

LINK public meeting 25th February
Break out groups

Roles and Responsibilities

Concerns area of uncertainty: How will PCTs function?

Rather than localities being PCT based why not Local Authorities based?

- Be Flexible
- be more open i.e. minutes on website

Q: Over the LINK being more open

Q: Boundaries – for the LINK, should members have them? Point about openness, Local Authorities, CEMVO with boundaries, LINK without, can the LINK be boundary less?

Sharing concerns:

Take them up as a whole through the countywide group however, each locality will be specific

Locality areas to share information chairs + coordinators share best practice

Q: Annual report – what responsibility goes to the host, Local Authorities and the LINK?

Q: Does the LINK have the data for the annual report?

A: Previous years have been on time, all data is available, financial, projects etc.

A: Getting template for report makes the process slow off the ground

BME Groups:

- access to health, language barriers

Role

- communicate need

Responsibility

- collaborative effectiveness, working with other groups who have expertise in working with BME groups

Q: Over training and if it is available to work with BME groups as specific areas require guidance – the following could be areas where training is required

1. knowing what the needs of the community are
2. forging links with service providers / be informants / hold Local Authorities, PCT et al to account
3. Host's role:
 - work for the LINK
 - facilitate members work
 - how to apply gov rules / principles to our advantage