Annex G Consultation Questionnaire

The case for change

Question 1: Is this proposal to focus initially, after legislation is enacted, on improving outcomes for older people, and then to extend our focus to improving integration of all areas of adult health and social care, practical and helpful?

Yes [ ] No [ ]

Comments [ ]

Outline of proposed reforms

Question 2: Is our proposed framework for integration comprehensive? Is there anything missing that you would want to see added to it, or anything you would suggest should be removed?

Yes [ ] No [ ]

Comments [ ]

National outcomes for adult health and social care

Question 3: This proposal will establish in law a requirement for statutory partners - Health Boards and Local Authorities - to deliver, and to be held jointly and equally accountable for, nationally agreed outcomes for adult health and social care. This is a significant departure from the current, separate performance management mechanisms that apply to Health Boards and Local Authorities. Does this approach provide a sufficiently strong mechanism to achieve the extent of change that is required?

Yes [ ] No [ ]

Comments [ ]

Question 4: Do you agree that nationally agreed outcomes for adult health and social care should be included within all local Single Outcome Agreements?

Yes [ ] No [ ]

Comments [ ]

AND OTHERS: Ed City Council Summers 12, invisible of wider concern, he now lives to Plan Service Support Strategy, with wider health and social care.

AND Meets concern to our representatives, who is asked but important to (provisionally at least)
Governance and joint accountability

Question 5: Will joint accountability to Ministers and Local Authority Leaders provide the right balance of local democratic accountability and accountability to central government, for health and social care services?

Yes □ No [ ]

Comments: We have to try and not lose focus on the bigger picture.

Question 6: Should there be scope to establish a Health and Social Care Partnership that covers more than one Local Authority?

Yes □ No [ ]

Comments: The boundaries need to be clear and flexible.

Question 7: Are the proposed Committee arrangements appropriate to ensure governance of the Health and Social Care Partnership?

Yes □ No [ ]

Comments: Do we have the necessary skills and resources?

Question 8: Are the performance management arrangements described above sufficiently robust to provide public confidence that effective action will be taken if local services are failing to deliver appropriately?

Yes □ No [ ]

Comments: Do we have the tools and skills?

Question 9: Should Health Boards and Local Authorities be free to choose whether to include the budgets for other CHP functions – apart from adult health and social care – within the scope of the Health and Social Care Partnership?

Yes □ No [ ]

Comments: Can we ensure that the practice is consistent?

Integrated budgets and resourcing

Question 10: Do you think the models described above can successfully deliver our objective to use money to best effect for the patient or service user, whether they need "health" or "social care" support?

Yes □ No [ ]

Comments: We need clear guidelines.

Question 11: Do you have experience of the ease or difficulty of making flexible use of resources across the health and social care system that you would like to share?

Yes □ No [ ]

Comments: We need a more coordinated approach.

Question 12: If Ministers provide direction on the minimum categories of spend that must be included in the integrated budget, will that provide sufficient impetus and sufficient local discretion to achieve the objectives we have set out?

Yes □ No [ ]

Comments: We need clear guidance.

Jointly Accountable Officer

Question 13: Do you think that the proposals described here for the financial authority of the Jointly Accountable Officer will be sufficient to enable the shift in investment that is required to achieve the shift in the balance of care?

Yes □ No [ ]

Comments: We need more flexibility.

Question 14: Have we described an appropriate level of seniority for the Jointly Accountable Officer?

Yes □ No [ ]

Comments: We need to be clear on the role and remit.
**INTEGRATION OF ADULT HEALTH AND SOCIAL CARE**

**Professionally led locality planning and commissioning of services**

**Question 15:** Should the Scottish Government direct how locality planning is taken forward or leave this to local determination?

Yes ☐ No ☑

In this legislation yes, but locally it is not going to be consistent?

Comments

**Question 16:** It is proposed that a duty should be placed upon Health and Social Care Partnerships to consult local professionals, including GPs, on how best to put in place local arrangements for planning service provision, and then implement, review and maintain such arrangements. Is this duty strong enough?

Yes ☐ No ☑

Comments

**Question 17:** What practical steps/changes would help to enable clinicians and social care professionals to get involved with and drive planning at local level?

Comments

**Question 18:** Should locally planning be organised around clusters of GP practices? If not, how do you think this could be better organised?

Yes ☐ No ☑

Comments

**Question 19:** How much responsibility and decision making should be devolved from Health and Social Care Partnerships to locality planning groups?

Comments

**Question 20:** Should localities be organised around a given size of local population e.g., of between 15,000 – 25,000 people, or some other range? If so, what size would you suggest?

Yes ☐ No ☑

Comments

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**Do you have any further comments regarding the consultation proposals?**

Comments

**Do you have any comments regarding the partial EQIA? (see Annex D)**

Comments

**Do you have any comments regarding the partial BRIA? (see Annex E)**

Comments

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**Sorry to be late but it takes ages to get here and to see everyone else.**

Write all the names of any name + address of other processes (like any other data) it is hard to group all the budget types etc.

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An excellent overview of your draft 2.000 or something today in big ears but really dead in real-time now.

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Phoebe remain Nicole Sturgeon I do feel she's seriously trying to teach what needs doing, slow coat.
NEW WAY TO PLAN SERVICES

Five-year strategy will make best use of budget

The Council has been working on a new way to plan for Edinburgh's future, called priority-based planning.

This new way of planning has been brought about to meet residents' changing needs. The make-up of Edinburgh's population is changing, which means the Council has to provide different types and levels of services to meet residents' needs and wants. There's more demand for services and Council budgets are tighter than ever.

As the name suggests, the focus is on priorities. Each service is currently being reviewed and prioritised to work out whether or how it needs to change to be fit for the future.

Your feedback has helped the Council shape its future and prioritise the services that are most important to residents. The end result will be a draft five-year plan which will go to Council for approval. If approved, it will become part of the Council's annual budgeting process. Although the process will change, consulting residents on their views and needs will continue to be a big part of the way the Council plans its services.