Agenda Item 6

HSCP Locality Working Progress Report

Agenda Item: 6

Falkirk IJB Clinical and Care Governance Committee

20 May 2022

HSCP Locality Working Progress Report

For Consideration and Comment

1. Executive Summary

1.1 This report provides an update on the Health and Social Care Partnership localities and work that is progressing in these areas.

2. Recommendations

The Clinical and Care Governance Committee is asked to:

2.1 consider and comment on the report.

3. Background

3.1 Falkirk Health and Social Care Partnership (HSCP) has established 3 localities as part of its commitment to delivering services tailored to the needs of communities. Each locality (East, West and Central) has a Locality Manager who will lead a group of managers delivering the range of services which partners have delegated to the Partnership.

3.2 Locality Teams are now being formalised and the services in each locality reporting to the Locality Managers are:

- Assessment and Care Management Teams
- Care at Home Team
- Community Nursing.

3.3 Locality Managers also have a lead responsibility for services across the HSCP as noted below:

- East — JLES, day services for older people, Living Well Falkirk
- West — Community Mental Health Services, Complex Care Nursing Team
- Central — CHART Team

4. HSCP Locality Working

4.1 The following summarises progress being made across the three localities and test of change work being taken forward in certain areas.

4.2 **Locality Management Working Arrangements**
The new Covid 19 variant Omicron has had a significant impact on the Partnership. This has resulted in extreme system pressures and staffing challenges leading to the daily task of ensuring that critical front-line services are delivered.

4.3 Monthly Locality Meetings take place in each area, with managers providing operational updates on their area of service; reviewing finance reports, including savings and efficiency targets; HR updates; Personnel; and risk management.

4.4 Recruitment remains an ongoing challenge across the health and social care sector. Across all localities, staffing and demand are being reviewed. There is a working group established to support the recruitment and retention of Falkirk HSCP staff, along with our partners in learning and development, the voluntary sector and Department for Work and Pensions (DWP).

4.5 Through these business meetings, there is an opportunity for services to discuss the current challenges and success stories. This sharing of information, knowledge and skills promotes a culture of continuous improvement and learning and promotes integration across services.

4.6 Despite system pressures there have been ongoing developments strategically and opportunistically in relation to locality management and oversight. This includes the refurbishment of Grangemouth Social Work Offices, as well as the ongoing Falkirk Community Hospital Masterplan. These developments will provide further opportunity for co-location, integrated working and shared learning across locality services.

4.7 The below key developments encompass Falkirk HSCP Strategic Plan outcomes, and how we will deliver adult health and social care services in Falkirk in the future, as well as the recovery from the Covid-19 pandemic.

4.8 **Back to Basics Work – West Locality**
We have established a multi-disciplinary integrated forum as it was recognised that we required to develop a process which would improve communication and professional relationships within teams and systems. The focus is on multidisciplinary, integrated care delivery to support improved outcomes for those who access our services.

4.9 The West Locality has 4 District Nursing Teams. These teams previously met virtually once a week to discuss any support required in respect of staffing cover and also to provide support in relation to any complex cases.

4.10 Since December this meeting has included Adult Social Work, Home Care representation. Allied Health Professionals (AHPs), GP colleagues and Strathcarron Specialist Nurses are also invited to attend. This meeting now focuses on multidisciplinary discussion of complex or ongoing cases which require an integrated approach. It is planned that this process will be developed across the East and Central localities.

4.11 The main themes that worked well are:

- working in partnership has improved Service Delivery/Outcomes for service users/patients
- improvement in communication and working relationships amongst professionals involved
- ensures a view from all perspectives
- early interventions and joined up approach to problem solving
- allows protected time for discussion
- improved understanding of professional roles/remits.

4.12 **Homecare – Remapping Pilot (Central)**
The objective of this remapping is to approach care scheduling from a geographical perspective. The aim is to free up care at home capacity/hours/visits by making care "runs" more efficient and within the one area.

4.13 At present, due to our commissioning model, external providers can pick up requested care packages from any area. Therefore, there can be multiple providers delivering care within the same postcodes.

4.14 Although in early development, there are suggestions to make this process easier such as focusing on a particular area in Central and supporting the external agencies to change. This approach requires good communication with service users and providers. As this pilot progresses, we will consider this approach for our internal homecare capacity, in line with the ongoing home care review implementation. If successful, a roll out will be considered across the other locality areas.

