

Report

Report to:	Social Work Resources Committee
Date of Meeting:	19 August 2020
Report by:	Director, Health and Social Care

Subject:	Occupational Therapy Professional Governance Structures, South Health and Social Care Partnership
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1. Purpose of Report

1.1. The purpose of the report is to:-

- ◆ outline proposals for a revised occupational therapy governance framework across the South Health and Social Care Partnership

2. Recommendation(s)

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

- (1) that the benefits of a South Health and Social Care Partnership Occupational Therapy Professional Governance framework be recognised noted and approved prior to wider consultation and engagement.

3. Background

3.1. Professional Context

3.1.1. Occupational Therapy is a Health and Social Care Profession, regulated in the United Kingdom by the Health and Care Professions Council (HCPC). It is one of the professions within the Allied Health Professions (AHP) job family.

3.1.2. At undergraduate degree level, Occupational Therapists (OTs) are educated to work across the spectrum of Health and Social Care, and across the fields of physical and mental health. They may work in hospital, community or social settings, and operate within medical and social models of disability, but they are specialists in bio-psychosocial and occupational approaches.

3.1.3. OTs adopt a person centred and asset based approach to care. Their philosophy is to work with people as active participants rather than passive recipients of Health and Social Care programmes. They promote self-reliance and resourcefulness to empower individuals to maximise their independence and personal outcomes, and enable maximum engagement in their communities. OTs have a key role in supporting self-management, re-ablement and rehabilitation approaches. As such, they have a significant contribution to make to NHS Lanarkshire's (NHSLs) Healthcare Strategy - Achieving Excellence, and to the South Lanarkshire Health and Social Care Partnership (SLHSCP) Strategic Commissioning Plan (SCP).

3.2. South Lanarkshire Context

3.2.1. OTs within South Lanarkshire are currently employed by NHSL or South Lanarkshire Council (SLC).

3.2.2. The NHSL OT Profession is currently hosted and managed within SLHSCP.

- 3.2.3 Within NHSL there is a single pan-Lanarkshire OT Professional leadership structure led by a Head of OT Profession and supported by OT Care Group professional leads for the following areas:
- ◆ Mental Health, Addictions & Learning Disability
 - ◆ Children & Young People
 - ◆ Acute
 - ◆ Community & Specialist Teams (including Brain Injury)
 - ◆ Primary care
- 3.2.4. The NHSL Head of OT Profession has lead responsibility for professional leadership, governance and accountability for OT staff at all levels of the organisation, irrespective of operational management structures or funding arrangements.
- 3.2.5. In SLC, OTs are based in a locality structure within Clydesdale, Hamilton, Cambuslang/Rutherglen and East Kilbride. The majority of Council OT staff within each locality are located within the Physical Disability and Sensory Impairment (PDSI) team, and managed via Adult and Older People Social Work management structures.
- 3.2.6. These PDSI teams are led by six OT team leads who provide line management and professional support to the Council OT staff within the locality. This includes two South Lanarkshire wide specialist OT practitioners for Brain Injury and children, young people and families affected by Autism; OT assistants; and a variety of sensory impairment rehabilitation officers.
- 3.2.7. Each locality has a separate Supporting Your Independence (SYI) OT service based and managed within the Social Work Homecare Service.
- 3.2.8. There is currently no single Professional Governance and assurance structure for SLC OT staff, with each OT team lead having delegated responsibility for Professional Governance within their own team. Consequently, a variance exists in professional practice and governance arrangements across the PDSI and Homecare teams, and between individual localities.

4. Current Situation

- 4.1. Learning from a variety of joint working projects across the South HSCP, and the more recent collaboration as a consequence of the COVID-19 pandemic has highlighted the variance in approach to professional and clinical governance arrangements between Health and Social Care OT staff across the SLHSCP.
- 4.2. In 2018, NHS Education for Scotland issued a position statement on the different aspects of supervision for Allied Health Professions (NES 2018). This recommended that all AHPs have access to a Professional Lead/Manager of the same profession for issues relating to scope of practice and role, continued professional development, professional and ethical issues. This ensures that Health and Care Professions Council standards are met for Proficiency of OTs (2013), Standards for Conduct, Performance and Ethics (2016), and Continued Professional Development (2017).
- 4.3. As a consequence of the different management arrangements for OT staff across the Council, there is no agreed framework for Professional Governance, and there is a variance in the available evidence regarding staff adherence to The Royal College

of Occupational Therapists (RCOT) Professional Standards of Practice (2017) or compliance levels with professional clinical guidelines.

