

Question 1**YES****Comments**

Catering for the needs of older people and developing better outcomes for the most vulnerable people initially, thereafter to refine and tailor services for the wider range of older people and later to extend the process for all areas of adult health and social care.

Through the workings of the Community Health Partnership in Dumfries and Galloway Region, the Health Board and Social Work Department have made considerable inroads towards joint working initiatives. Currently they are aligning their financial accounting systems.

The early work of "Putting You First" in Dumfries and Galloway could be considered a forerunner to the aims and objectives of this consultation document.

The practicalities of implementing these proposals have huge implications for a sparsely populated rural area such as Dumfries and Galloway region.

Question 2**YES****Comments**

I cannot overemphasise the need to constantly implement the principles of management of change throughout this process.

The words: communication, supervision and training should be embedded in every paragraph of the new legislation.

The fact that the Health Board and Local Authority boundaries are co-terminus is a huge benefit. There is good evidence that Social Work and the Health Board work well together at this time.

There are a large number of issues which are unique to a sparsely populated rural area which need to be addressed before, during and after the implementation of the new legislation. The following paragraphs highlight some of the issues to be considered.

Dumfries and Galloway region has one of the highest rates of death of heart disease in the country. More than two thirds of people surveyed are not worried by their heart health (survey by Heart UK and healthcare leader MSD).

Over one in five (22%) of the population in Scotland has inadequate access to essential health care services, while over one third may miss out on job opportunities as a result of poor public transport options: (Elizabeth Finn Care Charity News Release 2011).

Demographic Change

Current projections estimate Scotland's rural population will grow by 10% by 2035. However, in Dumfries and Galloway the level of migration expected will not be enough to compensate for the natural population decline (births minus deaths).

In the next 20 years the population of Dumfries and Galloway is expected to decline by 4.7%. Areas where natural decreases are predicted all currently have higher proportions of older people within their population.

Out-Migration

In 2009/10, Dumfries and Galloway had a net foreign out-migration of 230 people in contrast to Perth and Kinross net in-migration of 1,262 people.

Births

In 2009, the General Registry Office for Scotland's Migrations Reports estimated that on 8% of all births in Dumfries and Galloway were to non-UK mothers.

Working Age Population

Between 2010 and 2035 the predicted change to the working age population of Dumfries and Galloway is expected to decrease by 13.1%.

Summary

It is immediately evident that the areas of predicted population decline currently have:

- A more aged population
- Low levels of in-migration; and
- Are predicted to have a total population decline.

Earnings by Workplace

(Gross Weekly Pay)

<u>D&G</u>	<u>Scotland</u>
<u>Great Britain</u>	
£426.50	£488.80
£502.60	

Full-time employees in Dumfries and Galloway earn £62.30 less than the Scottish average and £76.10 less than the British average weekly pay.

Unemployment

At July 2012, unemployment across the Region hit a 15 year high.

Long-term unemployment rose to 1,565 its highest since October 1998.

The situation for young people is even worse with 420, 18-25 year olds out of work for longer than 6 months, the highest level since March 1997.

The number of people claiming unemployment benefit for more than a year reached 850, the highest since May 1999.

Since the 2010 General Elections, 500 Council jobs have been lost across the Region – 6% of all employees.

Dumfries and Galloway region is notionally 120 miles wide and 40 miles deep. The A75, A76 and A7 roads form the main arterial routes through the region.

Every 10 miles or so along the length of these roads the local dialect changes and with it the needs of the communities they serve.

Job Centres and Career Advisors

Should be consulted in an attempt to create local employment and prevent out-migration of school leavers, many of whom reside in rural areas.

The new legislation will provide job opportunities and a distinct career structure can readily be developed for school leavers and persons willing to be retrained.

From an initial SVQ qualification there will be opportunities for management training to degree level to keep pace with the ever ageing population; the development of healthcare hubs in rural settings, the growth/increase in number of care hours and increasing number of persons residing in their own homes for longer periods.

Vulnerable Settlements

The vulnerability index provides a means of comparing the vulnerability of 90 different settlements across Scotland.

The index is based on 4 indicators:

The proportion of the local population –

- Of working age
- Claiming Job Seekers Allowance
- Working in the public sector; and
- A measure of income deprivation devised from the Scottish Index of Multiple Deprivation.

Dumfries and Galloway has 6 such vulnerable settlements extending right across the region from Stranraer to Langholm.

They feature in each of the 4 districts which comprise the region as follows:

Stranraer

Wigtown District, Other Urban category (population 10,000-125,000) features 4/90 on the index.

Kirkcudbright

Stewartry District, Remote Small Town category (population less than 3,000) features 39/90 on the index.

Sanquhar

Nithsdale District, Remote Rural Town category, one of 2 in Scotland in the top 10 most vulnerable settlements, features 5/90 on the index.

Dumfries

Nithsdale District, Other Urban category, features 14/90 on the index.

Annan

Annandale and Eskdale District, Accessible Small Town category (within 30 minutes of a settlement of 10,000-125,000) features 32/90 on the index, and

Langholm

Annandale and Eskdale District, Remote Rural category features 69/90 on the index.

Third and Independent Sectors

With the prospect of an ageing population and a significant drop in the number of persons of working age it is vital to retain school leavers within the Region and in employment in local settings.

A recognised training scheme to SVQ level and beyond should be developed and implemented to prevent out-migration, improve employment opportunities, particularly for school leavers, to improve and therefore maintain high levels of care in the rural setting and in care homes.

