

HERTFORDSHIRE COUNTY COUNCIL

**ADULT CARE AND HEALTH
SCRUTINY COMMITTEE**

THURSDAY 12 JUNE 2003 AT 10.00 A. M.

Agenda item No.

5

**IMPLEMENTING THE AGREED ACTION PLAN ARISING FROM THE
SSI INSPECTION OF SOCIAL CARE SERVICES FOR OLDER PEOPLE**

Report of the Director of Adult Care Services

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1. Purpose of Report

To report progress on implementation of the 19 recommendations arising from the Inspection of Social Care Services for Older People carried out by the SSI in June/July 2002.

2. Summary

The Social Services Inspectorate carried out an inspection of Social Care Services for Older People in Hertfordshire between the 19 June and 1 July 2002. A presentation was made to the Scrutiny Committee on the 16 January 2003 by the SSI Lead Inspector, Jan Clark and copies of the full report were circulated to Members.

As a result of the inspection, 19 recommendations were made to improve services. Work has now been undertaken to address all the recommendations and the required actions have now been achieved in full.

This Committee report details how the implementation has been achieved and highlights the improvements in service that have resulted.

3. Conclusion

The SSI concluded that Hertfordshire Adult Care Services were serving some people well and that there were excellent prospects for improvement. Since the inspection and implementation of the

recommendations we believe the services to older people have improved to the benefit of most Hertfordshire residents.

4. Recommendations and Actions Undertaken

The first six recommendations are shown in order of priority, the remaining recommendations are shown under the relevant National Service Framework standard heading:

Recommendation 1

Ensure that Hertfordshire Older People's Steering Group continues to review the Waiting List Action Plan, takes action to address current issues regarding cases awaiting assessment and undertakes ongoing monitoring of progress.

The agreed Action Plan submitted to the SSI set a target of a 20% reduction in clients awaiting assessment against the April 2002 figure of 2206 by 31 March 2003. This figure has actually been exceeded and the report presented to the 13 March 2003 Scrutiny Panel showed the numbers awaiting assessment had been reduced to 899, a 55% reduction by March 2003.

Recommendation 2

Ensure that the review of assessment and care management processes addresses outstanding recommendations from previous SSI inspections and that care management reviews take place at appropriate intervals for all service users receiving services including those in residential and nursing care.

In November 2002 a Strategic Manager (Jean Farrer) was appointed to lead planned changes to assessment and care management and develop new ways of working. Procedures have been clarified and previously suggested actions are now in place. Guidance notes on reviews have been issued to staff and are published on Connect entitled Review of care needs of E&PD Service Users in Care Homes. This guidance gives more emphasis on individual" cultural and spiritual needs. Two seminars were held on 15 and 29 October, focusing on the process of making placements and on the review process, with additional input from Finance, Money Advice Unit, Contracts and Care Practitioners. Led by an Area Manager, this gave a clear operational focus. We are reviewing all the current guidelines on making placements. Care Management has improved and performance is being monitored in each E&PD Area. The evidence being gained by regular random checking of files to ensure the necessary compliance is actually being achieved. A Practice Development Programme is also underway exploring further areas of development in teams.

Recommendation 3

With partners, take steps to ensure that all aspects of services for older people demonstrate the principles of prevention, promoting independence and rehabilitation.

The Best Value Reviews of Older People's Services and Physical Disability have paid special attention to this recommendation and investigated options to achieve the desired outcomes of prevention, promoting independence and information development. Pilot projects will be undertaken to achieve flexible care planning and rehabilitation leading to improved independence. In 2003/04 financial year, over £1m has been included in budget allocations to promote independence and this includes areas such as Extra Care Housing, Intermediate Care, prevention of admission schemes to hospitals and other home support schemes.

The re-ablement project in St Albans (May 2003) is targeted to 50 users who have the motivation to improve and regain their independence. Specially trained carers will work under the supervision of a therapist to help users improve their skills in daily living tasks.

