**Consultation response form**

Your name:

Organisation (if applicable):

email / telephone number:

Your address:

|  |  |
| --- | --- |
| Responses to consultations are likely to be made public, on the internet or in a report. If you would prefer your response to remain anonymous, please tick here: |  |

Responses should be returned by 19 August 2019 to:

Complex, Unscheduled Care and Disability Branch

Partnership and Cooperation Division

Welsh Government

4th Floor, North

Cathays Park

Cardiff

CF10 3NQ

or completed electronically and sent to: [CHCFramework.Consultation@gov.wales](mailto:CHCFramework.Consultation@gov.wales)

**Consultation questions**

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| **Question 1**  In addition to revising the Framework we are placing a strong emphasis on its effective implementation.  Are there particular areas you would wish to see addressed in materials developed to support implementation? | | | |
| YES | PARTLY | NO | |
| if you have answered partly or no could you please tell us what additional information is needed? | | | |
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| **Question 2**  The Framework as it stands is a technical document aimed at specialist professionals who oversee assessment and care provision. We would welcome your thoughts on the potential publication of a simplified Framework aimed at both practitioners and service users. Comments on its appropriateness, including suggested format, content and style are welcome. | | |
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| **Question 3**  Does the proposed Framework provide sufficient assurance about the responsibility, ownership and governance of CHC by Welsh Government, LHBs and their partners? | | | |
| YES | PARTLY | NO | |
| If you have answered partly or no can you tell us what you recommend we change/ add? | | | |
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| **Question 4**  What approaches could be put in place nationally, regionally and locally to further develop partnership working between local health boards, local authorities and other partners in relation to CHC? |
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| **Question 5**  It was felt that some aspects of the Framework lacked clarity. Have we identified and addressed the right areas in the Framework and improved clarity? | | |
| YES | PARTLY | NO |
| If you have answered partly or no, can you please tell us what area is unclear? | | |
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| **Question 6**  The proposed key areas of the framework are:  The following aspects have been considerably revised   * assessment process, * consideration of eligibility * use of toolkits, notably the Checklist and the Decision Support Tool   Do you agree these areas, as they are proposed, are fit for purpose? | | |
| YES | PARTLY | NO |
| If you have answered partly or no could you please tell us what additional key areas or changes you would wish to see? | | |
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| **Question 7**  Do you think that individuals and their families are involved enough in the updated assessment process? | | |
| YES | PARTLY | NO |
| If you have answered partly or no can you give us details of what you would recommend to be added? | | |
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| **Question 8**  In your view, does the proposed Framework link well with other health and social services policy and guidance? | | |
| YES | PARTLY | NO |
| If you have answered partly or no can you tell us what feel is missing and what you recommend we add? | | |
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| |  |  |  | | --- | --- | --- | | **Question 9**  Is the proposed two-stage process for retrospective reviews appropriate and sufficiently comprehensive? | | | | YES | PARTLY | NO | | If you have answered partly or no can you tell us what feel is missing and what you recommend we add? | | | |  | | |   **Question 10**: We would like to know your views on the effects that the new Framework would have on the Welsh language, specifically on opportunities for people to use Welsh and on treating the Welsh language no less favourably than English.    What effects do you think there would be? How could positive effects be increased, or negative effects be mitigated?  Comments   |  | | --- | |  |   **Question 11:** We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them:   |  | | --- | |  |   Please enter here: |  |