

Halton Borough Council

Response to the Health and Social Care Bill Listening Exercise.

Halton Borough Council welcomes the Health and Social Care Bill listening exercise and the opportunity to be able to comment on the proposals set out within it.

We welcome the new role for local government in improving health and wellbeing by the transfer of the public health function to local councils. Local authorities are well placed in being able to respond to the wider determinants of health as demonstrated by the Marmot Review and are well placed in being able to understand the wider needs of the local population. The cross-cutting agenda of local Council's will be able to deliver better outcomes within the community and we believe there are some potential efficiencies to be made by integrating services. In addition, we believe we can provide more effective services in conjunction with Public Health services.

We are also supportive of the proposal to establish statutory Health and Wellbeing Boards aimed at improving integration and partnership working across the NHS, Social Care and Public Health. The implementation of Health and Wellbeing Boards should also strengthen and enhance relationships with GP colleagues who as primary care providers have a crucial knowledge of local communities and a sound understanding of cultures and behaviours that are essential to being able to address health inequalities at a local level.

The Health and Wellbeing Board must have sufficient powers to deliver on its responsibility to coordinate health and wellbeing commissioning with power to sign off the (JSNA based) commissioning plans of the GP Consortia and councils for investment in health, care and wellbeing outcomes.

Choice and competition

How can these be used to improve patient care and how when and where should they be extended?

More patient choice around elective and non-urgent treatments could drive up quality. There is however a danger that competition could cause a more fragmented continuum of care rather than providers working together/ collaboratively to develop holistic services.

The location of health facilities, transport and parking are a critical consideration and are regularly raised within community and patient forums within Halton. If we are to really make a difference to health inequalities these need to be examined alongside clinical considerations otherwise those who are often most in need of services are unable to access them.

There is concern that use of private companies will mean they compete to provide the profitable, cost effective health care at the cost of long-term limiting illnesses.

Patient and public involvement and accountability

How can the NHS be properly held accountable to the public and how can public and patient involvement be built into the heart of the new arrangements?

In terms of the proposed composition of GP Commissioning Consortia it may be useful to consider broadening the membership of these boards to include local authority members, public health and social care. This would provide a more rounded and joined up approach to commissioning and would ensure that expertise from a variety of sources is used to inform commissioning activity and decisions.

We wish to express our overall support for the establishment of Health Watch, however we have some minor concerns in terms of whether it is appropriate to set up the proposed new local "Healthwatch" organisations so soon after the institution of LinKs.

Guidance also states that HealthWatch would have a place on Health and Wellbeing Boards and have a role in scrutiny, which would present a conflict of interests.

The name "Healthwatch" may also be considered as misleading as it is also intended to cover social care.

In terms of accountability the issue has also been raised locally as to whether the Health and Wellbeing Board and GPCC meetings would be held in public. This has not been clarified within the existing legislation.

Clinical advice and leadership

How to ensure that advice and leadership from across the range of healthcare professions is at the heart of the new system in order to drive higher quality and more integrated care.

There needs to be an understanding that the professions which impact on health are much wider than those who provide clinical treatment especially when considering addressing the wider determinants of health. There is therefore a need to ensure that the broader role of local government professionals is taken into consideration. Some of this work is already happening on the ground but the value of this contribution within the new system needs to be highlighted and communicated at all levels of the Healthcare system.

In terms of GP Commissioning Consortia whilst we understand that GPs would make up the majority of members, it would also be beneficial to widen the membership in order to reflect the range of other (clinical and non-clinical) considerations which impact on effective commissioning.

Public Health England

As currently envisioned, the functions and staff of the Health Protection Agency and the Public Health Observatories will be located within the Department of Health as Public Health England.

It is considered that this may give rise to three issues of conflict:

- the health protection function would not be an independent entity and its advice might be questioned;
- there would be problems with the continued ability to sell services and the capability, capacity and resources for health protection at local level might migrate to the national function,
- with lack of influence from the local level on national policy and poor local implementation from the national function.

The lack of independence and commercial aspects would also apply to the public health intelligence functions of the current PH Observatories. It is unclear how the health improvement and healthcare functions of public health form any part of this 'integrated public health service' and this needs to be resolved.

Education and training

How can new arrangements best support improvements to the NHS and the future needs of patients?

A Commissioning event was recently held in Halton attended by GP Consortia members, PCT and Council staff. The main outcome was that a significant amount of work needed to be undertaken on understanding the current commissioning structures, examining their effectiveness and reviewing potential new approaches. Other discussions with GP colleagues, as part of the development of Health and Wellbeing Boards, revealed that they felt it was important for them to fully understand the role of partner organisations, current roles and responsibilities and how this can help them in carrying out their new responsibilities.

The recognition of the amount of work involved in understanding these new ways of working needs to be supported by integrated education and training strategies.