

ROYAL College of Physicians of Edinburgh

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Response to the Scottish Parliament Health and Sport Committee Call for views on Integration Authorities Consultation with Stakeholders

The Royal College of Physicians of Edinburgh ("the College") is pleased to respond to the Committee's call for views on Integration Authorities Consultation with Stakeholders. The College is an independent clinical standard-setting body and professional membership organisation, which aims to improve and maintain the quality of patient care. Founded in 1681, we support and educate doctors in the hospital sector throughout Scotland and the world with over 12,000 Fellows and Members in 91 countries, covering 30 medical specialties.

In order to inform our response, the College sought the views of our Fellows who work in specialities such as Care of the Elderly and would therefore have an interest in the work of Integration Authorities.

Do you know how and when you can get involved with the Integration Authorities to influence decision making?

Our Fellows have mixed views on this. Some have had no engagement at all, while some are aware of the process but have found in practice that it is overly difficult to get involved with barriers to participation.

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

Again, there have been mixed experiences in this regard. Some Fellows have not been involved while others are members of the strategic planning groups. However, Fellows who are involved have expressed the view that their role on that group is unclear; there is little in the way of clinical input and no real sense that the Integration Authority or Integration Joint Board (IJB) are taking action to recognise or acknowledge the clinical voice.

Have you been involved with the work of the Integration Authority following the publication of the strategic plan?

The experience of Fellows has been that they have not been involved and still await initial contact.

Have you been involved with the work of the localities/ what involvement would you like to have?

Fellows have either had limited or no involvement to date. A view was expressed that there was a very "top-down" approach and there has not been widespread clinical engagement. In some hospital settings, this approach has caused friction within departments with some staff supporting the proposals and others feeling there is no solid evidence for the changes, such as international studies or analysis, and that to take on the suggested developments will be to the detriment of the already over-stretched acute service.

Fellows agree that strategic planning and implementation at a local level is crucial and needs widespread clinical engagement which has so far not materialised.

Do you think that your involvement with the IAs has had an impact on decision making?

Fellows have not felt that their input has made an impact on decision making. Some have reported that there is a real sense of frustration that some IJBs appear not to value clinical opinion and there is a very big cultural gap between health and social care, which is a significant barrier to genuine integrated working.

What could be done to improve the communication from the IAs?

Fellows seek a real cultural shift in this regard, and the assistance of senior staff and managers across health and social care to emphasise the importance of integrated working and communication in every setting.

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

Improved transparency and awareness raising of stakeholder meetings and engagement would be helpful. Fellows also seek to see Integration Authorities mandated to have a much greater clinical voice. At present, the experience of our Fellows is that there is no integration in anything other than name and the cultures of health and social care have not changed enough to embrace integration.

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