

FALKIRK COUNCIL

SUBJECT: JOINT INSPECTION OF SERVICES FOR OLDER PEOPLE
MEETING: EXECUTIVE
DATE: 29 SEPTEMBER 2015
AUTHOR: HEAD OF SOCIAL WORK ADULT SERVICES

1. INTRODUCTION

- 1.1 The purpose of this report is to inform Members of the outcome of a Joint Inspection of Adult Health and Social Care Services in Falkirk.
- 1.2 In addition, for information, attached to the report as Appendix 1 is the draft High Level Joint Action Plan Template currently being developed in response to the Inspection. The Joint Action Plan Template once agreed will be driven forward by the Joint Management Group, a multi-disciplinary group across Health, Social Care and the Voluntary Sector, which meets monthly to progress joint working. Progress will be reported to Members at regular intervals.
- 1.3 The full Inspection Report has been published and can be found on the Care Inspectorate website using the link below and then selecting the Falkirk report from the list.
<http://www.careinspectorate.com/index.php/publications-statistics/46-inspection-reports-local-authority/joint-inspections-for-children-s-services>

2. BACKGROUND

- 2.1 Between September and October 2014 the Care Inspectorate and Healthcare Improvement Scotland carried out a joint inspection of Health and Social Work Services for older people in the Falkirk Partnership.
- 2.2 The focus of the inspection was on:
- How well the Partnership delivered good personal outcomes for older people and their carers.
 - Whether services worked together in an effective manner to deliver high quality services for older people.
 - How well Health and Social Work are prepared for Health and Social Care Integration.
- 2.3 The Partnership presented detailed evidence and the Inspectors scrutinised records, met with around 90 older people and carers and interviewed around 240 staff. The Inspectors used the evidence to assess the Partnership against 9 quality indicators. A rating was assigned to each indicator as detailed in Section 4.

- 2.4 The Report identified 9 recommendations for improvement and these form the basis of the High Level Joint Action Plan Template. However the plan is not constrained by these recommendations and will include additional actions that the Partnership wishes to pursue following detailed scrutiny of the Inspection Report.

3. KEY FINDINGS OF THE REPORT

- 3.1 Overall the Partnership was found to be providing a range of high quality services to older people and their carers. It determined that Health and Social Work staff work well together to deliver on the ground services.
- 3.2 Examples of good practice in Social Work Services were highlighted including the Forth Valley Sensory Centre, MECS 24/7 service and the approach to Absence Management in Home Care which has reduced absences significantly.
- 3.3 At the time of the Inspection it was found that the Partnership performed in line with Scottish averages in terms of Delayed Discharges and Emergency Admissions, although Delayed Discharge targets are not met consistently. The report notes that the reason for delays has varied over time but that across Forth Valley the issue is mainly due to awaiting Care Home vacancies. The report further points out that the majority of those delays are in Falkirk and there is work to do on developing the capacity of Care Home provision, Home Care and Community Services to address this issue.
- 3.4 Outcomes for older people were found to be generally positive and service users and carers reported they were on the whole satisfied with the services. A range of good outcomes is identified in the report including 83% of people feeling safe, 82% of people living where they want and 73% of people staying as well as they can.
- 3.5 The report identifies that staff across the Partnership are working more closely together to support older people. Examples of this include the Integrated Carers Strategy, the Sensory Centre, the close working links with Alzheimers Scotland and end of life services. However, there is still more to be done to improve communication and information sharing and staff identified the management of change and integration does need to be improved.
- 3.6 The staff survey undertaken as part of the Inspection showed that staff are generally well motivated and supported by Managers. However staff are concerned about the lack of capacity that prevents a focus on early intervention work.
- 3.7 There is evidence of the Falkirk Partnership engaging well with local communities and of good involvement and co-production with the Third Sector. This has led to positive commissioning exercises such as the Public Social Partnership and the Partnership Innovation Fund initiatives. These provide the Third Sector with opportunities to play a key role in new service developments.
- 3.8 The Partnership has more to do in terms of working together on assessment and care planning. This is an area of work which will be supported by Health and Social Care Integration looking to ensure there is a move away from approaching assessment and care planning on a single agency basis.

