



Integration Joint Board  
Clinical and Care Governance Committee

15<sup>th</sup> August 2019

This Report relates to  
Item 11 on the Agenda

# Independent Sector Scottish Care

*(Paper presented by Elaine McCartney)*

*For Discussion and Noting*

<b>Approved for Submission by</b>	Julie White, Chief Officer
<b>Author</b>	Elaine McCartney, Independent Sector Lead, Scottish Care
<b>List of Background Papers</b>	Not Applicable
<b>Appendices</b>	Not Applicable

## SECTION 1: REPORT CONTENT

<b>Title/Subject:</b>	Independent Sector Scottish Care
<b>Meeting:</b>	IJB Clinical and Care Governance Committee
<b>Date:</b>	15 <sup>th</sup> August 2019
<b>Submitted By:</b>	Elaine McCartney, Independent Sector Lead Scottish Care
<b>Action:</b>	For Discussion and Noting

### 1. Introduction

- 1.1 The Independent Sector is committed to supporting the sustainability of care provision in Dumfries and Galloway and is a key partner in the delivery of health and social care in the area. This paper aims to provide an update on the progress and activities of the Health and Social Care Partnership's contract and business plan with Scottish Care Partners for Integration Teams for period January to July 2019, for information and noting.

### 2. Recommendations

- 2.1 **The Clinical and Care Governance Committee is asked to:**
- **Note the ongoing and developing work activities Scottish Care's Partners for Integration Team are involved in.**

### 3. Background

- 3.1 Scottish Care through its Partners for Integration team (PFI team) aim to build on experience, knowledge and of existing relationships to effectively support Care Providers and our Health and Social Care Partnership (HSCP) to meet future challenges and the changing demography in Dumfries and Galloway (D&G). By working collaboratively, exploring new and innovative approaches to service delivery, adopting a culture of service improvement and development and the sharing of good practice the PFI team are supporting facilitation of transformational change in how services are commissioned and delivered in Dumfries and Galloway.
- 3.2 Through the Branch Chairs supporting Scottish Care's membership and PFI team supporting the wider Social Care providers, Scottish Care, is in a strong position to build on previous successes, learn from experience and positively contribute to Dumfries and Galloway's vision of making it's

communities the best place to live active, safe and healthy lives by promoting independence, choice and control.

#### **4. Main Body of the Report**

##### **4.1 *Maintaining safe, high quality care and protecting vulnerable adults***

4.1.1 *Care Provider Profiling* - PFI team have completed Profiling for ALL Care Homes and Care at Home providers in order to:

- Re-introduce and engage our PFI team,
- Establish improved relationships with the Care Providers, and foster a culture of collaborative, supportive working with Scottish Care.

Profiling has allowed the PFI team to gain improved knowledge around local Social Care Providers, their organisations, what matters to them, their Care Inspectorate gradings and any common thematic issues identified via these Care Inspections.

PFI teams works in a more collaborative manner, this has seen the Care Providers being increasingly proactive and responsive to contacting the PFI team, sharing information and raising concerns if required.

4.1.2 *Weekly Newsletter* - information and content is collated from across our Health and Social Care Partnership, the Care Inspectorate and Scottish Care's National Team. The newsletter acts as a vehicle to share information, good news and learning, condensed in an '*all in one place*' method to address the concern our Providers shared of receiving large volume of emails.

Sent to approx. 113 individuals, 100% of Care Providers, Strategic Planning and Commission team, NHS, Local Authority including in house Care and Support Services and our Third Sector Colleagues, who can all forward on to their wider teams.

Our newsletter is facilitated by Microsoft Sway, which provides analytics and allows us to track the interaction and engagement with the publication to ensure we are getting to the target audience with pertinent information.

