

Item No: 16

Meeting Date: Wednesday 27th March 2019

Glasgow City Integration Joint Board

Report By: Susanne Millar, Chief Officer, Strategy and Operations /

Chief Social Work Officer

Contact: Jacqueline Kerr, Assistant Chief Officer, Adult Services

and North West Locality

Tel: 0141 314 6240

ADULT SERVICES TRANSFORMATIONAL CHANGE PROGRAMME 2018-21 PROGRESS REPORT: INTEGRATION OF LEARNING DISABILITY SERVICES

Purpose of Report:

To update IJB members on the progress being made to introduce a more integrated service delivery model within GCHSP's Learning Disability (LD) services and the contribution this will make towards delivering the priorities and relevant actions set out in the IJB's draft strategic plan 2019-22.

While moving to a more integrated service delivery model will have benefits across the spectrum of LD services and the various pathways to other services, the focus of this progress report is primarily on community learning disability teams (CLDTs) and LD day care services.

Background/Engagement:

Development sessions took place with GCHSCP LD staff and system-wide professional leads in 2018 to consider the opportunities and challenges associated with the introduction of a more integrated delivery model. Further staff development sessions are planned to take place over the coming months to ensure that there continues to be a widespread understanding and ownership of the process.

Recommendations:

The Integration Joint Board is asked to:

- a) note the content of the report;
- agree the 'test for change' approach within North East Glasgow's LD services to inform the roll-out of integrated practices, including an effective mechanism for gathering service user and carer views on their experience of integrated services; and

	agree that an option appraisal during 2019 to inform the viability of replacing GCHSCP's 2 LD day centres with new build accommodation should be undertaken and reported back to the IJB on completion with a recommended course of action.
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Relevance to Integration Joint Board Strategic Plan:

The introduction of a more integrated service delivery model within GCHSCP's LD services will contribute to the delivery of all strategic priorities and actions relevant to people with a learning disability set out in the IJB's strategic plan 2019-22. In particular, the priorities of 'early intervention, prevention and harm reduction', 'enabling independent living for longer' and 'providing greater self-determination and choice'.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing	, , ,	
Outcome:	Outcome 1: People are able to look after and improve their own health and wellbeing and live in good health for longer. Outcome 2: People, including those with disabilitiesare able to live, as far as is reasonably practical, independently and at home or in a homely setting in their community. Outcome 3: People who use health and social care services have positive experiences of those services and have their dignity respected. Outcome 9: Resources are used effectively and efficiently in the provision of health and social care services.	

Personnel: There will be minimal change to the core functions associated with each professional role within the teams however Integrated service management arrangements will be further progressed over the course of the implementation phase. This will involve the operational management for both health and social work Learning Disability staff within each locality to

There will also be consideration of an integrated approach to team leader operational management, which while not affecting the ratio of professional team lead to staff group will enable cross cover to provide experienced staff to support frontline and fieldwork staff across all disciplines.

be delivered within a single management structure.

Carers:	The vital role played by carers is recognised and LD staff will continue to do all they can to ensure carers have access to assessments, advice, information and support offered by the HSCP. The role that LD day centre services, in particular, play in supporting carers is also fully recognised and the modernisation of services as part of the integration agenda will aim to further strengthen this.
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Provider Organisations:	No direct implications for provider organisations.
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Equalities:	Across NHS and Social Care, as well as wider society, it is recognised that people with a learning disability can experience inequality, can have barriers to accessing services and can have a poor experience of service delivery where services have not been tailored to meet their needs. LD services will continue to do all it can to provide inequalities sensitive practice through the dedication of its staff. An EqIA has been completed to inform the work to move to a more integrated service model and can be accessed at: https://glasgowcity.hscp.scot/equalities-impact-assessments
Fairer Scotland Compliance:	Covered within EQIA
Financial:	It is anticipated that a move to a more integrated service delivery model will result in more efficient and effective working practices. This will improve the service user and patient pathways and clinical and care outcomes. It remains to be determined whether this translates into further financial savings, beyond those identified previously to the IJB as part of the Adult Services Transformational Change Programme 2018-21.
Legal:	None
Economic Impact:	None
Sustainability:	None
Sustainable Procurement and Article 19:	None
Risk Implications:	There is an aspiration to co-locate CLDT staff within each locality. While this has been achieved within NE, accommodation solutions for NW and South staff have still to be determined. There is therefore a risk at this stage that an integrated service delivery model may not be fully realised in those localities should accommodation solutions remain outstanding. A risk framework will be developed as part of the option appraisal process to consider the viability of replacing GCHSCP LD day centres with new build accommodation.

