

**Your LINK for improving health and social care**

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April 2010

## Kent LINK

### Strategic Direction – note of meeting held on 1 April 2010

**Present:**

John Fletcher  
Mike Eddy  
Cate Jackson  
Mark Fittock

**Also present:**

Graham Hills, Operational Director, Kent LINK

The above members had been charged with the task of further developing the outline paper entitled 'Kent LINK Strategic Direction' which had been discussed at the Governors' March 2010 meeting.

It was felt that the strategic aims should be reordered as follows:

The overarching aim of the Kent LINK in the year 2010 / 11 shall be to identify inequalities in health / social care across the county with the aim of reducing such inequalities.

In order to achieve this, the LINK will

1. Forge meaningful relationships with the aim of:
  - a. Ensuring the LINK is informed of other relevant stakeholders' activities (that have relevance to the LINK)
  - b. Ensuring the LINK is enabled to influence decisions made by other bodies
  - c. Enabling the LINK to inform other bodies agendas (such as the regulators, Care Quality Commission)
2. Ensure that the Kent LINK is in a position to respond to relevant consultations / requests for public feedback in a timely fashion

3. Ensure the LINK's representatives on external groups are enabled to undertake their role (through the rules of engagement)
4. Build the LINK's capacity with the aim of:
  - a. Increasing the number of participants involved in LINK activities
  - b. Increasing the validity, effectiveness of LINK's activities.

It was recommend that at the Governors' Group's next meeting sufficient time should be devoted to discuss how the LINK is to ensure in the coming year that it is ensuring effective feedback from LINK participants.

In addition, the Governors should decide on three questions that shall be put to LINK participants at the Annual Meeting aimed at delivering the overall objectives of the LINK.

Attached is a note prepared by John Fletcher posing some questions for the meeting to consider. Also attached is a document which sets out the current allocation of work amongst LINK Development Workers and Project Workers.

## **Note from John Fletcher**

Under this item I would like to include a discussion on some very important issues that we are facing at the moment. These are:

The development of subgroups, what do we call them, how do we manage them, how do we find the right people to work on them? We already have one and will shortly have the community services and possibly a West Kent one as well as a mental health one. The acute trusts may well want to follow suit and so we could have up to eight of these and perhaps more if we can include single topic groups as well as social services.

So the questions are:

- How do these subgroups fit into the Kent LINK?
- How do we make participants on them feel that they are working for the LINK and are part of it?
- How do we keep in touch with them and what sort of reporting system do we have?
- How do we keep the participants on the groups informed so that they are aware of the LINK activities which impinge on what they are doing?
- How do we find the right people?
- Is our current method of selection adequate?
- How many such groups can we afford?
- What is the overall objective of a subgroup?
- Who decides its overall objective?
- Can we afford to be involved with such groups if they do not make a financial contribution to the running of the LINK?