

North Lanarkshire Council

Report

Adult Health and Social Care Committee

approval noting

Ref MF

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First Point of Contact

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Executive Summary

The purpose of this report is to provide information regarding the development of a North Lanarkshire Health and Social Care Partnership First Point of Contact (FPOC).

FPOC is an approach which aims to support people in our communities to receive the right supports, from the right person, at the right time. By reducing overlaps and duplication, as well as streamlining processes, the experience for the public should increasingly be that their issues are resolved or responded to quickly with less professional handovers through our organisational systems. It fits well with our aspiration to take a preventative, early intervention approach, promote self-management and realistic medicine and signpost individuals to community supports. Development of FPOC also takes account of feedback from people who use services and carers who want a simpler way of contacting services in a crisis or where there is concern about a person's safety. It also offers the opportunity to work in partnership with individuals, groups and communities, to make use of strengths, resilience and natural supports. FPOC will offer opportunities for further integration and collaborative working across the Partnership and with the Third Sector. The FPOC approach will include all Social Work Services including Children's Families and Justice, now sitting within Education and Families, and Adult Social Work services sitting within the Health and Social Care Partnership.

The First Point of Contact Steering Group was established in June 2018, to bring together key staff and stakeholders and take forward key pieces of work to develop First Point of Contact for all services within the Partnership. Proposals will be formulated within the context of the Health and Social Care Partnership Strategic Plan, Commitment to Inequality Prevention and Anticipatory Care, Primary Care Transformation, and the Mental Health Strategy.

Recommendations

Committee members are asked to

- Note the content of the report.
 - Note the proposal to develop FPOC across the Health and Social Care Partnership.
 - Note this development in line with priority areas of strategic development and within integration review implementation plan.
 - Note the consideration for Project Management support to take forward this important area of work.
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The Plan for North Lanarkshire

Priority Improve the health and wellbeing of our communities

Ambition statement (13) Improve preventative approaches including self-management and giving people information and choice over supports and services

1. Background

- 1.1 The development of FPOC came from the recommendations of the Integrated Service Review Board (ISRB) undertaken in 2018, which recognised that there was a variety of access points to services and supports which were not always as responsive and efficient as required for the people in our communities.
 - 1.2 The main purpose of the group is to review and map current arrangements and processes, identify gaps and positive practice, agree and implement future methods of entry for public and external agencies, improve communication with partner agencies and improved customer experience. The Group will develop options for service delivery in the context of future and current technology developments.
 - 1.3 The work of the group complements the principles of Realistic Medicine, which aims to build a personalised approach to care, reduce duplication and unwarranted variation, and change our style to one of shared decision-making.
 - 1.4 The work closely links with the delivery of the Primary Care Improvement Plan so that we take a consistent approach to accessing general practice which is, for many, the first point of contact with health services.
 - 1.5 The Public Bodies (Joint Working) (Scotland) Act 2014 set the statutory framework for North Lanarkshire Health and Social Care Partnership (HSCNL) and the evolution of the locality model of health and care. FPOC is an essential strand of the development of a locality model which makes effective use of staff resources whilst ensuring that people marginalised through poverty, disability, disadvantage or crisis can access the right support at the right time.
 - 1.6 The Health and Social Care Commissioning Plan for North Lanarkshire 2018-19, 'Achieving Integration' states that First Point of Contact will make access to advice, support and services consistent and much simpler. It includes aims of shared assessments and allocation of work, reducing duplication and making services more streamlined for service users and carers. Our vision is that people who live in North Lanarkshire will achieve their full potential through receiving information, support and care they need, efficiently and effectively, at the right time, in the right place and in the right way as shown in the attached diagram at Appendix 1.
 - 1.7 The FPOC work has a steering group, chaired by the Head of Adult Social Work Services, and 3 sub-groups each co-chaired by a Health manager and a Social Work manager. These sub groups focus on specific areas of practice, namely:
 - Initial Enquiry and Information, including further development of Making Life Easier (MLE). MLE is an online tool with 24 hour access, it offers information, professional advice and direct access to support via signposting and direct service if required. MLE is central to the principles of Assessment and Planning
 - Assessment and Planning Promoting the use of co-production with the 3rd sector in particular in relation to self-management, use of community resources, social prescribing and realistic medicine
 - Professional to Professional referral encouraging shared and consistent assessment across disciplines wherever possible.
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2. Report

