

I NATIONAL CONTEXT

Modernising Social Work Services in Scotland is a government White Paper that sets out proposals for achieving a social work service that is “responsible to individual needs, reliable and delivered promptly” and contains plans for regulation of care services and of the social care workforce. The themes of the White Paper are:

- *Social work services can make a key contribution to social inclusion*
- *The social work task is difficult and needs a competent, confident workforce to deliver it effectively*
- *Service standards need to improve to meet the standard of the best*
- *Vulnerable people and children need the protection of independent regulation of services*
- *Social work services need to work closely with each other and with other agencies in order to deliver services effectively*

Modernising Community Care: an action plan proposed changes to the way community care services are delivered. Its main aims are to secure:

- *better and faster results for people by focusing on them and their needs; and*
- *more effective and efficient joint working based on partnership*

The expected outcomes of the action plan include:

- *Better and faster decision making by:*
 - *delegating decision making and budgets;*
 - *streamlining management and transferring resources to front-line services; and*
 - *improving partnerships between agencies*
- *People to be cared for at home wherever possible by:*
 - *shifting the balance from institutional forms of care to caring for people at home*
 - *developing more flexible home care services and suitable housing; and*
 - *encouraging health and social work services to work side by side in the community*

- *A new emphasis on working better in localities by:*
 - *developing more and better targeted services;*
 - *planning and delivering services based on the needs of each locality; and*
 - *developing new approaches to the way services are managed and delivered, based on local partnerships.*

Our National Health: A plan for action, a plan for change also identifies as priorities:

- *Improving health*
- *Setting national standards of care to be delivered across Scotland*
- *Improving access to services - reducing waiting lists and making the "journey of care" easier, quicker and safer.*
- *Involving people in the way services are run.*
- *providing better care for the young and for older people.*
- *meeting specific needs including heart disease and cancer.*
- *working in partnership with staff to work in new, collaborative, flexible and effective ways.*

Community Care: A Joint Future is the report by the Joint Future Group, set up in early 2000 by the Minister for Health and Community Care to find ways to improve the joint working already identified as essential to the delivery of modern and effective person-centre services. Although focusing mainly on services for older people, the recommendations relate to services delivered to all disabled people. The main issues arising from the report are:

- *Every local authority should have a comprehensive, joint hospital discharge/rapid response team.*
- *Agencies should provide more short breaks and more breaks at home.*
- *Every local authority should identify the need for, and arrange, a practical shopping/domestic/household service.*
- *Agencies should have single, shared assessment procedures for all client groups*
- *Agencies should have a single, shared assessment tool.*
- *Care management should be redefined as "Intensive Care Management" for people with complex, frequently changing needs.*
- *Care Managers should be trained in "Intensive Care Management" and only those who have been trained should carry it out.*

- *Arrangements for single shared assessments should include specific proposals for the necessary sharing of information between agencies, by obtaining explicit client approval.*
- *Agencies will be required to integrate equipment and adaptation services with the rest of community care services and put in place a number of measures that will result in a better focused and more effective service for the user.*
- *To target occupational therapy services more effectively, agencies need to modernise equipment and adaptation services, and to remove duplication between hospital and community based occupational therapy services wherever practical.*
- *Agencies should draw up local partnership agreements including a clear programme for local joint resourcing and joint management of community care services.*

2. LOCAL CONTEXT

Community Services Assessment and Care Management Policy was developed by the Social Work teams in Community Care as the result of a project led initially by one Senior Social Worker-led team in conjunction with outside consultants to address the agenda outlined in Modernising Community Care. The purpose of the project was to:

- *Increase worker's sense of professional autonomy*
- *Empower service users*
- *Improve levels of practice and increase knowledge*
- *Identify an agenda for ongoing professional development*
- *Develop clear standards*
- *Develop policy and procedures*

Among the areas explored during the project were:-

- *maximising the value of initial contact*
- *client centred assessments*
- *consulting with service users*
- *streamlining paperwork*
- *improving assessment report formats*
- *sharing information*

The Occupational Therapy/Disability Resource Centre Best Value Service Review was conducted during 2000. Among its key findings were:

- *Excessive waiting times*
- *The full range of Occupational Therapist's skills are not being most effectively utilised.*
- *Duplication in some areas and gaps in others*

