

Consultation Questionnaire

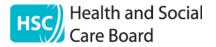
Please use this questionnaire to give us your views on Transforming Your Care. Please send your responses to:

Transforming Your Care Programme Team, 3rd Floor, HSCB HQ, 12-22 Linenhall Street, Belfast, BT2 8BS

Website: Email: Telephone: Textphone: Fax: www.TYCconsultation.hscni.net tycconsultation@hscni.net 02890 553790 18001 02890 553790 02890 553625

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.

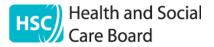
Freedom of Information – Please Read

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

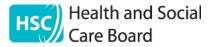


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The Institute of Public Health in Ireland

The remit of the Institute of Public Health in Ireland (IPH) is to promote cooperation for public health between Northern Ireland and the Republic of Ireland in the areas of research and information, capacity building and policy advice. Our approach is to support Departments of Health and their agencies in both jurisdictions, and maximise the benefits of all-island cooperation to achieve practical benefits for people in Northern Ireland and the Republic of Ireland.



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About you or your organisation:

*Are you responding (please tick):	On behalf of yourself?	X
	On behalf of someone else?	
*Are you/they (please tick):	a) over 65;	
	b) under 65;	
	c) disabled;	
	d) a carer;	
	e) a parent;	
	f) other?	X
Organisation	Institute of Public Health in Ireland	
(if applicable):		
Name	Dr Brendan O'Brien	
Job Title	Consultant in Public Health	
(if applicable):		
Postal Address:	Forestview, Purdy's Lane, Belfast, B	T8 7ZX
Email Address:	brendan.obrien@publichealth.ie	
Contact Telephone Number:	028 9064 8494	

Further contact details are given on final page of the response.

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

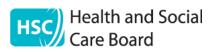
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Question 1.

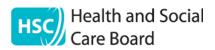
Do you agree that our health and social care services need to change in order to meet the needs of the community and promote health and well-being through prevention and early intervention so that as much acute illness as possible is avoided?

Strongly agree x Agree Comments:	Strongly disagree	Have no opin	ion
	d to reconfigure services to ilable to meet the evolving		
services remaining free welcomes the planne intervention. Available population wide preve fewer hospital admiss	e commitment to adhere to ee at point of delivery and d shift of resources to betto e evidence, as per the Kais ention and supported self-o sions and shorter length of nding and investment in pr	access to services based er funding for prevention ser model, shows that inv care can improve quality stay. This evidence supp	d on need. IPH also and early vestment in of life and result in ports a move
services can make ar Ireland. In Northern Ir use are associated w standardised hospital around one third high in the least deprived a related admissions in the role of health serv a cross-cutting theme listed six key policy o systems "strengthen t the reform of health a For example, in supp decisions on service	is a focus of IPH work and important contribution to reland, as with many other ith lower socio-economic s admission rate for circulat er among those residing in areas. Similarly, hospital ac the most deprived areas a vices in tackling health inec- e in the reform of health an bjectives to reduce health the role and impact of ill he and social services in North ort of the inequalities agen provision and planning take g aspects of health literacy.	tackling health inequalitie jurisdictions, ill-health ar status and area deprivation tory and for respiratory d in the most deprived area dmission rates for self-ha are double the regional fig qualities should be expre- d social care services. The inequalities and recomment ealth prevention" and we hern Ireland is taking suc- ida, a general principle co- e into account area depri-	es in Northern nd health service on. The isorders are both s compared to those arm and alcohol- gure [2]. Therefore ssly stated and form he Marmot Review lends that health are heartened that h an approach [3]. ould be that ivation and potential
<i>Lives</i> " ,which is also u released, the pathway health goals in Northe	cognition of the new public under development, in TYC ys by which reconfigured s ern Ireland are not explicitly	C. As the details of <i>Fit an</i> pervices can contribute to y stated. IPH supports in	d Well are yet to be broader population tegration and

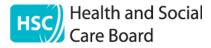
coordination of the policy goals in these two strategies with the joint aim of improving population health and reducing health inequalities. The contribution of reconfigured service design, delivery and evaluation processes to the achievement of improved population health will need to be continuously developed in the long term.



