

REPORT

 Item No: 8

SUBJECT:	Home Support Update
TO:	IJB Performance, Finance and Audit Sub-Committee
Lead Officer for Report:	Interim Head of Service Social Work Adults
Author(s) of Report	Manager Adult Services (Frailty & Long Term Conditions)
DATE:	19 Feb 2019

1. PURPOSE OF REPORT

This paper is coming to the IJB Sub-Committee for approval.

For approval	<input type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input type="checkbox"/>
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2. ROUTE TO THE SUB-COMMITTEE

This paper has been:

Prepared	<input type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input type="checkbox"/>
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The paper was prepared by the Manager, Adult Services and reviewed by the Interim Head of Community Care.

3. Recommendations

The members are asked to:-

- (i) Approve the revised implementation plan
- (ii) Note the improvements made in performance from roll out of the model
- (iii) Note the proposals around roll out of Dynamic Scheduling

4. Background/Summary of Key Issues
4.1 Background

4.1.1 The New Model of Home Support was agreed at the IJB on 27 March 2018 and the implementation plan was agreed on 5 June 2018. This report is an update on the implementation plan and milestones.

4.1.2 The Implementation plan is managed through The Home Support Project Board, working to timelines which are set out in the body of this report with the objective of:

- The establishment of reablement as the preferred model of support for all new service users or service users with a change in their circumstances
- To routinely offer individual budgets under the four options as set out in Social Care (Self-directed Support) (Scotland) Act 2013.
- Working in close collaboration with our partner agencies, of achieving same day discharge from hospital, or prevention of hospital admission from the community where possible.

4.1.2 The implementation plan contains a number of workstreams running in parallel with a roll out period of two years, with completion by the end of year three.

4.1.3 See Gantt chart attached for summary.

4.2 Reablement

4.2.1 It was planned that 3 reablement teams would be established in each locality by January 2019. One team, Cumbernauld, achieved this early last year and is currently planning to create a 4th team in the coming months. The other areas have all been able to enhance their reablement capacity in relation to staffing provision and have been able to ensure a more consistent approach to Reablement, though full roll out of 3 teams per Locality is not yet complete. It is also worthy of note that, in addition, locality Rehabilitation teams have now been established in all 6 localities. These teams are in their infancy and will work closely alongside reablement teams with shared objectives.

4.2.2 There have been a number of challenges to establishing further full reablement teams with several issues key to influencing progress. These include existing shift patterns which differ from the actual requirements of these teams. Overall capacity issues in providing day to day service has also had a significant impact on the pace of progress, since in consequence, there have been difficulties in releasing staff to new teams when they are required to cover mainstream work. The independent sector has also experienced recruitment challenges further impacting on capacity for change.

4.2.3 The working groups tasked with developing a programme of training and arranging implementation across the workforce has now concluded this work and good quality training for home support staff in reablement teams is tabled to take place from June 2019. Pharmacy support plans will be part of the training to support service users and carers in the self-management of medication.

4.2.4 We have currently moved from 45% of service users going through reablement to over 66%. By April all new service users will go through a period of reablement. The chart below demonstrates the outcomes for service users after reablement with over 45% requiring only information and advice.

Change in Service After Completion	Airdrie	Bellshill	Coatbridge	Cumbernauld	Motherwell	Wishaw	Grand Total	
Information and Advice	17	25	17	87	43	46	235	45.4%
Reduction in Support	13	10	17	29	27	24	120	23.2%
Same Level of Support	19		1	17	8	38	83	16.0%
Increase in Support	6		3	7	6	13	35	6.8%
Deceased	2	4	4	18	1	16	45	8.7%
Grand Total	57	39	42	158	85	137	518	100.0%
	29.8%	64.1%	40.5%	55.1%	50.6%	33.6%	45.4%	

4.3 Outcome Measurement

4.3.1 Agreeing an outcome measurement tool that can be used electronically has proven more difficult to achieve within the current social work information system, (SWIS.). However as part of the Digital NL work, SWIS will be replaced and expressions of interest will start the tender process within the next six months. There are a number of alternative information systems with good outcome measures that are easily shared with service users.

4.4 Intensive Teams

- 4.4.1 Two intensive teams have been established in two localities with good progress in the other four. Creating capacity as with reablement has been the main challenge, although two of the smaller teams are reviewing their need for a second team.
- 4.4.2 In conjunction with the Housing service review of sheltered Housing, work is ongoing in how best to support the residents in Sheltered Plus accommodation as a real alternative to residential care. Housing colleagues view the changing profile of the current resident group as a longer term objective, applying the new admission criteria only when vacancies arise.

