

Stuart Todd
Assistant Clerk to the Public Petitions Committee
T3 40
Scottish Parliament
Edinburgh
EH99 1SP

20 December 2013

Dear Mr Todd

CONSIDERATION OF PETITION PE1482 – ISOLATION IN SINGLE ROOM HOSPITALS

Thank you for your letter dated 4th December 2013 in which you ask us:

- What are your views on what the petition seeks and the discussions that took place at the meeting on 17 September?

We note the discussions that took place on the 17th September. The Scottish Health Council has been aware of a level of public concern around the issue of single bedded rooms, particularly in relation to the consultation by NHS Dumfries and Galloway.

Our view is that patient choice is always important in determining how services are delivered and therefore we would always expect there to be good clinical reasons if patient views are not to be taken into account. It is not the role of the Scottish Health Council to speak directly on behalf of patients and the public, but rather our role is to support patient focus and public involvement in and by the NHS and this can include providing support and facilitation for gathering and collating patient and public views on particular topics.

In this case the Scottish Government decided, in November 2008, to institute a policy setting out that:

“For all new-build hospitals or other healthcare facilities which will provide in-patient accommodation there should be a presumption that all patients will be accommodated in single rooms, unless there are clinical reasons for multi-bedded rooms to be available.”¹

This policy was informed by a steering group which, amongst other things, did consider public views as evidenced through opinion surveys. However as Alex Fergusson MSP has pointed out, there was no formal consultation on the policy. Our view is that this policy would have benefitted from public engagement and consultation. However we have no formal advisory role in terms of public engagement by the Scottish Government.

We are pleased to hear that the Scottish Government are proposing a review of evidence to test the assumptions within the current policy. We would encourage the Government to ensure that patient and public views are sought and are able to influence that review. The views of patients who have experienced single bedded and multi-bedded rooms will be particularly important to informing the review.

¹ CEL 48 (2008)

The Committee has also asked

- Why did the Scottish Health Council not explain to the petitioners that representations could be made on clinical grounds? ([PE1482/B](#), paragraph 7).

I wrote to Dr Womersley on the 19th October 2012 advising that:

“I have been advised by the Scottish Government that NHS Boards are required to follow Scottish Government guidance, which states:

“...the Chief Medical Officer has concluded that there should be a presumption of 100% single rooms in future hospital developments, is confirmed as the policy for NHSScotland except for:

- existing accommodation which is being refurbished, where taking into account the constraints of the existing building, a minimum of 50% single room accommodation would be allowed but as close to 100% as possible would be expected; and
- in new developments where there are clinical reasons for not making 100% single room provision they should be clearly identified and articulated in the appropriate Business Case. However, each case would be subject to Scottish Government agreement as part of the Business Case approval process.””

I also enclosed a copy of the relevant guidance with my letter, CEL 27 (2010), and this is the same position as set out by Mr Bishop in his letter to the Public Petitions Committee dated 25th October 2013.

Yours sincerely

Richard Norris
Director

www.scottishhealthcouncil.org

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