

5 October 2010

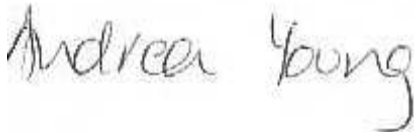
SOUTH CENTRAL SHA RESPONSE TO WHITE PAPER

Please find below the SHA's overarching comments on the White Paper. We will be responding in more detail to proposals contained within each of the themes set out in the White Paper by October 11th.

The SHA broadly supports the direction of travel as proposed in the White Paper, but would make the following comments:

- Arrangements for local authorities to take on responsibility for public health need to take account of the situation in Berkshire where there are six unitary councils. It seems likely that the DPH will need to be shared between more than one unitary council, although we would recommend some local autonomy in developing a workable solution.
- There needs to be clarity as to how the health and well being boards (reporting through the local authority structure) and GP commissioning (overseen by a National Commissioning Board) will be interlinked, as the two cannot work in isolation.
- It is important to recognise the good work done by many PCTs in this region in developing robust Priorities Committees. These have shown the value of involving clinicians and public health specialists in a process that meets the NHS Constitution requirement to base treatment decision on rational review of the evidence.
- In relation to funding for GP consortia, we feel it would be helpful if the Department of Health could send a clear message that this will not be based on 2010/11 activity levels. There is a widely held belief that this is the case, based on people's recollection of the introduction of GP fund holding.
- In relation to the proposals for all Trusts to become autonomous providers, we have concerns about the financial viability of some of our Trusts should they become FTs, and clarity is needed as to who will be responsible for failing FTs.
- We welcome the development of HealthWatch as an organisation which can help the health service involve and engage patients and the public in their plans. However, we have concerns about the proposal that HealthWatch will evolve from LINKs. LINKs in this region are not well developed and perform different functions with varying degrees of success. We would want HealthWatch to be far more representative of our population, to have a clearly defined role and a much higher profile than LINKs.

- On the proposals for the Outcomes Framework there is mention that PROMs will be used as a main outcome indicator. Our view is that PROMs is currently insufficiently developed to be used for this task.
- We would support the proposals for maternity services to be commissioned at a national level.

A handwritten signature in black ink that reads "Andrea Young". The signature is written in a cursive, slightly slanted style.

Andrea Young
Chief Executive (on behalf of South Central SHA Executive team)