- 3.9 The Partnership has a good set of joint plans, policies and procedures but still needs to develop a more integrated whole systems approach to performance reporting, quality assurance and self-evaluation. There is good evidence of strong and effective commitment to involving users, carers and stakeholders in service development.
- 3.10 The Partnership is currently in a transition year and the Report acknowledges this as an opportunity to scope out a plan for the joint delivery of services. The Report identifies there is much work to be done in this area and that going forward there needs to be a focus on a robust financial framework with leadership key to this process.
- 3.11 In conclusion the Report acknowledges that there is evidence of positive outcomes for older people and their carers. It recognises that there are constructive working relationships across the agencies and that Leaders share a strong commitment to developing new ways of working.

4. EVALUATION AND RECOMMENDATIONS

The Report has graded services as follows:

Quality Indicator	Heading	Evaluation
1.	Key Performance Outcomes	Good
2.	Getting held at the right time	Good
3.	Impact on staff	Adequate
4.	Impact of the Community	Good
5.	Delivery of key processes	Adequate
6.	Policy development and plans to support improvement in service	Adequate
7.	Management and support of staff	Adequate
8.	Partnership working	Adequate
9.	Leadership and Direction	Adequate

Evaluation Criteria	
Excellent	Outstanding, sector leading
Very Good	Major strengths
Good	Important strengths with some areas for improvement
Adequate	Strengths just outweigh weaknesses
Weak	Important weaknesses
Unsatisfactory	Major weaknesses

The recommendations that have been identified are:

1.	The Falkirk Partnership should put measures in place to meet the Scottish Government delayed discharge targets and to make sure older people in Falkirk are discharged home or to a homely setting when they are medically fit to do so.
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2.	The Falkirk Partnership should ensure all staff are aware of new initiatives and enable staff to communicate and share information more effectively.
3.	The social work service should improve its arrangements for how the public and other agencies access the service through the Contact Centre to the community care team duty system. It should also review the capacity of the locality teams to make sure it can efficiently respond to all the initial enquires.
4.	The Falkirk Partnership should improve on the numbers of carers assessments being undertaken and make sure that these, along with support plans, are recorded in the relevant case files.
5.	The Falkirk Partnership should take action to make sure their assessment, care planning and review processes are improved to ensure a better shared approach and understanding of older person's needs and wishes.
6.	The Falkirk Partnership should ensure that all relevant case records contain chronologies that are fit for purpose and documented as well as jointly developed risk assessments and risk management plans so that the older person's needs are clearly defined and protected.
7.	The Joint Management Group, as the strategic planning group, should use the available data to review and report on progress against the outcomes in the Joint Strategic Commissioning Plan. This is important in order to make sure that 'whole system' change and improvement is evidenced, planned and delivered in a sustainable way.
8.	The Falkirk Partnership should incorporate the Joint Strategic Commissioning Plan for older people in the Joint Strategic Plan for health and social care integration. The plan should be compliant with the Scottish Government's strategic commissioning plan's guidance (Health and Social Care Integration, Public Bodies (Joint Working)) (Scotland) Act 2014 Strategic Commissioning Plans Guidance and be accompanied by a robust delivery plan that is subject to routine scrutiny by the Joint Management Group.
9.	The Falkirk Partnership should implement the communication and engagement plan set out in the Integration Scheme as a matter of priority to ensure the work force fully understand the vision and pathways of change.

5. CONCLUSION AND RECOMMENDATIONS

- 5.1 The Joint Inspection was undertaken during September and October 2014 and it should be noted that further progress has been made since that time, particularly in relation to Integration.
- 5.2 A Short Life Working Group has been established to review the Report and take forward an Action Plan to address the 9 recommendations in the Report. The Group has started work and an initial draft of the Action Plan is attached as Appendix 1. The Joint Action Plan Template will be reported to Members at regular intervals in order to update on progress.