4.15 **Homecare Remodelling & Care at Home Retender**
This is a substantial project for all localities, encompassing 3 main work streams:

- reablement and training
- maintenance care
- urgent/crisis response.

4.16 The remapping pilot will also inform the remodelling process, as well as the ongoing process for a new care at home retender with our external providers. This remodelling will shape how care at home is provided across

Falkirk, as well as specific localities to meet outcomes, but also to ensure and support greater efficiency and streamline care capacity.

4.17 **Near Me Duty Social Work Pilot (East Locality)**
Following a successful bid for funding from the Scottish Government and the Office of the Chief Social Work Adviser (OSCWA), Falkirk joined a cohort of six Scottish HSCPs, with project support from the national Near Me team, to roll out Near Me video appointments to Duty Social Work.

4.18 A pilot is currently in place supporting the introduction and scale-up of video appointments to Duty Social Work, using the Near Me platform. Initially, the East Locality have been trialling this concept. The learning from this exercise will inform the roll out of the platform to the West and Central Localities.

4.19 The project will enable a blended approach of in-person and video interactions for Duty appointments. It is anticipated that this will attract benefits such as enabling choice, widening access to our services, supporting relationship-based approaches and outcomes focussed practice.

4.20 Near Me enables individuals to attend appointments from the location of their choice. This can reduce travel, minimise time taken off work, school, or routine activities, and make it easier for people who need carer support. Near Me can enable an interpreter, support worker, or family member to join an appointment remotely and, in this way, will support integrated service delivery. This creates an opportunity for shared decision making, thereby enabling timely person-centric care.

4.21 The platform can provide Social Workers, Occupational Therapists, or other Care professionals with insights about the environments of the people accessing their service, which may encourage intervention earlier than if the discussion occurred over telephone. This approach safely enables remote visual discussions without face masks.

4.22 Triage is central to Duty Social Work, requiring information gathering, multidisciplinary working and decision-making. Implementing Near Me would provide the foundation for developing alternative ways of providing, or supplementing, the Duty Social Work service. Our service is currently replicated in each of our three locality areas. Being able to access the service by video removes geographical barriers, creating the potential to explore how aspects of the service are organised.

4.23 Near Me is named in Scotland's Digital Health and Care Strategy. One strategic commitment is as follows: "Make video-based access via the Near Me service a choice available for all appropriate appointments and services across health and care. This includes increasing the number of ways people can access the care, support, and information they need, including opening up video-based access to group consultations, educational resources and peer support groups for all."

4.24 The introduction of Near Me will strengthen the technical skills and confidence of staff in the use of technology. It will support Falkirk to enable our workforce with a powerful mechanism to engage with service users and their carers. Offering Duty Social Work appointments as a digital service furthers the Partnership's strategic priority of making better use of technology to support people in Falkirk.

4.25 **Locality Community Work**
Falkirk HSCP and third sector partners have been working together to develop an effective model of community led support. Community Led Support (CLS) refers to services that are designed and delivered in conjunction with people and communities. The principles of community-led support are co-production, community focus, support, and advice to prevent crises, a culture based on trust and empowerment in which people are treated as equals, minimal bureaucracy, and a responsive and proportionate system that delivers positive outcomes.

4.26 Partners agreed that a Falkirk HSCP strategy was required to ensure that community led support remains sustainable, coordinated, and effective as our capacity increases to respond to demand on community-based services within localities. The draft strategy has been developed during 2021/2022. Our ambition is to increase the use of community led support to provide alternative models of care and to promote prevention and early intervention in the community.

4.27 The strategy intends to:

- ensure that Falkirk Health and Social Care Partnership have a collective understanding of the why and how we intend to work alongside communities
- highlight the learning from the Covid-19 pandemic, with particular reference to sustainable learning for the Partnership
- highlight the change that is required in order for community led support to be effective and sustainable.
- provide an action plan based on a theory of change model, which will enable investment and activities to be monitored and evaluated.

4.28 The strategy describes how we will develop community led support in relation to the following themes:

- Strengthening Communities
- Collaboration and Partnership
- Access to Community Resources.

4.29 The CLS strategy and action plan is still in draft format and is being finalised with partners. Co-production of the action plan is intended to ensure that there is an equal status amongst partners in terms of planning, design and decision making.

4.30 The strategy also builds on established work. Despite the impact of the pandemic, partners have continued to work with communities during 2021/2022. Two areas of significant development relate to community capacity building and community link work.