4.5 Self-Directed Support (SDS)

- 4.5.1 Significant development has taken place around the rollout of SDS arrangements, with the new assessment framework completed, changes made to SWIS and Area Wide and Locality monitoring arrangements currently being finalised to support a start date of April 2019 for all new service users. Work has been piloted to test the robustness of the arrangements and one independent Home Support provider already has 27 service users working to individual budgets.

4.6 Medication Administration

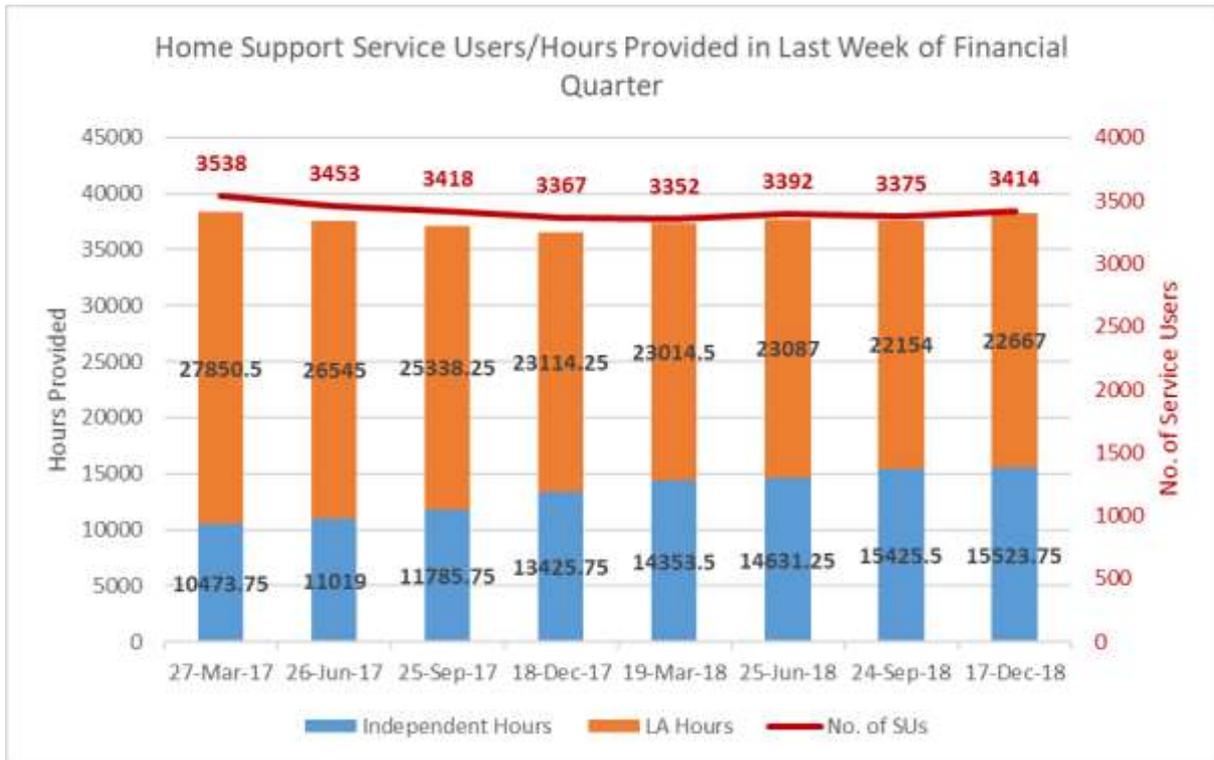
- 4.6.1 The Policy, Procedure and training manual for medication administration has now been agreed and signed off.
- 4.6.2 A detailed and costed training programme and timescales for delivery to all staff has been agreed, with training and implementation complete for three teams and on course to complete the training for one other team by July 2019 and the final two by October 2019.
- 4.6.3 The wider awareness training for staff and Health Colleagues who prescribe medication on the value of medication alignment, (taking account of service times when prescribing medication to ensure greater consistency) is ongoing with full implementation of all aspects of the medication administration policy across in house, independent sector and acute sector collaboration expected to be complete by March 2020.

4.7 SVQ2 Training

- 4.7.1 The registration for SVQ 2 for all staff is ongoing with over 55% already complete and on course for all staff by March 2023 (compliance with Regulatory Bodies required for October 2023).

