

Draft Regulations Relating to Public Bodies (Joint Working) (Scotland) Act 2014 – Set 2

Consultation response from the British Red Cross

August 2014

Who we are

- 1 We help people in crisis, whoever and wherever they are. We are part of a global network that responds to conflicts, natural disasters and individual emergencies. We enable vulnerable people in the UK and abroad to prepare for and withstand emergencies in their own communities, and when the crisis is over we help them to recover and move on with their lives.
- 2 The British Red Cross is part of the International Red Cross and Red Crescent Movement, which comprises:
 - > The International Committee of the Red Cross
 - > The International Federation of Red Cross and Red Crescent Societies, and
 - > 187 National Red Cross and Red Crescent Societies worldwide.
- 3 As a member of the Red Cross and Red Crescent Movement, the British Red Cross is committed to, and bound by its Fundamental Principles. These are: humanity, impartiality, neutrality, independence, voluntary service, unity and universality.

As an auxiliary to government in the UK, we help the emergency services and statutory authorities in any way we can to meet the needs of people affected by emergencies, big or small.
- 4 In Scotland, the Red Cross has over 4,000 volunteers supported by 500 staff members who deliver our humanitarian work in communities across the country. Last year in Scotland, we responded to more than 400 emergencies, trained more than 30,000 people in life-saving first aid, assisted more than 550 asylum seekers and refugees and reached more than 23,000 young people with humanitarian education.
- 5 In relation to health and social care, we helped 32,000 people live more independently through our health and social care services in Scotland last year. We provide valuable time-limited support to vulnerable people, helping them live independently in their own homes – reducing admissions to hospitals, residential and nursing care.
- 6 Our largest service is regulated by Care Inspectorate, and its staff are PVG-checked, qualified and trained to work with both older people and vulnerable adults.

Introduction

The British Red Cross welcomes the opportunity to respond to this consultation. Our services build confidence, enabling people to live independently in their own home.

We provide:

- Extra support and care following discharge from hospital
- Assistance around the home
- Befriending to prevent social isolation
- Loans of equipment, such as wheelchairs and mobility aids

In addition the Red Cross offers a regulated health and social care service, *Options for Independence*. This supports adults with health or disability issues. It provides a range of support to meet the individual needs of service users. The service aims to help people live independent lives.

Our response is based upon our experience of delivering services like these, all across Scotland. We are broadly supportive of the principle of health and social care integration, and our points will reflect the knowledge gained from this work. The following pages show only those questions which we have responded to.

Response to consultation questions

Annexe 1 (D) Question 1

Do these draft regulations include the right groups of people?

No.

Annexe 1 (D) Question 2

If no, what other groups do you think should be included within the draft regulations?

The British Red Cross welcomes the inclusion of non-commercial social care providers in the schedule of standard consultees. However, a number of organisations may not be considered to be providers of health and social care, despite providing services such as:

- Advocacy, information and advice for disabled people
- Employability support

This includes third sector support organisations such as Community Care Providers Scotland. A wider definition of “third sector bodies carrying out activities related to health or social care” than that provided by Annexe 4 (A) is required, in order to include such organisations.

Annexe 1 (D) Question 3

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

The British Red Cross would welcome emphasising co-production of services, rather than consultation. The benefits of this approach are evident, and the process would support the involvement of a wider range of individuals and organisations.

Such a shift in emphasis would develop community capacity and resilience. It would aid meaningful participation if the partnerships were accountable for building this capacity within communities.

On page 13, it states that the integration authority must consult with these groups, “where they are likely to have an interest in the decision”. The Red Cross would suggest deleting this proviso. Doing so would allow these groups to determine the relevancy of any proposals.

The Red Cross believes that co-production and transparency should be the default position.

Annexe 2 (D) Question 1

Are there any additional non-voting members who should be included in the integration joint board?

Yes.

Annexe 2 (D) Question 2

If you answered 'yes', please list those you feel should be included?

The British Red Cross' experience suggests that outcomes will only be improved if social care housing providers are integrated into the planning and decision-making process.

The Red Cross believes there is a need to define the non-voting advisory membership of the third sector, service users and carers. The list of standard consultees in annexe 1 recognises the expertise and experience of health and social care representatives.

This does not appear to be the case with the non-voting advisory members. One representative from each group may be unable to provide the wider views of their respective constituencies.

Annexe 2 (D) Question 4

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

The British Red Cross believes that the third sector's contribution will be crucial to meeting the national health and social care outcomes. To achieve this, the sector must be a full participant in the planning and decision-making process. This will have implications for the resources of all partner voluntary organisations.

Therefore, the local partnerships need to help these organisations to manage their time, resources, and engagement with their own stakeholders. This includes making sure that they have the tools, skills and support they need to engage with their peer organisations effectively.

The draft regulations do not appear to address the issue of effective third sector participation. Nor do they place any requirement on partnerships to enable this. This risks the partnerships disconnecting from the people who rely upon the services and expertise of the voluntary sector.

Annexe 3 (D) Question 1

Do you agree with the proposed minimum membership of the integration joint monitoring committee, as set out in the draft order?

No.

Annexe 3 (D) Question 2

If you answered 'no', please list those you feel should be included?

In our response to Annexe 2 (D) Question 2, the British Red Cross explained the importance of including social care housing providers. Their participation in the joint monitoring committees will be vital to improve health and social care outcomes.

Annexe 3 (D) Question 3

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

The British Red Cross would welcome a commitment to transparency in each committee's work. Therefore, membership information, agendas and minutes should be easily accessible. They should establish dedicated websites which communicate in plain English, and all information should be available in other accessible offline formats.

Each partnership needs to make sure that its work can be accessed by all parts of its local community. This means information must be available in the languages and formats used within its local area. Otherwise, a significant proportion of people would be excluded from the decision-making process.

Annex 4 (D) Question 1

The draft regulations prescribe the groups of people that should be represented on the strategic planning group. Do you think the groups of people listed are the right set of people that need to be represented on the strategic planning group?

No.

Annex 4 (D) Question 2

If no, what changes would you propose?

As previously stated, the British Red Cross believes that there is a need to widen the definition of, “third sector bodies carrying out activities related to health and social care”. This would make sure groups which may be excluded are involved in the planning and decision-making process. This includes those who provide services such as:

- Advocacy, information and advice for disabled people
- Employability support

This includes third sector support organisations such as Community Care Providers Scotland.

Annex 4 (D) Question 3

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

The British Red Cross believes that the success of the partnerships' commissioning will depend upon the quality of strategic planning. Effective strategic planning is determined by full and inclusive participation amongst all partners.

To enable this, the Red Cross believes that the partnerships should be asked to document their approach to participation. This would include how they enable service users, carers, third sector organisations and others to be an effective part of the process.