



# THE CASE FOR "PATIENTS' COUNCILS"

The Association of CHCs, together with many other stakeholders, believes that reform of CHCs would be the best way of achieving desired improvements to patient and public involvement. However, if this is not possible for political reasons, there is an overpowering case for the introduction of Patients' Councils to strengthen the new system. Patients' Councils would be community-led bodies at the local level, with at least one for each local authority overview and scrutiny area. They would be made up of a federation of Patients' Forums in the area, with additional community representation and staff deployed by the Commission for Patient and Public Involvement in Health. The key benefits are summarised below:

#### • INTEGRATION & SIMPLIFICATION:

The current proposals are overly bureaucratic and fragmented. Patients' Councils provide a means of integrating the individual Patients' Forums (which focus on specific NHS Trusts), the staff of the 'local networks' of the Commission for Patient and Public Involvement in Health, and the provision of Independent Complaints Advocacy.

#### LESS BUREAUCRACY:

By creating Patients' Councils to integrate the different elements of the current proposals, the need for three other bodies is removed. For example, 'local networks' of the Commission for Patient & Public Involvement in Health, the proposed "lay reference panels" and local providers of "Independent Complaints Advocacy Services" (ICAS) are all brought together within one Patients' Council. If the ICAS service were to be "commissioned" as envisaged in the current proposals, this would tie the Commission staff up in the bureaucratic exercise of tendering, contracting, monitoring and evaluation of different providers all over the country.

### A ONE STOP SHOP:

The NHS Complaints process and the structures of the local NHS are complex and confusing to the public. It is essential that the public is able to access information about the local NHS, advice on their rights and support with complaints quickly and easily. It also needs to be clear how people can get involved in local debates and consultations. Patients' Councils would act as a simple, accessible one-stop-shop that a local community could relate to. This would be in addition to, not instead of, reaching out to individuals in the community.

#### • LOCAL CREDIBILITY AND ACCOUNTABILITY:

The current proposals for 'local networks' of the Commission for Patient and Public Improvement in Health are for there to be staff-only bodies with no local lines of accountability. Volunteer-run 'Patients' Forums' would have to compete for professional support from the 'local network' staff, who would be deployed to

strategic Health Authority areas. 'Local Network' staff would lack credibility with Patients' Forums and local communities if they are this remote, and are not locally accountable. Their task of facilitating and co-ordinating Patients' Forums would be far more difficult if staff are 'parachuted in' from outside. Patients' Councils bring together the roles of staff and volunteers and create local accountability.

# A POWERFUL, INDEPENDENT VOICE FOR LOCAL PEOPLE:

With no staff of their own, and based at NHS Trusts, Patients' Forums on their own are likely to be over-reliant on support from their Trust and biased towards the needs of their own Trust. Patients' Councils guarantee Patients' Forums staff support of their own and the ability to take an objective view, taking on board issues beyond the individual Trusts' services. Patients' Councils would be a federation of local Patients' Forums, with membership drawn from the wider community as well. They would be well positioned to take up issues of concern to the local community and ensure that they are addressed, but they do not usurp the role of Patients' Forums working for improvements in the individual Trusts which they cover.

## OVERVIEW OF HEALTH ISSUES AND SERVICES:

Individual Patients' Forums will only focus on their own individual Trusts' services. By coming together to form Patients' Councils, they would have more of an overview of local service issues and the 'patient journey' rather than being tied to an institution. Under the current proposals, there would be no organisation looking at wider issues affecting health and health inequalities form the local community perspective. Patients' Councils would provide the ideal focus for this. An integrated system will be in a better position to ensure that broad trends are picked up across a local health economy.

### FLEXIBILITY:

Patients' Councils would be framed around a local authority's Overview and Scrutiny Committee area, but with the flexibility to have more than one Patients' Council per OSC where it is felt appropriate. Patients' Councils would be able to network across Strategic Health Authority areas on issues of wider geographic concern, in the same way as OSCs will need to.

## SUPPORT AND BACK UP FOR LOCAL AUTHORITIES:

Many local authorities have told us they would welcome the creation of Patients' Councils. Without them there would be no direct relationship between the Patient and Public Involvement mechanisms and Overview and Scrutiny Committees (OSCs). Patients' Councils would be a useful resource and partner to support local authority scrutiny functions and make it easier for OSCs to relate to the various Patients' Forums and the local community. Some local authorities have indicated that they will not undertake scrutiny of health at all (as this is a power, not a duty, and no resources are identified for it). Patients' Councils would provide a guarantee of some degree of scrutiny in every part of England.

# PEOPLE VALUE LOCAL WATCHDOGS:

The loss of local community-led health watchdogs in the form of CHCs without anything similar to replace them is by far the most unpopular and controversial aspect of the Bill. It would leave England as the only part of the UK without a CHC or similar body. In Wales, where genuine consultation was allowed, there was a

resounding call for the retention of CHCs. All available evidence suggests reform of CHCs would be just as popular in England. Support for the concept of CHCs or Patients' Councils as an alternative spans all political parties, many patients' and voluntary groups, local government and the health professions. (See "What People Say About CHCs/Patients' Councils")<sup>ii</sup>. Giving people Patients' Councils would unlock the current controversy and lead to greater consensus and public confidence.

### COMPATIBLE WITH THE GOVERNMENT'S OVERALL PLANS:

Last year, the Government itself agreed an earlier version of Patients' Councils proposed by David Hinchliffe MP. The present model has been revised and updated to make it compatible with the new framework set by the Government. Patients' Forums would remain the key bodies dealing with their own Trusts, and would come together as Patients 'Councils to deal with wider issues. None of the creative new ways of working envisaged for the Commission for Patient and Public in Health would be lost by creating Patients' Councils. They would be strengthened. In their "Response to the Listening Exercise" on its own proposals, the Department of Health said: "Patients' Councils provided a sensible option for facilitating the coordination of patient and public involvement mechanisms", but there is nothing resembling Patients' Councils in their current proposals.

### A NEW WAY OF WORKING:

Patients' Councils do not recreate CHCs. Patients' Councils embrace the Government's stated vision of a new approach to Patient and Public Involvement whilst building on the most valued aspects of CHCs. The emphasis would be on involving and empowering individuals and groups who traditionally have had less of a say, as well as acting as a credible focal point, grounded in the local community. Patients' Councils would embrace creative, new ways of working building on the best practice developed by CHCs. The Department of Health has said that it wants to build upon the best of CHCs, and there are now a number of successful examples of CHCs and local health economies piloting the new system with the equivalent of a Patients' Council at the centre. Some of these pilots are actually funded by the Department of Health.

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ACHCEW's comments on the patient and public involvement in health care proposals, including those that will not require legislation can be found at <a href="https://www.achcew.org.uk">www.achcew.org.uk</a>, or can be obtained from the Association.

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"ACHCEW, "What people say about CHCs/Patients' Councils"

<sup>&</sup>lt;sup>i</sup> Walsh, P. Health Service Journal, "Another Brick in the Wall" Health Service Journal, 1<sup>st</sup> November, 2001

Department of Health, "Involving Patients and Public in Healthcare: Response to the Listening Exercise"