The Choice and Control project in Welham Green will test out a more flexible approach to commissioning. The pilot will test ways of using commissioned packages to provide users with greater choice and control over the service they receive. Carers would undertake time critical tasks but then leave and return later to help in a wider range of non-time critical tasks. This will also include employment of a handyperson.

Finally, the Best Value Review has recommended the development of a county wide information strategy and the establishment of a network of local ACS champions to drive forward the information agenda. This will ensure that high quality information is available in key places which will help older people maintain their independence.

This has been accepted by Hertfordshire Older People's Steering Group who have established a sub-group to take this work forward.

Recommendation 4

With partners, ensure that care programme approach and care management processes are fully integrated as a matter of priority within the work to develop integrated mental health services.

As from April 2003 there is a Hertfordshire Partnership Trust Policy of CPA/Care Management Integration for adults and older people in place and preparations are underway for Single Assessment by April 2004.

Recommendation 5

With all stakeholders, ensure that a comprehensive network of intermediate care and reablement services for older people is developed countywide.

Mapping of Intermediate Care Services has taken place and existing partnership arrangements strengthened by sharing good practice. A 3-year Commissioning Plan and Commissioning Strategy has been formulated, agreed by a Member Topic Group and consultations are underway with PCTs, Acute trusts and Voluntary Independent Sector Providers on the Plan.

Recommendation 6

Develop a day services strategy for older people, including those with mental health problems, to include objectives and workforce plans that will give clarity of direction and role within the developing framework of services.

A draft strategy for in-house Day Services has been completed and is part of on-going consultation with users and their carers. The wider scope of Day Centres within the Independent Sector has been encompassed within the Best Value Reviews of Physical Disability, Older People's Services and Mental Health, linking with providers direct. In the future it is likely that a larger number of Day Centres will become Resource Centres with access to a wide range of information for clients and prospective clients both in leaflet form, web access and direct advice and guidance from staff and partner organisations.

National Priorities and Strategic Objectives

Recommendation 7

With health, ensure appropriate mechanisms are in place to ensure cohesive engagement and consultation with independent providers of services for older people at the earliest stages of strategic planning and service development.

Achieved by including independent providers in the Commissioning Plans and Strategy consultation as detailed in Recommendation 5. Independent providers and health as key stakeholders have been engaged from the outset and throughout the Best Value Review of Older People processes.

Recommendation 8

With health, continue to explore and develop use of Health Act Flexibilities in respect of services for older people.

Pooling of budgets already achieved in areas of equipment, nursing and residential Home Care and continue to be explored in other potential services.

Effectiveness of Service Delivery and Outcomes

Recommendation 9

Ensure that staff in the Customer Service Centre are fully familiar with the Prevention of Adult Abuse Policy and that they have received appropriate training.

Training of Customer Service Centre staff took place in December 2002. This will be followed up through regular supervision with staff and will continue to be updated.

Quality of Services for Users and Carers – Information and Care Management

Recommendation 10

Ensure that separate assessments of the needs of informal carers are routinely undertaken.

Revised guidance has been issued to include easier access to the Social Services Information System (SSIS) screens for recording. Training has been undertaken with all Area Teams.

The Carers Assessment Strategy in place from November 2002 included:

- production of monthly statistics from the Management Information Unit (MIU)
- supervision tool (SSIS report on carers' assessments) for managers
- new comprehensive guidance
- carers' co-ordinators delivering approximately 500 carers' assessments per annum above the baseline
- Team Managers (carers) meeting with Area Manager and Policy Manager Users and Carers to develop practice

An additional 4 part-time posts providing carer support in Hertfordshire's 4 Acute Hospitals are being recruited to strengthen services to carers within Hospital Teams.

Recommendation 11

Ensure that appropriate systems are in place that demonstrate the managerial oversight and monitoring of care practice and recording.

The Quality Assurance Development (QUAD) Group has already undertaken work on this priority area by carrying out audits on client files and monitoring the services that have been provided or planned for clients. This work is built into the Practice Development Programme as part of quality check on practice changes.

