

## **Scottish Parliament Health & Sport Committee Call for Evidence on Integration Authorities Consultation with Stakeholders – Response from the Scottish Health Council and Healthcare Improvement Scotland**

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### **About the Scottish Health Council**

The Scottish Health Council was established in April 2005 to promote improvements in the quality and extent of public involvement in the NHS in Scotland. It supports and monitors work carried out by NHS Boards to involve patients and the public in the planning and development of health services and in decisions that affect the operation of those services. The Scottish Health Council has a network of 14 local offices across Scotland (one in each NHS Board area) and a National Office in Glasgow. The Scottish Health Council, which is part of Healthcare Improvement Scotland, is a key partner in the delivery of Our Voice.

Pam Whittle has been providing leadership for a reflective exercise regarding the nature of the Scottish Health Council, in the context of the integration of health and social care and wider changes. The reflective exercise has been informed by feedback from a number of stakeholders. This has included an evidence session with the Health and Sport Committee on 24<sup>th</sup> January 2017 followed by a letter from the Committee. One theme from feedback received from stakeholders has been the need for a body which has a remit to promote and support meaningful engagement of people and communities across integrated health and social care.

### **1 Introduction**

- 1.1 The Scottish Health Council welcomes the Health and Sport Committee's examination of Integration Authorities' approach to engagement. We have shared the Committee's Call for Evidence with our individual, community and third sector contacts across Scotland and encouraged Public Representatives serving on Integration Joint Boards to respond.
- 1.2 The Scottish Health Council's focus is in supporting and promoting effective and meaningful public involvement in services across health and social care. Whilst the Scottish Health Council's current role does not formally extend into social care, the Our Voice framework spans both health and social care. We have therefore been working in a number of ways with Integration Authorities to support their public engagement activities. Our submission to the Committee concentrates on a few aspects of our work which we hope will be helpful. There is more information about the [Scottish Health Council](#) and the work of [Our Voice](#) on our websites.

## **2 Do you know how to get involved with Integration Authorities to influence decision making?**

- 2.1 The Scottish Health Council previously supported NHS Boards in developing Public Partnership Forums which were intended to operate as one mechanism by which Community Health Partnerships would maintain dialogue with their local communities. As engagement structures to support health and social care integration have emerged, the Scottish Health Council has offered to provide support and advice to all Integration Authorities on how best to adapt existing approaches and how to develop new ones to support both health and social care. Some of the Integration Authorities have contacted us for support in areas such as recruitment of members of the public to new structures, practical support to enable new approaches to get up and running, assistance to develop accessible materials, and support so that existing engagement mechanisms can be developed and strengthened.
- 2.2 There are a range of structures in place across Scotland to support public engagement in health and social care. Whilst a number of areas have retained their existing Public Partnership Forums (PPFs) as one engagement method others, often with the support of the Scottish Health Council, have refreshed their role and composition to take account of social care. Other engagement approaches include topic specific groups linked to localities and Public Involvement Networks. The development of new approaches has resulted in some Public Partnership Forums being disbanded.

## **3 Were you consulted in the preparation of strategic plans or involved with the work of the Strategic Planning Group?**

- 3.1 Some of the Integration Authorities shared their strategic plans with the Scottish Health Council's Local Offices when they were being drafted. This enabled Local Officers to provide advice on ways to consult the public on them. Some Scottish Health Council Local Officers were also involved in some areas in relation to the work of the Strategic Planning Groups with a role to provide advice on public engagement.
- 3.2 In setting out the arrangements for membership of Integration Joint Boards, regulations made in connection with the Public Bodies Joint Working (Scotland) Act 2014 state that an Integration Joint Board should include at least one representative from a third sector body, a service user and an unpaid carer. Integration Authorities have approached recruitment in a variety of ways and dependent on local circumstance. For example:
- recruited from former Public Partnership Forum or other existing engagement mechanism such as Patients Forums (most typical)
  - public and open local advertisement
  - invitation to selected and interested individuals
  - requests for nominations through third sector organisations.
- 3.3 It is important for representatives serving on Integration Joint Boards to be trained and supported if they are to feel informed, engaged and valued and so they can fulfil their role in a meaningful way. Through the Our Voice framework, we have been working in collaboration with the Coalition of Carers in Scotland and the ALLIANCE to develop peer networking arrangements for all service user, carer and third sector representatives.

