Thank you for your letter dated 3rd February 2017 concerning petition PE1628 (Consultation on service delivery for the elderly or vulnerable). The Scottish Health Council notes the discussion that took place at the Public Petitions Committee meeting on 2nd February, in particular the points relating to the guidance and requirements for public consultation.

The Committee has asked the Scottish Health Council to comment on;

- whether it feels that it would be beneficial for the Scottish Government to provide greater clarity on when a decision may be deemed to be a major or minor service change, and;
- what criteria could be specified to provide greater clarity in guidance to Integration authorities in this regard

Genuine and meaningful engagement with people and communities is vital in maintaining public confidence, and the Scottish Health Council believes that it also results in better planning and decision-making.

Guidance produced by the Scottish Government – *Informing, engaging and consulting people in developing health and community care services CEL4 (2010)* – sets out the process that NHS Boards must follow to involve people and communities in developing service change proposals. It also sets out the role of the Scottish Health Council, which is to provide advice and support to NHS Boards in implementing the guidance, and in the case of service changes identified as ‘major’, to quality assure the process and produce a report to inform decision-making.

Supplementary *Guidance on Identifying Major Health Service Changes (2010)* produced by the Scottish Health Council sets out a framework, including a range of criteria to be considered, which seeks to assist the determination of which service changes should be considered ‘major’ and therefore ultimately require Cabinet Secretary approval. NHS Boards should seek advice from the Scottish Government about whether a particular service change is considered to be major.

The guidance referred to above was published prior to the integration of health and social care services. It therefore does not take account of the current context for decision-making in relation to integrated services, or the ambitions for services which are outlined in the Scottish Government’s *Health and Social Care Delivery Plan (Dec. 2016)*, which refers, for example, to regional and national centres of expertise. There is therefore a risk of confusion and ambiguity given the current guidance does not reflect a very different landscape of decision making, accountability and more integrated models of care.

The Scottish Health Council firmly believes that the CEL 4 (2010) guidance and the supplementary *Guidance on Identifying Major Health Service Changes* should be reviewed and revised with the current context in mind.

The Scottish Health Council is part of Healthcare Improvement Scotland