Implications for Glasgow City Council:	None	
Implications for NUC	None	
Implications for NHS Greater Glasgow & Clyde:	None:	
Direction Required to	Direction to:	
Council, Health Board or	, Health Board or 1. No Direction Required	
Both	2. Glasgow City Council	
	NHS Greater Glasgow & Clyde	
	4 Glasgow City Council and NHS Greater Glasgow & Clyde	√

1. Purpose

- 1.1. To update IJB members on the progress being made to introduce a more integrated service delivery model within GCHSCP's Learning Disability Services and the contribution this will make towards delivering the priorities and relevant actions set out in the IJB's strategic plan 2019-22.
- 1.2. While moving to a more integrated service delivery model will have benefits across the spectrum of LD services and the various pathways to other services, the focus of this progress report is primarily on community learning disability teams (CLDTs) and LD day care services.

2. Background

- 2.1. In January 2018, IJB members noted the content of the Adult Services
 Transformational Change Programme 2018-21
 (https://glasgowcity.hscp.scot/publication/item-no-6-adult-services-transformational-change-programme-2018-2021) which set out the service reform programme for LD services, including the following actions associated with promoting more integrated services:
 - A review process to consider how Health and Social Care teams can improve joint working and the ability to plan and deliver services within an integrated service model
 - A phased approach to full integration of Community Learning Disability Services to take place over a 3 year period with the first step being the development of an integrated management team at operational and professional/clinical lead level
 - A phased approach to co-location of locality teams where possible to improve communication and engagement with and between front line staff
 - A review of service user pathways to ensure effective and efficient use of staffing resources. In doing so we will improve accessibility to specialist services such as psychology, speech and language and occupational therapy services
 - A reinvestment programme for both LD day service centres in order to upgrade the fabric and facilities of the buildings. In addition, an options appraisal to consider the replacement of the centres.

- 2.2. A summary of those actions is also reflected in the IJB's strategic plan 2019- 22, as follows:
 - the review and redesign of health and social care learning disability services
 - the development of an integrated support framework for people with complex needs
 - the development of a reform programme for day care provision.

3. Progress to Date

3.1. Staff Engagement

Two comprehensive engagement and development sessions have been held with health and social care LD staff across the city, including NHSGGC Board-wide professional clinical leads and representation from NHSGGC Specialist Learning Disability and Inpatient services. These sessions have enabled staff to contribute to a full discussion around the challenges and opportunities for returning to an integrated service delivery model. (Joint LD teams having previously been in place during the lifetime of Community Health Care Partnerships within Glasgow.) Further staff engagement events will take place over the next 6 months to ensure staff continue to have the opportunity to contribute to the development of the processes and systems that require to be in place to underpin integrated working. A learning and development plan for GCHSCP LD staff will also be developed to support staff through the changes, as well as to continue to meet professional requirements and standards of good practice.

3.2. Integrated Management Arrangements

The aim is to provide an integrated management arrangement across all 3 localities. There are currently different management arrangements across all three localities.

- Within North West locality, a single integrated service manager manages both health and social work staff
- Within North East there is single integrated service manager for learning disability services who also has responsibility for social work mental health services
- Within South Locality there is Social Work Service Manager with responsibility for MH and LD social work services and a health service manager with responsibility for the Health CLDT.

In addition, there is a requirement to strengthen the team lead role within each of the CLDTs. This will require the release of clinical time from a member of each team (at band 7 level) to enable them provide a more direct leadership role and to consider cross cover across all disciplines within an integrated service. It is anticipated that these new arrangements will be introduced over the course of 2019/20.

