
Annex 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

Given the intended, and possibly unintended, scope of the changes an incremental approach is prudent.

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

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

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

Comments

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

Comments

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

Yes

Comments

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

Yes

Comments

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

Comments

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

Comments

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

Comments

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

Experience has taught us that the more integrated services seek to be then in general there is more ease in getting the necessary support for service users. Proximity of itself does not necessarily mean services are as well integrated as they ideally could be.

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

Comments

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

Comments

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

Yes

Comments

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

Local determination has to have its place

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

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?

Provide feedback to local partners on suggestions (good or bad) they make

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

Yes

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

As much as is relevant

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

Population, geography and transport systems should be taken account of e

Do you have any further comments regarding the consultation proposals?

My concerns arise from the work my organisation undertakes with regards to providing support to particularly disenfranchised families. Circle provides holistic support to families in their homes. Circle teams provide support to families where substance misuse and imprisonment is an issue. Circle has found that many of the parents, and indeed young people from these particular groups, have mental health issues which remain unaddressed while the presenting behaviours are criminalised. The cost to the individual, the family and society is enormous once someone is established in the criminal justice system as opposed to a more appropriate health and social care system. Community Payback Orders provided an opportunity for poor mental health and substance misuse issues to be addressed but the take up on this is negligible. The NHS is now providing support in prisons and Circle remains hopeful this will provide the basis for a more holistic model of care. The consultation also leads to Circle having concerns about the role of the voluntary sector particularly with regard to funding and it taking forward the usual innovative work the sector is renowned for.

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