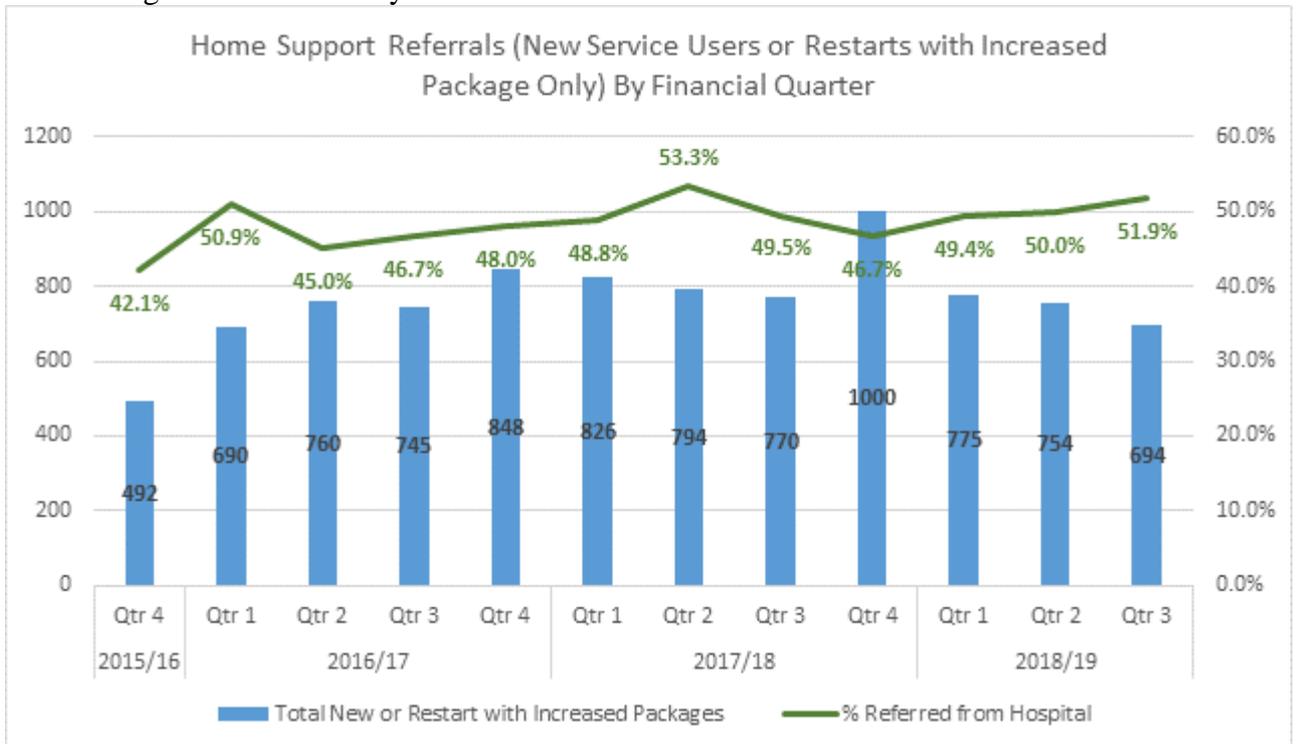
4.8 Performance

- 4.8.1 The recent National Benchmarking report stated, that while 'Councils with larger populations have significantly lower rates of people receiving personal care at home than smaller areas (58% compared to 69%),' North Lanarkshire is third after Shetland and Clackmannanshire with 70%, a significant example of the Partnership's continued investment and commitment to supporting people at home
- 4.8.2 Managing the demands for the service through reablement has been a challenge, but has met with some success as the table below shows. The overall cost for service delivery was assisted by the increase in work by the independent sector in the second to fourth quarter of the last financial year. This has remained static in this financial year adding to our cost pressures and ability to expand the in house reablement teams.