4.31 The HSCP currently supports three Community Development Workers: one within each locality area. The key role of these workers is to work with people to identify local needs, particularly relating to health and wellbeing, and then develop supports to address these needs. Examples of the work progressed during the period October 2021 – March 2022 are provided within Appendix 1. Community capacity development is a critical area of work in creating conditions for people to maintain and improve their health and wellbeing without requiring access to formal HSCP services.

4.32 Enhanced support in communities is also critical to the expansion of the community link work model. Three Community Link Workers have been supporting GP practices in each of the three locality areas during the past two years. The workers have demonstrated excellent outcomes for people and investment from the Primary Care Investment Fund has now been provided to enhance the service to seven workers. This expansion is in line with Scottish Government ambition to have a Link Worker aligned to every GP practice.

4.33 The Link Workers, who are hosted by Cyrenians, FDAMH and Strathcarron have received over 300 referrals from GPs, Mental Health Nurses, and Advanced Nurse Practitioners during the period October 2021 – March 2022. Many of the people referred have a complex range of support needs, which include:

- Carers support
- Financial/Debt/Welfare Benefits
- Housing/Homelessness
- Trauma/Bereavement
- Life skills/self-management/confidence
- Mental Health (including loneliness and isolation)
- Substance Use
- Weight management
- Employment/volunteering
- Learning disability.

4.34 A key challenge reported by Link Workers is the slow pace at which some support groups are re-starting after Covid or lack of capacity within communities. This can result in the Link Worker having to support individuals more intensely for longer. This again highlights the importance of community development work. Community Link Workers are now working with Community Development Workers. An example of work is the Link Worker has identified a group of men in Grangemouth and the Community

Development Worker is helping to establish a new 'Men's Shed' with the group.

4.35 Community Link Worker client quotes:

- "Thank you for helping my son he has fell through all the gaps in the net since he was a child and now he is getting the help he needs and that's down to CLW"
- "I have needed this support for ages but it has been missing, thank you for helping me get my house move it has helped me a great deal with my mental health and will enable me to move on with my life"
- "I have been lonely for a long time, being referred to you has made a big difference and I can only thank you for showing me the way forward, also thank you for the free iPad and MiFi it has been a great help to me"

4.36 During the period November 2021 – March 2022 a hospital-based link work model was also tested through the Third Sector Winter Pressures Collaborative. The pilot has involved Link Workers, hosted by RVS, being based within Forth Valley Royal Hospital to support discharge. The Carers Centres, Strathcarron, Food Train and Dial-A-Journey have also been involved in the service.

4.37 The pilot supported the discharge of over 650 people across Forth Valley during the period, through provision of transport, medication delivery and settling at home. A Link Worker then contacts the patient after approximately 2 weeks of discharge, to identify any further support that can be provided by third sector partners e.g. shopping, befriending, one-off household tasks. The pilot has received a positive evaluation and Falkirk and Stirling and Clackmannanshire Partnerships are now looking to extend the service for a further year.

4.38 **Living Well Falkirk Concept**
At present, there is a Partnership supported webpage that is a simple visual tool designed to help members of the Falkirk community to understand how to shape their progress on their ageing journey. As part of the Falkirk Community Hospital Masterplan work, there are ongoing discussions about developing and designing Living Well "hubs" in Falkirk, where service users can access a range of support, advice and signposting while attending 1 appointment. To support development, community participation and community led support will be crucial in order to meet the needs of the communities' residents now, and in the future.

4.39 **Using Locality Data**
As locality working continues to develop, we are making better use of new and current data. An example of this is hospital presentations and admissions data. This highlights some variance across the localities as well as connections between the Scottish Index of Multiple Deprivation and

presentation reasons. Further analysis on work, including frequent and moderate attender reasons, could develop locality initiatives around frailty pathways and “Living Well Falkirk” developments.

5. Conclusions

5.1 The report sets out current locality management arrangements and provides an update on the range of work taking place across the three HSCP localities.

Resource Implications
There are no resource implications as this is an update of current work.

Impact on IJB Outcomes and Priorities
The establishment of localities and integrated working is in line with the Strategic Plan and Delivery Plan.

Directions
No new direction is required.

Legal & Risk Implications
No legal or risk issues are indicated.

Consultation
This is not required for the report.

Equalities Assessment
This is not required for the report.