Date of Newsletter	Total Views	Glanced	Quick Read	Read in Depth
07/06/19	38	20	2	16
14/06/19	53	22	5	26
21/06/19	12	4	1	7
28/06/19	39	19	3	17

4.1.3 *Network and links* – PFI team host and attend several different strategic and operational meetings, both at locality and regional level under the Healthy Aging Programme Board groups. This enables our team to be an integral part of service development and planning while supporting current issues i.e. Delayed discharge. Meeting attendance is prioritised and shared between the PFI team and Branch Chairs to ensure the most appropriate person attends and information is shared to our Social Care providers as timely as possible.

4.1.4 *My Home Life* – PFI team and Strategic Planning and Commission are liaising with Care Inspectorate on a D&G Care Home supported roll out.

## 4.2 ***Support the work of the HSCP in trying to reduce Delayed Discharges***

4.2.1 *HSCP Delayed Discharge meeting*–participation allows PFI team to raise awareness of our sectors impact strategically and operationally, share information and concerns across the HSCP. I.e. Care at Home Capacity Report April 2019 – commissioned by HSC General manager, to investigate the barriers to increasing Capacity in the community. PFI team wrote this report in collaboration with 100% of Care at Home providers including the in-house service.

The report highlights the main issues currently being faced by Care at Home Providers of:

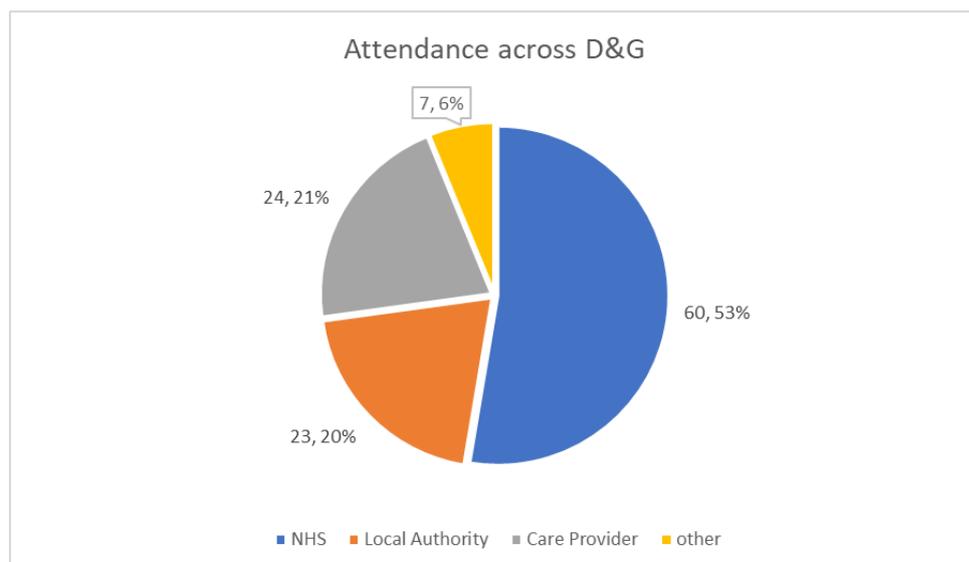
- *Recruitment and Retention,*
- *Communication issues,*
- *Financial pressures,*
- *Relationships and Expectations from other members of the partnership.*

Out of the 16 suggested ‘*Routes for Resolution*’ suggested by Care at Home providers via the above report, there are currently eight out for consideration as part of the Health Aging Programme Boards.

4.2.2 *Flow Discharge and Me awareness sessions* – concept for these sessions originated from the Scottish Care Branch Chair, with sessions designed, planned and facilitated by PFI team. Support was forthcoming for planning and facilitation from Locality managers and their teams. The agreed directive was to hold awareness raising sessions with a focus on services which support and facilitate hospital flow and discharge:

Outcomes for Sessions:

- Establish and develop rapport between all HSCP partners involved in Flow and Discharges,
- Develop an understanding of everyone's role within Flow and Discharge from hospital,
- Discuss barriers and issues which effect a positive discharge,
- Experience a positive Discharge as part of the Flow process



These sessions are newly completed, and PFI team are working with the Improvement Team to look at information and feedback gathered and use this to formulate Locality and Regional Improvement Work and Action Planning.