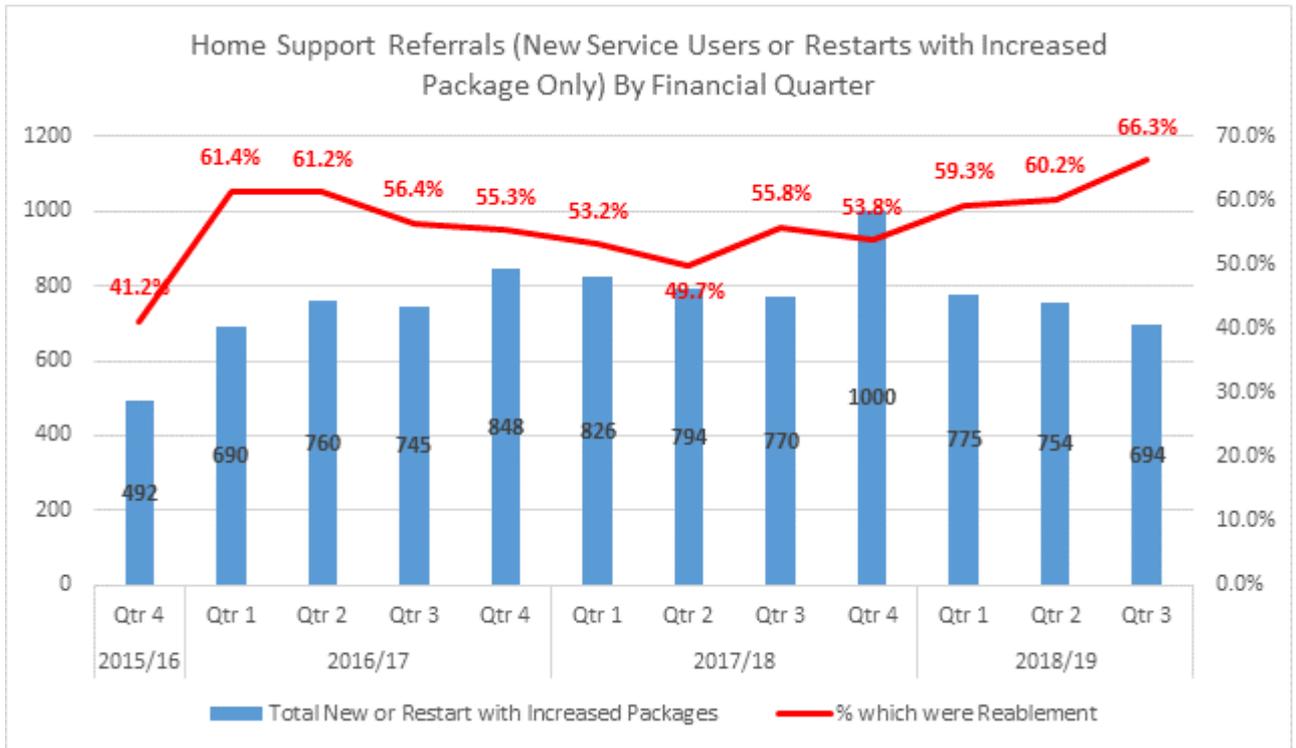


The table below shows the trajectory of the increase in hospital based referrals for new work and increased packages of care in the last three years, even although the numbers have remained steady.

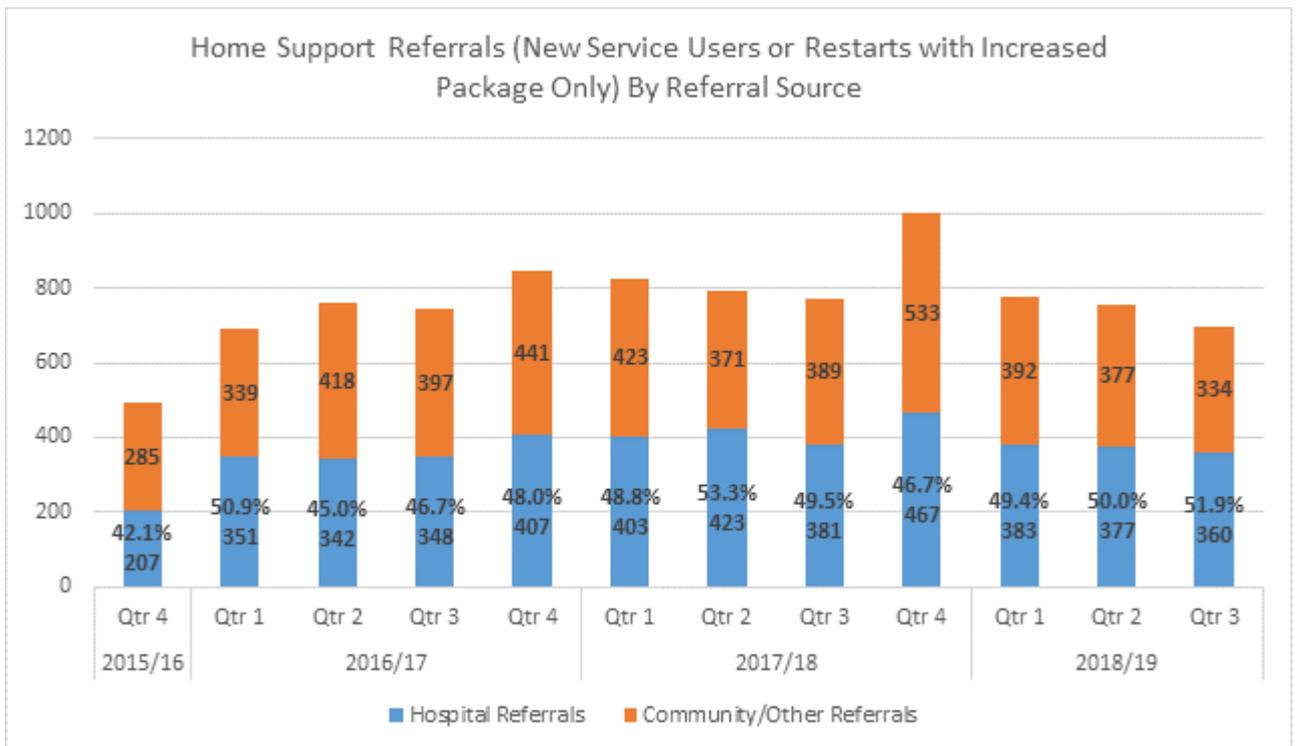
Home support related bed days decreased and were maintained at 40% less than the 2017 level throughout the calendar year of 2018.



