations which would make finding and accessing these opportunities more challenging.
6.5 What support is most needed?

The survey asked respondents what support they considered was most needed to ensure that service users and carers could become fully involved in service design and development. Fig. 6 shows that the key needs relate to ensuring information about opportunities is made widely available, and when they are taken up, to ensure that proper training is offered and costs of travel are covered. These views were held equally strongly by both service users and professionals.

It’s worth noting that service users and carers recorded that they preferred to share experiences and feedback with their peers. This is perhaps not surprising and reflects comments received during the Somerset LINk event ‘A Voice for your Mental Wellbeing’. Peer support is often invaluable in all areas of mental health service provision, but could be especially useful in the case of user involvement. There is a natural concern amongst service users that their views will not be taken seriously and they may feel intimidated by the prospect of attending meetings with service providers, for example. Having someone there to share their experience would increase the likelihood of successful engagement with the process.

![Supporting involvement of users & carers](image-url)

Fig 6
7. Conclusion

7.1 There are many reasons why it is important to develop effective service user involvement in mental health services, not least because on 1st April 2009 a new ‘Duty to Involve’ came into force for local authorities. This duty requires local authorities to demonstrate:

- That they understand community interests.
- That information, consultation and involvement opportunities are accessible and well targeted.
- That the service coordinates engagement activities with partners where appropriate. That local people know how to get involved and feel those good engagement opportunities are provided.

(Local Government and Public Involvement in Health Act 2007)

7.2 Academic and professional opinion across a significant number of reports always stresses the need for users to be involved in the development of any service. It is an effective and cost efficient way of ensuring providers target delivery where it is most needed.

7.3 This report raises concerns about levels of support available to mental health service users and their carers across Somerset. The differences in perception between users and the professionals that work with them also highlight the problems that could arise when designing and commissioning services. There could be a distinct gap between what is provided and what is actually needed.

7.4 The research undertaken for the purposes of this report suggests that there is currently a perception amongst users that current provision of services supporting them into effective involvement is inadequate. If it is there, as service providers seem to think it is, then the information is clearly not being conveyed effectively to those who would benefit from it.

7.5 As a result of this research, Somerset LINk holds firmly to the belief that a co-ordinated involvement support service is needed to ensure:

- mental health service users and their carers have an equality of opportunity in respect of public and patient involvement in health and social care;
- involvement opportunities are advertised and networked effectively;
- volunteers are supported and feel valued when giving their feedback, time and experience; and
- services develop and grow to meet service user needs by effectively assimilating their experience and knowledge.
8. Recommendations

8.1. Any new service should seek to ensure it has:

- user and carer representatives on focus groups and forums;
- user and carer representatives on Members’ Councils and boards where this is possible;
- user and carer involvement in the recruitment and induction of staff;
- established a network of mental health service users and carers.

8.2. Any involvement/participation service should ensure it offers:

- Training to enable service users and carers of those with mental health needs to fully participate and become involved;
- Reimbursement of expenses;
- Information about involvement opportunities and support;
- An independence from service providers and commissioning bodies.

8.3. All interested parties (such as Somerset LiNK, Somerset Partnership NHS Foundation Trust, Somerset Community Health and Somerset County Council) should discuss short term interim arrangements to meet the most pressing needs. These include provision of information about mental health involvement opportunities and the support of those currently involved.

8.4. All interested parties need to develop a co-ordinated approach to involvement. This must take into account existing and additional resources that are needed to enable this to happen.
9. Summary

The Somerset LINk has undertaken the research that underpins this report to inform commissioners and mental health service providers of the local need for a participation/involvement support service.

The report represents the views expressed by participants in both the consultation exercise and the survey and offers a detailed picture of the current position relating to the need for such a service. It also identifies current provision and highlights the difference in the perception of that provision that exists between users, carers and professionals.

The Somerset LINk believes that the recommendations, developed as they are from robust research, properly draw on the valuable experiences of all participants to the research and offer a blueprint for the development of a service that can meet the needs of all those with mental health issues in Somerset.
Appendix 1: Survey (page 1 of 2)

Support to be involved in Mental Health Service feedback & design

What support is needed to enable involvement in mental health service change in Somerset?

