

Consultation Response

The Scottish Independent Hospitals Association (SIHA) response to the Scottish Government's consultation document on Integration of Adult Health and Social Care in Scotland

Introduction

The Scottish Independent Hospitals Association (SIHA) is a representative Association of all independent acute medical/surgical hospitals and mental health hospitals in Scotland. SIHA promotes the highest standards in independent healthcare and strives to influence the policy debate on the future of healthcare in Scotland.

SIHA has published its Credentials 2011 document, profiling the independent healthcare sector across Scotland. The following statistics demonstrate the size of the sector:

- The six acute independent hospitals which took part in this audit:
 - Treated more than 32,000 inpatient/day cases in the period 2010-11.
 - Managed more than 26,000 bed days in the same period.
 - Had outpatient attendance numbers of 200,349.
- The Scottish independent mental healthcare sector provided 36,500 patient bed days in 2010/11.
- Of the 36,500 bed days, more than 19,000 were NHS patient bed days.
- The sector provides 229 mental health beds.
- The independent healthcare sector in Scotland employs more than 1,200 people.

For a full list of SIHA members, please see:

<http://www.independenthealthcare.org.uk/index.php?/scotland/scotland.html>

The SIHA welcomes the opportunity to comment on the Scottish Government's proposals for the integration of adult health and social care in Scotland.

Response

SIHA notes that the Scottish government's goal for the integration of health and social care is to tackle the challenges and disconnects described in Chapter 1 (pages 11-12). SIHA support the view that resources should follow people's needs in line with the government's commitment to a person-centred approach.

SIHA welcomes the statement (on page 15) that "*The fundamental purpose of our proposals for integration is to improve people's wellbeing; we will not succeed if, in bringing health and social care together, we overlook the need to build upon the progress that has been made in bringing third and independent sector partners*

to the table when planning delivery of services. The contribution of the third and independent sectors in enabling delivery of better outcomes is also a crucial factor in our wider public service reform plans.” SIHA is pleased that the contribution of the independent sector is being formally recognised. As tabulated above, the independent sector treats many thousands of Scottish patients every year, a number of whom are NHS funded. Furthermore, many independent sector services by their nature require the seamless integration of health and social care in order to provide best care to patients. SIHA would very much like to have an input into wider public service reform plans.

SIHA also notes that the document refers to the government’s assumption that a prerequisite for achieving good health and social care outcomes is “*effective partnership working between the NHS, local authorities and independent contractors and professionals*” (page 16). SIHA is a communication channel to the independent sector workforce and many people working in the independent sector have previously worked in the NHS and/or local authorities or move on to work in the NHS and/or local authorities. The nature of practising privileges means that consultants generally have a simultaneous NHS and independent sector practice. As stated above, SIHA hospitals employ over 1,200 people in Scotland. (This figure excludes consultants.)

As there is movement of staff between the NHS and independent sector, SIHA would stress the importance of the independent sector being involved in workforce initiatives. The consultation seems to suggest that the Scottish government is thinking along the same lines – “*The role of clinicians and care professionals will be strengthened, along with engagement of the third and independent sectors, in the commissioning and planning of services*” (page 16). Having a single regulatory body (HIS) gives assurance to the commissioning Boards.

SIHA notes the new structures that are being developed to provide the framework for integration – namely Health and Social Care Partnerships. Further, that it is envisaged that they will “work in close partnership with the third and independent sectors” and that the role of the independent sector in “strategic commissioning of services for adults will be strengthened” (page 17). **SIHA would welcome more detail on how independent sector representation will be sought and structured.**

The consultation poses Question 4: “Do you agree that nationally agreed outcomes for adult health and social care should be included within all local Single Outcome Agreements?” (page 21). This is an important question for independent sector providers. The single outcome is central to the improvement cycle of the NHS, therefore our response is positive with a commitment to working in partnership.

SIHA also notes the section on Health and Social Care Quality Outcomes, specifically *Health and Care Integration Outcomes* (page 41) and are supportive of these stated outcomes.

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