

PE1591/N

Scottish Government Letter of 31 October 2016

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

Thank you for your further letter of 30 September 2016 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.' The Committee have asked about setting up an Independent Scrutiny Panel.

Please be assured that whilst I have noted the petitioner's submission of 17 September, there is very little I can add to my previous responses to the Committee of 14 January 2016 and 18 March 2016. I note that the Public Petitions Committee meeting on 29 September was the first time the Session 5 Committee considered the petition and it might be helpful if I reiterate some points made in my earlier responses.

As in any case of major service change in the NHS in Scotland, and in the line with the relevant national guidance, I carefully considered all the available information and representations in this case before approving NHS Highland's proposals. I also noted 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 views.

As I have said previously, NHS Highland 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, and that this work had to be undertaken with the continued full engagement of local stakeholders. I have received such assurances from NHS Highland and this will underpin the development of the Board's formal business case for taking the proposals forward.

It is, of course, understandable that local people will favour the maximum provision of services as close to their homes as possible. NHS Highland had to choose a location for the Hub based on the best available evidence and responses to the formal consultation process. We need to remember that the Health Board's 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. As such, I have little doubt that the Health Board would have been faced with similar and significant 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.

The Committee asked about independent scrutiny. 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. 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 I remain content that independent scrutiny would not significantly contribute to the local consideration of options.

I note that the petitioner's letter of 17 September followed the Board's publication of its Initial Agreement (IA) which was submitted to the Scottish Government's NHS Capital Investment Group (CIG) for consideration. You may be interested to know that having reviewed the Board's IA, CIG felt that the strategic case was well made and that the option appraisal and related analysis was very good. That said, CIG was of the opinion that there is some work still to do, including developing the service model, before the IA can be agreed. The Board's IA will be re-submitted to CIG for reconsideration when the Board has provided the further detail requested.

As I have previously made clear, the decision to approve the Health Board's proposals has been made. It is now important to move forward and ensure the plans put forward by NHS Highland provide the best possible services for all the people of Skye, Lochalsh and South West Ross – 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 find this reply helpful.

SHONA ROBISON

Cabinet Secretary for Health and Sport