

Report

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Report to:	Social Work Resources Committee
Date of Meeting:	12 October 2011
Report by:	Executive Director (Social Work Resources)

Subject:	Reshaping Care for Older People - Change Programme
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ provide an update on the Reshaping Care for Older People–Change Programme

2. Recommendation(s)

2.1. The Committee is asked to approve the following recommendation(s):-

- (1) that the content of the report is noted

3. Background

- 3.1. Previous reports were submitted to the Social Work Resources Committee on 2 March 2011 and 18 May 2011 outlining the proposals for Reshaping Care for Older People in light of the considerable increase in the number of older people across Scotland set alongside the existing pressures on service on both Health and Social Care. The principal goal of the programme in this context has been to optimise independence and wellbeing for older people at home or in a home like setting.
- 3.2. As detailed in the previous report the Government announced a Change Fund of £70million to facilitate this shift in the balance of care for older people and the allocation to the South Lanarkshire Partnership is £4.021million. In the first instance, it is a one year, non recurring fund to be used on a partnership basis with the funding allocated to NHS Lanarkshire. It is anticipated that there will be continuation of the fund beyond 2011-12 and we are required to produce a plan spanning three years from 2011-12 to support ongoing implementation of the change agenda.
- 3.3. Within South Lanarkshire Social Work Resources we commenced the process of reshaping care for older people in 2010 through our approach to the personalisation of services and the introduction of Supporting your Independence (re-ablement) within Home Care Services.

4. Current position

- 4.1. As detailed in the previous report the high level submission for the South Lanarkshire Partnership was approved by the Scottish Government. Within the partnership we have started to use the change fund to support the implementation of a detailed Local Transformation Plan (LTP) and to lever the shifts in the balance of care needed to improve and sustain care for older people which is personalised, outcomes focused and enables people to optimise their wellbeing and independence at home. The overall goal will be the elimination of any delays in the patient journey once clinically ready for discharge and that all community care assessments will be

undertaken in the home environment (or place of previous residence). A key outcome of the local work will be a reduction in use of institutional beds with a resultant shift in demand into other parts of the care system, including community based day facilities, home care services and specialist community based teams. There are a number of supporting workstreams that are taking forward the work to develop the Local Transformation Plan.

- 4.2. Hospital Discharge: Significant progress had been made in redesigning the assessment and discharge processes within the hospital environment with a view to integrating the discharge process within the re-ablement and rehabilitation continuum to ensure, safe, effective, timely discharge. The focus is on the elimination of any delays in the patient journey once clinically ready for discharge. We have now introduced an Integrated Hospital Discharge Team at Hairmyres hospital with health and social work staff co-located and working as an integrated team. The assessment and discharge process has been simplified to facilitate safe and accelerated discharge. The work at Hairmyres has also seen a reconfiguration of the roles and responsibilities of the hospital social work team to support the shift to all community care assessments being undertaken in the home environment (or place of previous residence) thereby moving this process from an acute hospital environment. Hairmyres is being used as a test site and the model developed will then be rolled out across all hospital settings.
- 4.3. Integrated Community Support Teams (ICST's): Work is ongoing to establish Integrated Community Support Teams to support the success of hospital discharge and the prevention of admissions strategy. Significant progress has been made in developing the model for Integrated Community Support teams which will include social work and health staff and it is anticipated that such a team will be introduced within the East Kilbride locality in the near future. The home care service will be an integral part of both the hospital discharge process and Integrated Community Support Teams and the additional temporary operational manager posts for home care agreed at the previous Committee have now been recruited.
- 4.4. Community Capacity and Community Engagement: Work is in progress to build on existing capacity and further develop alternative approaches to providing support to older people and their carers in their communities. This will include recognising the contributions of the voluntary sector and the independent sector. The emphasis is on building capacity within communities to provide low level supports that aim to prolong positive health and wellbeing as well as supporting people to feel safe in the home and provide opportunities for social interaction. This work is ongoing.
- 4.5. Improved Day Opportunities: There are excellent day care facilities in place for older people within Social Work Resources. Work is ongoing to roll out a strategy which will reshape existing day care services across social work, health and the independent sector for older people, in order that we deliver an integrated service approach through a range of professionals within community settings. This would extend day opportunities to focus on more personalised approaches. This should optimise the use of facilities and staff resources to bring a range of services into community settings. This work is ongoing.
- 4.6. There have been a number of events to enable wider engagement on the South Lanarkshire Community Partnership Reshaping Care for Older People Programme. The most recent event on 15 June 2011 included employees from the Council, and health as well as representatives from the Voluntary Sector, the Independent Sector and Carers and what was evident was the preparedness of all concerned to recognise the opportunities.

