

Complex Needs – Draft Implementation Plan 2023-2026

Overview

This draft implementation plan sets out key priorities (themes) for those with learning disabilities and complex needs (referred to as complex needs throughout this plan). This is in response to National Policy, engagement feedback from people who access services their families and Carers and staff that work across health and social care. Under these key priorities there are a number of statements or enablers that will support delivery of this plan. The plan will be developed and delivered using a collaborative, rights based and participative approach to providing care and support for people with complex needs. Specific actions will be agreed using this approach. Throughout the life of the plan ongoing engagement will take place with people who use services their families and Carers. This will include ongoing engagement with the Complex Needs Programme Board Reference Group, Carers Centre and the Powerful Voices user group.

1. Key priorities and Strategic Commissioning Intentions (SCI's)

We need to identify and create new models of Care and Support for people with complex needs in Dumfries and Galloway. These models must focus on improving the areas identified during previous engagement while linking to the SCI's from Integration Joint Board's Strategic Commissioning Plan. These priorities include themes such as service structure, care and support, health and wider opportunities.

Strategic Commissioning Intentions

- SCI1 People are supported to live independently at home and avoid crisis
- SCI2 Fewer people experience health and social care inequalities
- SCI3 People and communities are enabled to self manage and supported to be more resilient
- SCI4 People have access to the care and support they need
- SCI5 People's care and support is safe, effective and sustainable
- SCI6 People who deliver care and support, including Carers and volunteers, feel valued, are supported to maintain their wellbeing and enabled to achieve their potential
- SCI7 People's chosen outcomes are improved through available financial resources being allocated in line with the Model of Care and delivering best value

What will enable change to happen? (Enablers)

- 1.1 Providing opportunities to engage and co-produce with stakeholders
- 1.2 Clarity over structure - how and where care and support can be delivered and accessed.
- 1.3 Models of care and support are developed with all stakeholders including people with complex needs and Carers.
- 1.4 Having clear governance processes that support joint approaches and decision making.
- 1.5 Improving the information available to plan care and support, health and housing for people with complex needs.
- 1.6 Ensure good conversations take place with people with complex needs and Carers to identify their health, housing, care and support needs.
- 1.7 Ensure health inequalities are considered in every stage of planning for care and support.
- 1.8 Ensure that an Equalities Impact Assessment is undertaken at the start of new developments or changes to complex need services.



Complex Needs – Draft Implementation Plan 2023-2026

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Complex Needs – Draft Implementation Plan 2023-2026

Actions to achieve these priorities	SCI	Enabler (E)	Responsible (R)	Performance measures/evidence of completion	When		
					23/24	24/25	25/26
1. Move to aligned health and social care structure <ul style="list-style-type: none"> Establish working group/identify project lead Develop Action Plan Implement structure 	4,6	1.1 – 1.5,	DMH/ CNSM	Performance Framework (see section 11)			
2. Move to fully integrated structure <ul style="list-style-type: none"> Establish working group/identify project lead Develop Action Plan Implement structure 	4, 6	1.1 – 1.5,	DMH/ CNSM	Performance Framework			
3. Positive Behaviour Support (PBS) involving <ul style="list-style-type: none"> Conducting functional assessments with individuals Developing PBS plans Training, coaching and mentoring staff teams and services in PBS plan Trouble-shooting and problem solving with services and teams NES Training 	1, 4, 5,6	1.3 1.6	CNSM	Performance Framework			

Complex Needs – Draft Implementation Plan 2023-2026

Actions to achieve these priorities	SCI	E	R	Performance measures/evidence of completion	When		
					23/24	24/25	25/26
<p>4. Development of the Community Enhanced Support Service (CESS) provided to people with complex needs living in Dumfries and Galloway. Working with and supporting providers with advice and training to ensure they are able to sustain support for people with complex needs and sometimes challenging behaviour</p> <ul style="list-style-type: none"> • Approval in place • Undertake recruitment • Develop Project/Implementation Plan 	1, 4, 5, 6	1.3 1.6	CNSM	Performance Framework			

Complex Needs – Draft Implementation Plan 2023-2026

Actions to achieve these	SCI	E	R	Performance measures/evidence of completion	When		
					23/24	24/25	25/26
<p>5. Work with partners to develop of a series of plans for 'housing with care and support', supporting the delivery of the IJB's model of care as described in the Strategic Commissioning Plan and the Independent Review of Adult Social Care in Scotland. These should include details of resources including finance and project management.</p> <p>This will reflect the Dumfries and Galloway Housing with Care and Support Strategy and other relevant local and national strategies.</p> <p>Development of these plans will include</p> <ul style="list-style-type: none"> Residential Care (Complex Needs Care Homes) Supported Accommodation (including specialist services, out of region placements, people living at home with Carers, Adult Supported Accommodation and Residential Placement Panel) People Transitioning into Adult Services 	1, 3, 4, 5	1.1, 1.3, 1.6	HCSL/C NSM/SP CM	Performance Framework			

Complex Needs – Draft Implementation Plan 2023-2026

Actions to achieve these	SCI	E	R	Performance measures/evidence of completion	When		
					23/24	24/25	25/26
<p>6. Develop Dynamic Support Register for Dumfries and Galloway</p> <ul style="list-style-type: none"> • Establish Working Group • Develop local register based on final national version • Implement register locally at operational and strategic level and develop reporting procedures • Consider the recommendations made in the Mental Welfare Commission report Out of NHS area placements (2023) 	4, 5	1.1, 1.3, 1.5, 1.7	CNSM/ SWSM	Performance Framework			
<p>7. Work collaboratively to fully embed human rights based approach by ensuring people that access care and support experience the core principles of fairness, equality, respect, autonomy and self-determination through the opportunity to lead decision making that affects their lives.</p> <p>Work in partnership with the Care at Home, Single Access and Home Teams Project Groups to review current assessment tools and practice to include human rights principles</p>	2,4, 5	1.7	SWSM	Performance Framework			

