

PE1591/B

Cabinet Secretary for Health, Wellbeing and Sport
Shona Robison MSP



T: 0300 244 4000
E: scottish.ministers@scotland.gsi.gov.uk

Mr Michael McMahon MSP
Covener
Public Petitions Committee
Room T3.40
The Scottish Parliament
Edinburgh
EH99 1SP

14 January 2016

Dear Michael

CONSIDERATION OF PETITION PE1591 (Major redesign of healthcare services in Skye, Lochalsh and South West Ross)

Thank you for your letter of 16 December 2015 in respect of the above petition which ‘calls on the Scottish Parliament to urge the Scottish Government to reverse its approval of the major service change to healthcare services in Skye, Lochalsh and South West Ross.’

Please be assured that I have noted the exchanges when the petitioners appeared before the Committee on 15 December 2015.

In February 2010 the Scottish Government issued guidance entitled *Informing, Engaging and Consulting People in Developing Health and Community Care Services*¹. This guidance was issued to assist NHS Boards with their engagement with patients, the public and other stakeholders on the delivery of local healthcare services. The principles of the guidance are to be applied, proportionally, to any service change proposed by a Board, including changes considered to be major. The guidance sets out the legislative and policy frameworks for involving the public in the delivery of services; provides a step-by-step guide through the process of informing, engaging and consulting the public in service change proposals; explains the decision making process with regard to major service change and the potential for independent scrutiny; and clarifies the role of the Scottish Health Council. To assist the Committee in understanding the NHS service change process as set out in the guidance, I have also separately enclosed a one-page flowchart.

I note that the Committee has written to NHS Highland and the Scottish Health Council to invite their comments on the petition. The remainder of this response will focus on the role of Scottish Ministers in considering major service change proposals in the NHS and, specifically, the set of proposals from NHS Highland in relation to Skye, Lochalsh and South West Ross that I approved in February 2015.

¹ CEL 4 (2010) – available at www.sehd.scot.nhs.uk/mels/CEL2010_04.pdf

The key purpose of the proposals from NHS Highland were to modernise and safeguard local healthcare services; to ensure medical (especially out of hours) cover would be sustainable and to replace and/or update old, out of date infrastructure. As in all cases of major service change, I carefully considered the evidence submitted by NHS Highland in good faith. In doing so, I had to be convinced that the plans were in the best interests of patients; that key local services would be safeguarded and improved; that the Board had credible and viable plans for the provision of the new hospital (the 'Hub') in Broadford; the redeveloped 'Spoke' facility in Portree; and that the proposals were consistent with national policies, frameworks and guidance. In addition to the proposed developments to the facilities in Portree and Broadford to bring local patient care up to modern standards, it is important to note that the Board's re-design programme will see a necessary expansion of care at home, community services, the further integration of health and social care, and some additional provision of palliative and respite care.

In approving NHS Highland's proposals in February 2015, I put on record the concerns raised by some local people about both the preferred location of the Hub and the service specification of the Spoke in the Board's preferred service model. It is understandable that local communities will favour the maximum provision of services as close to their homes as possible. I also recognised some concern that the Board's model will mean the concentration of inpatient beds at the Hub site, though the Board presented a compelling clinical case that this will allow a safer and more sustainable model of care to be provided. In terms of overall inpatient cover on Skye, NHS Highland were clear that the plans for inpatient bed numbers at the new build in Broadford (28-32) will be similar to the two current sites (32).

In approving the proposals, I noted that there are no plans to change the arrangements for out-of-hours and emergency cover in Portree. I also noted that the proposed model of service was backed by 86% of the 2,273 people who responded to the consultation survey; and that 2:1 responded in favour of Broadford as the location for a new Hub; as well as being the favoured location of local staff and planning partners. The Board's engagement process and proposals were also fully supported by the local constituency MSP. Nonetheless, NHS Highland assured me that the provision of community services would be maximised locally as the service redesign is taken forward, and that all local communities and their representatives would continue to be meaningfully engaged in this important work.

I was also aware that the public consultation process highlighted some general concerns around transport so was pleased to note the NHS Highland assurances that a working group had been established to consider this which included all the relevant stakeholders; that this is chaired by one of the local Councillors; that, going forward a range of potential solutions would be considered; and that the Board is committed to making sure that local communities are not disadvantaged by any of the planned changes. Indeed, in approving the proposals, I had the Board's assurance that they will plan for the new arrangements to be fully tested and up and running before any changes to the current service provision are made.

The Committee asked about independent scrutiny. As can be seen by the national guidance already referred to in this response, the aim of independent scrutiny in certain cases of major service change is to provide assurances that all the factors relevant to the proposals have been explored thoroughly and fully taken into account. Scottish Ministers are responsible for deciding which proposed service changes will be subject to this process and, in making such decisions, Ministers carefully consider the benefits on a case by case basis. As the responses the Committee will receive from NHS Highland and the Scottish Health Council will no doubt attest, the future configuration of healthcare services on Skye had already been

the subject of many years of evidence gathering and discussion. Whilst it was clear that there would always be disagreement about where to situate the new hospital Hub, there was no reason to doubt the quantity or quality of the evidence presented by the Board and – in the absence of any new information presented – I remain content that independent scrutiny would not significantly contribute to the local consideration of options.

To summarise, I carefully considered all the available information and representations before approving NHS Highland's proposals. The Board made a compelling case for change which was supported by the majority of local stakeholders including clinical staff, planning partners, local people and their representatives. I was content that the proposals were consistent with national policy and will provide modern, fit-for-purpose services for the benefit of local people in Skye, Lochalsh and South West Ross. Indeed, I was convinced that the proposed changes will bring considerable improvements to local health and healthcare for many decades to come. Nonetheless, in approving the Board's proposals I made it clear that further work was necessary to address the concerns raised during the consultation, such as those expressed around access and transport, and that this had to be undertaken with the continued full engagement of local stakeholders. I have received these assurances from NHS Highland and this will underpin the development of the Board's formal business case for taking these proposals forward.

I was also pleased to note that the view of the Scottish Health Council, as the independent arbiters of how consistent Health Boards' activity is with national guidance on effective engagement and consultation, that NHS Highland conducted the process in a meaningful and inclusive way, providing local people with numerous and reasonable opportunities to express their views².

As I have said, it is understandable that local people will favour the maximum provision of services as close to their homes as possible. NHS Highland would have been faced with similar opposition from the communities around Broadford, the South of Skye and the mainland had the preferred option been to build the new hospital in Portree. As such, and for the reasons noted above, I think it is now important to move forward and ensure the plans put forward by NHS Highland provide the best possible services for the people of Skye – and NHS Highland have assured me that they will continue to take this forward with the full involvement of local stakeholders.

I hope the Committee finds this response helpful.

SHONA ROBISON

² Scottish Health Council October 2014 report available via:
www.scottishhealthcouncil.org/publications/major_service_change_reports.aspx

Overview of the NHS service change process in Scotland