The existing commitment to localism in our small towns needs to be better recognised and supported.

Design and deployment of policies must be tailored to Rural Scotland. Such “tailoring” needs to go further, making it “fit for purpose” in multiple rural settings.

Scotland’s rural characteristics must be built deliberately, repeatedly and systematically into the very heart of strategic national policies.

In straightened times, localising design and delivery can be seen as an expensive luxury, however, not doing so risks inappropriate allocation of resources while challenges remain unaddressed.

Public confidence in these services is vital and public confidence is based first and foremost on local accountability for local services – something that must be at the heart of the proposed legislation.

Communication and Supervision

Should be included and developed throughout the proposed legislation. The majority of failings in any public sector organisation can be traced back to poor or inadequate communication and a lack of proper, structured supervision.

Too often people are promoted or appointed to the role of management without any consideration for management skills training to equip them to perform their jobs to even a satisfactory level.

Austerity

As the age of austerity puts further pressure on public services and with it the prospects of the regeneration of small towns, it places an increasing burden on the community and voluntary sector in these societies; not least the delivery of services and support to the most vulnerable.

Poverty

According to the Scottish House Condition Survey, 41% of the region's homeowners are struggling to meet rising heating bills. The national average is 28%.

Integrated Systems

The topography and nature of sparse rural settlements throughout Dumfries and Galloway region lends itself to the development of a series of hubs/one-stop shops to successfully deliver an integrated system of adult health and social care.

An asset register of suitable local authority owned buildings; doctors' surgeries and cottage hospitals should be considered in the first instance for adaptation/improvement to meet nationally agreed outcomes.

Where possible and until such times as electronic patient records are developed, any forms which are shared between the various agencies should be standardised to improve communication.

Computers and computer programmes should be standardised throughout Scotland to achieve consistency in record keeping and preparation of statistics.

Broadband

Carefully plotted paths are needed to identify the most appropriate use of digital technology in public service provision in a context of tight constraints on public spending.

Pressure on NHS resource might lead to a reduction in the frequency of personal care visits by professionals to the homes of older/disabled people.

At November 2011 the level of outdoor mobile 3G coverage in Dumfries and Galloway region ranged between 1 and 10%.

Given the remoteness of settlements in the region, ever increasing fuel costs and cutbacks in what can only be described as a mediocre public transport service, the use of broadband for video conferencing between consultants/specialists and patients, and the use of telemetry to monitor the elderly in their own homes will be highly dependent on robust broadband coverage for the region, with adequate back-up in the event of catastrophic broadband/power failure.

Broadband could be utilised to improve the quality of life for blind people residing in the area utilising transponders to inform them where they are.

The Royal National Institute for the Blind should be included in the consultation process.

Transport

Rather than providing a personal view on this subject can I refer you to a document:

“A Road to Health – How Travel in a Sparsely Populated Rural Area Affects Older People’s Health and Wellbeing”.

The Road to Health in Dumfries and Galloway is the culmination of a year’s work by nine volunteers from across the region and a variety of organisations as part of a Scottish Parliament Partnership Project.

Alex Fergusson MSP tabled a summary of the report on 19 January 2012 as Motion S4-01763.

Petition was lodged with the Scottish Parliament as PE1424 – Improving Transport Provision for Older People in Remote and Rural Areas and may be found at <http://scottish.parliament.uk/parliamentarybusiness/currentcommittees/48244.aspx>

The report subsequently secured debate in April 2012 and achieved cross party support.

People residing in the Langholm area can find themselves in Borders Hospital or in blue light situations over the border in Carlisle Infirmary due to the time it would take to reach Dumfries and Galloway Royal Infirmary.

Volunteers

Volunteers and voluntary organisations are essential to the development and day to day running of community based services. Some rationalisation of the plethora of voluntary services would allow for the pooling of resources, improvised communication and the provision of enhanced service delivery through scales of economy and reduction of duplication.

Question 3

YES

Question 4

YES

Question 5

YES

Question 6

YES

Comments

In the case of Dumfries and Galloway region the Health and Social Care Partnership should be established on a region-wide base only.

Question 7

YES

Question 8

NO

Comments

More detail is required in this area. Performance targets and results must be in a format which can be read and absorbed by the public in general. Examples of excellence should be highlighted.

Question 9

YES

Comments

If it is in the interests of scales of efficiency, without compromising the basic functions.

Question 10

YES

Comments

Careful selection of the Jointly Accountable Officer is crucial, someone with a good, broad knowledge of the remit who commands respect.

Question 11

NO

Comments

Not personally. However, public transport links can mean that patients cannot always get from home to Glasgow/Edinburgh for appointments and back in the same day.

Question 12

YES

Question 13

YES

Question 14

YES

Question 15

NO

Comments

My answer to Question 2 demonstrates the need for local determination. Much can be done in the next few years at Government and local level to ameliorate some of the difficulties highlighted.

Question 16

NO

Comments

Participation should be mandatory with strict timetables for implementation.

Question 17

YES

Comments

Use of digital technology. Development of hubs/one-stop shops. Integration of social care professionals in hubs/one-stop shops.

Question 18

YES

Comments

Use GP practices to establish hubs. Alternatively, use local authority buildings to establish hubs and keep costs/journey times down.

Question 19

Comments

No comment to make as not enough knowledge.

Question 20

NO

Comments

Not applicable to Dumfries and Galloway region – total population is approximately 150,000.