Midlothian Health & Social Care Partnership

Strategic Plan Consultation

2018

The Midlothian Health and Social Care Partnership is responsible for services that help you live well and get support when you need it. This includes all community health and social care services for adults in Midlothian and some acute hospital-based services.

We develop a long term plan every three years and in 2018 consulted with the public about their views on the services we deliver and their thoughts about what could be improved.

We would like to thank the 1,600 people (including 200 staff) who took part and the many community organisations and service providers who helped us reach so many people.

The questionnaires were available online, in libraries, GPs and at events across Midlothian in Aug – Sep 2018.
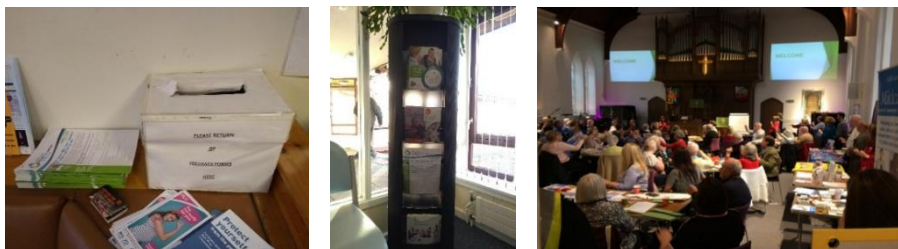
6,000
questionnaires distributed

- Libraries,
- GP surgeries,
- Community groups,
- Ageing Well,
- Day centres,
- Extra care housing,
- Citizen's Panel,
- Partnership staff.

7
events

- Older People (100),
- Carers (20)
- Grassy Riggs (100)
- Orchard Centre (25)
- Social Work Staff,(43)
- Collective Voice, (8)
- Voluntary Sector Summit (60)
- Substance Misuse (20)
- Enable (20)

Online

- Midlothian Council's Facebook and Twitter feed (6 posts, 6 tweets)
- Midlothian Council and NHS Lothian staff intranet,
- Scottish Health Council's Twitter feed,
- MVA email distribution list (190).
- Community Council distribution list

How the partnership engages with the public

		General Public	Older People	Carers	Mental Health	Learning Disability	Physical Disability	Substance Misuse
Inform	**Directory**	• Communities • MC/IJB/NHS web	• Older People • Red Cross	• WeeBreaks	• Midspace	• Autismideas • Disabled Sport	• Disabled People • LCiL • Disabled Sport • Forward Mid	• Meldap
	Newsletter	• IJB		• VOCAL				
	Online	• MC/NHS Facebook & Twitter • MVA email		• VOCAL Facebook		• Autism Facebook	• Forward Mid Facebook	• Meldap Facebook
Consult	**Survey**	• Health & Wellbeing • Citizen's Panel • Service Users (MC) • Census • Mid Profile (NRS) • NHS ISD • Patient Satisfaction		• Carers (MC) • Carer's Census • VOCAL		• CAT team		• Service Questionnaires
	Face to Face	• Hot Topics • Third Sector Summit • Collective Voice	• Annual event (MC) • MOPA	• Annual event (MC)	• Annual Event (Midlothian Voices) • Orchard Centre member's Group	• Health Fair • People First • ASD Expert Panel • LD Expert Panel • Provider Forum	• Disabled People's Assembly	
	Feedback	• Comments (MC web and phone) • External inspection				• Online - "What should we focus on next?"		• Facebook • Consultations • Emails to MELDAP
Collaborate	**Public reps**	• IJB	• Planning Group	• Planning Group • Carer's Action	• Planning Group • Quality Improvement	• Planning Group	• Planning Group	• MELDAP Commissioning + Performance Group
	Advocacy		• EARS		• CAPS • Midlothian Voices			• Peer Support
	User Groups	• One Dalkeith • Neighbourhood Planning • Community Council • People's Equality	• Bonnyrigg Seniors • Dalkeith Welfare • Gorebridge Forum • Ageing Well • Dementia Reference • Day Centres	• Dementia Group • Group (Grassy Riggs) • Coffee Morning (VOCAL) • D Café (Alzheimer Scotland)	• Orchard Centre • Recovery Café • Recovery College • Peer Support	• CAT hubs • Shared Lives • Supported Living • Day Centre • Artlink	• Access Panel • Peer Support • Café Connect • Deaf Action • RNIB	• Horizons Recovery Café • Peer Support Workers/Volunteers

Key Findings

Prevention and early intervention

Screening/immunisation

People found accessing a GP hard and this may deter them from attending regular screening. A number of people suggested annual 'Check Ups' or giving doctors more time to discuss non emergencies or offer advice.

