P/NHS Tayside
Children and Young People (Information Sharing) (Scotland) Bill

Consultation

1. Did you take part in any consultation exercise preceding the Bill and, if so, did you comment on the financial assumptions made?

Yes, NHS Tayside representatives have participated in the CEL 29 meetings and attended the consultation events. There was very brief reference and discussion to the financial position made at these events.

2. If applicable, do you believe your comments on the financial assumptions have been accurately reflected in the FM?

Not applicable

3. Did you have sufficient time to contribute to the consultation exercise?

Yes, however further consultation will be needed to support and align the Bill in response to any potential impact of the new Data Protection legislation due in 2018.

Costs

4. If the Bill has any financial implications for your organisation, do you believe that they have been accurately reflected in the FM? If not, please provide details

No. It does not fully reflect the additional activities associated with the Named Person functions and the wider workforce Getting it Right for Every Child (GIRFEC) information sharing role, including:

- Changes in the Named Person (NP) workforce profile; a considerable proportion of newly qualified Health Visitors require both continuing professional development (CPD) and preceptorship and additional supervision to support them in their NP role in relation to Part 4 and part 5 information sharing.
- No consideration has been given financial implications to train or provide backfill for staff who deliver supervision for NP.
- Administrative costs to support the NP in their role and the delivery of a NP service to support timely information sharing between partner agencies has not been factored within the FM. This also includes governance via audits, revising guidance, responding to FOISA, staff communications and reporting on the provision of the NP service.
- No reflection of costs relating to the impact of information sharing provisions on training and raising awareness for the wider staff group in health boards regarding their role in information sharing with the NP relating to any child wellbeing concerns they have identified. These staff groups include Adult Mental Health, Substance Misuse, CAMHS, Paediatric staff, GP’s, Dental, Allied Health Professionals. Learning Disability, Accident and Emergency staff.
5. Do you consider that the estimated costs and savings set out in the FM are reasonable and accurate?

No, the wider costs as detailed above are not reflected

6. If applicable, are you content that your organisation can meet any financial costs that it might incur as a result of the Bill? If not, how do you think these costs should be met?

No. Following a review of the call for evidence, there should be a revised FM that acknowledges the wider costs and implications that takes account of the ongoing costs associated with the Bill.

7. Does the FM accurately reflect the margins of uncertainty associated with the Bill's estimated costs and with the timescales over which they would be expected to arise?

No, not fully as per Q4

Wider issues

8. Do you believe that the FM reasonably captures any costs associated with the Bill? If not, which other costs might be incurred and by whom?

No as per Q4

9. Do you believe that there may be future costs associated with the Bill, for example through subordinate legislation? If so, is it possible to quantify these costs?

Unable to quantify as there is likely to be additional costs associated with ensuring appropriate governance is in place around information sharing both internal, and external to health, for example revision of guidance, protocols, reporting, communication and training.