



<p><b>Meeting of East Renfrewshire Health and Social Care Partnership</b></p> <p><b>Held on</b></p>	<p>Integration Joint Board</p> <p>27 November 2019</p>
<p><b>Agenda Item</b></p>	<p>9</p>
<p><b>Title</b></p>	<p>Care at Home Improvement and Redesign Programme</p>
<p><b>Summary</b></p> <p>This report provides an update to the Integration Joint Board on the most recent report from the Care Inspectorate, and sets out the arrangements we have made to develop a comprehensive programme to focus our efforts on meeting the Care Inspectorate Requirements, alongside a more fundamental service redesign.</p>	
<p><b>Presented by</b></p>	<p>Julie Murray, Chief Officer</p>
<p><b>Action Required</b></p> <p>The Integration Joint Board is asked to note and comment on the report.</p>	
<p><b>Implications checklist – check box if applicable and include detail in report</b></p> <p> <input checked="" type="checkbox"/> Finance                      <input type="checkbox"/> Policy                      <input type="checkbox"/> Legal                      <input type="checkbox"/> Equalities  <input checked="" type="checkbox"/> Risk                                      <input checked="" type="checkbox"/> Staffing                      <input type="checkbox"/> Directions                      <input type="checkbox"/> Infrastructure         </p>	

BLANK PAGE

## **EAST RENFREWSHIRE INTEGRATION JOINT BOARD**

**27 November 2019**

**Report by Chief Officer**

### **CARE AT HOME IMPROVEMENT AND REDESIGN PROGRAMME**

#### **PURPOSE OF REPORT**

1. This report updates the Integration Joint Board on the most recent report from the Care Inspectorate, and sets out the arrangements we have made to develop a comprehensive programme to focus our efforts on meeting the Care Inspectorate Requirements, alongside a more fundamental service redesign.

#### **RECOMMENDATION**

2. The Integration Joint Board is asked to note and comment on the report.

#### **BACKGROUND**

3. Integration Joint Board members will recall that when the Health and Social Care Partnership's new senior management structure was implemented in April 2018, the Care at Home service had a change in Head of Service and operational management. The new management team formed a view that there needed to be a substantial redesign of the service and formed a change programme board.
4. However, when the Care Inspectorate published their inspection report in February of this year a decision was made to put the service redesign on hold and to focus on the improvement activity required to meet the Care Inspectorate requirements.
5. The Integration Joint Board has received a series of reports on the issues with the in-house care at home service and the improvement activity underway. Links to all previous papers are provided at the end of this report in the background papers section.

#### **REPORT**

6. The Care Inspectorate undertook a further inspection of the Care at Home service at the end of August. Their report was published on 11 November 2019. Although there was acknowledgement that progress had been made, the Care Inspectorate does not consider the original requirements to be met and therefore the grades remain the same. The Inspectors have recognised some of the challenges we face and are clear that there are no quick solutions. Once again, the Inspectors praised our support workers and found them to be caring and compassionate and highly valued by our service users. We have been reporting to the Care Inspectorate on a monthly basis and will continue to do so. The Inspectors have committed to supporting us on the improvement journey.
7. Following discussion with the Care Inspectorate it has become evident that we will not meet the requirements in a sustainable way unless we embark on a programme of service redesign. There are a number of elements to the redesign programme, including developing a more systematic approach to telecare, the full integration of the

Responder service, review of transport provision and the consideration of our approach to market share with our framework providers. However, the most critical element in relation to meeting the Care Inspectorate requirements is to review frontline management roles to ensure our home care support workers are properly supported in the community. This will require the development of new roles that are fit for the future. Equally, in order to achieve better continuity of support for our service users we will not only need to recruit more staff, but ensure that our current workforce is deployed at the times that are needed by our service users. We have to review the shift patterns we currently have in place and move to more efficient and appropriate work patterns.

8. We have therefore moved from an improvement planning approach to a wider programme of improvement and redesign led by the Chief Officer and creating a programme oversight board chaired by the Council Chief Executive and with membership drawn from staff side, HR and legal services as well as the Chief Officer, who is the Programme sponsor, the Chief Social Work Officer, the Intensive Services Manager and a programme manager. The role of the oversight group is to:

Ensure the in-house service is viable, sustainable and safe by:

- Supporting and ensuring that actions are progressing to plan timescales
  - Unblocking any issues that are preventing plan progress (Getting to Green)
  - Handling any issues escalated/ requiring approval from HSCP programme meetings
  - Addressing key risks and issues
9. There is still an absolute focus on the improvement activity needed to meet the requirements but alongside a parallel redesign process. Additional project management, management and HR capacity has been identified to support the programme as it is important that the pace of change and improvement is increased.
  10. We have therefore moved from 'Phase 1' which ran from March to September 2019 and focussed on our immediate response to the Inspection and the development of our initial improvement plan, to 'Phase 2' running from September 2019 to March 2020 where we will focus on:
    - Embedding and sustaining the improvements from phase 1
    - Realigning the continuing work on the requirements to reflect the second inspection feedback and report
    - Refining and refocussing the use of additional resources
    - Planning the service redesign and begin the implementation.

