Affilex G Consultation Questionnaire
The case for change
Question 1: Is the 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 More Stable POPLIN -NOT NOWN AROUD BISSEST ISTLE + INTO TUTALE. BUT LESSONS MAS NOT ALWAYS CROSS OTTER BOWLINGT. Outline of proposed reforms TO ENSAGE.
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 Mo [] Comments OP PAREL SOOD - CONCOUN ABOUT ACTUAL LOSS RESOURCES + NEED FOL JOINT TRAINING (COMPULSORY?) LTC? DEMENTA? 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 the BUT NEED FOUS ON TRANSPIRE, AND THAT IT, MUCOUS CHANGES RECENTLY IN IT, SUSTEMS) TO MUCH ALL AT GICE.
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 Shows NOT

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 □
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Question 6: Should there be scope to establish a Health and Social Care Partnership that covers more than one Local Authority?
Yes ✓ No ☐
Comments Comments Cribrich Compares Stru Charge NHS LOTS FOR MEDICANN TO TESCO) Ourstion 7: Are the proposed Committee arrangements appropriate to ensure
Question 7: Are the proposed Committee arrangements appropriate to ensure governance of the Health and Social Care Partnership?
Yes 🗹 No 🗌
Comments & PAPER
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 Shows DO IF NOT FEST TO BE PROTECTING O LOW. (C SHOWS FORMS ON IMPORTANT NOT TRIVIAL ISSUES
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 □
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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 DEPEDS ON PROFESSIONAL AREA OF EXPERTSE
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 □
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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 IF DECIBROS WELL INFORMED
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 on PAPER - IMPLEMENTATION UNE DEPEND ON RESPECT FOR ANTHERINA DAY AN PARTIES
Question 14: Have we described an appropriate level of seniority for the Jointly Accountable Officer?
Yes [No [
Comments There So But Must AND BE IN FORCH LINGS
LOTAL NEEDS. SPECIAL POSOD WTHE FINANCIAY
GRSAMSANIONAL + PEOPLE SILINS

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
Comments Shows BE A LOT OF DIRECTON AT FRET - HAWKE
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 WHAT WILL HAPPED IF THEY DON'T.
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 TIME SUGO TO PARENCIPARE AS PART OF JOB. RENEGAT TOIN TRAINING TO BE INCOLED.
Question 18: Should locality planning be organised around clusters of GP practices? If not, how do you think this could be better organised?
Yes ☑ No □
Comments ASP? AS NO FOCUSSED ON HEATH NEEDS.
Question 19: How much responsibility and decision making should be devolved from Health and Social Care Partnerships to locality planning groups?
Comments As MUCH AS POSSIBLE UNIN ROME. SAROWS OTHER SET HEARD NOW THUR.
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?

Comments NUMBERS SOLDS RCGS DOAS CC.

Yes ☑ No □

Do you have any further comments regarding the consultation proposals?

Comments Concerns THAT A LOT OF CHAUSES BEINS HADE

AREADY - SMOND THERE NOT BE A HOLD OWTHER

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