PROPOSALS FOR PRESCRIBED INFORMATION TO BE INCLUDED IN THE INTEGRATION SCHEME RELATING TO THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

CONSULTATION QUESTIONS

1.	Do you agree with the prescribed matters to be included in the Integration Scheme? Yes
	No
2.	If no, please explain why:
3.	Are there any additional matters that should be included within the regulations?
	Yes X
	No
4	If you place augreet

4. If yes, please suggest:

Presently, Medical Directors can take action to prevent unsafe care by directing and enforcing spend where it is most required to address an immediate clinical issue. These regulations raise the question of where additional resources would come from to address such issues, i.e. which bodies will contribute financially if such an issue is identified? An additional layer of complication is added in boards that account for more than one partnership area, whereby – depending on the issue at hand – it may be most appropriate for all constituent organisations in a health board area to contribute financially., Though the regulations as they are currently written allows this to be resolved locally, we feel that this area should be covered more explicitly within the regulations to remove any dubiety, and to ensure continuation of a safe and effective service at all times.

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PROPOSALS FOR PRESCRIBED FUNCTIONS THAT MUST BE DELEGATED BY LOCAL AUTHORITIES RELATING TO THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

1.	Do you agree with the list of Local Authority functions included here which must be delegated?
	Yes
	No
2.	If no, please explain why:
3.	Are there any further comments you would like to offer on these draft regulations?
	regulations?

PROPOSALS FOR REGULATIONS PRESCRIBING FUNCTIONS THAT MAY OR THAT MUST BE DELEGATED BY A HEALTH BOARD UNDER THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

CONSULTATION QUESTIONS

1.	Do you agree with the list of functions (Schedule 1) that may be delegated?
	Yes
	No
	If no, please explain why:
2.	Do you agree with the list of services (Schedule 2) that must be delegated as set out in regulations?
	Yes
	No X
	If no (i.e. you do not think they include or exclude the right services for Integration Authorities), please explain why:

We wish to highlight the potential for clinical disintegration or uncoupling as the regulations stand. Two specifics worth highlighting are the suggestion that community dialysis services are in the H&SCP and the positioning of pharmacy and primary care drugs budgets. If the latter if positioned within the H&SCP it poses a risk to the optimal management of clinical effectiveness, cost effectiveness and safety as most of the risks and opportunities in these regards lie at the interface between primary and secondary care.

In addition, due to the major future challenges of clinical care, it is highly likely that the way the NHS is configured may have to change to meet future demand. It is not clear how an overall view of hospital services may be adopted if there are many different locality planners all with their own agenda which may not enable

3. Are you clear what is meant by the services listed in Scheon Annex A)?	dule 2 (as described in
Yes	
No	
If not, we would welcome your feedback below to ensure we description possible of these services, where they may not consistently in practice.	

4. Are there any further comments you would like to offer on these draft regulations?

We believe the definition of 'regional service' needs to be reviewed as that contained in the legislation does not correspond with what is viewed as a regional service in most health systems in NHS Scotland. In a practical sense, this means that individuals are often part of more than one rota, which could become potentially more difficult to have oversight of under a locality-based planning model and, consequently, may have an impact the delivery of regional services. The commissioning model in the regulations does not take into account anything other than a locality view and a way needs to be found to include the bigger picture in consideration to enable Health Boards and IJBs to manage risks accordingly.

There is perhaps a need for health boards to define what services are provided across the whole health board area and not just in one HSCP. There should be a clearly defined governance processes for these services. If resource is needed for a service that sits across/between two organisations where does it come from and who makes decisions? How do we ensure smooth person centred care?

There is a real risk of fragmentation of care across the interface of acute/primary and mental health as there is no clear managerial or clinical accountability for planning and delivery of clinical care across the interface.



PROPOSALS FOR NATIONAL HEALTH AND WELLBEING OUTCOMES RELATING TO THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

1.	Do you agree with the prescribed National Health and Wellbeing Outcomes?
	Yes No
	If no, please explain why:
2.	Do you agree that they cover the right areas?
	Yes No
3.	If not, which additional areas do you think should be covered by the Outcomes?

	nk that the National Health and Wellbeing Outcomes will be understood ervices, as well as those planning and delivering them?
Yes No	
5. If not, why	not?
6. Are there a Regulations?	any further comments you would like to offer on these draft
Regulations?	



PROPOSALS FOR INTERPRETATION OF WHAT IS MEANT BY THE TERMS HEALTH AND SOCIAL CARE PROFESSIONALS RELATING TO THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

Do you agree that the groups listed in section 2 of the draft regulations prescribe what 'health professional' means for the purposes of the Act?
Yes No
If you answered 'no', please explain why:
Do you agree that identifying Social Workers and Social Service Workers through registration with the Scottish Social Services Commission is the most appropriate way of defining Social Care Professionals, for the purposes of the Act?
Yes
No
If you answered 'no', what other methods of identifying professional would you see as appropriate?

5.	there ulation	further	comments	you	would	like	to	offer	on	these	draft

PRESCRIBED FUNCTIONS CONFERRED ON A LOCAL AUTHORITY OFFICER RELATING TO THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014

1.	Do you believe that the draft Regulations will effectively achieve the policy intention of the Act? Yes X
2.	No If not, which part of the draft Regulations do you believe may not effectively achieve the policy intention of the Act, and why?
	It is felt that the framing of the consultation places the focus of conversations too much on pathways and service delivery, and does not take account of whole systems of health improvement and public health. It is of crucial importance to ask the right questions and to be clear as to what exactly we are trying to achieve through this legislation. We are unclear as to the evidence-base from academic sources underpinning this policy and urge caution to ensure that unintended consequences and additional layers of bureaucracy are avoided.
3.	Are there any further comments you would like to offer on these draft Regulations?