

# Influencing Our NHS: a short UNISON guide

After the Health and Social Care Act 2012 was passed UNISON produced a [comprehensive guide](#) offering tips for members and the public who wanted to exert an influence in the NHS. Below is a summary of those key areas where you can make a difference.

## 1. Foundation Trust Membership

Foundation trusts (FTs) have a membership base and are corporate bodies, each with their own constitution. Anyone who lives in the defined areas of the FT can be a member (some can be as large as the whole country) and a number of FTs open their memberships to anyone who is a patient regardless of where they live. Membership is free and joining is easy

### WHY GET INVOLVED?

UNISON believes that, as NHS bodies, FTs must continue to act clearly in the public interest, rather than behaving like profit-seeking private companies. By being a member of an FT, activists can make the arguments and there are always avenues to make complaints to the regulator if the views of members and governors are ignored.

### TAKE ACTION

All current foundation trusts can be found on the [Monitor website](#) and you can follow the links through for more information on particular FTs and how to become a member. The [Socialist Health Association website](#) has a list of those FTs with national memberships.

## 2. Foundation Trust Governors

All FTs have a council of governors made up of three types of governor: those appointed by local stakeholders such as the council; those elected based on geographical area, such as a group of council wards, a county or even the whole country; and elected staff governors from various groups such as doctors, nurses, allied health professionals and others. The chair of the governing body is also the chair of the trust. Governors oversee senior appointments and can remove such people from office.

There are different structures depending on the type of governor and different trusts have different arrangements. Most trusts will respond positively to any enquiries about becoming a governor and the best have taster sessions and make genuine attempts to get a representative cross section of elected governors. Staff governors will usually make up a third of the governing body and are elected from their various staff groups. Some union members may feel that getting involved as staff governors at the FT where they work has the potential for conflicts of interest. In which case others can get involved instead as public governors, who need not be employed by the FT or even working in the NHS. Public governors are elected usually for three year terms of office.

### WHY GET INVOLVED?

Governors are the first line of defence in ensuring good standards are maintained. The NHS needs supportive people to join FTs as members and to elect governors who will genuinely represent patients and local communities, as well as challenging bad practice. The Health and Social Care Act states that FTs can only increase the amount of income they make from private patients by more than 5% if they have the approval of a majority of their governors. This gives governors a chance to stand up for the NHS if they are concerned that extra private patient income will push NHS patients further back in the queue for treatment.

### TAKE ACTION

Anyone wishing to consider becoming a staff governor can contact UNISON for support and advice. FTs should also include information on their websites about the process for electing both staff and public governors. For appointed governors, FT websites should set out the make-up of the council so you can identify what organisations are entitled to have appointed governors.

### 3. Clinical Commissioning Groups

Clinical commissioning groups (CCGs) are intended to be the new powerhouses of the NHS, making important decisions about what services are provided by which organisations. CCGs are the point where tough decisions about priorities have to be decided, which could include closures of services or changes of use of buildings. CCGs must have two lay members (one of which is responsible for patient and public involvement), and they should include a nurse and a secondary care clinician within their membership. Each GP practice is part of a CCG and should have its own patient participation group, where patients can scrutinise the wider policies of the local CCG.

#### WHY GET INVOLVED?

One of the major concerns is that CCGs will effectively contract out their functions to others, such as the major private sector players. The involvement of local activists can help identify at the earliest stage when there are moves to bring in private providers so that this can be challenged.

#### TAKE ACTION

There are 211 CCGs listed by [NHS England](#). CCGs meet in public and publish their agendas. This offers an opportunity to find out what they are doing. In terms of patient participation groups, the National Association for Patient Participation provides useful [information](#).

### 4. HealthWatch

HealthWatch are the latest bodies set up to represent patient interests. They help patients deal with complaints, provide advocacy and have a role in shaping local services. HealthWatch cover both health and social care.

#### WHY GET INVOLVED?

One of the major concerns in the new NHS is that competition and financial pressures may force an acceleration of service closures and treatment restrictions, as well as longer waiting times. The involvement of local activists in patient and public involvement can help identify at the earliest stage when there are proposals for reconfigurations and other changes in services locally.

#### TAKE ACTION

The HealthWatch website allows you to [search](#) for your local body. Your local authority should also be able to provide information about your local HealthWatch.

### 5. Local Authorities

Since 2012 local authorities have had a larger role in the NHS. All local authorities with social care responsibilities have Health and Wellbeing Boards (HWBs), which have strategic influence over commissioning decisions across health and social care. They involve both democratically elected representatives and patient representatives, and provide a forum for challenge and involvement. Council health Overview and Scrutiny Committees (OSCs) also have the power to scrutinise “substantial” changes to services and to ensure change is preceded by proper consultation.

#### WHY GET INVOLVED?

Local activists can get involved in local health and wellbeing strategies and in the plans to deliver services. Councillors have rights to obtain information and access to meetings where issues are discussed and decisions made. Some councillors can also become part of the scrutiny arrangements which oversee changes to care services.

#### TAKE ACTION

For councillors, it is important to attend HWB meetings and to get the papers. UNISON can also assist with model questions to ask commissioners. For members of the public there is the right to attend HWB meetings to raise issues and ask questions whenever the opportunities arise. OSCs meet in public, so you can attend for information on NHS changes. Your local authority should have information about these meetings on its website. In between meetings you can also lobby councillors to take up NHS issues – either in person at local surgeries, or via email from the council website.