

GUIDANCE ON IDENTIFYING MAJOR HEALTH SERVICE CHANGES



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INTRODUCTION

NHS Boards have a statutory duty¹ to involve patients and the public in the planning and development of health services, and in decisions which will significantly affect the operation of those services. Guidance² sets out how NHS Boards should inform, engage, and consult their local communities about proposed service changes. This is particularly important when a proposed service change will have a major impact. A full public consultation process will be required for major service changes and the NHS Board's final decision on the way forward will be subject to Ministerial approval. In addition, the Scottish Government has introduced a process of 'independent scrutiny' which will apply in some cases of major service change.

This guidance aims to provide NHS Boards, and their communities, with a framework that will assist them in identifying potential major service changes. The Scottish Health Council can provide advice on using this guidance. It is intended that the guidance will help Boards to stimulate discussion amongst key stakeholders in order to establish whether there is a consensus view.

Where a proposed service change would impact on the public in another NHS Board area, the Boards concerned should work together throughout the process.

There are other factors that NHS Boards may consider relevant, and which will provide significant drivers for change in NHS services, for example, workforce issues, or clinical standards. However, this paper concentrates on issues that are relevant for identifying when a proposed service change might be classed as major, rather than on factors which are underlying drivers for change.

The decision on whether a service change should be regarded as major ultimately rests with Scottish Ministers. However, in making such a decision, Ministers will wish to have regard to the process that the NHS Board has followed in reaching its own view.

¹ National Health Service Reform (Scotland) Act 2004, section 7

² Informing, Engaging and Consulting People in Developing Health and Community Care Services, CEL 4 (2010), Scottish Government

ISSUES TO CONSIDER

The following issues should be considered when identifying whether a proposed service change ought to be regarded as major. They are intended simply to provide a framework for discussion. Please note that these issues are not ranked in order of importance. Some of the issues may appear to overlap, but each should be considered. Any evaluation as to what extent these issues apply will involve a level of subjectivity.

It is intended that NHS Boards and other stakeholders should consider each of the issues in the context of the particular local circumstances. As a general rule, the more issues that apply, the more likely it is that a service change should be considered as major. There are prompts under each of the issues. These are not intended to be exhaustive.

1. Impact on patients and carers

- Consider the number of patients that will be affected as a proportion of the local population, and assess the likely level of impact on those patients, together with any consequential impact on their carers.
- Where it appears that a relatively small number of patients is affected, it may still be necessary to consider the level of impact on those individuals, particularly where their health needs are such that they are likely to require to continue to access the service over a longer period of time.
- The particular impact of the proposed change on patients that may experience discrimination or social exclusion should also be taken into account.

2. Change in the accessibility of services

- Consider whether the proposed change involves relocation, reduction or withdrawal of a service.
- Assess the likely impact of the proposed change in terms of transport (in relation to patients, carers, staff, goods / supplies).

3. Emergency or unscheduled care services

- Consider whether the proposals involve, or are likely to have a significant impact on, emergency or unscheduled care services, such as Accident and Emergency, Out-of-Hours or maternity services.
- Assess the potential impact on the delivery of services provided by the Scottish Ambulance Service.

4. Public or political concern

- Assess the likelihood that the proposals will attract a substantial level of public concern, whether across the local population, or amongst particular patient groups.
- Take account of any views expressed by Public Partnership Forums, local community groups or elected representatives.
- Consider any views reflected in the local media.
- Are there likely to be complex evidence issues that could be open to challenge or dispute?

5. Conflict with national policy

- Do the proposals run counter to national policy, for example, the presumption against the centralisation of health services?

6. Change in the method of service delivery

- Do the proposals involve the use of new or contentious technology?
- Are changes proposed in relation to practitioner roles?
- Might there be changes in settings, such as moving a service from a hospital to a community setting, or vice versa; or other changes in the care process e.g. moving to 'one stop clinics' for services which have traditionally been provided separately?
- Has the proposed change been demonstrated to work in other areas? Identify whether there are examples of working models elsewhere, which would help to inform discussions.

7. Financial implications

- Consider in broad terms the level of investment, or savings, associated with the proposed changes.
- Take account of the implications for the NHS Board(s) involved and for other agencies e.g. local authorities.

8. Related changes in recent years

- Take account of the cumulative effect of the proposed changes, when considered alongside other changes that have taken place over recent years.

9. Consequences for other services

- Consider the effect the proposals could have on decisions about the development or location of other services.
- Identify whether the proposals will impact on other NHS Boards.

INDEPENDENT SCRUTINY

Some proposals for major service change may require to be the subject of independent scrutiny. The decision on whether independent scrutiny will apply will rest with Scottish Ministers. In making such decisions, the benefits of independent scrutiny will require to be carefully weighed against the costs, on a case-by-case basis. Where a proposed service change has been identified as major, NHS Boards should therefore seek advice on whether independent scrutiny will apply.

FEEDBACK AND REVIEW

The Scottish Health Council would welcome feedback from people who have used this guidance in order that we can assess whether it has been helpful in identifying major service changes. We intend to review this guidance one year after issue on the basis of feedback received to decide whether any changes are necessary. Please send your views to:

Sandra McDougall
Head of Policy
Scottish Health Council
Delta House
50 West Nile Street
Glasgow
G1 2NP

Email: sandra.mcdougall@scottishhealthcouncil.org