

**By:** Paul Carter, Leader of the County Council.  
Roger Gough, Cabinet Member for Corporate Services  
and Performance Management.  
Katherine Kerswell, Group Managing Director.

**To:** Cabinet, 11 October 2010.

**Subject:** “**Equity and excellence: liberating the NHS**”

**Classification:** Unrestricted

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**Recommendation:**

Cabinet are asked to AGREE the commentaries appended to this report as representing the views of Kent County Council in respect of the Coalition Government’s White Paper “*Equity and excellence: liberating the NHS*” and its associated consultation reports.

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**Introduction**

1. In July 2010, the Coalition Government published for wide consultation a White Paper setting out proposals for a radical transformation of the National Health Service. The White Paper was supplemented by a set of more specific consultations on commissioning, local accountability, regulation and outcomes. Subsequently, in mid September a further consultation report regarding children’s healthcare services has been published.
2. The appendices to this report set out the proposed responses on the specific consultations, together with the response made to the main White Paper itself, which had an earlier deadline of 5 October.
3. The forthcoming Health Bill, which will be informed by this consultation, will pave the way for extensive changes to how the people of Kent will be served by health services in the future and the role of the County Council in achieving this. Although the consultation process on the White Paper formally closes on 11 October, the Coalition Government has signalled a clear intent to keep stakeholders engaged in what is an emergent policy.

**Alignment with Council priorities.**

4. The Health Bill will have impacts on virtually all of the council’s services and on how the council works with partners in the NHS. With the abolition of the Primary Care Trusts in Kent by 2013, the council will need to forge new relationships with the GP consortia that will be the new primary care bodies at the heart of the reforms – and at the heart

of a much more localised commissioning of healthcare services from 2013.

5. The Health Bill will also create the statutory framework for a new national Public Health Service – specifically, the transfer from the NHS to local government of the health improvement functions of the current NHS, working in collaboration a national Public Health Service dealing with health protection and tackling health inequalities. These changes, and the council's role in their successful delivery, are fully consistent with the current Medium Term Plan and Vision for Kent. These proposals are informing the dialogue with all partners over the refresh of partnership arrangements in Kent.

### **Financial and legal implications**

6. Until the Comprehensive Spending Review is published and the Health Bill has been published and completed its passage through Parliament, the financial implications can not be readily quantified, although it is anticipated they will be significant.
7. The White Paper makes proposals which will bear directly on the council's statutory functions and its governance and constitutional arrangements as the Bill is enacted, At this stage, until the Bill is published, it has not been thought necessary to seek formal legal advice.

### **The NHS White Paper – “no decision about me, without me”**

8. The White Paper's proposals are far-reaching. If enacted as outlined, there will be fundamental changes to how healthcare is commissioned, organised and performance-managed. The abolition of Primary Care Trusts and Strategic Health Authorities is to be followed by their replacement by GP consortia, working in much closer collaboration with local government, and an NHS Commissioning Board at arm's length from the Secretary of State, together with reconstituted arrangements to strengthen local patient and public 'voice'.
9. By these means, it is intended to put healthcare commissioning strategy and decision-making much closer to those making the everyday clinical decisions – and much closer to those affected by those decisions. The enhancement of the local authority role in, for instance, the functions of local Health & Well-being Boards, marks a significant reintroduction of local democratic accountability in an NHS that has been increasingly seen as remote and unaccountable.
10. Such changes are not without risk and in anticipation of the Health Bill, arrangements are already in place for Members of Cabinet to be fully engaged with GP and NHS colleagues in co-designing the future arrangements for Kent, strongly supported by the Group Managing Director, the Managing Director for Adult Social Care and the jointly-appointed Director of Public Health, to ensure there is a work programme in place to deliver these transformational changes.

## **Consultation and communication**

11. The County Council is a formal respondent to the Coalition Government's White Paper proposals. The Department of Health, primarily through the agency of the Strategic Health Authorities, has organised and led a series of engagement events, in which Cabinet Members and senior officers have actively participated. The Group Managing Director, the Managing Director for Adult Social Care and the Director of Public Health, in particular, have established open lines of communication with NHS colleagues on a day-to-day basis. The consultation period from mid-July has been accompanied by a steady flow of supplementary correspondence from the Department of Health, as well as briefings and other materials from the many stakeholders.
12. The White Paper is intentionally light on many aspects of the detail as the clear intent is to focus on outcomes and leave the detail of local interpretation of 'what works best' to local determination as the changes are rolled out. Nevertheless, many officers across the County Council have been involved in helping draw together the council's responses and this has in turn depended on extensive internal consultation with Members and others. This consultation stage is just the first part of what will be an extended period of engagement – the Programme Board will ensure that an effective communications strategy will support this.
13. Members of Cabinet have already held two constructive meetings with PCT Chairmen, Chief Executives and Medical Directors and at the time of publication, plans were being finalised for a further meeting with GP leaders in Kent in November.

## **Managing the transition**

14. The County Council will wish to work collaboratively with NHS colleagues and establish robust joint programme management arrangements to ensure continuity of 'steady-state' business during a period of organisational flux for the NHS and that changes already planned and in the pipeline are reviewed to assess how those plans are consistent with the new direction and arrangements set out in the White Paper. The programme will seek to secure opportunities for closer service integration and improved efficiency.
15. The Council's Health Overview & Scrutiny Committee will have a key role to play during this interim period, even though scrutiny arrangements themselves will need to adapt to a different set of accountability arrangements, subject to the legislation.
16. These are issues that will be of importance to all Members of the County Council. As Leader, I have asked that further briefings are arranged so that all Members have the opportunity to contribute to how these developments progress.

## Conclusions

17. The White Paper proposals set out the Coalition Government's vision of healthcare more closely designed around local need, with services and care pathways designed by those who best know their patients and their localities. Together with the prospect of a White Paper on Public Health in the near future that will enhance the role of local government in improving the health of residents and communities, and a Localism Bill which is intended to empower local communities and councils, the County Council is well placed to play a strategically significant role in shaping future arrangements and also to support the successful launch of GP consortia, if the right 'paving' and enabling legislation is passed.

## Recommendations

Cabinet are asked to AGREE the commentaries appended to the report as the views of Kent County Council in respect of the Coalition Government's White Paper *"Equity and excellence: liberating the NHS"*.

Cabinet are asked to AGREE to publishing the consultation responses on [kent.gov.uk](http://kent.gov.uk) and drawing them to the attention of GPs and other stakeholders.

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## Background Documents

*"Equity and excellence: liberating the NHS"*;

*"Liberating the NHS: commissioning for patients"*;

*"Liberating the NHS: local democratic legitimacy in health"*;

*"Liberating the NHS: regulating healthcare providers"*

*"Liberating the NHS: transparency in outcomes – a framework for the NHS"*;

*"Liberating the NHS: report of the arm's-length bodies review"*;

- all these consultation documents were published in July 2010.

*"Achieving equity and excellence for children"* – this report, described as an 'engagement document', was published in September 2010.