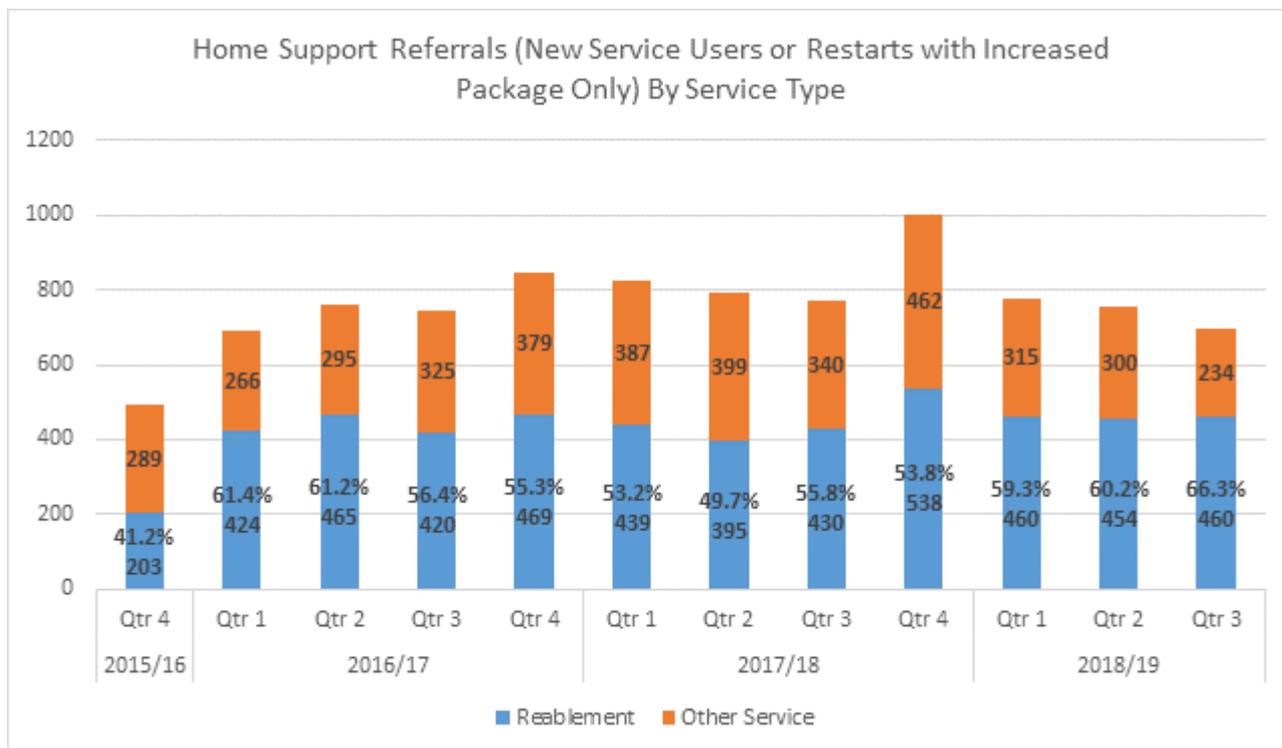
The impact of the investment in reablement can be shown in the chart below. In the past reablement staff were used to supplement mainstream work, which diluted the effectiveness of reablement, hence the dip at quarter 2 of 17/18 and subsequent rise.



