

# Have your say

## Question 1

The Scottish Government would like to make health and social care services better. We would do this first for older people and then improve services for all adults. Do you think this is a good thing and can you tell us why?

A GOOD THING :- WORK HAS ALREADY BEGUN ON OLDER PEOPLE HEALTH/SOCIAL CARE SERVICES. ONCE THIS WORK HAS HAD TIME TO SETTLE AND BE ASSESSED AND MODIFIED WHERE NECESSARY THEN MOVE ON TO THE NEXT CATEGORY OF ADULT PEOPLE WHO NEED SPECIALISED HEALTH -SOCIAL CARE AND ASSESS THE DIFFERENT REQUIREMENTS.

## Question 2

Have we thought about all the things we need to put the money together for adult health and social care services? Do you have anything you would like to add or change?

- I THINK THAT "PREVENTION" - FUTURE PLANNING OF ADULTS WHO ARE APPROACHING OLD AGE OR WHO HAVE BEEN DIAGNOSED WITH A DEBILITATING CONDITION SHOULD BE INCLUDED IN THE PROGRAMME AND THEREFORE SOME FUNDS MADE AVAILABLE.

## Question 3

Councils and Health Boards will need to work together to make things better. We call this outcomes. This is different to how they work. Do you think what we want to do is a good way to make the change?

YES I THINK IT IS A GOOD WAY TO MAKE THE CHANGE EVERYBODY WORKING TOGETHER WITH THE SAME AMBITION

## Question 4

Should Health Boards and Councils both agree on how they will make things better for adult health and social care?

YES, THEY SHOULD BOTH AGREE ON THE OBJECTIVES AND ON HOW THEY CAN BEST BE ACHIEVED

### Question 5

If health and social care services have to report to Ministers and Council leaders, is there the right balance of local and national responsibility?

AFTER READING THE PARAGRAPHS 4 & 5 IT COMES THROUGH THAT THERE WILL BE DISCUSSIONS AND AGREEMENTS BETWEEN ALL INVOLVED. THEREFORE BEST POSSIBLE OPTIONS SHOULD MATERIALISE.

HOWEVER:- WATCH OUT THAT 'OVERSEEING / ASSESSING / ACCOUNTING ETC. DOES NOT USE

UP TOO MUCH OF THE FUNDING

### Question 6

Should it be possible to create a new Partnership that covers more than one Council area? For example, a Lothian Regional Partnership?

IT WOULD BE POSSIBLE TO COVER MORE THAN ONE COUNCIL AREA.

HOWEVER: THE WORD LOCAL FEATURES IN THE PROPOSALS SO THAT PERHAPS THE FINAL UNITS SHOULD BE AS LOCAL AS PRACTICABLE + FINANCIALLY VIABLE AS POSSIBLE.

### Question 7

Do you agree that it should be senior officials from Health Boards, Councils, elected Council members, professionals (such as doctors) and people from the voluntary sector that form the committee for the local Partnerships?

- NOT SURE ABOUT THIS QUESTION, BUT YES, THERE DOES NEED TO BE INPUT FROM EVERY PERSPECTIVE OF INVOLVEMENT.

### Question 8

Do you think the new plan will mean changes can take place quickly if local services are not working properly? What could we do to help?

- SPEED IS NOT THE PRIORITY.

- GETTING IT RIGHT IS THE PRIORITY

- THE ONLY WAY, AT THIS MOMENT OF THE CHANGE, IS TO BE POSITIVE AND TO KEEP THE 'USERS' OF HEALTH / SOCIAL CARE INFORMED AND THAT THINGS WILL GET BETTER

### Question 9

Do you think the new Partnerships should be able to include other areas of health and social care, if they want to?

YES

### Question 10

If the money is put together, do you think our proposals will allow money to be spent better for the patient or service user?

SHOU-> DO, PROVIDING NOT TOO MUCH IS SPENT ON SURVEILLANCE, ADMIN. ETC.

