Voluntary Health Scotland (VHS) is the national intermediary for a national network of voluntary organisations working to improve health, tackle health inequalities or provide health care. We seek to maximise the impact of the voluntary sector on Scotland’s health and wellbeing. We collaborate and work with a wide range of national and local voluntary organisations, central and local government, health boards and others to realise this aim.

We support the policy intentions behind the Bill, as described in the Policy Memorandum, to provide joined up care that delivers better outcomes for patients, service users and carers. We agree that to do so there needs to be a shift towards preventative and anticipatory care through co-production and person-centred approaches. However, we feel there is scope to strengthen the Bill to reflect these priorities and the role the third sector should play.

We welcome this opportunity to brief MSPs on our members’ views on potential scope for amendments to the Public Bodies (Joint Working) (Scotland) Bill. These priorities reflect consultation with the third sector and discussions with Voluntary Health Scotland members.

**Priorities**

The focus of Voluntary Health Scotland and its member organisations has been in three key areas in relation to the Public Bodies (Joint Working) (Scotland) Bill:

* Partnership working and co-production – securing formal representation for the third sector in health and social care partnerships, planning and locality arrangements, and joint strategic commissioning.
* Ensuring a strong voice and involvement for users of services and their families.
* Ensuring the focus on personal outcomes and quality of provision is not lost within aspects of structural reorganisation.

**“*The main concern is the role the third sector will be expected to play when the integration process has started, without having had full involvement in the initial stages of the integration process. There is a lack of clarity in the third sector role, voice, and influence in this process; as evidenced by this not being defined in the main body of the bill*.” (VHS Member Organisation)**

There is strong consensus in the third sector that there should be a legislative framework which provides commitment to the involvement of the third sector, users of services and carers. These arguments include the contribution of the sector to quality, to integrated services that enable people to live well at home and for longer, to health and wellbeing outcomes including enabling people to stay connected to their communities. As Nigel Henderson, Coalition of Care and Support Providers in Scotland, highlighted to the Committee, “*the third sector is trusted to provide care and support to some of the most vulnerable people in Scotland but are not trusted or respected as equal partners in the Bill*”.

The third sector should be an integral part of plans to shape, to create and to innovate for the desired outcomes, and recognised as such in the text of the Bill.

We note in the Stage 1 Report on the Bill, that the committee accepts it is important that the third sector is seen as a key partner as the process of integration is taken forward. We welcome the Committee’s commitment to strengthening this involvement and engagement. We also welcome the Cabinet Secretary’s guarantee that that all key stakeholders­ – the public, end users, the third sector and the independent sector are involved, not just consulted, at both partnership and local levels. The commitment given in the policy memorandum to involving the third sector is insufficient to guarantee this involvement. This should be included within the text of the Bill and not only recognised in the Policy Memorandum.

We welcome the commitment in the Stage 1 report to amending the Bill to ensure that human rights principles are explicitly stated in the text of the Bill. This will provide a continued focus and commitment to personal outcomes, co-production and person centred approaches.

**Proposed amendments**

While we recognise the above commitments from the Committee and the Cabinet Secretary, we feel there is scope to strengthen the text of the Bill to reflect the stated priorities.

The Health and Social Care Alliance (The ALLIANCE) has led on drafting a number of proposed amendments to the Bill. These amendments are supported and have been agreed by national voluntary sector intermediaries, including Voluntary Health Scotland, and voluntary health organisations. We commend these amendments to you for your consideration in due course, the main focus of these are as below:

* Introduce overarching human rights based principles to the text of the Bill.
* Embed the involvement of service users and unpaid carers into integration plans.
* Ensure specific consultation of disabled people’s organisations and of organisations contributing to health and wellbeing.
* Introduce a right to independent advocacy for service users (in the same way that the Mental Health (Care and Treatment) (Scotland) Act gives advocacy rights).
* Ensure high quality local strategic commissioning through appropriate scrutiny arrangements.
* Provide a single entry point for complaints about integrated services
* Ensure implementation of the legislation is adequately monitored to avoid unintended consequences such as a medical model dominating integration.

**Contact**

We welcome the opportunity to pro-actively engage with MSPs as the Bill progresses through its Parliamentary Stages. Contact Susan Lowes, Policy and Engagement Officer [susan.lowes@vhscotland.org.uk](mailto:susan.lowes@vhscotland.org.uk)

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