Community Development Alliance Scotland is a network for the national organisations and agencies that promote good policy and practice relating to community development. Member organisations have had the opportunity to contribute to this response.

Whilst we are supportive of the principles of greater public and patient involvement in services and of enhancing democratic control, the network takes no collective position on the principal issues raised by the Consultation Paper concerning the possible election of members to Health Boards.

However we feel that it is appropriate to raise a few points about the context and the principles involved.

We note that the paper talks throughout about public involvement in 'health care' or 'health services'. But NHS Boards have a leading role, along with local authorities and others, in promoting positive health improvement in their communities. There is a need both:

- to ensure that people in the community who are concerned with actively promoting this become involved in decision making

- and for action to ensure that people and groups in communities are partners not only in decision making but in action to improve health.

In response to your questions:

6. How could the Public Partnership Forums associated with Community Health Partnerships encourage greater public engagement?
7. How could local Community Planning Partnerships best ensure improved public engagement with NHS planning?
8. What other measures could be introduced to increase effective engagement and involvement of the public with the NHS in Scotland?

We strongly support the current guidance to apply the National Standards for Community Engagement to involvement in health. We recognise that there is still some way to go in these being fully implemented. Health Boards and Community Health Partnerships need to take action to increase involvement. They also need to actively support and develop the capacity of individuals and groups in the community to become involved and to raise and research issues.
The key point that we wish to make is that, whatever the decision on direct election to Health Boards, it will not remove the need for community development work by health service organisations. In particular:

- Community groups will still need direct channels for access to both Board and CHP level.

- The system needs to be remain open and flexible to hearing the views of and involving the changing groups that exist in the community.

- Any elected representatives will themselves need support and perhaps training to assist them in supporting the involvement of the communities that they represent.

Community Development Alliance Scotland

31 March 2008