

## **EVALUATION FOR POLICY DEVELOPMENT IN THE DEVOLVED SCOTTISH HEALTH CARE SYSTEM**

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### **Abstract**

*The Scottish Health Services Policy Forum was set up in September 2000 to facilitate debate about health services policy. The Forum brings together the diverse interests of academics, health service practitioners, government, consumers, the health care industries, and others. The work is based on formal and informal evaluation of health services policy and its implementation, seeking to close the loop between these evaluations and policy development. The Forum provides opportunities for debating health policy, it opens up learning opportunities for all participants, and it generates research questions, proposals and publications. The work is research driven, but the research is mainly applied and of relevance to the health service. Current research interests are the impact of political devolution on health services policy, the organisation and funding of health care systems, and health services integration.*

### **Introduction**

Although the NHS in Scotland has long had an identity of its own distinct from its counterparts in the other countries of the United Kingdom, political devolution in 1999 brought the prospect of greater diversity in the organisation of health care within the UK. NHS policy is almost entirely a devolved matter, the responsibility in Scotland of the Scottish Executive and the Scottish Parliament. NHSScotland consumes about 30% of the Scottish Executive's budget. In anticipation of this new context this the Nuffield Trust suggested that new 'policy villages' might emerge in those parts of the UK to which health policy making was being devolved. This model would link policy analysis with health service practice via policy debate, evaluation of policy implementation, and ensuring evaluation results influence practice. The Forum is designed to contribute to the development of a Scottish 'policy village'.

### **Evaluation and the Scottish Health Services Policy Forum**

The interests of the Forum are wide, but evaluation is integral to everything it does. The work of the Forum is based on formal and informal evaluations of policy development and implementation. While recognising that there are many inputs to the policy process and various possible outputs, it is important to note that the evaluation loop back into policy change is not well-developed. In fact the need to fill this gap was one of the drivers for the creation of The Scottish Health Services Policy Forum.

## About The Scottish Health Services Policy Forum

The Forum draws together academics, leading figures in NHSScotland, health care suppliers, and consumer communities with an interest in the development of health services policy. The combination of major health problems in the West of Scotland, the prospect of more open government post political devolution and the limited financial resources available for health care, combined with the existing expertise in the University of Glasgow created the opportunity to establish a centre of excellence in health services policy of national and international standing.

The Forum builds on the foundations laid by the creation of the William R. Lindsay Chair in Health Policy and Economic Evaluation in the Department of Public Health. This post was established to provide academic leadership in health policy with a particular interest in the rationing of health services. Rationing of care is a feature of all health care systems and so dominant concerns in health service policy are the choices that must be made amongst the competing claims on resources, how these choices are made, and the consequences of them. In short, health service policy in this context is concerned with resource allocation as social, political and management issues as well as a technical problem. Questions arise about variations in access to care and the factors that give rise to social, geographical, gender, and age inequalities in health and health care. Answering such questions requires innovative thinking about the funding and organisation of health care, the rigorous evaluation of service delivery models and the performance of health care systems. They also require a continuing investment in the capacity of health system managers in order that they have the knowledge, skills and ideas to alter service delivery as medicine and the expectations of patients change. Forum initiatives are intended to assist with these endeavours by the development of an active, research-led health services policy analysis capability in Glasgow.

The relevance of this initiative and the case for its pursuit in Scotland at this time derives from Scotland's appalling health record and the fact that NHSScotland is the single, largest public service directly under the control of the recently established Scottish Executive, consuming 30% of its expenditure. In short, the future of health and health services in Scotland is a matter of major public interest. Much of the health services policy 'debate' in Scotland is concerned with responding to Scottish Executive initiatives rather than by rigorous analysis and debate about policy alternatives. There are some alternative sources of independent health services policy analysis within Scotland, but Scotland needs to have effective and more systematic links with health policy-making elsewhere in the world, especially Western Europe as the EU's competence in the fields of health care expand.

The Forum was initially established in September 2000 as a series of prestigious seminars for invited participants selected for their expertise and standing in the

field under consideration. Papers presented to the Forum are edited and published electronically. As its starting point the Forum focussed on the three issues identified by the Nuffield Trust in its report (Dargie, 2000) on Policy Futures for UK Health: the consideration of health in the wider context of Government social and economic policy; how to manage public expectations and pay for them; the need to equip the health care workforce to anticipate and accommodate change. Since then the Forum has been strengthened by winning financial support enabling the appointment of two post-doctoral research associates and its current research focus is on: the impact of political devolution on health policy; health system organisation and funding; and rationing.

Meeting the challenge of delivering health services in a resource-limited world is demanding for health care professionals and health service managers alike. They need opportunities to refresh their skills, to share their ideas, to learn from others and from one another. They are keen to do so, as these are communities of highly trained inquiring people with an interest in their continuing professional and personal development. The Forum seeks to assist them by opening up opportunities for groups of people with a common research interest to work together supported by skilled research assistance and to publish their analyses.

The Forum and its associated activities delivers three 'products' through a process of issue identification ('scanning'), review, research, debate, and dissemination: the generation of new insights and new ideas in a context that enables participants to build links and networks to further explore them; the identification of research questions that lead to the preparation of research proposals to discover new knowledge and so strengthen health services policy evaluation in NHSScotland; the publication of the Forum's proceedings and its research output.

Benefits from this initiative can be articulated at national, regional and local levels. Nationally, it brings together the diverse interests of the health service, government, professional groups, consumers, patients, parliamentarians, and the health care industries to discuss major policy issues in the 'safety' of an impartial and objective academic environment. It links debate about Scottish health services policy with similar debates elsewhere in the world, but especially in Europe at a time of growing political integration. Regionally, the initiative provides a focus for health services policy and health care management in the West of Scotland at a time of unprecedented changes in the organisation of care. It exploits the research potential of the region whose population size and health services make it an ideal 'laboratory'. Locally, it assists individuals and health service organisations in planning and managing service changes by bringing the worlds of academic policy analysis and health service practice together.