5.3 **Members are asked to:**

- **Note the Services for Older People in Falkirk Report.**
- **Agree the Action Plan.**
- **Request regular reviews of the Action Plan to ensure Members are updated on progress.**

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Deirdre Cilliers
Head of Social Work Adult Services
Contact 4005
Date: 16th September 2015

LIST OF BACKGROUND PAPERS

FALKIRK OLDER PEOPLE'S INSPECTION – ACTION PLAN TEMPLATE

Partnership Response/Progress Since January 2015	Single Agency Actions		Partnership Actions	Timescales
	Social Work Services	Health Services		
<p><i>Recommendation 1:- The Falkirk Partnership should put measures in place to meet the Scottish Government delayed discharge targets and to make sure older people in Falkirk are discharged home or to a homely setting when they are medically fit to do so.</i></p> <p>The challenges identified by the Inspectors in ensuring that older people in Falkirk care discharged home when they are medically fit remain and the Partnership agrees that focussed partnership action is required to improve the position.</p> <p>The national delayed discharge target changed in April to a 2 week target. The nationally reported position at the August census was that there were 17 people delayed for more than 2 weeks.</p>			<ul style="list-style-type: none"> Senior officers from health and social services meet monthly to review performance and agree actions. A weekly tactical group has been established as a problem solving group and all patients are reviewed weekly by a multidisciplinary group and actions agreed. The Falkirk Health & Social Care Transitional Board has identified improvements in delayed discharge as its highest priority and has sponsored work to identify the additional measures required to improve the position and initial actions. Guardianship process and audit policy on choice care home. A delayed discharge action plan is in place. A number of funded projects are in place and will be subject to evaluation in the coming months. These include: 	<p>Ongoing on weekly and monthly basis.</p> <p>October Transitional Board meeting.</p> <p>Ongoing, reviewed monthly by Delayed Discharge Steering Group.</p> <p>Ongoing, subject to evaluation and review by December 2015.</p>

			<ul style="list-style-type: none"> ○ Enhanced discharge hub working over 7 days ○ Case management and anticipatory care nurses and AHPs supporting earlier discharge home from hospital ○ Additional community rehabilitation beds ● A significant new investment in health and social care community services is being taken forward through integrated care fund aimed at preventing avoidable admissions and supporting more older people with complex needs at home. The “Closer to Home” project builds on learning from the Bo’ness pilot work. 	Planned to commence implementation from December 2015.
<p>Recommendation 2:-The Falkirk Partnership should ensure all staff are aware of new initiatives and enable staff to communicate and share information more effectively.</p> <p>The context of this recommendation was the significant change in Council social care structures that were being planned at the time of the Inspection together with planning for Health & Social Care Integration which was still at an early stage at that point.</p>	New Council Social Work structures have now been implemented and there is clarity around the services that will be included in the Falkirk Health & Social Care Partnership.	A transitional CHP structure has been agreed by NHS Forth Valley. This provides operational stability for CHP services through the transition to the Falkirk Health & Social Care Partnership.	<ul style="list-style-type: none"> ● Seven joint staff engagement sessions were undertaken in early 2015 to involve staff in planning for Health & Social Care Integration with more sessions planned in relation to the strategic plan. A report on the feedback from the staff engagement sessions has been considered by JMG. ● An Information Sharing Partnership is in place and an information workstream has been established to support planning for Health & Social 	Some of these actions are already complete, others are ongoing or linked to health and social care integration timescales for completion by march 2016.