- 4.4. SLC OTI Team Leads (PDSI Teams), SYI OTs and specialist brain injury and autism OTs within the Council, currently have no formal profession specific support or governance arrangements resulting in a lack of parity of access to OT professional leadership, supervision and profession specific learning and development opportunities across the different PDSI and SYI teams.
- 4.5. This has inadvertently contributed to a reduced flexibility of the OT workforce, increased vulnerability in terms of OT staff assurance or development of clinical skills and competence, and reduced professional career progression prospects.
- 4.6. It is recognised that individually, registered OTs are professionally accountable to the Health and Care Professions Council (HCPC), but they also have a contractual accountability to their employer and are accountable in law for their actions. This is the position irrespective of the setting and context within which registered occupational therapists perform their roles. It should be noted that the proposed development of a single occupational therapy Professional Governance and leadership framework for the South HSCP will not therefore incur any change to staff terms and conditions of employment, and each employer will continue to retain full responsibility and accountability for the occupational therapy staff in their employment.
- 4.7. An Occupational Therapy Governance framework is required to assure compliance with the Royal College of Occupational Therapists' Professional Standards of Practice, and the Health & Care Professions Council Standards of Proficiency. This proposal will strengthen opportunities to enable the future integration of Health and Social Care occupational therapy staff, and will further support the key ambitions of the AHP Active & Independent Living Improvement Programme (2017) and the future development of Lanarkshire's Rehabilitation Strategy. It underpins NHS Lanarkshire's corporate objectives for the delivery of high quality, safe and effective care, and will help to deliver modernised, integrated services in line with NHS Lanarkshire's Healthcare Strategy and the South Lanarkshire's Health & Social Care Partnership's Strategic Commissioning Plan.
- 4.8. HSCP and NHS Boards have corporate accountability for maintaining and improving the quality of services in the form of clinical governance. Within the current changing landscape and the context of integration, it is imperative that there is an assurance in the quality of OT Services delivered by two different employers across Lanarkshire. It provides greater opportunities for collaborative learning across teams and within the wider AHP community which will underpin new ways of working, and make the most effective use of current resource.

5. Next Steps

- 5.1. Any future proposals for change to OT Professional Governance and leadership arrangements should promote a parity of approach for all OT staff across the Partnership, irrespective of their team or employer.
- 5.2. It is suggested that a single OT Professional Governance framework be implemented across South HSCP to further enhance integrated practice and develop new models, or pathways of care, based on evidence or best practice.
- 5.3. A single Professional Governance framework would further support clinical and quality improvements, and maximise service efficiency and productivity as staff work

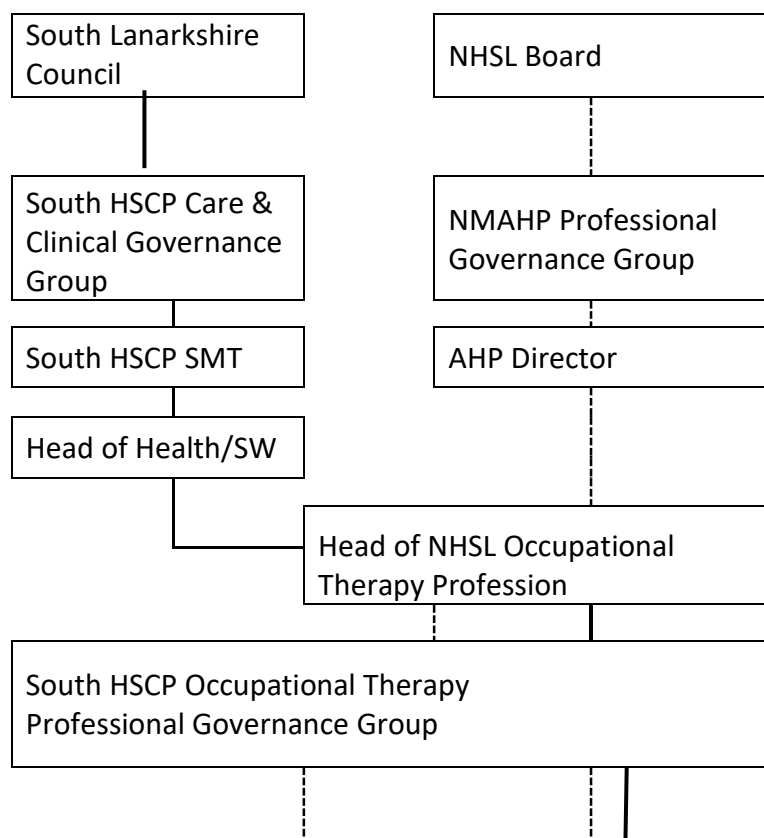
more collaboratively and consistently in line with up to date professional standards and guidelines. This will assist the development of emerging roles or new models of practice, provide increased opportunities for enhancing professional and clinical practice skill sets, and strengthen the OT contribution to locality planning or strategic commissioning.