### **How are Forum meetings conducted?**

There are four Forum meetings per year and they are conducted under the

Chatham House Rule. Participants are free to openly discuss all the issues relevant to the debate safe in the knowledge that their comments will have informed the debate, but they will not be attributable in the subsequent report. Each meeting is led by a guest speaker presentation, occasionally two linked presenters, who give a keynote address on their topic of interest. Participation is by invitation to secure a well informed audience from diverse organisations who share a common interest in the topic under discussion. The presentation is followed by an extended period of discussion which tends to be wide-ranging and animated. The presentations and ensuing discussions at meetings have been highly pertinent to the Health Service in Scotland, indicating that the Forum appears to be meeting a need for this level of debate. Topics so far have been:

- Policy Futures - health trends towards 2015
- Health care funding
- Poverty, income, inequality and health
- The NHS workforce of the future
- Thoughts of a former Minister of Health

### **Evaluation research interests**

The Forum has three main strands of evaluation research work at present, although, if the Forum continues to function effectively then its interests will evolve almost as quickly as health service policy in Scotland does. Current work focuses on the following three areas.

- The impact of political devolution on health services policy
- Organisation and funding of health care systems
- Health services integration

#### ***1. Impact of political devolution on health services policy***

The Forum is the Scottish partner for the Devolution and Health project co-ordinated by the Constitution Unit at University College London. This involves producing quarterly monitoring reports covering a three month period and an annual report. These reports give both a broad commentary on health policy and a detailed description of all developments reported in the press, parliamentary session notes, and elsewhere relating to health in Scotland. Comparison of the Scottish, Welsh, and Northern Ireland information with the English health system is intended to demonstrate what effect political devolution has had. Some of the questions that are beginning to emerge are as follows.

- Are health policies in each devolved country similar or divergent i.e. do we still have a UK NHS or a number of National Health Services?
- What are the repercussions for the other UK countries of Scotland's decision to provide free personal care for the elderly?

- What impact will the different governance arrangements in each country have on policy development?

## **2. Organisation and funding of health care systems**

There is much to be gained by looking outward from the organisation of Health Services in Scotland. While no-one could condone the unquestioning adoption of initiatives from countries with very different health care systems, it is valuable to share learning with colleagues in the rest of the UK, and internationally. Consideration of the contextual specificity of many of the drivers of health policy and its evaluation should ensure that lessons to be learned will be translated before being tested. Currently, in UK terms each of the three countries of Britain have developed different Performance Assessment Frameworks, and, given the associated accountability agenda, there is potential for these to reinforce differences in the three health care systems. Internationally, the World Health Organisation Report 2000 (WHO, 2000) attempted to devise league tables comparing health systems from around the world. The resulting variety of opinion in relation to their success with this venture (e.g. Williams, 2001 and Blendon et al, 2001) demonstrates the considerable potential for further debate which is not likely to be concluded in the short-term.

As described in the section detailing what the Scottish Health Services Policy Forum is about, rationing is a common theme that consistently emerges in debates. In the post internal market, the NHS is still struggling to reconcile finite resources with rising public expectations. There is growing debate about this issue in the public arena, as an increasing number of interventions/new technologies gain approval from the National Institute for Clinical Excellence (NICE) or the Health Technology Board for Scotland (HTBS) but it has not developed in to a national debate about relative priorities as happened in some other countries that have explored an explicit policy of rationing publicly funded care. In addition to encouraging debate around rationing, the Forum has set up a Prioritisation Group to explore in more detail many of the underlying issues drawing upon international experience and some initiatives by health boards in Scotland.

## **3. Health services integration**

A common theme of government policy in each of the devolved countries of the UK is for health service staff to engage in partnership working and to integrate their practice with colleagues from other organisations who deal with similar client groups. The general steer is that partnership working is inherently a good thing, and that government believes it has the potential to replace the pseudo internal market as a driver of progress. In Scotland this was described in the White Paper 'Designed to Care' (Scottish Office, 1997), in the Scottish Health

Plan (Scottish Executive 2000), and equivalent policy documents south of the border. The Scottish Health Services Policy Forum has a number of projects underway in this area, as follows.

- Mental Health integration in primary care
- Evaluation of Managed Clinical Networks
- Partnerships involving health and social services and others. Topics include Domestic Abuse, Cancer Prevention, and Mental Health

### **What has the Forum achieved in its first year?**

Apart from the work to establish the Forum's existence and modes of operation, we have made progress in all three areas of research evaluation interest. Some of this research has been undertaken and completed, other parts of the work are underway. Funding has been successfully attracted to support additional staff and there are now four people in post. In addition to pursuing some of our current research interests, staff are involved in ongoing discussions to generate new research questions in relation to health services policy. Five Forum meetings have taken place and the proceedings published. We have also created a website which can be accessed at <http://www.dph.gla.ac.uk/shspf/>

### **The future**

Initial impressions are that The Scottish Health Services Policy Forum has begun to meet the need for policy debate and evaluation of policy implementation in this devolved country. We have also made valuable contributions to national and international debates. Our potential to build upon the work started in the first year is dependent on the continued expansion of our critical mass and the development of close working relationships with all relevant policy partners. We are also about to embark on some major pieces of evaluation work, specifically related to our interests in health services integration. One of the major challenges remaining is how we determine our success in linking policy evaluation back into practice.

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