			<p>Care Integration.</p> <ul style="list-style-type: none"> • A joint website with a section on frequently asked questions has been established for the partnership. • Locality events involving GP's, social care and community health staff have taken place to discuss locality priorities for integration. • Additional education for staff on Anticipatory Care Planning and frailty unit have taken place. • Joint training on SDS has taken place as part of the Bo'ness pilot and funding for a nurse post has been agreed. 	
<p>Recommendation 3:- The social work service should improve its arrangements for how the public and other agencies access the service through the Contact Centre to the community care team duty system. It should also review the capacity of the locality teams to make sure it can efficiently respond to all the initial enquiries.</p> <p>The Partnership acknowledges there are improvements to be made in passing referrals from the Contact Centre to locality teams.</p>	<p>A review has commenced of the duty intake process for the 5 locality community care teams. It is recognised that the SW contact centre response to calls returns good performance indicators. The process between the contact centre, the CC duty intake and response to referrer are being reviewed</p>		<p>Continue liaison meetings with GP Primary Care Locality Co-ordinators – purpose to improve working relationships between GP practices and Community Care Teams.</p>	<p>Ongoing</p> <p>Completion of review of duty / intake processes by end October 2015</p>

	<p>with the aim to ensure consistency across teams and clarity for referrer and service users. Quarterly meetings are held between Service Managers (Social Work Adult Services) and GP Primary Care Locality Co-ordinators to discuss any areas of difficulty or concern and identify areas for improved partnership working.</p>			
<p>Recommendation 4:- The Falkirk Partnership should improve on the numbers of carers' assessments being undertaken and make sure that these, along with support plans, are recorded in the relevant case files.</p> <p>The Partnership is in agreement that more needs to be done to improve the uptake of Carers Assessments.</p>	<p>The Single Shared Assessment (SSA) process requires the Carers assessment screen to be completed. This is mandatory. This requires the worker to offer a carers assessment and record the outcome as to whether the carer has or has not taken up the offer. The SSA also has a</p>	<p>Carers are being asked if they would like a Carers Assessment by District Nurses, if they would like this they are signposted to the Carers Centre to have this undertaken and support provided to meet their needs.</p>	<p>The Carers Trust continues to support carers to complete carers self-assessment.</p> <p>Ongoing within current practice as Midis General Assessment Form now includes a box to remind staff to ask about carers assessment. We will audit the numbers of carers asked about carers assessments by District Nurses.</p> <p>The outcome of the Carer's Bill currently being progressed through the</p>	<p>December 2015</p> <p>Timescale commensurate with</p>

	section to record carers views as part of the cared for person's assessment. The uptake of carers' assessment is monitored through best value and scrutiny reporting.		<p>Scottish Government will require an implementation response.</p> <p>The further implementation of the SDS Act will require a review of assessment approaches in respect to carers.</p>	the Health and Social Care Strategic plan – April 2016.
<p>Recommendation 5:- The Falkirk Partnership should take action to make sure their assessment, care planning and review processes are improved to ensure a better shared approach and understanding of older person's needs and wishes.</p> <p>Recommendation 6:- The Falkirk Partnership should ensure that all relevant case records contain chronologies that are fit for purpose and documented as well as jointly developed risk assessments and risk management plans so that the older person's needs are clearly defined and protected.</p> <p>The Partnership agrees that work is required both on a single agency and on a joint basis to ensure that assessments are jointly undertaken where appropriate; are consistent (i.e. SMART) and are appropriately shared.</p>	<p>A programme of training in outcome focused assessment has been progressed and continues. The offer of the SDS options is mandatory and required recording on SWIS. The SWIS system is to be upgraded to capture progress towards achieving the outcomes identified through the assessment process.</p> <p>Chronology recording on the Social Work system SWIS has been upgraded. Includes recording of key</p>	<p>District Nursing records are audited through the Assuring Better Care process. This involves reviewing Assessments, Care Plans and review processes.</p> <p>Training continues to ensure care plans are person centred and outcomes focussed.</p>	<p>Develop the Clinical Portal to underpin this work:-</p> <p>Establish a group reporting to the Joint Management Group (JMG) to develop action plan on partnership developments required to improve information sharing and joint training. This group will agree the process for sharing Risk Assessments and Chronologies. This group will build on evidence of good practice in this field i.e. Older People's Mental Health Service.</p>	<p>By October 2015</p> <p>By October 2015</p> <p>On-going quarterly reporting.</p>