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 x Strongly disagree Have no opinion Agree Disagree Comments:				
IPH supports the concept that patients and clients requiring care and support should have more choice and control in relation to the services they require. However, service users need to have sufficient information to enable them to make fully informed decisions.				
IPH notes the planned introduction of a web based portal that will include information on prevention and self-management of illness.				
Providing service users with more control will provide a consistent message that the citizen has a full role to play in looking after their health both when well and when they require care and support.				



Question 3.
Do you feel the provision of individualised budgets and self-directed support should
be more widely promoted?
Yes X No
Comments:
IPH gives a cautious welcome to the wider promotion of individualised budgets and self- directed support in the belief that these have the potential to empower patients and clients and give them a greater sense of control.
Evaluation of the personal health budget pilot programme in England demonstrated mixed results [4]. Personal health budgets were associated with a significant improvement in the care-related quality of life and psychological well-being of patients but failed to have an impact on health status per se over the 12 month follow-up period. The way in which personal health budgets are configured is an important factor in determining outcomes. It is important that this approach is systematically monitored and evaluated in terms of patient outcomes and cost effectiveness in the Northern Ireland context.
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 X Strongly disagree Have no opinion Agree Disagree Comments:
IPH is supportive of patient and client choice and therefore feels that where service users have expressed a preference for being able to stay at home for as long as possible and / or being cared for at home that efforts should be made to facilitate this.



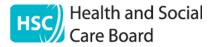
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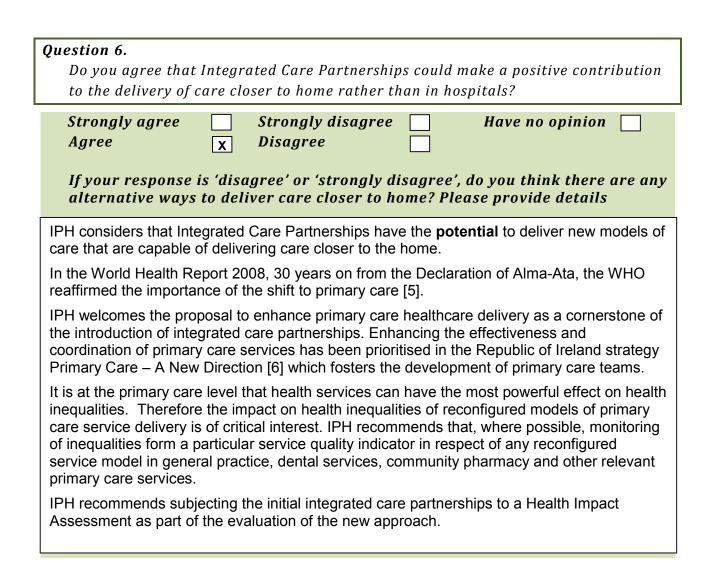
Question 5.

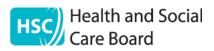
Given the choice, who would you like to provide your care and support in your home?

- 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:







Question 7.	
Do you agree with the proposals set out in respect of older people's services?	
Strongly agree Strongly disagree Have no opinion X	
Agree Disagree	
Do you believe there are better alternatives? Please provide details	

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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	X	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?

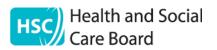
Yes	Х]	Vo

Comments:

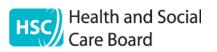
IPH welcomes the development of sources of information to support patients with long-term conditions (and their carers) to monitor and manage their condition. IPH understands that a single accessible source of information on health and social services in Northern Ireland is currently being developed in the form of the proposed HSC Web Portal.

