

Angus Health & Social Care Partnership



Public Consultation

Developing a Strategic Commissioning Plan

A Summary Report

Introduction

The integration of health and social care provides a new opportunity for the council and health services to work more closely together to provide the best possible service to the people of Angus in the future.

This means that GPs, hospitals, health workers, social care staff, and the voluntary and independent sectors will increasingly work side-by-side in local teams to share information and provide more coordinated services.

As part of this work we are now developing our strategic plan, outlining the differences we will make and our aspirations and plans for the future of care in Angus.

This new way of working will improve the quality and consistency of services for patients, service users, carers, families and communities.

During July, August and September 2015 we asked your opinion on what needs to happen to make sure that people can remain independent for as long as possible in their own homes and have choice and control over the services they receive.

We also asked you to tell us what needs to happen to make sure carers are supported and that they have a life outside of their caring role.

We wanted to hear from anyone, or any group, who had a view. This was your opportunity to get involved in influencing the development of a strategic commissioning plan that suits you best and helps shape services and support for your community. We had an online questionnaire, we went out on the streets of Angus to talk to people and we had a series of locality events.

This report summarises what you said, your views and opinions of what needs to happen across Angus to support local delivery of services, ensuring that our communities receive the services they need where they need them. It also provides details of what will happen to your views and opinions as we move forward with Health and Social Care Integration in Angus.

Some of your responses, for example, the need for accessible information, good communication and services that are community based have been raised in many of the questions. In order to show the varied responses we have received, if for example the need for good communication has already been identified in one set of responses, we have not repeated it across the others.

Question 1

What support do you think people will need to help them stay as active and as healthy as they can be?

You told us that affordable and accessible activities such as walking groups, exercise classes, bowls, swimming classes and education, about diet for example, at a local level would help.

You also thought that preventative support, for example wellness clinics, good community support, social support and promotional days or events at leisure centres, community centres and so on would be beneficial.

You believe that we need to raise awareness of what is available in your community, for example the services, events, leisure centres, support groups, and help you to access them. You also believe that these activities should be promoted in different ways. You feel that easy access to benefits and financial advice and information would also be helpful.

Good communication, accurate information, one point of contact, good transport links, support when leaving hospital, support to live at home, befriending services, education about your own condition, how to manage medication and a prompt response to minor illnesses were all important to you. Additional facilities to enable those with profound and multiple disabilities to stay as active and healthy as they can are also needed.

Question 2

What support do you think people will need to stay independent and live as long as possible in their own home?

You told us that there should be flexibility in the support available - trying as much as possible to accommodate the person and not trying to get the person to accommodate the service. You believe this support should be accessible and that whoever provides the support should be reliable and care about what they do.

Practical support such as gardening, decorating, odd jobs around the house and shopping would be helpful. Carers should be able to administer medications following some form of education.

You would like to see support made available to attend community activities, social events or just to go shopping on a regular basis to prevent you becoming isolated. This could be through voluntary organisations or the independent sector.

Having a link person you can turn to or somebody who is responsible for overseeing your social care that links in with G.P. Being clear who has overall responsibility for yours social care.

You would like to have one central health record that is used by primary care and secondary care and also social services. You would like to have the same carer coming in, not having a different person every single time.

You believe more appropriate accommodation with support provided is needed. Alternatively if you do not want to move, then advice on how to future proof your house would be helpful - what can be done while you are well that might make it easier in the future – for example a shower room or a ramp. In addition you would

like to know how to access to information about getting help with insulating your home, or installing a more efficient boiler or heating system.

You believe that help in terms of finances and benefit check is needed and assistance to complete forms. You would appreciate having and documenting discussions around what you wish for in the future in terms of your care while you still can.

Question 3

What needs to happen to ensure people continue to have choice and control over the service they receive and access to the right information to help them make decisions?

You feel that relevant information and access to the right information at the right time and in the right way is crucial to ensuring that you have choice and control over the services you may need.

To raise awareness this information should be published in a variety of formats and available online. It should also be available in your local area for example in GP surgeries, the local chemist, through local groups, from staff across all organisations, in libraries and other parts of the council such as the ACCESS offices. This information must be regularly updated, and it must be simple to read and easily understood.

You want people to listen to what you have to say, asking you what is important to you and supporting you to make your own choices and decisions. In addition where appropriate, family members and carers should be involved in this discussion from the earliest point and their contribution valued.

You also said that seeking out information is difficult and time-consuming and sometimes depends on going through procedural hoops. This makes it difficult to make an informed choice. You thought a dedicated point of contact by phone and speaking to you on a one-to-one basis would help with this.

