

# *Consultation Questionnaire*

Please use this questionnaire to give us your views on Transforming Your Care.  
Please send your responses to:

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**However you choose to give us your views, we want to hear from you.  
Please send us your comments by 15 January 2013.**

Alternative formats of this document including EasyRead, Braille, audio formats, large print or minority languages (for those not fluent in English) are available on request. Please contact as above with your request.

*Transforming Your Care:  
Consultation Response Questionnaire: Downloadable Form*

## Introduction

To have your say, please complete the questionnaire below.  
Further information on the Transforming Your Care consultation is available on the 'What we are consulting on' page.

**Note:** Questions marked with an asterisk (\*) indicate required information.

### Freedom of Information – Please Read

The HSCB will publish a summary of responses following completion of the consultation process. Your response, and all other responses to the consultation, may be disclosed on request under the terms of the Freedom of Information Act 2000. The HSCB can only refuse to disclose information in exceptional circumstances. The HSCB cannot automatically consider as confidential information supplied to it in response to a consultation. However, it does have the responsibility to decide whether any information provided by you in response to this consultation, including information about your identity should be made public or be treated as confidential. This means that information provided by you in response to the consultation is unlikely to be treated as confidential, except in very particular circumstances.

If you do not wish information about your identity to be made public please select the 'Yes' option below to request that your response be treated as anonymous.

**\*Please indicate if you wish your response to be treated as anonymous.**

**No**

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**About you or your organisation:**

<b>*Are you responding (please tick):</b>	On behalf of yourself?	<input checked="" type="checkbox"/>
	On behalf of someone else?	<input type="checkbox"/>
<b>*Are you/they (please tick):</b>	a) over 65;	<input type="checkbox"/>
	b) under 65;	<input type="checkbox"/>
	c) disabled;	<input type="checkbox"/>
	d) a carer;	<input type="checkbox"/>
	e) a parent;	<input type="checkbox"/>
	f) other?	<input type="checkbox"/>
<b>Organisation (if applicable):</b>	Federation of the Royal Colleges of Physicians of the UK	
<b>Name</b>	Dr A D Dwarakanath FRCP Edin	
<b>Job Title (if applicable):</b>	Secretary, Royal College of Physicians of Edinburgh	
<b>Postal Address:</b>	Royal College of Physicians of Edinburgh, 9 Queen Street, Edinburgh EH2 1JQ  NOTE: THIS SUBMISSION IS ON BEHALF OF THE FEDERATION OF THE ROYAL COLLEGES OF PHYSICIANS OF THE UK	
<b>Email Address:</b>	l.lockhart@rcpe.ac.uk	
<b>Contact Telephone Number:</b>	0131 247 3608	

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\*Please fill in any boxes marked with an asterisk, this will allow us to ensure that we have received a cross section of responses

**Question 1.**

*Do you agree that our health and social care services need to change in order to meet the needs of the community and promote health and well-being through prevention and early intervention so that as much acute illness as possible is avoided?*

Strongly agree       Strongly disagree       Have no opinion   
 Agree       Disagree

**Comments:**

The Federation feels that while there needs to be a re-configuration of the delivery of health care systems in Northern Ireland due to changing population, disease patterns and means available to deliver health care, it is vital that effort is focused on change through evidence based prevention strategies which are proven and trusted.

In terms of the challenges being faced, we wish to highlight the recent RCPE briefing on [Inappropriate admissions to hospital: myth versus reality](#) as well as the RCPL report [Hospitals on the edge?](#) and the RCPL [Future Hospital Commission](#) which is due to report in 2013. We believe that the issues they cover are equally pertinent to Northern Ireland. Outcome indicators need to focus less on process and take more account of quality, through more structured and systematic patient feedback.

**Question 2.**

*Do you agree that people who need care and support should have control over how their assessed care and support needs should be met?*

Strongly agree       Strongly disagree       Have no opinion   
 Agree       Disagree

**Comments:**

The Federation feels the word “control” needs to be carefully defined in this context. Of course patients who are competent should have their autonomy respected, but control might mean total responsibility and being left unsupported to struggle with bureaucracy in the health and social care services, particularly if care involves integrating statutory, voluntary and community services.

