Introduction
Scottish Disability Equality Forum is a national disabled person’s organisation (DPO). We are member-led and work to improve access and inclusion for disabled people. Each week we send out a poll question to our members on different topics. For the week of 11 July 2017 we asked our members to comment on the question “Are patient and service user views taken into account in the planning and delivery of services?” We received 29 responses in total. Overall, three-quarters (76%, 22 respondents) said no, patient views are not considered, while just under a quarter (24%, 7 respondents) felt that patients and service users were part of decision-making. Further points made by our members are discussed below and are highlighted by their verbatim comments.

Conflict between service providers and managers
Overall, our members felt that there was direct conflict between the aims of clinicians and the aims of NHS managers. It was felt that clinicians are trying to improve patient care, while managers are trying to offer a service within reducing budgets. “Clinicians see the discrepancies and needs in service every day and try push management to improve overall patient care but managers (in control of the money) do not listen and claim that provision of service is within an overall longer-term plan which only they are party to.”

Tokenism
There was also a strong view that decisions are taken before the public are involved, and so it is rarely true consultation. Those who answered ‘yes’ to this question, also indicated that “more could be done” or that there was “room for improvement”. Our members suggested that funding and resources drive the decision-making, rather than the quality of service.
“It's more about cost and affordability. Consultations are normally tick-box exercises.”

“Don't know how much weight they have though- money saving always comes first or else we'd have more beds and nurses!!”

More flexible arrangements for engaging with the public
Our members felt more needs to be done to gather the views of patients and service users, such as holding meetings with NHS managers and clinicians outwith normal working hours to allow people to participate. It was also suggested that the NHS could be flexible to different types of meetings, such as Skype or video-conferencing. “Having meetings that take place Mon to Fri 9 to 5 may suit staff, but most people are working then.”
“Digital participation as well as face-to-face meetings can support patient/service user/carer/staff involvement in planning and delivery of services.”

In conclusion
Members of SDEF felt that more could be done to improve patient and service user involvement in decision-making over service delivery.