3.3. Integrated Processes and Systems

Health and social work LD team staff within North East locality have been successfully co-located within Petershill Park. This co-location provides an ideal opportunity to introduce a 'test for change' approach within North East that can inform the roll-out of integrated working practices in all localities. It is planned to report the findings of this work by October 2019, which will consider:

- The potential to move to a 'single point of access' to simplify the referral process
- How to improve the efficiency and effectiveness of referrals, case allocations and clinical and service reviews
- Ensuring eligibility criteria remains fit for purpose and is applied consistently
- The introduction of joint integrated protocols, operating procedures and governance arrangements
- Ways in which access can be improved for service users, both in terms of the ability to access specialist support and in terms of the ability to then have quicker access to other levels of support out with LD services as necessary
- The status of existing joint protocols and care pathways with non-LD services, particularly for those conditions where people with a learning disability experience a higher prevalence or risk, with a view to recommending improvements as necessary
- Information Technology requirements, including those necessary to support agile working and flexible working practices.

The above work will take into account the roles and responsibilities for health staff as set out in the NHSGGC's 'A Strategy for the Future' (2014). This includes the expectation that specialist LD services, as well as providing direct specialist interventions, support and enable mainstream services to adapt their approaches to better meet the needs of people with learning disabilities.

While co-locating CLDT staff has been achieved within North East locality, accommodation solutions to co-locating staff within North West and South localities have yet to be identified. In the interim, it is still anticipated that teams in North West and South localities will be able to adopt the necessary working practices that will enable them to move to a more integrated way of working.

3.4. Modernising Day Services

Day care services have already undergone significant change in the City over the last 6 years through the implementation of personalisation and giving people greater flexibility over how they wish to access services and supports. GCHSCP aims to ensure that all adults with learning disabilities are as integrated as possible into the everyday life of their local communities. This has meant, for some, a focus on employability and volunteering opportunities, as well as wider access to local leisure and recreational resources. For others, it has been the development of new local support services and networks of mutual support, friendship and respite.

In 2018/19, GCHSCP's 2 LD day centres at Riddrie and Carlton both benefited from significant investment to upgrade the accommodation. This included new flooring, furnishings and finishes, as well as investment in new equipment.

However, going forward, it is recognised that both buildings have a limited life-span and are compromised by a lack of physical space to fully meet the needs of people attending. Accordingly, an options appraisal will be undertaken to consider the replacement of the 2 learning disability day care centres within the City.

The option appraisal will consider the viability and location of new build accommodation. In doing so, it will consider the feasibility of an option of 2 new build facilities serving the North and South of the City, as well as the feasibility of an alternative option of a single new build facility serving the City. In the case of both options, it is important to stress that there is no planned reduction in the capacity of day places and that GCHSCP remains committed to being a direct provider of this service. It is also important to highlight that this option appraisal will inform the affordability of the new build and that at this point, no funding has been identified to progress any new build option.

The option appraisal will be carried out over the 2019 period and reported back to the IJB for consideration on completion. Service user and carer representation will be an important part of this process, with service users and carers kept informed and supported to contribute.

Modernising day care services goes beyond the fabric of the building. In the months ahead, GCHSCP will look at ways in which CLDTs and wider services can be developed into a fully integrated day care service. This will include:

- looking to extend the range of health clinics offered at day centres
- improving access to health checks
- considering alternative and more timeous responses to service users or carers in times of 'social or care crisis'
- supporting consideration of an alternative to hospital care by providing a coordinated approach between learning disability and specialist learning disability services to provide "respite" or increased support for short periods within a structured environment.

Overall this will see day centres become more of a specialist hub that better support prevention and early intervention, with more structured links to other services.

Wherever possible, day care services also play a role in helping to prevent admission to specialist LD assessment / treatment inpatient wards or to support discharge from inpatient care. It is anticipated that this role will increase in the future as the overall NHS specialist inpatient bed capacity reduces.

A new specification will be developed over the coming months that sets out the evolving role for day care services in greater detail.

