

Halton LINK

(Local Involvement Network)

‘The NHS Constitution’

A consultation on new patient rights.

Response from the Halton LINK

The Halton LINK has members from voluntary and community groups and individuals living or working in Halton, who have an interest in the health & social care field locally. The Halton LINK held a small consultation workshop where the above document was discussed.

Introduction

Halton LINK members welcomed the consultation document and the fact that the Government appears to be committed to improving future healthcare services for people. These proposals offer an accountable way of achieving excellent services for users of NHS services.

The following questions and their bullet point comments reflect the members’ individual and collective opinions.

Qu. ‘Should a right in respect of waiting times be established and included in a revised NHS Constitution? If so, should the right include:

- *The current standard for treatment within 18 weeks?*
- *The current standard for urgent referrals of suspected cancer to be seen by a specialist within two weeks?*

Ans.

- Fully agree in principle but have heard feedback from clinicians saying other services have suffered because of meeting these targets – have clinicians’ views been taken on board?
- Barriers: Staffing issues:
 - Staffing levels
 - Resources
 - Using less qualified staff to carry out procedures
 - European directives affecting quality standards of training for doctors

Qu. Should GPs provide specified information to patients on their rights?

Ans.

- Agree with rights and everyone should be informed of what is available to them at the earliest opportunity – This should be highlighted in Handbook. (For the 18 week process).

Qu. Should GPs provide specified information to patients on their rights around a two week referral?

Ans.

- Should be left to GP's discretion (patient may be vulnerable – one size doesn't fit all ... might cause unnecessary distress).

Qu. Do you agree that a right to an NHS Health Check every 5 years for those aged 40-74 should be established, with effect from April 2012, and be included in a revised NHS Constitution?

Ans.

- Yes .. in favour of the health checks. Health practitioners should include assessments in their workload and not be paid extra for carrying out their jobs.
- Why the age bands? – presume research dictates these ages...but can reasons be explained so that people understand?
- After 74 years are you entitled to annual health check? If not – there should be an annual health check – and could this be a 'right'?

Qu. Other opportunities for future patient entitlements. Do you agree we should explore potential future rights for patients and the public in the areas set out in Chapter 3?

- *Evening/weekend GP access* – fully agree!
- *Treatment by NHS dentist* - agree
- *Personal budget* - agree in principle - equal to all
- *Choosing to die at home* - needs more thought – carers could be put under pressure; might have considerable staffing costs; needs resourcing
- *Tests within 1 week* – agree in principle

Qu. Do you agree the role of the Constitution champion should be determined locally by PCTs?

Ans.

- No, don't agree PCT should determine the champion – should be independent of any NHS provider – but champion should be decided locally
- Should be LINK – independent body already in place with an accountable structure for gaining people's views and keeping abreast of policies/procedures within the NHS.
- Staff champion up to PCT.

Qu. Do you think there are any particularly important aspects to the role?

Ans.

- Champion should have all information necessary from providers to make sure constitution is compliant.
- Constitution Champion – a lot of responsibility for one person.... A body of people such as the LINK could share the responsibility...so if someone off for a long time, the work would carry on. (This is always an issue when responsibility lies with one person... and adds considerably to budgets if replacements have to be found.) NHS & LAs spend a fortune on 'bank staff' or 'consultants (not medical ones).

- Important aspects of role – what are the powers/authority to make role effective?
(Ineffective if no powers)

Conclusion

Halton LINK Board members welcomed the chance to ‘have their say’ on these proposals and they hope that the outcome will be that services will be delivered in a timely and equitable way across the country. These proposals will offer guaranteed levels of care to all and will hopefully help to reduce health inequalities.

We hope that the above comments and views will be useful to you.

Halton LINK.
February 2010.