The main recommendations arising from the service review were:

- *Closer working with health Occupational Therapists to establish common standards and procedures and to reduce duplication.*
- *Provide support and training to colleagues from other disciplines to enable them to provide some equipment and adaptations directly.*
- *Consider introducing self-selection of some simple solutions.*
- *Introduce measures to reduce waiting lists in the short term.*
- *Establish jointly managed equipment service in line with the recommendations of "Community Care: a Joint Future".*
- *Target Occupational Therapist's skills more effectively.*

3. ACTION PLAN FROM THE LAST COMMUNITY CARE PLAN

ACTION POINT UPDATE	
Improve information systems to people with physical disabilities	The restructure of Community Services in 1998 re-created the post of Information Officer at the Disability Resource Centre. However, resource restrictions have prevented the post being filled. Some improved facilities have been incorporated into the existing information library at the Disability Resource Centre e.g. UPDATE information service, Scottish Holiday Resource, Internet access.
Facilitate access and mobility for people with physical disabilities	There is an ongoing targeted programme of access improvements to Council owned buildings which will continue. South Ayrshire Council continues to support Ayr Shopmobility
Implement respite strategy for adults with a physical disability or a sensory impairment	The Respite Strategy recognised the need for improved information about the availability of short breaks. A database of short breaks provision was to be developed and the information disseminated by the Information Officer. This post remains unfilled.

<p>Develop wide ranging partnerships to provide employment opportunities for people with acquired brain injury and people with physical disabilities</p>	<p>Headway Ayrshire together with the three local authorities and Kilmarnock College have established a supported learning programme at the College for people with acquired brain injury with the aim of assisting people to enter mainstream further education. This has the long term aim of assisting those people for whom it is a realistic prospect to enter or re-enter employment. The courses are now underway and proving successful. Participants have access to careers advice through the College.</p>
<p>Develop services for people with acquired brain injury and their carers</p>	<p>The local authority and the Health Board continue to financially support Headway Ayrshire to provide their services to people with acquired brain injury and their carers. The Health Board's Brain Injury Services Review was completed during the life of the 1998-2001 Community Care Plan but has not been implemented.</p>
<p>Review existing discharge protocols for people with Acquired Brain Injury. Develop new protocols as necessary</p>	<p>This review was carried out as part of the Health Board's Brain Injury Services Review.</p>

4 WHAT HAS BEEN ACHIEVED DURING THE LIFE OF THE PLAN?

- *The Community Care (Direct Payments) Act has been implemented and continues to be developed. A number of service users are using Direct Payments to purchase their own care either from agencies or by directly employing personal assistants. The Council has worked with the Ayrshire Independent Living Network to develop a support network and services, including a payroll service, for Personal Assistant employers.*
- *Waiting lists for Occupational Therapy assessments have been reduced to around 3 months for the lowest priority referrals. Highest priority referrals can be dealt with within 24 hours in some cases.*
- *An Occupational Therapy Duty system has been introduced to speed up and streamline the response to high priority referrals, especially in the case of service users leaving hospital. As a development of the duty system, external handrails are now being provided without the need for assessment to certain groups of older disabled people.*
- *A new "user-friendly" format for assessment reports and other paperwork by Community Care staff has been developed as part of the Assessment and Care Management project. This will be used throughout the Community Care team from April 2001.*

- *The Rapid Response Team and the NASA project have been set up to provide fast-track, short term services to facilitate discharge from hospital and prevent admission. The Rapid Response team model is being rolled out across Ayrshire.*
- *Headway Ayrshire have developed and expanded their services to people with acquired brain injury and their carers with continued support from the local authority and the Health Board. Headway service users, in a recent consultation, indicated that information is now more readily available and that this makes them feel more supported and helps them and those around them to be more able to deal with the consequences of their injury.*
- *Headway Ayrshire together with the three local authorities and Kilmarnock College have established a supported learning programme at the College for people with acquired brain injury with the aim of assisting people to enter mainstream further education.*
- *A review of Home Care Services resulted in a pilot that developed the role of home care staff to include extended care tasks and flexible patterns of care delivery. Following evaluation, the new model is now being rolled out throughout South Ayrshire.*

