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Strategic health authority

Strategic health authorities (SHA) were part of the structure of the National Health Service in England between 2002 and 2013.^{[1][2]} Each SHA was responsible for managing performance, enacting directives and implementing health policy as required by the Department of Health at a regional level.

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History

In 2002, the existing regional health authorities were renamed and merged to form 28 new strategic health authorities.^{[3][4]} This was the first time that the regional tier in the NHS reported directly to the centre rather than having a board and non-executive members. In 2002 the implementation of the Health and Social Care Act 2001 created 28 strategic health authorities and four directorates of health and social care. The latter were created against the wishes of the then Secretary of State and were rapidly abolished, lasting only 18 months.

The SHA chief executives were appointed after a wide-ranging search and selection process and did not represent continuity with the previous regions, not least because CEOs were allocated to areas they were not generally familiar with. A number of the new CEOs had previously been health authority CEOs or CEOs of large trusts, rather than being on the traditional path.

The role of the SHAs was set out in *Shifting the Balance of Power within the NHS – Securing Delivery*^[5] and included the following:

"Strategic Health Authorities will provide strategic leadership to ensure the delivery of improvements in health and health services locally by PCTs and NHS Trusts within the national framework of developing a patient-centred NHS. They will lead the development and empowerment of innovative and uniformly excellent frontline NHS organisations. The wider span of control will enable Strategic Health Authorities to consider the overall needs of the health economy across primary, community, secondary and tertiary care, and work with PCTs and NHS trusts to deliver a programme to meet these needs."

The goal was to create a coherent strategic framework for the development of services across the full range of local NHS organisations, including:

- Performance management
- Brokering solutions where there were disputes
- Building capacity and supporting performance improvement
- Preparing and delivering cohesive strategies for capital investment
- Working with workforce confederations (in some unspecified way)
- Ensuring effective professional leadership across their area

A pivotal event seems to have been a loss of financial control in 2005/6 and a failure of the management system to respond quickly or firmly enough. This combined with some ministerial ambivalence about the effectiveness of SHAs and a promise in the 2005 election to reduce NHS management spending led to Patricia Hewitt, Secretary of State for Health, announcing that, following an NHS consultation which ended on 22 March 2006, the SHAs were to be reorganized, reducing to ten in number.^{[6][7]} This was expected to produce substantial financial savings.

At the same time there were other important changes that had implications for the functioning of SHAs:

- Span of control – the number of PCTs was reduced to 152 from 302 in 2002 (although there had been a continuous process of mergers). At the same time, an increasing number of providers were achieving foundation trust status. Both of these changed the nature of the relationships of the intermediate layer to local organisations.

8. Essex SHA
9. Greater Manchester SHA
10. Hampshire and Isle of Wight SHA
11. Kent and Medway SHA
12. Leicestershire, Northamptonshire and Rutland SHA
13. Norfolk, Suffolk and Cambridgeshire SHA
14. North and East Yorkshire and Northern Lincolnshire SHA
15. North Central London SHA
16. North West London SHA
17. North East London SHA
18. Northumberland, Tyne and Wear SHA
19. Shropshire and Staffordshire SHA
20. South East London SHA
21. South West London SHA
22. South West Peninsula SHA
23. South Yorkshire SHA
24. Surrey and Sussex SHA (Surrey, East Sussex, West Sussex)
25. Thames Valley SHA (Oxfordshire, Berkshire, Buckinghamshire)
26. Trent SHA (Derbyshire, Nottinghamshire, Lincolnshire)
27. West Midlands South SHA (Warwickshire, Worcestershire, Herefordshire, Coventry) †
28. West Yorkshire SHA



† known as the 'Coventry, Warwickshire, Herefordshire and Worcestershire SHA until 2004.^[10]

The London boundaries were:

- North Central London – Barnet, Camden, Enfield, Haringey, Islington
- North East London – Barking and Dagenham, City, Hackney, Havering, Newham, Redbridge, Tower Hamlets, Waltham Forest
- North West London – Brent, Ealing, Hammersmith and Fulham, Kensington and Chelsea, Harrow, Hillingdon, Hounslow, Westminster
- South East London – Bexley, Bromley, Greenwich, Lambeth, Lewisham, Southwark
- South West London – Croydon, Kingston, Merton, Richmond, Wandsworth, Sutton