

REPORT TO: POLICY AND RESOURCES COMMITTEE - 24 MARCH 2008
REPORT ON: LOCAL HEALTHCARE BILL - CONSULTATION DOCUMENT
REPORT BY: ASSISTANT CHIEF EXECUTIVE (COMMUNITY PLANNING)
REPORT NO: 197-2008

1. PURPOSE OF REPORT

To advise members of a Scottish Government consultation document which sets out proposals for a Local Healthcare Bill, and to recommend a response.

2. RECOMMENDATIONS

It is recommended that the Council's response to the consultation document should:

- i) support the principle of encouraging greater public and patient involvement in the planning and delivery of local health services and the greater democratisation of the NHS
- ii) express concern that the introduction of direct elections to NHS Boards would be costly and divert resources from frontline services
- iii) support the strengthening of existing policies to ensure that the views of local communities are heard effectively
- iv) suggest that increasing the number of elected members nominated by local authorities to health boards would be a cost effective way of increasing democratic accountability in the NHS

3. FINANCIAL IMPLICATIONS

None.

4. BACKGROUND

- 4.1 The Scottish Government wants to encourage greater public and patient involvement in the planning and delivery of local NHS services, and believes that direct elections to NHS Boards can help to secure this. A consultation paper has been issued to gather views on whether a Local Healthcare Bill should include provision for direct elections to NHS Boards, and if so what form these might take. This report recommends a Council response to the consultation paper, a full copy of which is available in the members' lounge and from group secretaries.
- 4.2 The consultation paper begins with background information on how the NHS works at present and includes sections inviting views on:
 - . how the role of patients and communities could be strengthened within the existing arrangements
 - . how current arrangements could be improved by the introduction of directly elected members on NHS Boards

- 4.4 NHS services in Scotland are planned and delivered by Boards appointed by Scottish Ministers. The Boards include non-executive lay members, non-executive 'stakeholder' members (including one councillor nominated by each local authority in the area served by the Board) and executive members appointed because of the jobs they do for the Board
- 4.4 There is a generally accepted need to address the "democratic deficit" in the NHS. In particular, some recent decisions to change the way in which NHS services are delivered in parts of Scotland have raised strong feelings in the communities affected, and arguments that Boards have not taken sufficient account of the views of local people. However, there is concern about the cost of introducing direct elections. This is roughly estimated in the consultation paper at £5 million, not including the cost of remuneration, training and support arrangements, and there is a view that the resources required for this would reduce funding available for frontline services. Given this concern, it is necessary to consider if there are other ways in which the NHS can be exposed to greater local democratic accountability.
- 4.5 It is proposed that the Council's response to the consultation document should suggest that:
- existing arrangements for public and patient involvement should be enhanced by:
 - ensuring that NHS Boards adhere to the National Standards for Community Engagement and the national guidance on informing, engaging and consulting the public on proposals for major service change
 - ensuring that Public Partnership Forums are effective vehicles for involving the public in Community Health Partnerships and NHS Boards
 - continuing to develop proposals for independent scrutiny of major service change proposals
 - the democratic accountability of NHS Boards should be enhanced by increasing the number of elected members nominated by local authorities
- 4.6 The consultation paper includes a number of detailed questions on how direct elections would work if this proposal is adopted, including eligibility criteria for candidates, the percentage of directly elected members on boards, the division of board areas and wards, the voting system and remuneration for directly elected and other members. If the proposal for direct elections is pursued following this consultation exercise, there will be an opportunity for the Council to comment on these issues in detail when the draft Bill is being scrutinised.

5. **POLICY IMPLICATIONS**

This report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

6. **CONSULTATIONS**

The Chief Executive, Depute Chief Executive (Support Services), Depute Chief Executive (Finance) and Head of Finance have been consulted.

7. **BACKGROUND PAPERS**

Consultation Document : Local Healthcare Bill - Scottish Government, 2008

Chris Ward
Assistant Chief Executive (Community Planning)..... 18/03/2008