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**Question 3.**

*Do you feel the provision of individualised budgets and self-directed support should be more widely promoted?*

Yes  No

**Comments:**

It is generally felt that it is beneficial for patients to have input into these areas. However, we would welcome greater evaluation of potential benefits to patients and more detail on how vulnerable and elderly patients would be supported in this process.

**Question 4.**

*Do you agree we should organise our services to enable people to stay at home for as long as possible and / or be cared for at home?*

Strongly agree  Strongly disagree  Have no opinion   
Agree  Disagree

**Comments:**

The Federation feels that an innovative approach is needed so that health care professionals in the community are empowered to deal with the wide range of issues which often prevent patients staying in or returning to their own home. Social services must be adequately resourced to develop efficient integrated working with acute and primary care and allow effective discharge.

Some patients with very complex needs are optimally cared for in a care setting and cannot be adequately cared for at home. Whilst we should do all in our power to make it possible for people to be cared for at home, we must recognise that sometimes this is not possible or desirable. Recommendations should be based on the patient's needs and what will work best for them within the reality of financial constraints.

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**Question 5.**

*Given the choice, who would you like to provide your care and support in your home?*

- 1. **Statutory bodies**
- 2. **Voluntary and community groups**
- 3. **Independent sector**
- 4. **A mixture of the above**
- 5. **You would prefer to receive the money yourself to choose**

**Comments:**

No comment.

**Question 6.**

*Do you agree that Integrated Care Partnerships could make a positive contribution to the delivery of care closer to home rather than in hospitals?*

- Strongly agree**     **Strongly disagree**     **Have no opinion**   
**Agree**     **Disagree**

***If your response is 'disagree' or 'strongly disagree', do you think there are any alternative ways to deliver care closer to home? Please provide details***

For a defined range of conditions there are benefits. The benefits could be optimised by having a unified patient record to avoid duplication, and well defined links between GPs and relevant specialists.

However, while the continual pressure to deliver care closer to home may have laudable aims in terms of patient experience, the Federation is concerned that quality of care, cost effectiveness and patient safety may suffer as a result and could also lead to significant inefficiencies of practice from the point of view of the health care professionals delivering the care. Large scale pilot programmes are necessary and must be proven to be successful before services are moved.

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**Question 7.**

*Do you agree with the proposals set out in respect of older people's services?*

**Strongly agree**     **Strongly disagree**     **Have no opinion**   
**Agree**     **Disagree**

***Do you believe there are better alternatives? Please provide details***

The Federation is broadly in agreement with the proposals. However, page 26 of the document points out how much money is spend on elderly patients in hospital and then goes on to say that "many arrive at hospital because there is no viable alternative in the community". The Federation is concerned that the impression is given that elderly people should not be admitted to hospital. Older people deserve equal access to acute medical treatment when it is needed and the document should make this clear: if there is no viable alternative in another setting then their admission to hospital is entirely appropriate.

We would suggest that the document should address the journey of the older person requiring admission to hospital. Currently the pathway often involves an on-call GP (or no GP assessment), a large Emergency Department, then a large Acute Medical Unit, then triage to elderly care, then transfer to another ward (or another hospital) and then intermediate care. This may involve 5 or 6 consultants from beginning to end. The result is poor team working, increased length of stay, increased risk of delirium etc. Perhaps a better approach for the frail elderly patient would be appropriate assessment in primary care, direct liaison with a geriatrician and direct admission to an elderly care ward (if appropriate). This would be a useful example of how an ICP might operate.

**Question 8.**

*With regard to Long Term Conditions, would it be helpful to*

*a) make more information and education available to help those with a long term condition to monitor and manage their own condition?*

**Yes**     **No**

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b) enable those with long term conditions to make more use of technology in their home to help problems be identified earlier, and reduce the need for avoidable visits to hospital or the doctor?