- 3.4 So far, the Scottish Health Council has organised 7 local events which have given service user representatives in Greater Glasgow & Clyde, Dumfries & Galloway, Lanarkshire, Ayrshire & Arran, Borders, Lothian and Tayside an opportunity to share their experiences. In partnership with the ALLIANCE, we recently organised a Scotland-wide peer networking event for all carer, service user and third sector representatives on Integration Joint Boards. This was part of work commissioned by the Scottish Government in relation to Our Voice. It followed an earlier Our Voice national event held in November 2015 which included scoping interest in developing a support network for carer, service user and third sector representatives on Integration Joint Boards.
- 3.5 From the feedback we have received through these events, some representatives have indicated that they would welcome additional training and support to help them fulfil their role.
- 3.6 Through the work with these representatives, the issue of not having voting rights is sometimes perceived as a barrier to equal and meaningful discussions.

#### **4 What could be done to ensure greater collaboration and engagement in the decision making process of Integration Authorities?**

##### *Developing the capacity of individuals and communities to engage*

- 4.1 One of the activities of the Scottish Health Council's local offices is to raise awareness with people of opportunities to get involved in local health and social care services. We are aware of the growing importance of going beyond simply connecting people with Integration Authorities and offering practical support to individuals and communities to get involved.
- 4.2 During 2016, the Scottish Health Council trained all of its Local Officers (21) in how to deliver capacity building training to individuals and communities using Chest Heart & Stroke Scotland's Voices Scotland Programme. We have also started to adapt this programme so that it is suitable for other audiences such as people with learning difficulties and young people. During the last 4 months, the Scottish Health Council has delivered a number of training sessions for local communities which comprises a series of modular sessions which can either be run as a full programme or stand alone sessions depending on needs. The topics we cover include:
- understanding the structure of health and social care services in Scotland
  - finding out which health and social care organisations are looking for involvement and views
  - how to effectively communicate with health and social care professionals
  - learning how to improve services by developing a 'case for change'
  - developing the skills to become a patient or carer representative – learning about planning, monitoring and improving health and social care services.
- 4.3 The training has been well received. Its aim is to help individuals and communities have the confidence to meaningfully engage in decision making processes.

## *Supporting staff in health and social care structures with engagement*

4.4 In March 2016, the Scottish Health Council, as part of Our Voice, organised an event which brought together health and social care engagement leads from across Scotland. It provided an early opportunity for them to network with peers and to discuss the opportunities and challenges associated with involving the public across different sectors on a Scotland wide basis. At that event, we asked what sort of support staff needed to be able to encourage and empower the public in their areas. In response they identified 4 key areas:

- leadership (not simply support) from senior management was very important to empowering individuals to get involved. There was an identified need to take feedback and demonstrate how it can be used to encourage communities to continue engaging with service providers
- training – a need was identified for providing staff who have a role in supporting participation with training in all areas of engaging with the public (the Scottish Health Council was suggested as a provider)
- sharing practice – participants felt there should be a variety of means and methods for sharing best engagement practice across Scotland
- opportunities for networking and peer support.

4.5 One important area where greater clarity is required for people and communities, as well as integration authorities, is in relation to service change.

*Guidance on Informing, engaging and consulting people in developing health and community care services CEL 4 (2010)* sets out a process for NHS Boards to follow when proposing changes to NHS services. This guidance requires to be reviewed and updated to take account of health and social care integration. This is particularly important given the ambitions for health and social care services set out in the Health and Social Care Delivery Plan.

8<sup>th</sup> March 2017