



Marie Curie provides expert care to people with terminal cancer and other illnesses at home and in its hospices. The charity is also a leader in end of life care research.

Marie Curie response to Public Bodies Act Regulations – Set 2

Marie Curie is the leading charity providing care to people with a terminal illness in their own homes or in one of our nine hospices.

Our nurses provide them and their families with free hands-on care and emotional support at home, right until the end. In Scotland we run hospices in Edinburgh and Glasgow, which provide free specialist medical care for those with a terminal illness, and emotional support for their families, giving them the best possible quality of life.

Last year, in Scotland we supported nearly 5,000 patients with our nursing service and over 2,000 patients through our Scottish hospices.

Marie Curie believes that the integration agenda provides Scotland with an opportunity to produce better person-centred care and improve outcomes for patients and their families.

Below we have set out our response to the second set of regulations emerging from the Public Bodies Act.

Groups to be consulted on Integration Schemes and Strategic Plans

Marie Curie supports the list of people/representatives that integration authorities are required to consult with regarding the development of Integration Schemes and Strategic Plans.

However, we would highlight that the third sector is a massive community of organisations that reflect a wide range of services, interests and people. Any consultation carried out with the third sector must reflect the nature and complexities of the sector in order to be meaningful.

The scope of health and social care work to be delivered by integration authorities would make it difficult for any one representative of each of these areas to have an expert level of input into this scope.

Consultation with the third sector should not be limited to engagement with Third Sector Interfaces, and although it is perhaps right that they represent the sector on Integration Boards, the boards must reach out beyond them and engage more widely.

The third sector must also be supported to engage in consultation activity. Large national charities, which cover all or most of Scotland's local authorities and NHS Boards, have limited capacity and resources to engage with up to 30 Integration Boards. If the third sector is not supported to or do not engage with Integration Boards then it is unlikely that they will be in a position to truly meet the needs of their communities or draw upon all the resources and skills within their areas.

We would urge Integration Boards to engage in comprehensive community mapping exercises to ensure that they have complete information regarding their areas to inform future strategic plans.

The involvement of service users and carers must also be carefully considered. These people will need to be supported to be able to participate effectively. It is also important for Boards to find ways of engaging with the wider community of carers and service users who are not always in the position to express their views and thoughts through formal channels.

There is a danger that those with the greatest resource may generate the greatest influence, which may ultimately influence the focus of strategic plans and how resources are allocated by integration authorities.

Membership of Integration Joint Boards

We agree with the proposed list of people to be members of Joint Integration Boards, however, Marie Curie believes that the third sector representatives should have voting rights. If only statutory partner representatives have voting rights it makes two classes of membership for Boards.

It also means that the voice of the third sector will be diluted in deliberations and decisions made by Integration Boards, which may have an impact on the range and quality of services delivered by Boards.

The example set by the Reshaping Care for Older People (RCOP) Change Fund has shown that the third sector and statutory partners can work together equally as joint signatories to significant integration projects.

We also believe that third sector representatives, as well as representatives drawn from services users and carers should be given training and support by the integration board to enable them to participate effectively in its work and planning.

Membership of Strategic Planning Groups

We welcome a statutory requirement to have representatives from the third sector, carers and health and social care users on the Strategic Planning Groups. Strategic plans will be crucial in the success of the Integration Boards, so it is essential that they reflect the needs of the area they have been developed for.

As highlighted in other sections, we are concerned that one representative from each of the third sector, service users and carers cannot effectively represent their constituent groups. Strategic Planning Groups must consult and engage widely beyond its membership in order to ensure that its final plan is fit for purpose.

Integration Boards should also support third sector, services users and carers representatives with training and support to enable them to participate effectively.

Prescribed form and content of Performance Reports

We agree with the list of items that an Integration Board has to report on.

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