11. The table below sets out the key activities within the programme, the latest update, RAG (red, amber, green) status and plans for the months to the end of March 2020.

	Latest Update	RAG	Q4 2019 (Oct, Nov, Dec)	Q1 2020 (Jan, Feb, Mar)
<b>Workstream 1: Requirements- Phase 2</b>				
	<b>Activity: Care Planning</b> All service users reviewed by review team have a care plan in place	A	Create and deliver plans for all remaining service users Upskill organisers to complete care plans in their patches. Establish practice forum to support development of outcome focused care planning	Improve quality of plans to better reflect outcomes and risk management. Refine pathway to ensure all service users entering the service have a care plan developed in line with statutory requirement.
	<b>Activity: Medication</b> Staff are attending medication good practice training as per scheduled sessions Medication pilot planning and preparation activity underway with a target go live date of 18/11	G	Train 50% of staff in medication good practice Commence the pilot and monitor early impacts	Train remaining staff in medication good practice Roll out pilot across Barrhead locality
	<b>Activity: Reviews</b> Historical overdue reviews completed (except handful outwith our control) All hospital discharge service users who have been receiving service for over 8 weeks reviewed	A	Complete all reviews with a 2019 due date Build and refine automated Carefirst report to identify reviews due each month to inform scheduling of review activity Finalise Carefirst data cleansing to support reporting and planning Commence quality sampling	Improve quality of reviews
	<b>Activity: Complaints</b> Continue to record on Council lagan system with manual data extract being taken when required. Complaint and compliments being added into Performance (KPI) dashboard	A	Fit for purpose recording in place Refine process across service	Introduce monthly management team complaint reviews - Complaint overview and learning improvement focus
	<b>Activity: Service Delivery</b> Compliance rates (use of electronic monitoring of visit times) continue to improve. Real time alerts (missed/late visits) fully operational	R	Maximise current available staffing resource. Increase visit times where required. Improve communications to front line staff around changes to schedules	Additional management resource in place to support service redesign

<p><b>Activity: Employ/ Deploy</b> Move to permanent contracts for current temp staff and new recruits agreed. Recent job fair- 3 selected for interview. Further advert on myjobscotland Bespoke recruitment flyer developed and sent to schools for onward distribution to parents</p>	<p><b>A</b></p>	<p>Continue recruitment Recruitment flyers to parents/carers through schools Progress Modern Apprenticeship scheme Develop and finalise recruitment strategy with Communication Team Improve visit compliance rates</p>	<p>Ongoing recruitment Implement recruitment strategy Develop wider strategic plan for recruitment across social care sector Provide better continuity of care/service timings/patterns of service delivery</p>
<p><b>Activity: Training</b> Role defined and progressed to Job Evaluation</p>	<p><b>G</b></p>	<p>Deliver short term quarterly plan Competence checks commenced</p>	<p>Deliver Q1 2020 training plan - first aid, dementia and medication focus Deliver 1x further induction programme</p>
<p><b>Activity: Supervision</b> Schedule for supervisor and managerial supervision and Quality Conversations (annual review) now agreed and implemented</p>	<p><b>A</b></p>	<p>Monitor that Organisers are following schedule for staff supervision. Commence field based supervision</p>	<p>Continue monitoring to ensure schedule is being followed as normal practice Develop quality of sessions and experience of managers &amp; organisers in delivering</p>
<p><b>Activity: Notification to Care Inspectorate</b> Managers are now undertaking reporting Option of notifications automatically appearing in performance dashboard being explored</p>	<p><b>G</b></p>	<p>Better reporting in place (volume/timeliness) Clear procedure is developed and issued</p>	<p>Introduce a monthly overview and focus on reporting at management meetings Remind staff regularly on the importance of notification</p>
<p><b>Activity: Dementia</b> Dementia Experience completed</p>	<p><b>G</b></p>	<p>Staff attend Dementia Experience Align staff to appropriate skill level on Promoting Excellence framework to allow planning of next quarter training Include dementia good practice discussions at patch meetings</p>	<p>Set targets for number of staff to attend framework based training Agreed number of staff undertake training</p>
<p><b>Activity: Supplementary</b> SSSC registration sessions underway and booked throughout Nov- on target to complete by 13/12 deadline Weekly operations management level meetings underway (performance focus)</p>	<p><b>G</b></p>	<p>Complete SSSC registration for all required staff Agree quality framework calendar for 2020</p>	<p>Progress first quarter priorities from quality framework calendar</p>

