

Glasgow City Health and Social Care Partnership

RESPONDENT INFORMATION FORM



Please Note this form **must** be returned with your response.
Are you responding as an individual or an organization? (required)

YES Organisation

What is your name or your organisation's name? (required)

Dowanhill, Hyndland and Kelvinside Community Council

What is your phone number?

0141 334 6354

What is your address?

Ann Laird, Chairman 2/3, 16 Dudley Drive Glasgow
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What is your postcode?

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What is your email?

Annlaird@hyndl.demon.co.uk

The Glasgow City Integration Joint Board may publish consultation responses, and we would like your permission to do so. Please indicate your publishing preference:

YES - You can publish response with name.

We may share your response internally with other teams who may be addressing any issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for us to contact you again in relation to this consultation exercise?

YES - You can contact us again.

Our 3-page written submission follows this front cover page.



Dowanhill, Hyndland and Kelvinside Community Council

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Glasgow City Integration Joint Board: Health and Social Care

Participation and Engagement Strategy Options for city-wide engagement structures

Glasgow City Council Consultation (DRAFT document)

Dowanhill, Hyndland and Kelvinside Community Council Submission: 12 September 2016

Introduction

The Strategy outlines the principles and approach that we will take to engaging with individuals, groups and communities in service planning and service development.' Fortunately the document is short and can be accessed at:

<<https://www.glasgow.gov.uk/index.aspx?articleid=19690>>

Essentially the purpose is to develop mechanisms to elicit feedback and ideas to monitor and improve the working of the newly developing health and social care integration process about which we have previously commented.

The introduction begins with a claim '...we have a good history of working as a partnership between Social Work, NHS and community groups to develop and deliver health and social care services...'

The anecdotal evidence we have received suggests otherwise with an opaque multiplicity of access points and the existence of 'silos' throughout the service. How to discover availability of care, public or private is unclear. A single contact is essential especially for those discharged early from primary care or with a debilitating condition.

The relationship between the Integration Joint Board and the Glasgow City Health and Social Care Partnership needed to be made clear at the beginning of this strategy draft. The document reads as though there are two separate bodies with similar responsibilities. Is this not duplication and added cost?

Principles of Engagement

The aspirations outlined in the document are laudable. Of the nine points listed in the introduction, the last three deserve comment.

'Striving for innovation'; we suggest adding **appropriate** before innovation to indicate a focused, directed approach.

'Developing a strong identity' but for what purpose? Presumably clear lines of communication and contact points for existing and potential users of the services so that contact is easy. A strong favourable identity will come from successful integration, organisation simplification and good service provision.

'Focussing on continuous improvement' probably best achieved by encouraging ultimate service providers and users to offer suggestions.

The principles of participation and engagement outlined reveal perpetuation of two bodies: Glasgow City Integration Joint Board and Glasgow City Health and Social Care Partnership. Why should two bodies exist in an integrated organization? This can be confusing for those offering feedback.

Items 1 to 8 reflect good intentions.

Item 3: 'We will be **Transparent** in all our engagement activity. We will share information, and will answer questions fully and frankly. We suggest adding **'honestly'** to this.

Item 4: 'We are committed to **Two Way Communication...**' Those initiating communications should always be given a response. We are aware that there will always be those who complain without justification, but they will become known. Nevertheless their complaints should be examined, particularly if others also mention them.

Suggested item 9: Those initiating critical comments should be assured of confidentiality and protection from intimidation. Unjustified comments should be given a polite but firm response.

The Glasgow Approach

Through this strategy we are committed to:

Seven items listed mostly reflect formal systems which should follow organizational lines of responsibility. But they must not discourage informal communications directly between users, staff, and senior managers at any level, including the CO.

Levels of Involvement

A formal organization should be well supported by flexible easily accessible contact points for feedback collection. The formal systems suggested appear to offer opportunities for ideas to be corrupted by system complexity, but this might be inevitable. Therefore alternative direct access to the highest levels of responsibility should be facilitated.

Exactly what is meant by 'activity' in this section is unclear.

'To assist with promoting an open and transparent approach when conducting activities, the following definitions will apply'

Inform

Providing appropriate information...

Or (should be changed to And)

Collecting and using existing information...

Consult

Why one-off and not continuing?

Partner

'An equal part of the decision-making process.' How can this be possible with information asymmetry?

Integrated Engagement Structures

Participation and 'engagement' requires an integrated approach. This document implies greater complexity with the Joint Board and the Partnership.

The anecdotal evidence which we have shows notable weaknesses in the existing structures with multiple points of access for services leading to confusion, paucity of provision in some cases and complexity for those with disabilities.

Suggested 'Item 1' making no change to existing structures is self-evidently unsatisfactory as it lacks integration.

Suggested 'Item 2' integrated client and interest group best meets the integration criterion, with elements on 'Item 3' local engagement network across health and social care.

Locality Engagement Activity

It is likely that the same localities as used by the Glasgow Community Planning Partnership will be adopted. Such structure may be adequate in some circumstances, but the danger is that criticisms raised at this level may be suppressed. There needs to be a clear route for all feedback. Spontaneous unsolicited communications should be encouraged.

Every suggestion, criticism or observation requires a response or the process will become ineffective resulting in a waste of resources. Failure to respond will discourage input from most knowledgeable sources, those that perform the service and the recipients.

City-Wide Engagement

Designed to spread information and feedback across the city, there will be meetings of representatives of the Joint Board and local communities.

That there will also be similar meetings with the Social Care Partnership's CO illustrates the weakness of continuing both organisations rather than integrating them. Is this not unnecessary duplication?

Engagement with the Integration Joint Board

There are representatives of social care users, health service users, and carers on the Joint Board. But they have no vote.

In addition *'...the City Health and Social Care Partnership will put in place an appropriate level of support to articulate the interests of their respective stakeholder groups to the best of their ability'*
What does this mean?

The Glasgow Joint Board has a Public Engagement Committee to

-consider petitions

-monitor implementation of the Board's Participation and Engagement Strategy

-perform functions conferred by the Board consistent with Participation & Engagement strategy.

There is no mention of system or organisation redundancy in all this.

Community Planning

also **Consultation Activity**

Considerable repetition from previous content.

Equalities

Equality can be achieved by reducing the best service to equalize the worst. There is no mention of raising the lowest to meet the best. That is a critical omission of intention from this and previous documents.

Conclusion

The Dowanhill, Hyndland and Kelvinside Community Council strongly supports the aspirations of the organising Board and Partnership in endeavouring to establish mechanisms to encourage public involvement in their activities. We believe that the existence of two organisations will result in duplication, overlap and flawed integration.

Furthermore there is no reference to internal feedback from staff, particularly front-line staff, but we appreciate that this document was not intended to cover that critical aspect of feedback

The effectiveness of the proposals included in the strategy document will depend on the way in which they are applied.

We are grateful to our Vice-Chairman Douglas Briggs for writing this document, and to several Community Councillors who contributed their experiences, anonymously and in confidence.



Chairman, Dowanhill, Hyndland and Kelvinside Community Council
12 September 2016