5.4. It is proposed that current operational management arrangements remain with the staff member's existing employer, with the introduction of new OT Professional Governance arrangements designed to augment and support current line management arrangements.

- 5.5. The benefits of a South HSCP occupational therapy Professional Governance framework would include:
- ◆ South wide professional overview, influence and impact
 - ◆ enhanced assurance regarding clinical and professional standards of practice
 - ◆ increased opportunity to develop new, integrated and sustainable models of service delivery
 - ◆ modernised OT Services based on evidence/best practice guidance
 - ◆ increased efficiency and value for money
 - ◆ increased professional guidance and support to augment locality management structures
 - ◆ increased access to professional supervision, guidance and supports
 - ◆ increased emphasis on professional learning and development
 - ◆ enhanced trust and relationships between OT teams

6. **Diagram 1: Proposed South HSCP OT Professional Governance Framework**

6.1. Diagram 1 outlines the proposed OT Professional leadership reporting arrangements for the South HSCP. The model includes all registered OT practitioners and uni-professional/generic rehabilitation support staff.



SLC PDSI & SYI OT	NHSL OT
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Operational Management

Professional Leadership

7. Employee Implications

- 7.1. Following agreement from the Social Work Resources Committee and the support Care and Clinical Governance Group further work will be undertaken in terms of consultation with staff and the unions.

8. Financial Implications

- 8.1. A single Professional Governance structure for the Occupational Therapy profession could be achieved at no additional cost by extending the role of the existing Head of Profession within NHS to include the professional leadership of OT staff within both Councils.
- 8.2. There is currently a Senior Officer within North Lanarkshire Council (NLC) who has allocated responsibility for Professional Governance and accountability of all NLC OT staff. It would be advantageous to consider a similar professional leadership role within SLC for OT staff. However, this would require a review of current SLC OT Team Leader roles and responsibilities, and opportunities to meet any uplift costs from existing resource.

9. Climate Change, Sustainability and Environmental Implications

- 9.1. There are no implications for climate change, sustainability and environmental implications in terms of the information contained in this report.

10. Other Implications

- 10.1. Failure to consider more integrated Professional Governance arrangements will result in a variance of performance in professional standards of practice across different teams and employers. It will inhibit joint and integrated working practices, and prevent future role development opportunities to support the strategic objectives of NHSL and South HSCP. This could reduce efficiency, and could potentially impact on an increased risk for the public, and consequently the NHSL and Integrated Joint Board.
- 10.2. There are no other issues associated with this report

11. Equality Impact Assessment and Consultation Arrangements

- 11.1. There is no requirement to carry out an impact assessment in terms of the proposals contained within this report.
- 11.2. This paper has been developed in consultation with OT team leads in SLC, and has been endorsed by the South HSCP Head of Health (Host Manager), and the NHSL AHP Director.

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Director, Health and Social Care

28 July 2020

Link(s) to Council Values/Objectives

- ◆ achieve results through leadership, good governance and organisation effectiveness

Previous References

- ◆ none

List of Background Papers

- ◆ None

Contact for Further Information

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

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