

Background

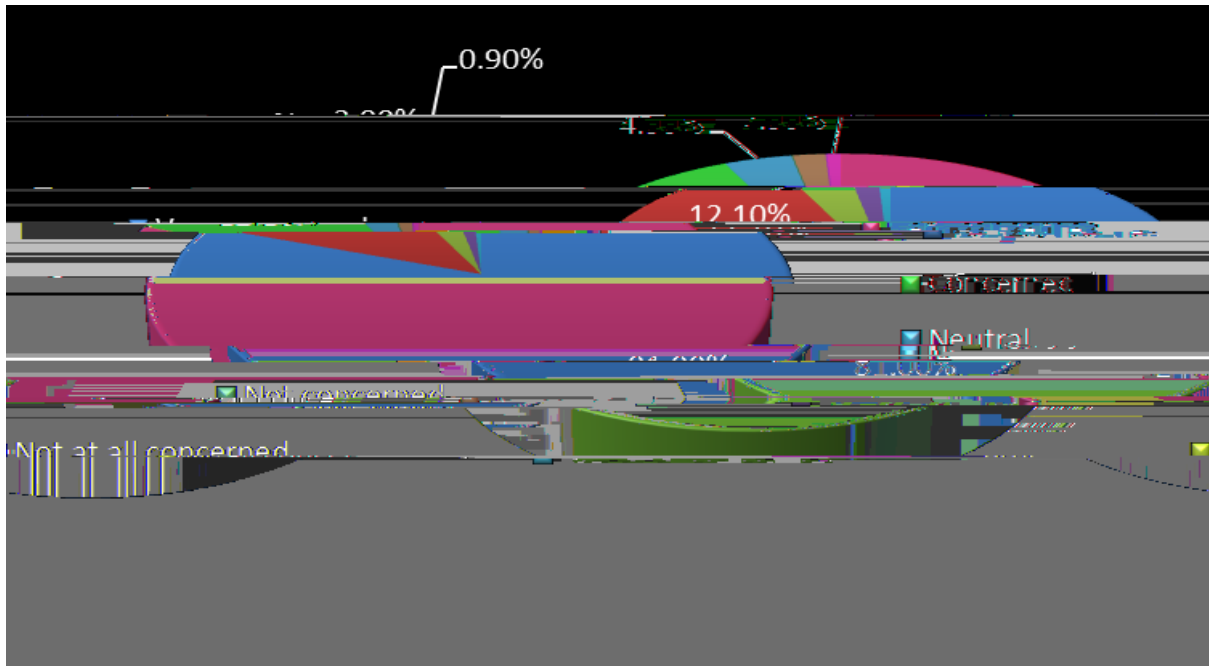
they represent, has been fraught with difficulties in recent years. It is with this in mind that the current project has been developed.

Healthwatch was developed as an accountability mechanism of the Health and Social Care Act (2012)

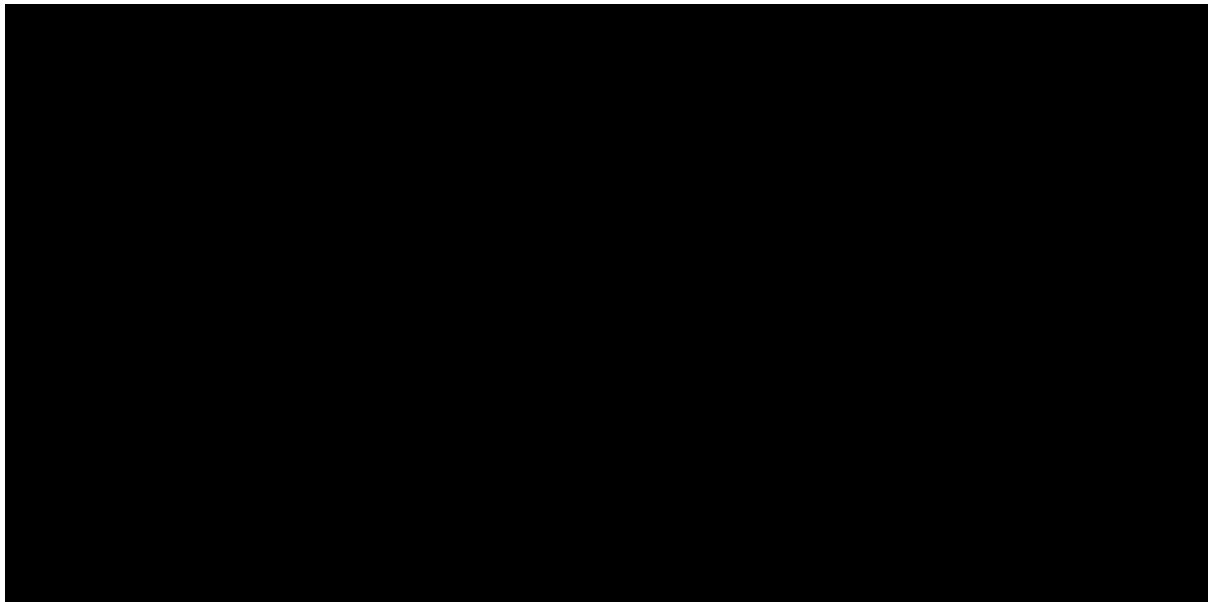
Findings

A. When asked 'who would you prefer to be treated by', almost 88% of the respondents said the NHS. This compared with 9.1% who had a preference for a private he69a/Atc/(h(a)91 0 0 1 359.47 722.1

G. In 2016 and 2017 the Brighton and Hove Clinical Commissioning Group are considering inviting health providers to bid to run a primary care mental health service. 93% of people would be very concerned or concerned if this contract was given to a private provider.



H. Similarly, regarding the potential contract for NHS 111 service for non-emergencies, 85% of people would be very concerned or concerned if this contract was given to a private provider.



3. In the city of Brighton & Hove, a vast majority of the public are against the use of private companies in the local health economy and are very concerned about some recent decisions that have been made to commission private companies to undertake certain health services.
4. Thus further work is needed on the part of the CCG to reflect the public needs and values in their commissioning decision.

Very recently new guidelines have been developed and published by NICE on community engagement (Fenton, 2016). Specifically these suggest the need for NHS, local authorities and other service providers to better engage local communities in decisions that affect their health. The new guidelines suggest the development of collaborations and partnership approaches to encourage and support alliances between community members and statutory, community and voluntary organisations to meet local needs and priorities and making it as easy as possible for people to get involved.

As a result of the issues above and the recommendations from NICE, it is intended that the Brighton Citizens' Health Services Survey will continue for the foreseeable future. It is also intended that it develops as the platform for a broader project seeking to recruit local stakeholders and members of the public to use the University of Brighton to develop and hold innovative spaces where the disparity that has arisen between some current commissioning decisions and public preferences can be addressed.

During such complex and rapidly changing national and local contexts for health commissioning, we believe that there is value not only in maintaining such a large scale and independent public consultation across the city but for using it as a launch pad to explore other ways that the voice of the public can be brought more firmly into the decision making process on local health commissioning.

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