3.5 <u>Service User and Carer Experience</u>

A crucial measure of successful integration is whether there has been a positive experience for service users and carers. This is likely to include whether there has been improved access and response times, quality of care, lack of duplicated processes and overall, whether there was perceived to have been a positive experience.

Accordingly, in taking forward the integration agenda, GCHSCP's LD services will seek to develop, in collaboration with service users, carers and representative community organisations, a framework to gather and assess service user and carer feedback of their care experience. This should include people's experiences of inequalities sensitive practice, as part of the HSCP's commitment to meeting the requirements of Equality legislation and addressing health inequalities.

This will provide a more tailored feedback mechanism for learning disability service users and carers than is currently available through the national survey of service user and carers' experiences. The development of an effective way to gather service user and carer views will be considered as part of the 'test for change' approach in North East locality, referred to in section 3.3 of this paper.

3.6 Team Capacity

In order to take forward these service proposals we have to consider capacity within the teams to deliver on existing business while being able to take forward the tests of change to support a more streamlined service and better outcomes for our service users and patients.

It is clear that the current construct and resources within the locality services will be unable to deliver the level of activity required to achieve the required number of service user reviews, as well as the statutory and legislative requirements required to maintain the safety, health and wellbeing of our service users and patients. This will inevitably impact on the ability to provide a fully integrated learning disability service able to meet the current demand for service input.

There has been some investment in a "Central Review Team" which is supporting the ongoing service users review process for support within the community for all care groups. This review team is made up of 12 social care workers, 2 Team leads and 1 service manager.

The work of this review team will be required to be continued within a redesigned learning disability service to support the delivery of key outcomes and direct support to our service users and patients. It is noted that the continuation of the Central Review Team is essential in providing capacity to ensure robust and timeous reviews of service users' care packages both to deliver on the transfer of providers from the 2015 to the 2019 Providers Framework and to ensure ongoing capacity to the review process beyond 2020. This activity would also ensure the locality-based LD integrated teams could focus on the complex care management responsibilities within their teams. The entirety of this service will be managed within the singularly managed adult services construct to ensure coherence across the Central Review Team and localities.

4. Recommendations

- 4.1 The Integration Joint Board is asked to:
 - a) note the content of the report:
 - b) agree the 'test for change' approach within North East Glasgow's LD services to inform the roll-out of integrated practices, including an effective mechanism for

- gathering service user and carer views on their experience of integrated services:
- c) agree that an option appraisal during 2019 to inform the viability of replacing GCHSCP's 2 LD day centres with new build accommodation should be undertaken and reported back to the IJB on completion with a recommended course of action.



DIRECTION FROM THE GLASGOW CITY INTEGRATION JOINT BOARD

1	Reference number	270319-16-a
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2	Date direction issued by Integration Joint Board	27 March 2019
3	Date from which direction takes effect	27 March 2019
4	Direction to:	Glasgow City Council and NHS Greater Glasgow and Clyde jointly
5	Does this direction supersede, amend or cancel	No
	a previous direction – if yes, include the	
	reference number(s)	
6	Functions covered by direction	Community learning disability teams (CLDTs) and Learning Disability day
		care services
7	Full text of direction	Glasgow City Council and NHS Greater Glasgow and Clyde are jointly directed to carry out a 'test for change' within North East Glasgow's LD
		services to inform the future roll-out of integrated community learning
		disability teams across the city, including an effective mechanism for
		gathering service user and carer views on their experience of integrated services.
		Glasgow City Council and NHS Greater Glasgow and Clyde are further directed to carry out an option appraisal during 2019 to inform the viability of replacing GCHSCP's LD day centres at Riddrie and Carlton with new build accommodation and, on completion, present recommendations back to the IJB.
8	Budget allocated by Integration Joint Board to carry out direction	Within existing resources.
9	Performance monitoring arrangements	In line with the agreed Performance Management Framework of the Glasgow City Integration Joint Board and the Glasgow City Health and Social Care Partnership.
10	Date direction will be reviewed	27 March 2020