### Question 11

Do you have experience of how easy or difficult it is to access services across both health and social care systems? If you have, would you like to tell us?

- AN ELDERLY FRIEND WHO HAS NO CLOSE RELATIVES HAS RECENTLY BEEN THROUGH  
1) FALLS -> HOSPITALISATION -> BILGART -> TRIAL PERIOD 3MR HOME -> TRIAL PERIOD IN CARE HOME  
DID NOT WORK OUT NOW PERMANENT + V. HAPPY  
FROM BEGINNING TO END SHE HAD HELP/ENCOURAGEMENT/CONSULTATION, EVERYTHING  
POSS. DONE TO MAKE SURE SHE WAS LOOKED AFTER, SAFE AND HAPPY

### Question 12

Should Ministers say in law the parts of the separate health and social care budgets that should be in the joined up budget? Would this allow the outcomes to be met locally?

NOT UNLESS THE LAW GIVES SCOPE FOR DIFFERENCES IN LOCAL REQUIREMENTS.

### Question 13

Do you think we have given the senior officer the right amount of say in how the money is spent? Do you think it will be difficult for one person to be in control of all this money?

NOT ABLE TO FORM AN OPINION RE. PART 1 OF THIS QUESTION.

YES, I THINK IT WILL BE DIFFICULT FOR ONE PERSON, BUT IF AND WHEN THE TWO PROVIDERS BECOME A UNIT, THEN IT WILL BECOME MORE CLEAR ABOUT THIS QUANTITY.

### Question 14

Have the proposals given the senior officer enough authority and responsibility to take control of this money?

IT SOUNDS LIKE IT, THE PROPOSALS SEEM TO HAVE BEEN THOROUGHLY THOUGHT THROUGH.

### Question 15

Should the Scottish Government tell Partnerships how to plan for local services, or should this be left to local areas to decide?

- LOCAL AREAS SHOULD DECIDE. THEN OFFER THEIR PROPOSALS TO THE SCOTTISH GOVERNMENT.

### Question 16

We think that local professionals, including General Practitioners, should be asked to help plan local services. Is this a strong suggestion, or should it be stronger?

- IT IS A STRONG SUGGESTION, AND ANY GROUP OR PROFESSION THAT HAS INVOLVEMENT, AT ANY LEVEL, WITH HEALTH/SOCIAL SERVICES SHOULD BE INFORMED OF PROPOSALS AND ASKED FOR SUGGESTIONS/OPINIONS

### Question 17

What practical help should we offer to help health and social care staff get involved with planning services?

- COMPILER A QUESTIONNAIRE, EASY READ, WITH TICK ✓ BOXES OR MARKS OUT OF 10 REGARDING THEIR DIFFICULTIES/ PRACTICALITIES/ JOB SATISFACTION.
- GIVE OPPORTUNITY TO OFFER SUGGESTIONS FOR IMPROVEMENTS

### Question 18

Should we use groups of doctor's surgeries to organise the local planning of services? If not, how could this be done better?

SORRY, CANNOT SUGGEST ANY OTHER WAY OF DOING IT.

### Question 19

Should the partnerships talk to people in their communities? How might this be done?

- YES: - LOCAL NEWSPAPERS - (MIDSHIRE POST) - ADVERTISER
- OPPORTUNITIES IN RETIREMENT - they have talks every alternate Tuesdays - they produce a newsletter, quarterly.
- THROUGH OTHER VOLUNTARY GROUPS: OSTEOPOROSIS, CARERS, DIABETES PARKINSONS, ETC.
- NEWSLETTERS - for pick-up from libraries, GP surgeries, pharmacies.

### Question 20

Do you think we should say how many people need to be involved in the planning of local service? For example, a percentage of the local population?

NOT SURE THAT IT IS POSSIBLE TO PUT A FIGURE ON THIS.  
SOMETIMES LESS ACHIEVES MORE.  
SOMETIMES LESS DOES NOT GET IT RIGHT