As well as supporting self-care, IPH considers that other changes will be needed to support the health service to effectively respond to the rising number of patients with long term conditions. Increasingly, the biggest challenge may be patients who do not just have one condition but have several. People with long term conditions use disproportionately more primary and secondary care services, with multi-morbid patients being the most intensive users of the most expensive services [7,8]. IPH considers that a comprehensive approach to health reform to address the rise of long term conditions and multimorbidity would also require [8]

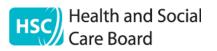
- New skills among those directly involved in clinical care and holistic case management as well as among those involved in team and health service management
- Organisational innovation and enhanced partnerships between hospital-based services, primary care and community based prevention programmes to optimise secondary and tertiary prevention for patients with long-term conditions
- New approaches to capturing multimorbidity within data on health service performance, quality and cost



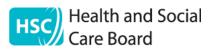
Question 9. Do you agree that the proposals set out in respect of palliative and end of	f life care
would support you to be cared for in a place of your choice?	
Strongly agree 🗌 Strongly disagree 🗌 Have no opinio	on X
Agree Disagree	
Do you believe there are better alternatives? Please provide details	
Question 10.	
Do you agree with the proposals set out in respect of mental health servic	
-	
Do you agree with the proposals set out in respect of mental health service Strongly agree Strongly disagree Have no opinion Agree Disagree Image: Complete the service	
Do you agree with the proposals set out in respect of mental health servic Strongly agree Strongly disagree Have no opinion	
Do you agree with the proposals set out in respect of mental health service Strongly agree Strongly disagree Have no opinion Agree Disagree Image: Complete the service	
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Do you agree with the proposals set out in respect of mental health service Strongly agree Strongly disagree Have no opinion Agree Disagree Image: Complete the service	
Do you agree with the proposals set out in respect of mental health service Strongly agree Strongly disagree Have no opinion Agree Disagree Image: Complete the service	



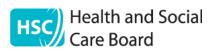
Do you agree wit	h the pr	oposals set out in resp	ect of learning disability serv	vices?
Strongly agree Agree		Strongly disagree Disagree	Have no opinion	X
Do you believe t	here ar	e better alternatives	? Please provide details	
unation 17				
	-	oposals set out in resp	ect of physical disability and	sensor
Do you agree wit	-	oposals set out in resp Strongly disagree Disagree	ect of physical disability and Have no opinion	sensor X
Do you agree wit impairment servi Strongly agree Agree		Strongly disagree Disagree		
Do you agree wit impairment servi Strongly agree Agree		Strongly disagree Disagree	Have no opinion	
impairment servi Strongly agree Agree		Strongly disagree Disagree	Have no opinion	
Do you agree wit impairment servi Strongly agree Agree		Strongly disagree Disagree	Have no opinion	



v 0	h the pro	oposals set out in res	pect of Fa	mily and Child Care?
Strongly agree Agree		Strongly disagree Disagree		Have no opinion 🛛
Do you believe ti	here are	e better alternatives	s? Please	provide details
Question 14.				
•	h the pro	oposals we have set o	ut in resp	ect of maternity and child
-		a. 1 11		
Strongly agree		Strongly disagree		Have no opinion
Agree	x	Disagree		
Agree Do you believe ti	here are	Disagree e better alternatives		provide details
Agree Do you believe ti	here are	<i>Disagree</i> e better alternatives views on the Maternity		
<i>Agree</i> <i>Do you believe th</i> IPH previously submidetails are available of	here are itted our on the IP	<i>Disagree</i> e better alternatives views on the Maternity PH website. [9]	Strategy f	provide details
Agree Do you believe the IPH previously submit details are available of IPH welcomes the est wellbeing of the most	here are itted our on the IP tablishm	<i>Disagree</i> e better alternatives views on the Maternity 'H website. [9] eents of Family Nurse F intaged children and fa	Strategy f Partnership milies to p	<i>provide details</i> or Northern Ireland and
Agree Do you believe the IPH previously submit details are available of IPH welcomes the est wellbeing of the most	here are itted our on the IP tablishm	<i>Disagree</i> e better alternatives views on the Maternity 'H website. [9] eents of Family Nurse F intaged children and fa	Strategy f Partnership milies to p	provide details or Northern Ireland and s to improve the health and revent social exclusion. There
Agree Do you believe the IPH previously submit details are available of IPH welcomes the est wellbeing of the most is a growing body of o	here are itted our on the IP tablishm	<i>Disagree</i> e better alternatives views on the Maternity 'H website. [9] eents of Family Nurse F intaged children and fa	Strategy f Partnership milies to p	provide details or Northern Ireland and s to improve the health and revent social exclusion. There
Agree Do you believe the IPH previously submit details are available of IPH welcomes the est wellbeing of the most is a growing body of o	here are itted our on the IP tablishm	<i>Disagree</i> e better alternatives views on the Maternity 'H website. [9] eents of Family Nurse F intaged children and fa	Strategy f Partnership milies to p	provide details or Northern Ireland and s to improve the health and revent social exclusion. There