4.2.4 *Red Bag Initiative* - our PFI team is proactive as part of the D&G Red Bag initiative supporting three Care Homes who have agreed to pilot the use of Red Bags. Supporting the HSCP to develop effective and efficient arrangements for the improved flow of information and communication on admission and discharge to hospital. Scottish Care is keen to ensure this initiative is effective and positive,

however, is monitoring impact and wishes to ensure this does not place an onerous amount of additional work on our Care Home staff.

#### **4.3 *Enabling people to have more choice and control***

- 4.3.1 *ACP* - Working in collaboration with the ACP project lead, the PFI team Care have been promoting education training and use of ACPs, during discussions with providers and as part our newsletters. To date 43% of Care Homes and 61% of Care at Home services have attended the ACP education and training. In June 2019 50% of individuals living in a Care Home have an ACP which was the Project's identified target.
- 4.3.2 *Mainstream Good Conversations Training* – less time has been spent on this work, however there are plans to liaise and work with HSCP to share training resources. PFI team only have one qualified train the trainer. A note of interest was circulated to all providers with only two Providers at either end of the region who indicated an interest. On evaluation PFI team have identified that the previous training offered requires highlighting to Care Providers differently.
- 4.3.3 *SDS* – New SDS lead officer in post and initial contact made. PFI team are working with Strategic Planning and commissioning on extending Care Provider uptake of the SDS option 2 contract. PFI team liaising with provides to investigate barriers for engagement and sign up to SDS Option 2.

#### **4.4 *Developing and strengthening communities***

- 4.4.1 *Volunteers in Care Services to enhance our workforce and services* –PFI team shared Guidance Document, 'Volunteers in Care Homes' -relevant across all Care Services.
- 4.4.2 *Regional Falls work* – PFI team are facilitating a consultation on the Falls Fractures Strategy for Scotland.
- 4.4.3 *Making the most of well-being - Vital Signs Stewartry locality* – PFI team and Branch Chair are working closely with the Stewartry Locality Manager and Project Lead to design an effective and comprehensive Project Plan. The Aim of this project is to understand the interest and added value of Care Homes across Stewartry supporting and participating in Vital Signs gathering in their Care Home. This project will also test technology such as Attend Anywhere to understand if video consultations can support multi-

agency professionals to also reduce face to face visits. Project training commencing on 1<sup>st</sup> October 2019, with Base line data currently being collected, for evaluation.

- 4.4.4 *Life Curve™* – initial discussions held regarding D&G Lifecurve™ Test for health and Wellbeing for staff.

#### 4.5 ***Maintaining safe, high quality care and protecting vulnerable adults***

- 4.5.1 *Adult Support and Protection* - PFI team have been working with HSCP, Lead Officer Adult Support and Protection to roll out ASP training in the East and the West of the region. PFI team advertising events via our newsletter and encourage providers to attend these sessions.

- *23rd April 2019 – Stranraer - 9 providers attended this training*
- *28th June 2019 – Dumfries - 1 provider attended this training*
- *2nd July 2019 – Newton Stewart - 5 providers attended this training*

- 4.5.2 *ASP 1 form* – current testing the use of the ASP 1 Form with Call Centre's Computer Systems with In- house service. PFI team are proactive at pursuing results for a timeous roll out to all providers.

- 4.5.3 *Recruitment and retention of health and social care staff* - linking with Scottish Care National Workforce lead. As information emerges from the National Lead, PFI team transmit as appropriate.

- 4.5.4 *Apprenticeship initiative* - recently the National Workforce Lead was able to share initiatives and access to apprenticeships.

- 4.5.5 *Supporting care providers with the new inspection processes and implementation of the health and social care standards* - PFI team are liaising with Care Inspectorate Improvement Team. With the New Care at Home framework on the horizon, working to secure dates for Care at Home provider workshops as well as Quality Improvement theme.

