



ECPU

DEPARTMENT OF HEALTH AND SOCIAL SECURITY

Richmond House, 79 Whitehall, London SW1 2NS

Telephone 01-210 5166/7/8

From Sir Roy Griffiths

12th June, 1989

Mr. Paul Gray
Downing Street

Dear Paul,

MANAGEMENT ARRANGEMENTS FOR THE NHS IN SCOTLAND

The Duty Clerk at No. 10 rang on Friday asking me for a comment on the above paper dated 31st May from Malcolm Rifkind. I telephoned and at the end of the conversation was asked to let you have a note confirming for the file the points I have made.

My comments were as follows. Scotland has switched from having a Policy Board but no Chief Executive to a position of no Policy Board but having a Chief Executive. I am sure they are right to appoint a Chief Executive. I have heard Malcolm Rifkind in a meeting saying that the old Policy Board was useless and that he preferred a more informal arrangement of a Health Service Policy Group consisting of senior Civil Servants and Chief Professional Officers. He states accordingly that he does not intend initially to replicate the Department of Health's arrangement for a Policy Board.

Without being close to the specific situation in Scotland I believe a Policy Board will eventually be necessary, for the following reasons.

1. In a well run Board papers will be presented appropriately and regularly which will anticipate the major problems and give Members a chance at a very early stage to comment.

Cont.....



2. Outside Members are necessary at policy level:

- a) to contribute from their broad experience, and
- b) to force a discipline on Ministers and Civil Servants to prepare well considered papers at an appropriate and early stage.

I have seen Ministers operate without a Policy Board. I believe it is too undisciplined and ad hoc on major policy issues and that is why Kenneth Clarke has always supported and intends to implement well, the new Policy Board.

I believe had we had proper papers before an effective Policy Board in England on matters such as Nurses regrading, financial control, etc. on which outside Members could have contributed their experience, we would have had far less trouble over the past two years. That is why we are committed to making a Policy Board in England work and why I believe Scotland should eventually have a Policy Board.

Two incidental comments. We would not allow Regional or Health Authority Chairmen to run their Authorities either in their existing or their new form on the informal basis which Scotland is proposing for the centre, i.e. we are expecting formal meetings on a regular basis with appropriate agenda.

The Policy Board, with appropriate agenda and Minutes makes it easier for No. 10 to be satisfied that sufficient attention is being paid to policy matters and to keep readily in touch as it wishes.

Yours sincerely,

ROY GRIFFITHS