

Midlothian Public Partnership Forum for Health - Response to the Scottish Government's Consultation on the proposal for the Integration of Adult Health and Social Care – September 2012.

The Forum members broadly welcomed the proposal of services joining together with the purpose of providing a seamless service for the people who use the service.

The Forum's experience of being involved with the change fund in Midlothian and observing how Midlothian Community Health Partnership and the Midlothian Council have worked together for the benefit of the community is evidence of what is possible. But this has involved a small group of people focusing on the outcomes that will make a difference in clearly defined projects. How this will translate across large departments is of concern, particularly when the focus in the consultation proposals is on structure with little mention of what the outcomes should be. People can become territorial when faced with such major change that may affect their job, terms and conditions and position and as a result the importance of focusing on who the service is for may be lost.

The two organisations have different cultures and operating systems. Therefore bringing these together will take time and require the support and skills of people experienced in change management. As this is a Government lead initiative, what support will be provided, and will staff be better informed of proposed developments/ process stages, than during this consultation phase?

The sharing of patient information will also need to be addressed if ultimately the proposed change is to work. The change will also require some bridging funding if the systems are to integrate. It is noted that the aim is that this change will be cost neutral. While this may be laudable in the current financial climate, if this change is to work for the benefit of people then some funding to facilitate the change is necessary, even if ultimately money is saved.

Response to Q 1 – focusing initially on outcomes for older people

Regarding the focus of the integration on people over 65, the Forum does not see how this will work in practice. Lothian Mental Health and Well-being Strategy 2011-16 made a welcome point of ensuring that there is no difference in service delivery once people reach 65, which had been the previous experience. How would such an age barrier work in view of the implantation of the Equality Act? In addition given that the proposals state that the Community Health Partnerships (CHP) will cease to exist, how will all the other services currently being delivered by them be delivered and in what structure? Given that staff often work across age groups this division does not seem practical.

Response to Q 2 – is there anything missing?

Yes

The major omission from these proposals is that there is no mention of public involvement. This is particularly disappointing given the emphasis in recent years

by the Health Directorate on the importance and value of involving people in service design, development and delivery of services. Given the recommendations of the Christie Commission, this lack of recognition of working in partnerships with patients, carers and the communities is even more of a gap. While there is a passing reference in 7.5 to carers and patient representatives in the patient pathway, there is clearly limited understanding of the requirements of carer and public involvement. There must be a requirement to involve people who use services, carers and local communities not only in the design and planning of services, but also in the development of the new structures being proposed.

In view of the proposed demise of the Community Health Partnerships, the implication will be the loss of the Public Partnership Forums. In Midlothian there are voluntary organisations and forums, e.g. for disability which engage with health and the council - will those channels of debate/communication be lost? The Forum has also similarly engaged both in health and in the community planning forums while linking with the other groups. The value of the Forum has been that it has brought together people with a variety of interests.

Chapter 5 - comment

Regarding the accountable person, why is this not the lead person?

Sue Edmond

Chair Midlothian PPF for Health