

Agenda Item 7

Prescribing Proportionate Care Project



Falkirk IJB Clinical and Care Governance Committee

25 February 2022

Prescribing Proportionate Care Project

For Consideration and Comment

1. Executive Summary

- 1.1 The report sets out the work being taken forward to embed a Moving with Dignity approach within clinical and community assessment, particularly the implementation of Prescribing Proportionate Care across the Forth Valley area. Prescribing Proportionate Care is enabled through completing a dynamic assessment and provision of specialist equipment, whilst ensuring that those in need of care and support continue to live longer, healthier lives at home.
- 1.2 This approach will support the release of Care at Home capacity, as just one of a number of solutions required to tackle the unmet need in Care at Home provision.

2. Recommendations

The Clinical and Care Governance Committee is asked to:

- 2.1 note the content and that a progress report will be provided to a future meeting.

3. Background

- 3.1 The Committee will be aware of the local and national pressures facing social care and the shortage in the workforce due to absence and vacancies. There are a number of factors that contribute to the continued increase of demands on Care at Home services. The Partnership is taking forward a range of work to address these factors including:
 - Completion of timely reviews of existing care packages
 - Recruitment to vacant posts
 - Embedding the reablement approach
 - Reconfiguration of care routes (also known as 'runs') to use our resources more efficiently with less travel time between visits
 - Review of Occupational Therapy services.

- 3.2 A Forth Valley wide, whole systems approach has been taken to address and tackle this challenging area, with recognition that there is a critical need for a significant culture shift around tasks and ownership pertaining to moving and handling.

4. Prescribing Proportionate Care Project

4.1 What is Prescribing Proportionate Care?

The ethos behind Prescribing Proportionate Care is using the right moving and handling risk assessment, training and equipment to personalise the prescription of care offered, ensuring the proportionate amount of care is given.

4.2 Who Benefits from Prescribing Proportionate Care?

- **Service Users** by being supported to maintain their maximum functional independence and greater flexibility in care options. Delays in provision of care are reduced and, potentially, the number of different carers coming in and out of their home is also reduced.
- **Informal Carers** by having access to the most appropriate equipment and by learning new techniques, informal carers, who wish to, may be able to help their loved ones with aspects of their care that they were previously unable to.
- **Employees** access to equipment models (funded by the programme) appropriate to the most up to date techniques for supporting people contributes to safe systems of work.

Prescribing Proportionate Care can reduce the number of paid carers for each visit and often requires individual carers to spend longer with service users. This reduces footfall in the service user's home while improving opportunities for building positive professional relationships. Reducing house to house movement of staff also means less time spent travelling.

- **Health and Social Care systems** – the national shortage of care staff is well documented, as are delays in sourcing care and delays for people waiting to be discharged from hospitals. National research from areas which have already implemented a prescribing proportionate care ethos has shown that, through robust moving and handling assessment and correct provisioning of appropriate equipment, on average, 40% of double up packages of care can be reduced to single-handed care.

This has freed up capacity, allowing services to address growing demand and reduce delays in a way that is effective and safe for those receiving care and those who deliver it. Currently there are around 250 people in Falkirk who require 2 paid carers for transfers – potentially 100 of those individuals could be supported by 1 carer per visit.

4.3 **What does this mean in Falkirk?**

A joint funding package was approved by Falkirk Health & Social Care Partnership, Clackmannanshire & Stirling Health & Social Care Partnership, and NHS Forth Valley in September 2021 to implement a training programme for a wide group of staff involved in prescribing packages of care. Across Forth Valley 192 staff are being trained. This involves staff from in-patient services, social work, NHS community teams, Community OTs, Acute and Community AHPs, training teams, and moving & handling leads from in-house and external care at home services, identified as the key cohort for training.

4.4 Delivery of RoSPA (Royal Society for the Prevention of Accidents) accredited Single-Handed Care training has commenced. We are working with A1 Solutions, who have experience of providing this 3 day training across the UK, to deliver the course.

4.5 Training Outcomes have been identified. Evidence indicates that undertaking shared training with a diverse range of practitioners and providers, hospital patient flow and provider capacity significantly improves. Carer hours recouped through robust assessment (or reassessment) and appropriate provision of more dynamic equipment, releases capacity constraints within the system.

4.6 In summary this approach will:

- support people to remain at home for longer
- release essential care staff to fulfil some of the unmet need within the system
- reduce delayed discharges and improve the patient flow through the system
- drive up the standards of care across all care providers
- reduce costs (relatively) in the longer term and increase overall capacity.

4.7 Following approval of the proposals by Falkirk HSCP, Clackmannanshire and Stirling HSCP and NHS Forth Valley, a Forth Valley-wide Project Team, led by Clackmannanshire and Stirling HSCP, was established to drive the project forward.

4.8 A series of 'Engagement' events and refresh of Moving and Handling training was undertaken in December 2021 and the first cohort of trainees commenced on three days training in January 2022. The first service user reviews commenced in early February.

5. **Conclusions**

5.1 Implementation of a Prescribing Proportionate Care approach commenced in Falkirk in late January and reviews for individual service users have begun.

- 5.2 The roll out of the approach will be monitored closely to ensure that the anticipated benefits are realised and translate into improvements for the individuals concerned and across the wider health and social care system.
- 5.3 A further report detailing progress will be provided in 6 months.

Resource Implications

There are no new resource implications as funding approvals are already in place. Clackmannanshire and Stirling HSCP are the lead partner.

Impact on IJB Outcomes and Priorities

This work will support the Strategic Plan priorities and outcomes.

Directions

A new Direction or amendment to an existing Direction is not required as a result of the recommendations of this report.

Legal & Risk Implications

There are no new legal issues or risks that may arise, relating to the integration authority or the constituent partners.

Consultation

Discussions with service users and their carers will be undertaken as part of the assessment and review process and their views will be taken into account.

Equalities Assessment

The training programme is an extension of ongoing workstreams to maximise capacity and access to health and social care services. It is not envisaged that any new equalities implications arise. Clackmannanshire and Stirling HSCP, as the lead partner, have been asked to consider whether an Equalities Impact Assessment is required.

6. Report Author

- 6.1 Gordon Mackenzie, Locality Manager (East)
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7. List of Background Papers

- 7.1 There are no background papers circulated with this report.

8. Appendices

- 8.1 None