The Somerset LINk recognise that those who use or care for someone who uses health and social care services have information to offer which can be used to make improvements to services. This expertise is not available from any other source and is therefore a vital part of helping services to develop and improve.

Often those with specific needs may require specialist support to enable them to access and participate in opportunities for them to be involved.

The Somerset LINk is exploring the involvement support needs of users and carers of mental health services, and would value your views. Please could you take a few moments to fill out this survey to help us further our research into this area.

Please send this survey in the FREEPOST envelope provided (no stamp needed) or post it to:
FREEPOST RSAC-KSRE-CZCE, Somerset LINk, 2, Bowden’s Business Park, Hambridge, Somerset, TA10 0BP.

1. Please tell us about yourself.
   - I have used mental health services in the past.
   - I am currently using mental health services.
   - I have cared for someone who has used mental health services.
   - I have worked in mental health services or services that involve supporting those with mental health needs.
   - Other (please specify) .................................................................

2. Do you feel there is less or more opportunity for mental health service users to be involved and have your say now than 3 years ago?
   - More
   - About the same
   - Less
   - Don’t know

3. What support do you know of that helps enable someone with mental health needs (or their carers) to be involved in feedback about services or service design?
   - Support from the Somerset Partnership (please specify below)
   - Support from Mind (please specify below)
   - Support from Re-think (please specify below)
   - Support from other organization (please specify below)
   - Not aware of any support

Please specify here: ........................................................................
Support to be involved
in Mental Health Service feedback & design

4. In your opinion, what would be the best ways to involve service users and their carers in mental health service feedback and mental health service design?

☐ User and carer representatives on focus groups or forums (for example: Acute care forum, Patient and carer experience groups, Anti stigma focus groups...)
☐ User and carer representatives at board level of mental health service providers.
☐ A network of users and carers of those who have mental health needs to discuss mental health service feedback and service design.
☐ Peer support groups discussing mental health service feedback and service design.
☐ A county-wide forum for mental health service feedback and service design.
☐ User and carer involvement in visits or ‘spot checks’ of mental health services.
☐ User and carer involvement in the recruitment, induction, and training of staff.
☐ Other (please specify) ..............................................................

5. What support is needed to enable users and carers of those with mental health needs to fully participate and become involved?

☐ Information on what involvement opportunities exist.
☐ Peer support to share experiences of using services with others.
☐ Professional support to share experiences of using services with others (e.g. paid support staff).
☐ Training to enable mental health service users and their carers to participate (this may include ‘Running meetings’, ‘Self confidence’, ‘Public speaking’, ‘working with volunteers’ etc.)
☐ Reimbursement of travel costs.
☐ Peer support after a meeting or participation opportunity to reflect on the experience and de-brief participants when needed.
☐ Professional support after a meeting or participation opportunity to reflect on the experience and de-brief participants when needed.

Please let us know which area of Somerset you live in:

☐ West Somerset
☐ South Somerset
☐ Taunton Deane
☐ Sedgemoor
☐ Mendip

Thank you for completing our survey.

If you would like to receive a copy of the final evaluation report, please include your contact details below:
Name:................................................................................................................................................................................
Address (if you would like a copy by post):..........................................................................................................................
..........................................................................................................................................................................................
Email address (if you would like a copy by email): ..................................................................................................................

Somerset LiNK
Mental Health Service User Participation
Report and Recommendations
Appendix 2:  
Response from Somerset Partnership NHS Foundation Trust

“Until December 2009 Somerset Partnership used Involve Somerset as a way of using an independent user involvement network to recruit people who used our services or their families and carers, into areas of trust business, such as involvement on statutory and working groups, in staff training and for one off pieces of work. The Trust is committed to learning from the views of service users, carers, and others, and to implementing changes as appropriate.

We are currently involving service users in service design, planning and evaluation in the following areas:

Governance Groups:
- Patient and Carer Experience Group
- Clinical and Social Care Effectiveness Groups

Sub-Groups – that report back to the governance groups:
- Carers and families steering group
- Acute Care forum
- Women’s Development Group
- Psychological Mindfulness working group

In addition as a Foundation Trust we have a Service User and Carers Experience working group as part of the Members’ Council who also hold a role in involvement around service design, planning and evaluation.