Complex Needs – Draft Implementation Plan 2023-2026

Actions to achieve these	SCI	E	R	Performance measures/evidence of completion	When		
					23/24	24/25	25/26
<p>8. Research and work in collaboration with people locally, regionally, nationally and internationally to support the work of the Complex Needs Service in identifying models of care and support elsewhere in the world.</p> <ul style="list-style-type: none"> Develop Communication and Engagement Strategy Fully establish Complex Needs Reference Group Build on links with Powerful Voices Group Ongoing engagement and participation with Social Work Scotland Complex Needs Group Ongoing engagement with Scottish Commission for People with Learning Disabilities (SCLD) Strategic Planning Group Develop engagement opportunities with use group 	5, 6	1.1, 1.3, 1.7, 1.8	SPCM/ CNSM	Performance Framework			

Complex Needs – Draft Implementation Plan 2023-2026

<p>9. Review and enhance existing referral pathways between Children and Adult Services for care and support for those with complex needs to ensure those who are vulnerable access suitable health and social care and housing that meet their needs.</p> <ul style="list-style-type: none"> • Review existing process • Report on findings • Develop action plan • Education and Learning • Develop engagement opportunities with use group 	4	1.1, 1.3, 1,4	SWSM	Performance Framework			
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Complex Needs – Draft Implementation Plan 2023-2026

Actions to achieve these	SCI	E	R	Performance measures/evidence of completion	When		
					23/24	24/25	25/26
<p>10. New Model of Care & Support</p> <ul style="list-style-type: none"> • Ensure Complex Needs representation in existing Care and Support Working Group. Including areas of work such as <ul style="list-style-type: none"> ○ Tech solutions – Use of power BI mapping, Digital Care Planning ○ Recruitment and retention in social care ○ Exploring and developing efficiencies in delivery of care and support ○ Building on role of third sector in supporting delivery of care and support • Involve specialist provider partners in stage 2 of collaborative test of change to further develop collaborative approaches and ethical commissioning approaches • Explore opportunities to expand existing Shared Lives Service • Explore opportunities to build on Loch Arthur model of care and support combined with training and employment opportunities • SDS options including those for unpaid Carers • Core and Cluster Housing Models 	1, 2, 3, 4, 5, 6, 7	1.1, 1.2, 1.3, 1.4, 1.5, 1.6	CTPB/ CNSM/ SPCM	Performance Framework			

Complex Needs – Draft Implementation Plan 2023-2026

Actions to achieve these	SCI	E	R	Performance measures/evidence of completion	When		
					23/24	24/25	25/26
11. Performance Framework <ul style="list-style-type: none"> Develop evaluation/performance plan and measures around implementation including how the voice of people who use services and their carers has and will shape the ongoing implementation of the plan 	1, 2, 3, 4, 5, 6, 7		GMMH/C NSM	Reporting to Mental Health Directorate Management Team, Complex Care Programme Board, HSC Leadership Group and IJB as required.			
12. National Policy Strategy/Review/Response <ul style="list-style-type: none"> Coming Home Implementation Impact/review of Learning/Intellectual disability and Autism: Transformation Plan national strategy on D&G Carers Strategy 	1, 2, 3, 4, 5, 6, 7	1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 1.8	SPCM	Performance Framework			

Complex Needs – Draft Implementation Plan 2023-2026

Actions to achieve these	SCI	E	R	Performance measures/evidence of completion	When		
					23/24	24/25	25/26
13. Health Checks for those with a learning disability <ul style="list-style-type: none"> Set up working group Develop local process Carry out engagement on draft process Implement final local process 	2, 6	1.6, 1.7	PC/CN SM	Performance Framework			
14. Day Services/Opportunities Review <ul style="list-style-type: none"> Commence and complete review of day opportunities Report on findings Develop action plan to include signposting mechanisms 	2, 6, 7	1.1, 1.2, 1.5, 1.6	SWSM /SPCM	Performance Framework			
15. Respite/Short Breaks <ul style="list-style-type: none"> Access Panel Review Capacity/Usage Develop Action Plan 			SWSM /SPCM	Performance Framework			
16. Ensure Equality Impact Assessments are started at the onset and updated throughout any new projects to determine, identify and analyse how the project might mitigate any areas of potential inequality.	2	1.8	GMMH /CNSM	Performance Framework			

Complex Needs – Draft Implementation Plan 2023-2026

Who is Responsible, Accountable, should be Consulted or Informed	
SPC - Strategic Planning and Commissioning	CTPB - Community Transformation Programme Board
PL - Health and Social Care Project Lead(s)	CNS - Complex Needs Service
GMMH - General Manager Mental Health	CNSM – Complex Needs Service Manager
CASARPP - Chair of Adult Supported Accommodation and Residential Placement Panel	CBR – Community Bed Review
FM – Finance Manager	SPCM - Strategic Planning and Commissioning Manager
IJB – Integration Joint Board	SWS – Social Work Services
CPB – Carers Programme Board	SWSM – Social Work Services Manager
PC – Primary Care	