2.1 The FPOC Steering Group

- 2.1.1 This group has oversight of the development of a response which transforms the way services interface with the public, becoming increasingly responsive, proportionate and person centred. Options are being explored to support both different conversations with the public and an increased focus on outcomes. As part of the FPOC work we have looked at other models of assessment and planning which put the person and their family at the centre. One of the models currently being considered to ensure that we have people at the centre of any engagement, is the 3 Conversation Model. This offers a collaborative way of various stakeholders, including the NHS, 3rd sector social work and the person using community based support to achieve better outcomes.
- 2.1.2 It would offer a more streamlined approach to supporting an individual in crisis and is about a single professional, 3rd sector rep, working in an in depth way with the person to connect them to their community and ensure that that `named person` is in daily contact to wrap around the person until they are out of the crisis.
- 2.1.3 Evidence from other partnerships, Councils, who have adopted this model would indicate improved outcomes for the individual, savings in terms of reduced need for long term service provision for the individual and better and more effective use of resources, including staff. This work will run in parallel with the other areas of development within the Partnership, including the development of Integrated Rehabilitation teams across the 6 localities, the redesign of Home Support Services and the redesign of how we deliver our Mental Health Officer Service.
- 2.1.4 In addition to the above we have been piloting some work with our 3rd sector colleagues around a `conversation` model for people who have a Community Alarm. This has seen a significant uptake of people using the service from a link worker with Getter Better Together Shotts. We are now looking to roll this model out across other service users, particularly those who use Home Support. We have also sought comment and feedback from service users and carers via a Partnership for Change assimilation meeting and will take the First Point of Contact approach to the newly established Health & Social Care Partnership Participation & Engagement Group for comment and feedback on a regular basis.
- 2.1.5 As part of the redesign of the partnership`s` FPOC we have been engaging with our partners within Digital NL, in particular to look at the following areas. Outgoing mail and initial contact with the public, to consider a Targeted Operating Model that would be consistent across all Council services. To look at opportunities for automatically electronically inputting referrals from our partner agencies, in particular Police Scotland, from whom we receive a significant number of referrals which then require inputting into the social work IT system.

2.1.6 We are also in dialogue with Digital NL to look at options for the procurement and replacement of the current social work client index system, Myswis. This is an in house bespoke IT system which contains social work service user records, supports the delivery of our home support service and manages our financial solution for care home payments and other payments to 3rd parties. South Lanarkshire Council are also actively considering the procurement of a new case management system for their social work service and we are jointly looking to see if there are opportunities to work together in the procurement of a new system which will offer best value, financial savings and the ability to share information across agency platforms, including NHS Lanarkshire, in the future We are currently in a pre-procurement stage in this process but are working with Digital NL to produce a business case and scope out the preferred option and costings.

2.1.7 Part of the current work with Digital NL is to look at the type of enquiries, referrals and by which communication means they come into the social work service. A review of the social work data revealed that from April 2016 until September 2018 a total of 88688 new pieces of work were referred into the service. The main sources of referral were from Police Scotland, self-referral, NHS or a friend or relative. The main routes for referral were email, telephone and people presenting at the office. As of April 2019 we have started to produce performance information on how many people we are able to offer advice, guidance and support to at the FPOC in social work and early indications are that this is around 150 people every month.

2.1.8 In addition to the above a specific piece of work was undertaken within Motherwell locality in July 2018 to look at the workflow into the various FPOC`s across the partnership. Including primary care and 1 GP practice and waiting times for allied health professional and other health services.

2.2 The Information/Initial Enquiry Sub Group main purpose is to:

- Gather and verify current sources of information in terms of health and social care needs for residents of NLC.
- To map how the public and partner agencies use the current information available for self-management.
- To identify gaps in how information is produced and accessed.
- To identify how the public and professionals maximise digital solutions and opportunities.

2.2.1 The Information/initial enquiry sub group is drawing on the learning from a range of key developments, including:

- Link Workers in GP practices across North Lanarkshire.
- Development of a staff platform within Making Life Easier (MLE) and the training of Champions to further promote use

- Consideration of the option of a single phone number for Social Work is currently being explored.

2.3 The Assessment and Planning Sub Group main purpose is to ensure that services are generic, proportionate and holistic. Key tasks include:

- Scoping current arrangements, processes and workload / volume across localities, area wide and hosted services.
- Map current arrangements and identify good practice, gaps and issues.
- Consider methods of entry to assessment.
- Understand communication across the partnership.
- Consider the experiences for all involved in the assessment and planning processes.
- Consider options for future service delivery in the context of current and future technology.

