

AG/630

2 September 2003

Kathleen Bessos  
Directorate of Services Policy and Planning  
Scottish Executive  
St Andrews House  
Regent Road  
EDINBURGH  
EH1 3DG

Dear Kathleen

### **COMMUNITY HEALTH PARTNERSHIPS**

I write on behalf of Community Care Providers Scotland in response to the invitation to comment on the current consultation paper relating to the guidance in respect of Community Health Partnerships.

Can I first of all say that I very much appreciate your arranging the briefing session on CHPs at our annual conference in November. Second, can I introduce you more formally to CCPS and indicate our keen interest in this aspect of NHS policy.

CCPS is the national voice of service providers in the voluntary sector. Our membership comprises virtually all the major providers of social care services for adults in Scotland: I attach a copy of our annual review which will give you an idea of the scope of our membership and the activities we undertake.

We are very interested in CHPs insofar as they 'seek to bridge the divide that has existed for too long between...health and social care'<sup>1</sup> and that they are the 'local focus for partnership with local authorities under the Joint Future agenda'<sup>2</sup>.

CCPS has recently been invited to participate in a working group, set up by the Joint Future Implementation and Advisory Group, to examine the development and implementation of joint services. CCPS members have a considerable interest in this area; I enclose a briefing paper that we produced last year setting out our major issues and concerns.

The consultation paper.../cont.

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<sup>1</sup> Introductory letter to the consultation paper from Malcolm Chisholm MSP

<sup>2</sup> Paragraph 28 of the consultation paper

The consultation paper recognises that CHPs will not directly manage community care services (paragraph 29); however given the scope of the Joint Future agenda, we would see there being considerable potential for CHPs to play a significant role in the planning of social care services and eventually perhaps in the joint commissioning of those services from the voluntary sector.

On this basis, we are very keen indeed that any guidance on the formation and membership of CHPs should be very clear about the need to include the key voluntary sector service providers from the outset. This is all the more important given that the consultation document's list of the main services to come within the ambit of CHPs includes those areas where the majority of social care services are provided by voluntary organisations (I am thinking specifically of mental health and learning disability services, although the sector is also a major provider of drug and alcohol services too, and of course services for elderly people).

One of the difficulties that voluntary sector service providers have faced in their relationships with local authorities is that they are sometimes excluded from planning exercises and forums on the basis that their role as potential contractors for the resulting services represents a 'conflict of interest'. We would very much hope that this issue might be addressed in the guidance so that voluntary organisations are not excluded *a priori* from CHP membership on the same basis.

Overall we are very pleased to note the paper's repeated references to the voluntary sector. We would be very happy to work with the Executive, perhaps in tandem with our colleagues at Voluntary Health Scotland and the Scottish Community Care Forum, in developing its proposals in this area to ensure that this recognition of, and commitment to, the sector can be articulated in more detail in the guidance.

Yours sincerely



**ANNIE GUNNER**  
Co-ordinator

Encs