Physical Health

Most people said they were active for at least 30mins a day but mentioned:

- The cost of leisure centres was too high.
- Some leisure centres could be more accessible – with classes in the local community, better facilities for people with disabilities, classes outwith working hours, childcare and more classes for specific groups.
- Walking was popular and people suggested ways to encourage this – e.g. safer walking/cycling routes, better wheelchair access
- Information about what is available needs to be improved.

Most people felt they ate healthily but mentioned:

- Information on healthy eating (e.g. recipe cards, menu planning, drop in clinics) would be helpful
- It would be helpful if it was easier to choose healthy food – e.g. more shops, lower cost, less take away outlets and healthy options in workplaces/schools/hospitals/food bank and help with online shopping.

Mental Health

Most people felt they had good mental health and felt connected to friends and family but mentioned:

- Feeling high levels of stress at work
- The importance of having 1:1 support and encouragement e.g. Local Area Co-ordinators, volunteering, befriending, exercise classes and support groups.
- Nearly half of unpaid carers felt isolated from family and friends.
- Transport and the removal of taxi cards was mentioned as a factor increasing isolation.
- There is a need for improved information about what is available – especially for vulnerable people.

Planned Support

Physical buildings

Most people said their house was suitable for their needs but mentioned:

- Equipment and adaptations improved their independence and feelings of safety. However this service could be improved (e.g. through use of technology and shorter waiting times) to prevent crisis or the need to move into residential care.
- There was a lack of choice for adapted accommodation – e.g. extra care housing isn't available in all communities and more adapted houses needed to be included in the new building developments.

Care at home

Most people who received care at home said it helped them live independently but mentioned:

- A number of improvements could be made such as greater flexibility, better continuity of care and shorter waiting lists. There was a concern that the length of time taken to receive services could lead to people falling into crisis or needing long term care.
- There is a need to invest in both technology and front line staff to improve the care offered at home.
- Both public and staff felt it was important for people to be involved in planning their care and treatment but members of the public mentioned lack of time to discuss options and members of staff mentioned that they were not always able to offer a range of options due to a lack of resources.
- More work needs to be done to improve understanding and use of forward plans – Power of Attorney, Emergency Plans and Anticipatory Care Plans.

Unplanned Support

Accessing Support – Right time, right place?

- People found accessing a GP hard because:
  - There are not enough GPs and the number of new houses being built made this worse.
  - It is hard to get through to GP practices on the phone
  - It would be easier to book appointments outwith working hours, in advance or online
  - It was hard to see the same doctor – so people had to repeat their story and didn't feel they had enough time to discuss their options.

The difficulties people have accessing the GP means people access alternative help – e.g. NHS 24 and A&E

- People would like better information from the GP and information about alternatives to the GP
- Staff had concerns about the lack of resources and capacity in some services e.g. Care at Home, respite and Mental Health
- MERRIT was seen as important in supporting people in crisis and preventing hospital admissions but there were concerns about the capacity of this service.
- Joint working between frontline services was seen as essential.

If I were in charge

There is a general understanding that the current budget does not meet the current demand but many people suggested that we should save money elsewhere by reducing perceived wastage in areas such as:

- Charging for prescriptions or missed GP appointments.
- Reducing money spent on salaries – of those in management or agency staff.
- Improving efficiency through joined up working and better use of IT
- Reviewing medication and support packages
- Supporting people to prevent illness through reducing social isolation, supporting people to stay active, regular Health MOTs, and making the environment more accessible

Other areas for concern included:

- Making it easier to see a GP
- Improving conditions for frontline staff and increasing the number of care staff
- Mitigating the effect of the rise in new houses being built on infrastructure that is already under strain