- 4.7. Establishing existing baselines across a range of key indicators was crucial to being able to identify the extent of the resources being committed to caring for older people currently, where those resources were being spent and the impact of that pattern of spending. This involved identifying a range of baselines including financial baselines, institutional bed baselines, delayed discharges, emergency admissions and associated bed days.

5. Supporting Your Independence

- 5.1. The ongoing implementation of the Supporting Your Independence (SYI) approach within home care services is a key component of reshaping services for older people and this is reflected in the local transformation plan.
- 5.2. The service user pathway for supporting your independence has been developed and revised key processes are now in place. This required a new service model for delivering and supporting your independence approach and the assessment and review function for singleton home care services has now transferred from older people's teams to home care. This has required the transfer of staff to the multi disciplinary teams which include occupational therapists, the recruitment of additional home care staff and the delivery of a learning programme to support the culture shift.
- 5.3. Supporting Your Independence has been mainstreamed in East Kilbride and Rutherglen since November 2010 and across all other localities since 1 April 2011. In terms of outcomes the results so far have been positive. Individuals have increased independence, enabling people to remain at home, helping people regain skills and confidence. The approach has been effective in reducing the number of people who do not require a home care service (32%) or have a significantly reduced packages (20%) following Supporting Your Independence.
- 5.4. There has been a reduction in externally purchased home care, this in part, can be attributed to the introduction of SYI. The reduction in the requirement for home care services following SYI has also been freed up availability and allowed us to meet an increasing demand for home care. The service will be developed to support reducing the length of unnecessary stay in hospital, to ensure that as far as possible assessments will be in the person's own home, and to support people at home, thus preventing admission to hospital.

6. Governance Arrangements: Change Plan

- 6.1. We have established a robust set of governance arrangements which will see the Joint Services Management Group (JSMG) overseeing the development and implementation of the Local Transformation Plan. The JSMG is co-chaired by the Executive Director of Social Work and the Director of the South Lanarkshire Community Health Partnership. The JSMG includes representative from the Voluntary Sector and patient/carer representation.
- 6.2. There is a financial and planning framework in place to deliver the Local Transformation Plan. The financial plan sets out the phasing of the various developments, how this utilises the Change Fund money across the duration of the plan and how the reduced reliance on hospital and institutional beds will translate into money to invest in the maintenance and development of community based services. In addition to the plan for the duration of the Change Fund, the Partnership will also prepare a 10 year Commissioning Strategy.
- 6.3. The South Lanarkshire Partnership submitted a mid year progress report on 26 August to the Joint Improvement Team on the implementation of the Change Fund.

This included the relevant monitoring information regarding the Partnership Change Plan and change activities. We also provided detail of change fund financial commitment and year end projections.

- 6.4. All work will be implemented through the Health and Care Partnership and the Operating Management Committee of the CHP. There will be regular update reports to the Social Work Resources Committee.

7. Employee Implications

- 7.1. The future delivery of service will lead to more integrated working across health and social work

8. Financial Implications

- 8.1. There is a financial framework in place across health and social work in relation to the £4.021m change fund monies which have been allocated to NHS Lanarkshire for the South Lanarkshire area.

9. Other Implications

- 9.1. All work will be reported through the Health and Care Partnership and to the Operating Management Committee of the Committee Health Partnership. There will be regular update reports to Social Work Committee.
- 9.2. There are no additional risks associated with this report.
- 9.3. A Strategic Environmental Assessment was not required to be undertaken.

10. Equality Impact Assessment and Consultation Arrangements

- 10.1. There is no requirement to carry out an impact assessment in terms of the proposals contained in this report. There will be a requirement to undertake an impact assessment when the Local Transformation Plan is developed.
- 10.2. There will be ongoing consultation with staff and the Trade Unions.

Harry Stevenson
Executive Director (Social Work Resources)

26 August 2011

Link(s) to Council Values/Objectives

- ◆ Develop services for older people.

Previous References

- ◆ Social Work Resources Committee 2 March 2011
- ◆ Social Work Resources Committee 18 May 2011

List of Background Papers

- ◆ Submission for Change Fund Plan.

Contact for Further Information

If you would like to inspect the background papers or want further information, please contact:-

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