Do you agree wit	th our proposals in respe	ect of acute hos	pital services?	
Strongly agree Agree	Strongly disa	gree	Have no opinion	x
Do you believe t	there are better altern	atives? Please	provide details	
Question 16.				
Do you agree tha	at the criteria set out in . red remain the most appr			ces
Do you agree tha		ropriate criteri		ces
Do you agree tha have been assess Strongly agree Agree If you disagree	ed remain the most appr	ropriate criteri gree X lease provide	a? Have no opinion [specific details on wh	at
Do you agree tha have been assess Strongly agree Agree If you disagree you see are mor The criteria are give	ed remain the most appr Strongly disa Disagree or strongly disagree, p	gree	a? Have no opinion specific details on wh easons for your comm nat guided their developn	at tents.
Do you agree that have been assess Strongly agree Agree If you disagree you see are mor The criteria are given In particular the ratio The relatively low we espoused ethos of 7	ed remain the most appr Strongly disa Disagree or strongly disagree, p re appropriate criteria n in isolation without any c	gree	a? Have no opinion specific details on wh easons for your comm hat guided their developn d. ear to go against a lot of t	nat nents.



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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:
IPH has contributed and helped shape renewed public health strategies in both Northern Ireland and Ireland. There are clear synergies and opportunities for cooperation as the challenges are largely the same.
IPH would fully support and expect benefits to similarly accrue from closer working relationships with the Republic of Ireland and Great Britain in terms of service provision, shared learning etc. In particular, we welcome the commitment to explore formal contractual arrangements between the Republic of Ireland and Northern Ireland and consider that this would lay a strong foundation for further North-South cooperation.
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
commente on non encode autor se impacts coura se reaucea er aneviatea in the

Comments:

Consultation Response Questionnaire: Downloadable Form

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.

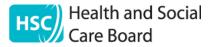
Comments:

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:

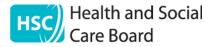


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Question 21.

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

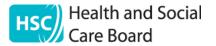
Comments:



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References

- 1. Singh D, Ham C. *Improving care for people with long-term conditions: a review of UK and international frameworks*. Birmingham: University of Birmingham and NHS Institute for Innovation and Improvement, 2006
- DHSSPS and NISRA. *NI Health and Social Care Inequalities Monitoring* System – Fourth Update Bulletin . Heidi Rodgers; Bill Stewart and Linda Keys. Project Support Analysis Branch. Information Analysis Directorate. June 2012
- 3. Marmot Review Team. *Fair Society, Healthy Lives: Strategic review of health inequalities in England post-2010 (The Marmot Review).* London: Marmot Review Team, 2010.
- 4. Forder J, Jones K, Glendinning C, et al. *Evaluation of the personal health budget pilot programme*. Discussion Paper 2840_2. November 2012.
- 5. *The World Health Report 2008: primary health care now more than ever.* Geneva: World Health Organisation, 2008.
- 6. Department of Health and Children. *Primary Care: A New Direction: Quality and Fairness A health system for you.* Dublin: Stationery Office, 2001.
- 7. Department of Health 2007. *Raising the Profile of Long Term Conditions Care*. <u>www.dh.gov.uk/publications</u>
- 8. OECD. Health Reform Meeting the Challenge of Ageing and Multiple Morbidities. OECD 2011
- 9. IPH response to Review of Maternity Services in Northern Ireland. (<u>http://www.publichealth.ie/document/iph-response-review-maternity-services-northern-ireland</u>)



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For further information on this submission, please contact

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