<b>Workstream 2: Service Redesign -Care At Home and Responder Services (including out of hours)</b>				
	Initial stakeholder meeting held (including Legal services) Discussions commenced with HR re resource required to support workstream Initial meeting held with Staffside to discuss approach to developing collective agreement and working towards ethical charter	<b>A</b>	Preparation activity including: forming workstream team prepare detailed project plan define model & structure define market share	Finalise job specifications and evaluate Financial modelling
<b>Workstream 3.Workforce Development</b>				
	Being managed under workstream 1	<b>G</b>	n/a- manage under workstream 1	Planning, design and delivery of training- ongoing quarterly planning
<b>Workstream 4. Private Providers (Interim framework)</b>				
	Engagement and review meetings continue Test of change being undertaken with partner provider	<b>G</b>	Put in place single system for arranging care at home packages Appoint contract management officer for care at home providers	Prepare provider market for future Comprehensive overview of all externally commissioned Care at Home provision
<b>Workstream 5. Transport</b>				
	Scope of transport review defined	<b>A</b>	Commission review of use of transport within the service Focus on grey fleet (use of workers own vehicles) considering (1)efficiencies available by providing transport and (2) if applicable, future transport approach	Agree and plan implementation of recommendations Feed transport aspects into workstream 2
<b>6. Telecare TSA Action Plan</b>				
	Action plan developed and submitted Telecare Services Association (TSA) have approved action plan - quarterly KPI improvement reporting is required Critical friend consultancy resource agreed, will commence 04/11 Monthly KPI monitoring in place Recruitment underway	<b>A</b>	Deliver actions to plan timetable Complete external consultant review and agree implementation of any further recommendations	Implement the agreed recommendations Induction of new starts to cover vacancies
<b>7. Telecare A2D (operational)</b>				
	Agreed that a Digital Office funding bid should be submitted	<b>G</b>	Prepare & submit a funding bid	Appoint to role Early planning/preparation for implementation
<b>8. Embedding TEC</b>				
	Role defined and progressed to Job Evaluation	<b>G</b>	Appoint to role and progress early planning/preparation of project plan in advance of workstream commencing	Progress work stream

## CONSULTATION AND PARTNERSHIP WORKING

- Staff side are represented on the programme oversight group and we have had early discussions about working towards a collective agreement linked to the adoption of the ethical charter. We have held engagement sessions with frontline staff which will inform our redesign proposals.

## **IMPLICATIONS OF THE PROPOSALS**

### Finance

13. The Care at Home service is currently projected to overspend by £461k based on the current cost commitments against a budget of £7.5 million (6.16%). This includes the £1 million funding agreed by the Integration Joint Board for this year. The cost projection is regularly reviewed to reflect the ongoing impact of the action plan, including recruitment, reducing agency use, the interim framework contract and review of care packages. The cost projection continues to be refined as the year progresses and we are working hard to bring costs closer in line with budget.
14. The additional £750k recurring budget (included in the position above) is meeting the costs of 12 responders, 10 care at home FTE (full time equivalents) and additional contract management capacity. There is also £175k committed to progress the improvement and redesign of the service.
15. The £250k non-recurring resource is fully committed and is funding a number of development posts along with training and recruitment. Should there be any in year slippage this will carry forward to fund a full 12 months of activity.

### Staffing

16. Redesign of the care at home service will have implications for current staff roles and working patterns.

### Risk

17. The risk associated with the care at home service remains high. Our improvement and redesign work should see the risk reduce, however the winter and pressures that it brings adds to the risk. We will mitigate through winter planning.

### Directions

18. None at this point, but will be issued when redesign proposals are agreed.

## **CONCLUSIONS**

19. The outcome of the most recent inspection of our in-house care at home service acknowledges some of the progress we have made but has not led to improved grades. In discussion with inspectors we have concluded that service redesign is required alongside our improvement planning in order to meet requirements in a sustainable way. We have created a programme approach led by the Chief Officer with and oversight board chaired by the Council Chief Executive to ensure that we can move through this next phase with greater pace. We will continue to report progress at each Integration Joint Board meeting.

## **RECOMMENDATIONS**

20. The Integration Joint Board is asked to note and comment on the report.



## REPORT AUTHOR AND PERSON TO CONTACT

Julie Murray, Chief Officer  
[julie.murray@eastrenfrewshire.gov.uk](mailto:julie.murray@eastrenfrewshire.gov.uk)  
0141 451 0746

## BACKGROUND PAPERS

IJB Paper: September 2019 – Care at Home Improvement Update: August 2019  
<https://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=25145&p=0>

IJB PAPER: August 2019 – Care at Home Improvement Update  
<https://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=24912&p=0>

IJB PAPER: 26 June 2019 – Care at Home Improvement Update  
<https://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=24640&p=0>

IJB PAPER: 1 May 2019 – Care at Home Inspection Report and Improvement Plan  
<https://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=24316&p=0>

IJB PAPER: 20 March 2019 – Care at Home Improvement Activity  
<https://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=24127&p=0>

IJB PAPER: 30 January 2019 – Care at Home Update  
<http://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=23706&p=0>

IJB PAPER: 29 March 2017 – Care at Home Programme Update  
<http://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=19790&p=0>

CCGC PAPER: 20 June 2018 – Homecare Service Inspection  
<http://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=22587&p=0>

BLANK PAGE