You feel that services should be truly flexible to meet the needs of people at the time they need them and are also not dependent upon where they live. You feel it would be useful to have support on how to manage services as not all can or want to do this independently.

It would also be useful to have health and social care information on one website rather than multiple websites to be navigated, as this can be confusing for both users and professionals.

Question 4

We know that problems can develop into a crisis very quickly and may result in people being admitted to hospital needlessly. How can we all work together to support people in a crisis situation? What can we do to prevent problems from developing into a crisis?

You told us that to prevent problems from developing into a crisis there should be good local services with good community support. A local telephone number to contact for advice would also help but we need to ensure that people know about it. There should be better joint working between health and social care. We should have a team of people whose job it is to go in to support the person. G.Ps should be

part of this local team as you believe they don't liaise with social care as often or as well as they should.

You feel that everybody involved in providing the care and support should be talking to each other without one service provider feeling they are more important than another service provider. There should be openness and transparency across all service providers with clear communication between them and with the family.

GPs, social care, health and voluntary services need to share information and act quickly to avoid falls and deterioration of conditions. Home safety checks can identify immediate issues that can then be resolved, and preventative adaptations are better than larger reactive adaptations.

You believe we need to get better at identifying people at high risk of admission to a hospital before it gets to a crisis. This means getting the service to work with the person and being much more flexible. Early intervention and effective preventative work is what you would like. We should invest in prevention of admission services or intensive care at home.

You believe that it is important to know who the people at risk in community localities are. You suggest that joint working to identify people at risk through multi-disciplinary meetings and the involvement of the voluntary sector could support this.

Careful multi agency decision making and good links with GP practices is important. You also think that having a multi agency team attached to each practice with social workers and nurses with a single manager working together would be one way forward, and would ensure the right staff, with the right skills, are in place to support people. These services should be available for extended periods during the day and weekends to prevent unnecessary hospital trips.

There should be enough time for appropriate staff to spend with people to resolve issues and to make individuals feel understood and cared for. You think we need to have these types of conversations earlier and that we should ask people and their families what they might need to help them to remain at home. We should support them to consider things like telecare or to create a wellness recovery action plan so that early identification of problems and subsequent plans are in place.

Question 5

What needs to happen to further support communities to respect each other and maintain their own safety and wellbeing?

You said that we need to support communities to understand each other, to embrace the differences and to become aware of how much as individuals they can contribute. You would like to see more initiatives to help people engage with all members of their community, making them feel part of something. Involving them in consultations and making them feel proud of where they live.

You think we should be encouraging community connections and building community capacity, including having ways that different groups in the community know about each other and each others needs and can help each other out. You suggested having schemes like they do in other areas where you bank your time and services free e.g. doing someone's laundry - you get points for how much you do and can then spend it on a service you want like a few hours gardening from some one else in the scheme.

You said that many people feel isolated within their own communities. Work should be done to reduce loneliness, for example appropriate housing specifically for older people to allow them to live independently while living safely. You feel that there needs to be better understanding between generations to improve mutual understanding/empathy and that young people and older people need to meet together to bring up issues they both have. This could be through talks, visits, social events etc. involving all age groups.

You would like to see local communications and a good neighbour approach along side the promotion of well-being in communities; you would like us to bring services to the people, not people to the services.

You suggested that as most villages have an underused hall, why not have monthly clinics there involving local pharmacists, healthcare and social work to allow the local community to ask questions, get help about conditions, alcohol and drug abuse and stopping smoking or Diabetes checks. This could be run with a social cafe and cooking demonstrations and so on.

In addition you say that Police Scotland and the Fire Service could be involved in assuring people their home is safe and secure, and checking fire risks, especially people who have mobility issues. We should be promoting public duty to protect vulnerable members of society, as well as investing in real joint working - health, G.P.s, social care, housing, community planning, independent sector and voluntary sector. You would like to see Locality working, with powers to develop what is needed locally with less red tape and paperwork

Trust, respect, dignity, confidence, openness and honesty are clearly important issues with many of you who responded. Some of you feel that there is no respect any more and that we need to challenge people who behave inappropriately or do not respect their surroundings.

You suggested that good inter-disciplinary working should be used to set a good example of the type of relationships we wish to foster throughout our interaction with the public creating mutually respectful partnerships.

You also said that if respect, openness and honesty amongst service providers were clearly evident to the public in the delivery of care, this would have a positive impact for good. When people feel that they are of worth and not a nuisance, respect will blossom.