<p>Actions for both recommendations are being developed together.</p>	<p>event, action taken and source. An updated procedure on case recording including chronologies has been developed. Community Care Teams have a self-evaluation process of case file audit including risk assessment and risk management plans. This is progressed through the supervision process. Records of the number of case files audited and outcome of audit are kept. This system is currently under review to include improved qualitative audit. Social Work Adult Services has an established Quality Improvement and Outcomes Group chaired by the Head of Service.</p>			
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	Performance Outcomes are reviewed by the group with reporting to Falkirk Council Best Value and Scrutiny Committee.			
<p>Recommendation 7:- The Joint Management Group, as the strategic planning group, should use the available data to review and report on progress against the outcomes in the Joint Strategic Commissioning Plan. This is important in order to make sure that 'whole system' change and improvement is evidenced, planned and delivered in a sustainable way.</p> <p>The Partnership agrees that the JMG should review outcomes in the Joint Commissioning Plan in a more robust way. The Performance Monitoring Group established by the JMG is undertaking this work for example through the end of Change Fund evaluation and is ensuring that the Bo'ness Test of Change Project reports through the JMG.</p>			<ul style="list-style-type: none"> • A Performance Management Work stream has been established to support implementation of health and social care implementation and ensure the partnership fulfils its statutory requirements. • JMG to complete end of Change Fund evaluation report. • Review role of JMG as part of implementation arrangements for health & social care partnership. • Review Bo'ness Leadership Group and ensure clear links to JMG 	<p>Ongoing Performance Framework to be in place by March 2016</p> <p>September 2015</p> <p>March 2016</p> <p>October 2015</p>

<p>Recommendation 8:- The Falkirk Partnership should incorporate the Joint Strategic Commissioning Plan for older people in to the Joint Strategic Plan for health and social care integration. The plan should be compliant with the Scottish Government's strategic commissioning plan's guidance³ and be accompanied by a robust delivery plan that is subject to routine scrutiny by the Joint Management Group.</p> <p>This recommendation will be addressed through the strategic planning work being led by the Interim Chief Officer for the Falkirk Health & Social Care Partnership. The development of a strategic plan, to be agreed by March 2016, will be overseen by the Joint Transitional Board/Integration Joint Board. This work will take account of all existing plans including the Joint Commissioning Plan for older people.</p>			<ul style="list-style-type: none"> • Work to develop a strategic plan for the Falkirk Health and Social Care Partnership is underway, led by Transitional board. • Progress to date includes:- <ul style="list-style-type: none"> ○ Engagement events with key stakeholders in June 2015 ○ Engagement events with staff (7). ○ Discussion with Transitional Board and CHP sub-committee on key priorities for the Falkirk Partnership. ○ Strategic needs assessment being undertaken. ○ Cross reference to Health Board clinical services review. 	<p>In line with agreed timeline for establishment of Health and Social care partnership by April 2016</p>
<p>Recommendation 9:- The Falkirk Partnership should implement the communication and engagement plan set out in the Integration Scheme as a matter of priority to ensure the work force fully understand the vision and pathways of change.</p>			<ul style="list-style-type: none"> • An engagement and participation work stream has been established to support the implementation of health and social care integration. This includes staff. • Seven staff engagement events have taken place and evaluation 	<p>Ongoing, linked to agreed timeline for health and social care partnerships in April 2016.</p>

<p>The Partnership considers that this recommendation has been met. Initial engagement events with staff have taken place. These were well attended by council, health, third sector and independent sector and evaluated well. A report on the initial engagement work has been produced and further engagement events planned in line with Strategic Plan consultation.</p>			<p>report completed.</p> <ul style="list-style-type: none"> • An Interim Chief Officer is in place providing focused leadership on the development of the Strategic Plan. • An OD plan covering the integrated workforce has been developed and agreed by the Transitional Board. • An OD and workforce work stream is in place. • A website, including frequently asked questions by staff has been established and is being updated on an ongoing basis. 	
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