Yes  No

**Comments:**

- (a) Yes, but it must be recognised that some patients will be better suited to this than others.
- (b) The Federation does not believe the evidence yet demonstrates reliably that telemonitoring can provide better, more efficient care for most long-term conditions. Expensive new approaches should only be implemented when they are proven to work and provide better more efficient care.

**Question 9.**

*Do you agree that the proposals set out in respect of palliative and end of life care would support you to be cared for in a place of your choice?*

**Strongly agree**  **Strongly disagree**  **Have no opinion**   
**Agree**  **Disagree**

**Do you believe there are better alternatives? Please provide details**

Whilst many people wish to die at home, this policy must not be implemented insensitively. Many patients who in die in hospital do so after an acute illness for which they were actively treated.

**Question 10.**

*Do you agree with the proposals set out in respect of mental health services?*

**Strongly agree**  **Strongly disagree**  **Have no opinion**   
**Agree**  **Disagree**

**Do you believe there are better alternatives? Please provide details**



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**Question 11.**

*Do you agree with the proposals set out in respect of learning disability services?*

**Strongly agree**     **Strongly disagree**     **Have no opinion**   
**Agree**     **Disagree**

*Do you believe there are better alternatives? Please provide details*

**Question 12.**

*Do you agree with the proposals set out in respect of physical disability and sensory impairment services?*

**Strongly agree**     **Strongly disagree**     **Have no opinion**   
**Agree**     **Disagree**

*Do you believe there are better alternatives? Please provide details*

**Question 13.**

*Do you agree with the proposals set out in respect of Family and Child Care?*

**Strongly agree**     **Strongly disagree**     **Have no opinion**   
**Agree**     **Disagree**

*Do you believe there are better alternatives? Please provide details*

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**Question 14.**

*Do you agree with the proposals we have set out in respect of maternity and child health services?*

**Strongly agree**     **Strongly disagree**     **Have no opinion**   
**Agree**     **Disagree**

***Do you believe there are better alternatives? Please provide details***

The increasing number of women becoming pregnant with significantly complex medical conditions requiring consultant led obstetric care means that any reduction in consultant led obstetric beds must be viewed with some apprehension.

**Question 15.**

*Do you agree with our proposals in respect of acute hospital services?*

**Strongly agree**     **Strongly disagree**     **Have no opinion**   
**Agree**     **Disagree**

***Do you believe there are better alternatives? Please provide details***

The Federation feels the tendency to reduce investment in acute hospitals, without very significant investment in community services has simply exacerbated many of the recent problems eg unacceptable boarding rates and delayed discharge. The configuration of acute hospitals has been a matter of ongoing debate and review in Northern Ireland and this matter must be addressed before existing services are altered further.

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**Question 16.**

*Do you agree that the criteria set out in Appendix 1 against which acute services have been assessed remain the most appropriate criteria?*

**Strongly agree**     **Strongly disagree**     **Have no opinion**   
**Agree**     **Disagree**

*If you disagree or strongly disagree, please provide specific details on what you see are more appropriate criteria. Please give reasons for your comments.*

**Question 17.**

*To what extent do you agree we should develop closer working relationships with the Republic of Ireland and Great Britain?*

**Strongly agree**     **Strongly disagree**     **Have no opinion**   
**Agree**     **Disagree**

**Comments:**

**Question 18.**

*Are the proposals set out in this consultation document likely to have an adverse impact on any of the nine equality groups identified under Section 75 of the Northern Ireland Act 1998? If yes, please state the group or groups and provide comment on how these adverse impacts could be reduced or alleviated in the proposals.*

**Comments:**

No comment.

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**Question 19.** *Are you aware of any indication or evidence – qualitative or quantitative – that the proposals set out in this consultation document may have an adverse impact on equality of opportunity or on good relations? If yes, please give details and comment on what you think should be added or removed to alleviate the adverse impact.*

**Comments:**

No comment.

**Question 20.**

*Is there an opportunity to better promote equality of opportunity or good relations? If yes, please give details as to how.*

**Comments:**

No comment.

**Question 21.**

*Are there any aspects of the proposals where potential human rights breaches may occur?*

**Comments:**

No comment.