#### 4.6 ***Integrated Ways of Working***

- 4.6.1 *Co-production of new Care at Home tender documentation* - this work is ongoing through Healthy Ageing Programme Board

Subgroup - Care at Home, with all provider engagement supported as required e.g. workshop held.

4.6.2 *Strategic thinking and planning for the Care Homes for the future* – this work is being facilitated by the Care Home Subgroup and information from this group is shared, with provider feedback gathered.

4.6.3 *Extension to Current Framework* -PFI are working in collaboration with Providers, to help advise this activity.

4.6.4 *Representation and engaging of sector at locality and regional levels* – The PFI team continues to working on building and strengthening engagement with all providers and is also working with Health & Social Care Partnership colleagues on improving engagement out with the historical commissioning model and specifically on strategic and operational improvements where independent providers can offer insights and/or adapt services to ensure best quality and best value.

#### 4.7 ***Working efficiently and effectively***

4.7.1 PFI team have highlighted opportunity with HSCP /NHS Facebook page to Share provider job opportunities as part of the wider partnership.

4.7.2 To further enhance Social Care Provider engagement PFI team are encouraging all providers to work rotationally and support the PFI teams' attendance at meeting and forums.

#### 4.8 ***Making the best of technology***

4.8.1 *NHS email access for care providers* - 100% of Care Homes have active working secure email accounts, accessed by two dedicated staff members. Have requested same for Care at Home, await response.

4.8.2 *Telecare telehealth* - use of Attend Anywhere, trialled in certain Care Homes across D&G, and plans for wider use to enhance the Stewartry locality- Vital Signs project.

4.8.3 *Responder services care at home* -PFI team carried out a scoping exercise and fed back. Conclusion that only one Care at Home Service is currently contracted to carry out the responder services and is not available in all Localities. It was uncovered and shared

that Care at home providers are by default placed on Care Call as third responder ( without Care Providers knowledge or authorisation), if called out by Care Call, most providers attend and do not request payment, which is giving out HSCP a false reading of need.

4.8.4 *Digital health and care programme board* - scoping currently being carried out on the challenges and obstacles felt in by the Social Care sector which could be addressed and improved by technology. PFI team facilitating this exercise.

## 5. **Conclusions**

Report is for noting and information.

As mentioned earlier Scottish Care PFI team supported by the Branch Chairs and our National Team are in a good position to support D&G HSCP, having the ability to explore and share information on projects and experiences which are progressing on other areas of Scotland and by the collaboration with the D&G Care Providers, we represent.

## **SECTION 2: COMPLIANCE WITH GOVERNANCE STANDARDS**

### **6. Resource Implications**

There are no resource implications identified.

### **7. Impact on Integration Joint Board Outcomes, Priorities and Policy**

- 7.1. The work of Scottish Care and its Partners for Integration team as described above is carried out in line with the agreed requirements of our Business Plan and Appendix to Business Plan, agreed by D&G HSCP.

We must continue to ensure that Independent Sector is represented and continues as a key partner in the delivery of health and social care in the D&G HSCP.

### **8. Legal & Risk Implications**

- 8.1. The PFI team funded under this programme is not a front-line service. It is a key that serves the HSCP and Independent Providers with the goal of maintaining and improving services for Individuals during very challenging times for our sector.

### **9. Consultation**

- 9.1. During the PFI activities and work over the previous six months, we have and will continuously work in collaboration with our all HSC colleagues and partners, developing and strengthening relations.

### **10. Equality and Human Rights Impact Assessment**

- 10.1. At Scottish Care, we believe that Equality and Human Rights, which state that every person must be treated with dignity, respect and without discrimination, must be the starting point for people providing and delivering services. And importantly, we need to promote that these rights do not diminish when an individual moves into residential care regardless of his or her mental or physical condition.

No Impact Assessment required at this time.

## 11. Glossary

HSCP	Providers and our Health and Social Care Partnership
PFI Team	Partners for Integration team