Some people thought there would always be an element of disrespect and danger in our communities and perhaps earlier engagement with school aged children would help. You suggested introducing into the curriculum something which ensures pupils engage and understand diversity. You felt that people can be different for a variety of reasons mental health, cultural reasons, disability and so on.

However, you also feel that respect is built in relationships and that there is a need to support and facilitate people to feel part of something. The promotion of community cafes for example, similar to the old community centres, that offer things that community members would be interested in - this would be a first step to creating communities rather than just people living in the same area.

Question 6

What needs to happen to ensure that carers are supported in their role as carer? What needs to happen to improve the health and wellbeing of carers and ensure that they have a life outside their caring role?

You have said that it is important for carers to be identified so that a carer's assessment can be undertaken. We must also ensure carers are always offered a welfare rights benefits /income maximisation check by the welfare rights team with a fast response to the assessment and payment of carer's self-directed support monies.

You believe that carers need adequate and robust service provision with adequate equipment to manage daily life skills better and appropriate care packages. Angus Carers support is important, as is time spent listening and recognising the caring role.

You have clearly identified that the most important thing that needs to happen is to ensure that carers have easy access to regular, reliable short term respite like the short breaks service that was cut last year. Carers need regular breaks from their role to enable them to have some me-time and relax without worrying about the person they care for.

Carers need good support from all sectors, specific support from organisations and the ability to ask questions about the person they care for without all the red tape around. The carer has to be involved in all parts of the care planning as they will be the vital link to the person's wellbeing at home and also the contact person.

You have said we must ensure that carers know how to contact someone if they need to. We must continue to keep them informed via Website, newsletters and sharing information. You think quick, clear access to support- who, what, when and how- a one stop shop would be beneficial. We should also make carers aware of other organisations and encourage meeting/outings with other carers. You tell us we should support and value them because, as carers, they save costly resources, time and money.

Your comments support the fact that carers need to feel valued; they may have their own health issues which can go ignored as the cared for person takes precedence. Giving carers an open door to services and allowing them to communicate with medical professionals on an equal footing you say would improve their well being and outcomes for them.

In short you have said that respite care needs to be offered on a regular basis before a crisis is reached, and a good care plan should be in place for the person being cared for. There should be availability of local services to support them and an understanding that communication is the key issue. The dissemination of good information is essential, as most people are unaware of what's available to them, as are most of the staff involved in care.

Question 7

Any other comment you would like to make or questions you would like to ask?

Many of you gave personal examples of what is working and what is not. You have also said that you hope that the Integration of health and social care can to be used as an opportunity to promote the co-production of service planning and

delivery, the promotion of health and well-being, the prevention of ill health and the pursuit of health equity.

You have said that communication, consistency and diligence can make or break the best laid plans. Duplication and confusion can waste time and resources. Professionals have to break down barriers between each other and make patients/carers/service users a priority. More staff is needed, more training, a real cultural shift, and more investment.

Funding must be tightened up and local services need to be available to all - many services are just too expensive for people to access including the financial cost of respite.

You have also asked what will be done to develop a public understanding of this new model of service and care. The structure should be no less difficult for the public to understand than the current local authority and health services.

You realise there is not a pot of gold, but look forward to what comes out of the consultation. You are particularly interested in how the new partnership will put in place mechanisms to show how things have improved with regard to efficiency and effectiveness.

You have told us that the ideas are out there in the community and that we need to move the balance of power to those working and living in localities in order to ensure that good ideas flourish. We should consult with staff at ground level - they're the experts on what works and what doesn't - not the people who hide away in think tanks. However you are not sure that management mind-set is quite there yet.

You think a one point of contact would be brilliant and save you lots of calls to different people and departments to get information. You would also like to see local voluntary organisations utilised to their best and also funded where needed, like Angus Care and Repair and Angus Carers who are vital to the wellbeing of both carers and the person they look after and they are very well respected organisations.

Next steps

Your comments, suggestions and concerns received following our public consultation: Developing a Strategic Commissioning Plan have been summarised in this document. They will be used in conjunction with other views and opinions gathered at local events, held in the four localities of Angus, to support the work currently in progress to create a strategic commissioning plan supported by locality commissioning plans. The strategic plan will be available for comment at the start of 2016.

A copy of the full report linked to this summary can be found on the Have your Say section of the Angus Council website: www.angus.gov.uk/strategiccommissioningplan

You can also see the feedback reports from the four locality events on our Health and Social Care Integration page (under Downloads): www.angus.gov.uk/healthsocialcareintegration