

APPENDIX 1

Health and Care (Staffing) (Scotland) Act 2019 Statutory Guidance: Consultation



Respondent Information Form

Please Note this form **must** be completed and returned with your response.

To find out how we handle your personal data, please see our privacy policy:
<https://www.gov.scot/privacy/>

Are you responding as an individual or an organisation?

- Individual
 Organisation

Full name or organisation's name

Pamela Milliken, Chief Officer, on behalf of Aberdeenshire Integration Joint Board

Phone number

01467 538909 / 07876 258 940

Address

Aberdeenshire Health & Social Care Partnership, Woodhill House, Westburn Road,
Aberdeen

Postcode

AB16 5GB

Email Address

Pamela.milliken@aberdeenshire.gov.uk

The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:

- Publish response with name
 Publish response only (without name)
 Do not publish response

Information for organisations:

The option 'Publish response only (without name)' is available for individual respondents only. If this option is selected, the organisation name will still be published.

If you choose the option 'Do not publish response', your organisation name may still be listed as having responded to the consultation in, for example, the analysis report.

We will share your response internally with other Scottish Government policy teams who may be addressing the 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 Scottish Government to contact you again in relation to this consultation exercise?

- Yes
 No

Questionnaire

Question 1(a)

Do you think the guidance is clear and easy to understand?

- Yes
- No

Question 1(b)

Please detail any specific areas of the guidance that you found unclear or hard to understand. Please tick the relevant section(s) and provide further information in the text box.

- section 3
- section 4
- section 5
- section 6
- section 7
- section 8
- section 9
- section 10
- section 11
- section 12
- section 13
- section 14
- section 15
- section 16
- section 17
- section 18

General Feedback

There was consensus that the guidance is clear but there were concerns raised regarding the challenge of how to apply the guidance in practice. This is due to the repetitive nature of the information and the considerable size of the document which makes it challenging to decipher the overall message in a timely manner.

Each area was clear if read in isolation, but it was felt there needs to be a better summary in the introduction to make it easy to find the relevant section. There were also concerns that confusion may arise where duplicate sections could be relevant and further information would be welcomed as to how these interact with each other.

It was also felt there was limited discussion of the role of HSCPs/integration authorities in the health sections. There is no mention of Scottish Government requirements for 3-year Workforce Plans and further guidance/information would be requested as to how the Act and reporting requirements link into this.

Section 15/16/17

It was felt that these sections which related to care were less specific than other sections.

Question 2(a)

Do you think the guidance is comprehensive, in that it contains sufficient detail to be able to support organisations in meeting obligations placed on them by the Act?

Yes

No

Question 2(b)

Please detail any specific areas of the guidance where you felt information was missing or incomplete.

Following on from question 1(b), there is no mention of Scottish Government requirements for HSCPs and NHS Boards to prepare workforce plans and how the Act and reporting links to this.

There is some concern about the reliance on language describing using 'clinical judgement' and 'sufficient' staff for the service users' needs which may not be helpful to staff referring to the guidance for support.

It also raised the question whether a senior clinician would need to be on call alongside operational leads as this paper differentiates between responsibilities of clinical leads and operational managers. Further clarity would be requested as to what arrangements will be for mitigations and responsibilities both in and out of hours.

Question 3

Do you have any other comments on the draft guidance?

It would be helpful to promote and share collaborative working on the application of the guidance going forward. There are concerns that from the perspective of a partnership that there is a greater push via NHS routes to share information and understanding; there is a need to ensure comparable awareness and understanding across Social Care as to what this will mean for all services.

The guidance is not felt to adequately address the issues which may arise where a clinical lead covers a wide geographical area. In this instance, difference may occur due to local need. There are concerns this may remove opportunity or detract from innovation and new thinking and potentially trap services within a statutory stranglehold.

There is a fear that this will become a confused and unhelpful process without the funding required to apply and achieve the national staffing levels as not all services are starting from the same baseline.