REVIEW OF THE ADVISORY STRUCTURE FOR HEALTH – DISCUSSION PAPER

Consultation by the Chief Medical Officer for Wales

Response from BMA Cymru Wales

INTRODUCTION

BMA Cymru Wales is pleased to provide a response to the consultation being undertaken by the Chief Medical Officer for Wales on a discussion paper produced as part of a review of the advisory structure for health.

The British Medical Association represents doctors from all branches of medicine all over the UK; and has a total membership of over 150,000 including more than 3,000 members overseas and over 19,000 medical student members.

The BMA is the largest voluntary professional association of doctors in the UK, which speaks for doctors at home and abroad. It is also an independent trade union.

BMA Cymru Wales represents some 7,000 members in Wales from every branch of the medical profession.

RESPONSE

As we indicated in the response we submitted to the CMO’s consultation earlier in the year¹, BMA Cymru Wales supports the retention of the current advisory structures for health (albeit recognising that there are aspects of the current bodies which could be reviewed in order to enhance the provision and effectiveness of statutory independent medical advice).

We are therefore opposed to the current proposal to replace the National Joint Professional Advisory Committee, the seven Statutory Advisory Committees (including the Welsh Medical Committee) and the 24 National Special Advisory Groups (NSAGs) with a single joint professional council. We are very concerned that this proposal would serve to substantially erode the provision of independent and professional clinical advice to Welsh Government. We fear that this in turn will be detrimental to the ability of Welsh Government to undertake key decisions on the provision of health services for the people of Wales from a properly informed perspective. In our view, this would represent a disempowering of the medical profession in Wales from its current role in the provision of clinical advice for the benefit of the Welsh public.

The move to an appointed body for the provision of advice is also deeply concerning to our members. Such an approach will undoubtedly lead to suspicion – whether it is actually the case or not – that any individuals appointed to such a body have been hand-picked in order to facilitate Welsh Ministers being able to obtain the advice that they would wish to receive, rather than advice which can be unquestionably regarded by outside observers as coming purely from an impartial and professional viewpoint. Moving away from the provision of statutory independent advice would, in our view, therefore be a deeply worrying step.

We recognise that the current structure allows a diversity of views to be put forward, with the Welsh Medical Committee then able to distil such diverse views from different specialists and different specialties. Such an approach fits with the belief that the best way to obtain effective advice on a matter as complex as the development of a health service is to collect a diversity of expert views. Indeed this is a well-recognised mechanism for garnering expert advice to inform policy-making (an example of this being the Delphi Method) and we are concerned the known benefits of such an approach will be lost by such a proposed drastic reduction in the number of statutory advisory bodies.

We would be particularly concerned about any moves to abolish the 24 NSAGs as we are aware of a number of examples of tangible improvements in health service provision in Wales that have been developed as a result of clinical advice put forward through this route. A couple of such examples are the bowel cancer screening programme and the provision of low vision aids through the Low Vision Service Wales (LVSW). Such initiatives have been brought forward after initially being discussed in relevant NSAGs and we are fearful that such opportunities to effect positive change in service provision in specific areas would be lost in future. We also note that the regulation of tanning parlours in Wales which has been taken forward in recent years by Welsh Government was in part developed through discussions undertaken within the current health advisory structure, including by the Welsh Medical Committee.

Should the CMO’s proposed changes to the health advisory structure be implemented in their current form, BMA Cymru Wales would question how professional groups, and representatives of particular specialties, would still maintain a strong voice within the advice that would be put forward to Welsh Ministers. We would suggest that unless this is addressed then a vital safeguard currently enjoyed by Welsh Government would be lost, i.e. being able to take decisions on health service provision with the benefit of clinical advice that is both independent and professional.

Another advantage that results from the present structure is the ability to develop greater consistency across Wales in the way services are provided by offering opportunities for dialogue between practitioners within specific specialties and decision-makers. Some of our members have noted, for instance, that this is not necessarily replicated in other parts of the UK and this becomes apparent when they compare experience with colleagues from outside of Wales. Indeed many of our members who have involvement with specific NSAGs are aware that they currently undertake a substantial body of work beyond providing advice to Welsh Government, but which may equally be of value to improving the provision of services to patients in Wales.

A further concern raised by members is that losing the NSAGs could mean that horizon scanning for future developments in specialties is also lost. This could lead to Wales becoming more of a follower in terms of medical research and medical advances, as opposed to being in the vanguard. This in turn could impact on Wales’ reputation, adversely affecting its ability to secure research grants and research posts or attract the best medical academics.

In conclusion, BMA Cymru Wales would wish to reiterate its substantial reservations regarding the CMO’s proposal to replace 32 existing advisory bodies with a single joint professional council. We would consider this to be a deeply worrying and retrograde step which would substantially impact on the ability of Welsh Government to benefit from the receipt of effective and independent professional clinical advice. This will lead in our view to key decisions being taken regarding the provision of health services in Wales from a significantly less clinically-informed perspective.

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2 http://is.njit.edu/pubs/delphibook/delphibook.pdf