The table below shows the balance of referrals between community and hospital for new provision or increased packages of care.



The table below demonstrates the increased percentage use of reablement while the service continues to manage new demand.



4.9 Next Developments

- 4.9.1 In line with the ethos set out in *We Aspire – A shared ambition for North Lanarkshire*, work has commenced to look at the next developments for the service as set out within the DigitalNL programme.
- 4.9.2 A report has gone to the Adult Health and Social Care Committee setting out plans to review the potential of dynamic scheduling within the service.
- 4.9.3 The Home Support service already utilises the Kirona system, with the first element ‘Job Manager’ already fully operational over the last four years, sending schedules for workers direct to their mobile phones.
- 4.9.4 It is now proposed to engage with Kirona to explore the roll out of the second element of ‘Dynamic Scheduling’. This was always the aim on procurement of the Kirona system, reducing the need for manual scheduling, freeing up managers to be less office based and creating a greater focus on quality. Learning from other services utilising similar systems suggests an efficiency gain of up to 20% whilst supporting a greater quality of service.
- 4.9.5 Details of the programme will come to the IJB for approval as part of the 2019/20 Commissioning Plan.
- 4.9.6 It was initially planned that a consultation exercise with staff and unions would commence on the agreed standardised set of work patterns across the workforce in order to provide a more consistent service across Localities. However, with the Integration Review, disaggregation of Children and Families and Adult Social Work Services and changes planned above around Dynamic Scheduling, this has been delayed to ensure that only one exercise is undertaken with staff to ensure a coordinated and consistent approach.

5. CONCLUSIONS

- 5.1 Overall, strong progress has been made on the roll out of the new model of Home Support, with positive feedback from colleagues in both acute sites in North Lanarkshire on the improved responsiveness of the service.
- 5.2 In general, Home Support related delayed discharges are supported home within 72hrs, which is a marked improvement. The percentage of new or increased packages of care commencing with Home Support is steadily increasing towards the March 2019 target of 70% and the outcomes for those going through the service have been maintained.
- 5.3 However, some elements of the plan have required revised timescales, largely due to the inter-related challenges of creating additional capacity in reablement whilst still maintaining the day to day pressures within the managed service, alongside continued recruitment pressures in the independent sector. Strong progress has been made in transitioning to individual budgets, with the full framework nearing completion for an April roll out, commencing with new demand.
- 5.4 Due to the revised timescales, the service is currently projecting a £2m overspend, with a number of factors attributable, many of which are specific to individual Localities rather than the service as a whole. A separate management action plan is in place and will be brought to a future IJB to inform of the actions in place for the next financial year.
- 5.5 The planned developments with Kirona offer an exciting development for the service, with the potential of improving efficiency by up to 20%, offsetting some of the planned increase in demand of the service going forwards. While 'Job Manager' is fully implemented, 'Dynamic Scheduling' is now being explored for roll out. Another major focus will be around improving the use of data and analytics to provide real time performance management information for managers to use in day to day operations.

6. IMPLICATIONS

6.1 NATIONAL OUTCOMES
Home Support services are a crucial element of supporting people to remain at home in the community, impacting particularly on outcomes 2, 3 and 4.

6.2 ASSOCIATED MEASURE(S)
Home Support services impact on a range of the national outcome indicators, but particularly on 2, 3, 4, 7, 12, 13, 15, 19, 21 and 22.

6.3 FINANCIAL

This paper has been reviewed by Finance:

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
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6.4 PEOPLE
The development and roll out of the new model will require collaborative working with service users, carers, staff and Trade Unions, with a commitment to annual focus groups to review service delivery.

6.5 INEQUALITIES

EQIA Completed:

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
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7. BACKGROUND PAPERS

N/A

8. APPENDICES

Gantt chart for performance time line



Gantt Chart for
home support perfor

A handwritten signature in black ink, appearing to read 'Dennis McLafferty', written over a light grey horizontal line.

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CHIEF ACCOUNTABLE OFFICER (or Depute)

Members seeking further information about any aspect of this report, please contact Dennis McLafferty, Manager Adults, (Frailty and Long Term Conditions) on telephone number 01698 332031