2.3.1 The Assessment and Planning sub group is drawing on the learning from a range of key developments, including:

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|------------------------------|--|
| • Discharge to Assess | • Community Mental Health Teams |
| • District Nurse Process | • MLE |
| • Health Visitor Pathways | • Access Social Work |
| • Addiction Recovery Teams | • Adult social Work Locality Teams |
| • Hospital Social Work Teams | • Children and Family and Justice Locality Teams |
| • Hospital Discharge Process | |
| • Locality Rehab Teams | |

2.3.2 The use of E-Care (a shared electronic system across the partnership) could be accessed more widely. It has been agreed that until the Partnership has updated their management information systems, that as an Interim arrangement, E-care will be used to support information sharing.

2.3.3 Making Life Easier (MLE) is central to the development of Assessment and Planning, importantly including self-assessment.

2.3.4 An area of good practice is the use of the Outcome Star in Addictions and Justice which promotes person centred outcomes for people where both staff and service users realise the benefits in an efficient way. It is recommended that a partnership approach to this model is devised and agreed across all future assessments.

2.4 The Professional to Professional Sub Group main purpose is to:

- Develop pathways to access support from other professionals / teams when requested.
- Review need for screening as part of the process
- Explore electronic /digital opportunities for transfer information /request.
- Agree scope of peer to peer support

- 2.4.1 The group is currently developing a generic electronic communication form that will be shared through the Multi Agency Store (MAS)
- 2.4.2 The group is currently mapping the peer to peer journey, and should be based on best practice for the patient journey.
- 2.4.3 It is proposed to streamline the flow of referrals to the new established rehabilitation teams in localities

2.5 Implementation Plan

- 2.5.1 Development of the new model of First Point of Contact will be planned and implemented on a staged basis to fit with other programmes of work, including the redesign of Home Support, rollout of the Rehabilitation Teams and a review of assessment to planning.
 - 2.5.2 Whilst some developments can be staged incrementally we will ensure that any future model of service delivery fits with Digital NL and the Programme of Work for North Lanarkshire. This will ensure that change is managed effectively, mitigating any risk and will include a staff communication and workforce plan.
 - 2.5.3 A further updated report on the progress of the development of our First Point of Contact model will be submitted to Committee in November 2019.
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3. Equality and Diversity

3.1 Fairer Scotland Duty

Duty is on strategic decision making and, as such, the proposals outlined in this report require to be considered under the Duty. The Fairer Scotland assessment process will therefore be carried out as part of the next stage in developing the Programmes of Work outlined in this report. In particular equal access to service provision for all residents of North Lanarkshire and consideration of employment opportunities for all people of working age.

3.2 Equality Impact Assessment

Redesign of the FPOC is to allow the public and stakeholders to have the ability to self-manage and access information and therefore there are no implications.

The FPOC development work will be subject to an equality impact assessment

4. Implications

4.1 Financial Impact

The project management, development and testing of innovative approaches such as the 3 conversation model may require additional short term funding and possible funding sources are currently being explored. A future report to committee will provide an update on the agreed funding position for relevant staff.

4.2 HR/Policy/Legislative Impact

No HR/Legislative impact at this juncture in development work

4.3 Environmental Impact

At this stage it is not anticipated that there will be an environmental impact, although the location of public facing hubs have still to be concluded.

4.4 Risk Impact

At each stage of the development work any issues within work streams will be reported to the steering group and mitigated prior to any new development being implemented.

5. Measures of success

5.1 The FPOC model will support people in our communities to receive the right support, from the right people at the right time.

5.2 FPOC will be streamlined, offer a more efficient assessment process and service delivery, if required.

5.3 FPOC will focus on signposting and early intervention work, in conjunction with our 3rd sector colleagues, which will enhance people's resilience and capacity for change and self-management.

5.4 FPOC will include the wider Digital NL agenda, Making Life Easier (MLE) and ongoing partnership working with the Third Sector.

6. Supporting Documents

- Integration Review [Integration Review](#)
- Home Support Design [Home Support Redesign](#)
- Digitalisation [Digitalisation](#)
- The Plan for North Lanarkshire [The Plan for North Lanarkshire](#)



**Interim Head of Adult Social Work Services
Health and Social Care NL**

Appendix 1