One of the challenges posed from the previous user involvement network (Involve Somerset) was, how did we as a Trust ensure that the people we asked to become involved, were truly representative of the current needs and aspirations of our customers. We valued the independence of Involve Somerset and the extent to which they were connected across the wider health and social care community which we very much hope LINKS will continue to provide this.

As a Trust we are reviewing user involvement to ensure a structure for the involvement of people who use our services and their families address this and further develop our culture of involvement and participation across our services.

From this we are exploring how volunteering opportunities exist alongside involvement. This will ensure that the people who become involved have a specific role, are trained, supported and supervised during their involvement period. There would be an expectation that these volunteers would actively link into other groups to seek wider views, so they have a true representation. I understand Sarah Huish Saunders and Lucy Nicholls have started to discuss how this can be taken forward and to explore to what extent LINKS and Somerset Partnership can work together on this.”

Diana Rowe, Director of Operations and Deputy Chief Executive
30 September 2010
Appendix 3: 
Response from NHS Somerset

[In addition to the comments made by the provider of Secondary Care Mental Health Services (Somerset Partnership NHS Foundation Trust)]

“Somerset Partnership are doing some work around increasing volunteering opportunities for people who use their services. The opportunities available are:

- Inpatient peer support volunteering
- Carer befriending

Sarah Huish-Saunders is also in negotiation with the NHS Library Service with regards to short term volunteering opportunities for people who use Somerset Partnership services that need extra support in volunteering. The library service would like to develop a project for this.

It is also evident that the creation of a Members’ Council and the opportunity to become a member of the Foundation Trust has had a positive impact on the opportunities for service users to have their say at both an operational and strategic levels within the Trust.

Primary Care Mental Health Service (Somerset Community Right Steps)
The opportunities for involvement in primary care mental health services are still evolving. As a rule, service users’ length of contact with the service is short and our experience so far is that most people would wish to provide feedback on their experience at or shortly after their episode of treatment. When the clients are discharged they complete a patient experience questionnaire that is returned via a pre-paid envelope. They are then sent to the “hub” that dealt with that particular client. Comments are captured electronically and the team leader addresses any negative comments locally. A written protocol to ensure the standardisation of this process is in development.

Right Steps are also consulting with a service user as an ‘expert by experience’ to inform future practice on involvement. This could involve inclusion on a stakeholder group and involvement in recruitment.

Commissioner Perspective
With the demise of the ‘Involve Somerset’ service, NHS and Local Authority Mental Health Commissioners had hoped to collaborate on a re-tendering exercise to replace it with an innovative and facilitative service to enhance the support available to service users who wished to provide feedback on current services or contribute towards future service developments. Unfortunately, due to organisational and financial constraints it has not yet been possible to proceed with this initiative. However, we remain hopeful that there will be an opportunity to progress this work in the near future. With the development of the LINk we would also need to ensure that roles and responsibilities of any service dovetail appropriately with the LINK’s role.

For many years the Local Implementation Teams (LITs) have provided a useful stakeholder forum for discussion of NHS services in Somerset. The Mental Health LIT in particular has been well attended by a range of interested parties, including service users and carers. LITs were recently reviewed by NHS Somerset and, while recognising their contribution in the past, we now consider that in the light of changing health policy and future challenges and opportunities, a more focussed approach to engagement would be helpful. Virtual networks and stakeholder events will replace the function of LITs, providing a forum where work can be done to develop patient pathways and share good practice across organisational boundaries. Service user and carer input to this work will be essential.

Wayne Lewis, Associate Director, Joint Commissioning, Somerset Primary Care Trust
19 October 2010
About this report

This report was commissioned by the Somerset Local Involvement Network (Somerset LINk), 2, Bowden's Business Park, Hambridge, Taunton, Somerset. TA10 0BP. For more information about the Somerset LINk see www.somersetlink.org.uk.

The supporting research and draft report for this project was overseen and written by Jonathan Yelland, Development Officer at the Somerset LINk.

The final report was commissioned from Suzie Grogan for Monetas Consultants, Somerset.