

The Capitation Formula Consultation  
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To Whom It May Concern:

**ALLOCATING RESOURCES TO HEALTH AND SOCIAL CARE  
COMMISSIONERS: PROPOSED CHANGES TO THE WEIGHTED  
CAPITATION FORMULA**

**A FIFTH REPORT FROM THE CAPITATION FORMULA REVIEW GROUP:  
CONSULTATION**

Thank you for alerting the Committee on the Administration of Justice (CAJ) to the above consultation document which clearly has important implications for the allocation of resources across the health service. Unfortunately we were unable to provide you with a detailed response prior to the closure of the consultation on 12<sup>th</sup> September. Given the importance of this issue however, CAJ felt compelled to highlight some concerns with the existing proposals, notwithstanding the fact that our comments will be somewhat belated, and rather brief.

One of CAJ's four key programme areas is the promotion of equality, specifically within the context of Section 75 of the Northern Ireland Act. CAJ is however mindful of the fact that during the passage of the Northern Ireland Act, Lord Dubs, referred to the relationship between the statutory duties contained within Section 75 of the Northern Ireland Act and the targeting social need policy in the following terms:

"The [Section 75] obligation relates to equality of opportunity, not equal treatment, so it is hard to see an incompatibility between it and addressing disadvantage among women, Travellers, or people with disabilities. The Government are fully committed to tackling disadvantage wherever it is found through major policies such as Targeting Social Need..."

CAJ has on a number of occasions sought to highlight this aspect of Section 75 in order to ensure that when designated public bodies seek to promote equality, they do so within a "TSN framework". It is this aspect of the proposals which give CAJ most concern in this case. It is our view that the changes proposed here will in fact direct resources away from, and not towards, those in most need.

Furthermore, we have had sight of a number of submissions from other concerned parties, including Evan Bates (formerly of the Royal Hospitals) and the trade union UNISON, which have raised doubts as to the extent to which the current proposals will direct resources to those in most need. We would largely share the concerns expressed in both the Evan Bates and UNISON submissions in particular. In this context, we recommend that the Department urgently review the proposals in order to ensure that health resources are correctly targeted at those in most need.

Yours faithfully,

Tim Cunningham  
Equality Project Worker