Fair Access

Recommendation 12

Ensure that eligibility criteria for older people's services is reviewed and revised to comply with *Fair Access to Care Services* guidance, and fully reflects the Council's objectives for older people.

Fair Access to Care Services has been implemented across the County from April 2003. On-going staff support and development on issues arising from FACS will continue to be provided through the next 12 months.

Recommendation 13

With partners, identify the aggregated health and social care needs of black and minority ethnic elders and develop appropriate services.

A lead Area Manager (Mark Janes) was established in 2002. He has held meetings with local Team Managers covering the County and notes are published on Connect. Future meetings are being held quarterly. Local plans are being studied and the census data is being used to plan future services for health and social needs of black and minority ethnic elders.

A strategy to respond to the needs of black and minority ethnic older people is being produced as part of the overall Older People Strategy. This is informed from the work of the Ethnic Elders Sub-Group of the NSF Older People, some local research and national information. Information from consultation and the Best Value Review of Older People will also be fed in. In line with the Race Relations Amendment Act and Equality Standard, an Impact Assessment will be undertaken this year.

Recommendation 14

Develop and implement assessment and care management documentation that ensures that service users' first language and other communication needs are identified and demonstrates that older people have been informed of their personal rights.

Documentation has been reviewed to ensure first language will be recorded on the new IT system and Oracle development will include a screen for recording of language.

Cost and Efficiency

Recommendation 15

Give consideration to how frontline staff in assessment and care management could make a greater contribution to the quality monitoring processes applied to commissioned services.

Front line staff when carrying out reviews with clients now examine the quality of services provided and feedback to the Contracts Unit where good or poor practices are observed e.g. in Home Care/Residential Nursing Care.

Recommendation 16

Ensure that all key provider services, including in-house providers are fully engaged in processes to identify the health and social care needs of older people.

Achieved through the Commissioning Planning and Strategy Process and is on-going through the Hertfordshire Older People's Steering Group.

Management and Resources

Recommendation 17

Take actions to ensure that the training programme is effective in meeting the identified needs of staff, gives sufficient attention to ensuring that staff are equipped to deliver national priorities and local objectives and offered joint training opportunities with relevant agencies.

In January 2003 we launched a significant staff development programme – focussing on practice development.

The Practice Development Programme is designed to ensure that all staff are up to date with national and ACS care practice developments. It is also co-ordinating the modernisation of the care practice guidance and preparing staff for the new client recording system which will support this later in the year. The programme is exploring different ways of making continuous professional development a part of every worker's working life as a complement to formal training and qualification programmes.

The aim is to embed developments in practice and provide supervisors with the tools to check evidence of this through discussion and file checks – and to record what further training/development staff need to improve performance.

This year this raises the profile of outcome focussed assessments, Direct Payments, Carers Assessments, Integrated approach to equalities, feeding improvements to services into the commissioning process, developing local performance measures to focus on improving practice.

This will feed in to the new EPD Training Advisory Group so that we have a good overall picture of staff training and development needs and increase our repertoire of meeting them in ways which reach all staff.

Recommendation 18

Develop a centralised or local database of staff skills, training and competencies in relation to older people's services to better inform training and development programming.

The new database has been installed on the administration computers in the TDQ Unit. Admin staff have input data from 2002/3. The database will be linked to the Personnel staff database in June 2003. Information from April 2000 will be inputted in the TDQ database (all data previous to this date will be kept in an archive).

Recommendation 19

Give consideration to re-devolving the operational training budget subject to the development of an effective protocol for its use and monitoring.

Achieved and allocated to Area Teams as part of the 2003/4 budget allocation process.

5. Improvements in Services to Older People

The implementation of the SSI's 19 recommendations has resulted in significant improvements to services for older people. The first 6 action points resulted in major reductions in clients waiting for assessments, improved care management, promotion of independence and planning for services. By achieving recommendations 7 to 19 this has resulted in a more cohesive engagement of providers to ensure better strategic planning and improved identification of the health and social care needs of older people.

6. Rural Implications

There are no specific rural implications for older people, all 19 recommendations are designed to improve services to older people, wherever they live.