6. Report Author
Gordon Mackenzie, Locality Manager (East)
Marlyn Gardner, Locality Manager (West)
Claire Chapman, Locality Manager (Central)

7. List of Background Papers
n/a

8. Appendices

Appendix 1 : Closer to Communities Key Areas of Work 2021/2022

Appendix 1

In 21/22 the Closer to Communities Project has focussed on recovery from the Covid 19 pandemic. Key areas of work are as follows:

- Capacity building support to community organisations to resource the restart and/or reimagine services
- Support to community organisations & communities to become more digitally included
- Develop networks and partnerships at a local level to co-design and co-produce services

Work is underpinned by the 5 Ways to Wellbeing: Connect, Be Active, Take Notice, Keep Learning & Give

Locality	Key Achievements	Challenges	Future Developments & Opportunities
Central	Digital Inclusion Project for Older People (Callander Park) eg one to one digital support, IT with Tea, devices appr	**Covid 19 Restrictions** All localities have experienced challenges relating to restrictions as a result of the Covid 19 pandemic. The majority of these were overcome eg providing the necessary support and resources to transition to online meetings, sourcing PPE, risk assessments etc However there have been some longer lasting impacts eg reduction in the number of people from 'at risk' groups and reduction in the number of volunteers, particularly in the Grangemouth area. Work is ongoing to address these challenges. **<u>Embedding a culture of collaborative working</u>**	Work with older people in Callander Park flats to develop a programme of and increase participation in social activities
	Hallglen Community Project eg Food Pantry, Listening Room for first point access to MH&WB services, Wellbeing Café for older people		Work with Hallglen Community Project to develop activities that promote positive physical and mental health activities to targeted groups
	Shieldhill Community Hall Committee eg refurbishment of underused community facility, develop activities for older people		Work with Shieldhill Community Hall to develop a lunch club and growing area that includes intergeneration work
East	Work with the Pen Group (community group for carers and adults with complex needs) to explore health inequalities within the context of their lived experience using the Health Issues in the Community framework		
	Falkirk Supporting Young Parents (FSYPP) – a CLD & NHS Family Nurse Partnership Project to reduce social isolation and improve mental health & wellbeing		
	Boness Community Hospital Community Garden – a community partnership project to create an outdoor garden for patients with dementia		
	Establish Grangemouth Community Network – a community led network of organisations providing services to vulnerable people		Develop a capacity building programme that supports volunteer recruitment & development
	Jock Tamson's Bairns – community group for adults with additional support needs to providing music, quizzes and activities to become an independent group		Work with community group to develop outreach provision of dedicated activities for older people in day care settings

Appendix 1

		Supporting and encouraging groups to work together to recognise collective strengths and joined up response to community needs requires time, care and understanding of community relationships and history. Work is ongoing to address these issues.	***New** Work with Community Link Worker and participants to co-design a community based activity programme for men, living in the Grangemouth area, experiencing poor mental health & wellbeing.
			Work with community organisations, including Ability Net, to host 'Tech Tea Parties' for older people living in Grangemouth
West	Falkirk Supporting Young Parents (FSYPP) – a CLD & NHS Family Nurse Partnership Project to reduce social isolation and improve mental health & wellbeing		
	Digital Inclusion Work for 50+ groups in West Locality (Krafty Hookers, Nifty Fifties, Dennyloanhead Hall Committee, Denny Writers) to secure devices, connectivity and digital skills learning opportunities		Work with community organisations, including Ability Net, to host 'Tech Tea Parties' for older people living in the Denny & surrounding areas.
	Support to 50+ groups with programme development		Work with 50+ groups and partners to co-produce activities focussing on access to nutritious affordable food for older people
	Establish the Denny Network - community led network of organisations providing services to vulnerable people		Work with network members to raise awareness of the network and its members' activities to the wider community. Increase involvement of the wider community in the work of the network
			Work collaboratively with NHS Forth Valley Dietetics Service and targeted community groups and individuals to identify community led solutions to pre diabetes & type 2 diabetes
All Localities	**<u>Additional Resources Secured</u>** **<u>Funding</u>** Community Choices £116,642 FEL Food Futures £22,672 Life Changes Trust £12000		

	All Other Grants under 10K: £13,800 **Total: £165,114** **<u>Digital Inclusion</u>** Connecting Scotland (123 IPads & 2 Years Unlimited Data) £79,950 SG CBAL Adult Learning Recovery £1500 Fairer Falkirk Digital Inclusion Fund £5000 **Total: £86,450** **Total Additional Resources £251,564**