5. WHAT REMAINS TO BE ACHIEVED?

- *Waiting lists for assessment, particularly by the Occupational Therapy team, remain long and this is a source of concern to service users. This can mean people waiting unacceptably long to receive the services they need.*
- *People still have difficulty accessing information about the services that are available to them from all agencies, including the voluntary sector.*
- *There continue to be areas of duplication between agencies and areas where the transition from one agency or service to another is not seamless.*
- *There remains a need to establish a database of local information including information on short breaks for disabled people and their carers.*
- *People in rural areas and particularly the far south of South Ayrshire continue to have greater difficulty accessing some services than those who live around Ayr, Prestwick and Troon. The problem can be exacerbated by transport difficulties.*
- *People with acquired brain injury experience a variety of difficulties that can impact on relationships, emotions, communication, ability to return to work or education. There is still not enough daytime support and support at home to help address these difficulties.*

6. ACTION PLAN FOR THE NEXT 3 YEARS

- *Occupational Therapy waiting lists will be reduced further and people who are referred to the service will be advised by return when they may expect to be assessed.*
- *Establishment of a jointly resourced and managed equipment service. Discussions will take place between agencies. As well as creating economies of scale in the supply, management and maintenance of equipment and adaptations, this will allow a programme of training for colleagues from all disciplines in the prescription and use of some equipment and adaptations funded by both the local authority and the Acute and Primary Care Trusts. This is expected to result in reductions in the delays that people experience to receive some equipment and will enable Occupational Therapy staff to develop skills in other areas, including care management.*
- *Opportunities for integrated working will be explored, particularly concerning the Occupational Therapy services delivered by both the Local Authority and the Health Trusts, to identify ways of more effectively targeting Occupational Therapy skills. In particular, opportunities for continuing rehabilitation post-discharge will be developed. There is evidence from other areas that increasing Occupational Therapy involvement and intervention can result in a substantial reduction in the need for other services including residential care and home care services.*
- *Funding has been identified to establish a Smart Homes Technology project, the first of a number of projects that will use new approaches for supporting people at home who might otherwise be at risk of admission to hospital or residential care. The project will use new technologies to assist people to be more independent and safer in their homes and, where appropriate, to rely less on personally delivered care.*
- *The Council will continue to support people who wish to manage their own care packages, with support if required, by receiving Direct Payments and/or Independent Living Fund monies. The Council continues to work with Ayrshire Independent Living Network to provide support, advice and assistance to PA employers.*
- *To continue to support voluntary organisations who provide advice, support and assistance to people with disabilities including Arthritis Care, Multiple Sclerosis Society, Ayr PHAB Club. The Disability Resource Centre provides a venue and other assistance to local teams from Arthritis Care delivering the Challenging Arthritis self-help course and will continue to do so.*
- *To continue to support the development of services provided by Headway Ayrshire to people with acquired brain injury and their carers. Headway Ayrshire will liaise with Kilmarnock College to build on the success of the further education project for people with acquired brain injury.*
- *To further develop the services available at the Disability Resource Centre and to explore ways of delivering these services to the rural areas of South Ayrshire.*

- *To provide opportunities for service users to self-select simple equipment and adaptations without the need for assessment and the delays this can entail.*
- *The phased and prioritised programme of improving access to Council-owned buildings will continue.*

7. OPTIONS BEING CONSIDERED

- *Service users to have the opportunity to self-assess and self-select some simple solutions e.g. some equipment and adaptations. External handrails to be provided on request to certain groups.*
- *Relocation of the Disability Resource Centre to more suitable premises to improve the availability of advice and guidance for people who wish to try out equipment.*
- *Provision of some equipment for purchase at the Disability Resource Centre. Presently, some advice and guidance can be given to people who wish to purchase items that are not supplied by the Council e.g. equipment for leisure activities. This development would allow more comprehensive information and advice to be given to support people in their choices.*
- *Establishing an Occupational Therapist post dedicated to Housing issues to allow a more comprehensive and cost-effective approach to identifying appropriate housing for disabled people in both the public and private sector.*
- *Developing the information service at the DRC to address the issues raised in consultations with service users about the availability of information on services. Options include providing increased public access to information resources as well as exploiting "get-round" technology to enable people to use the facilities who would otherwise have difficulty using computer based resources.*
- *Establishment of a "mobile" Disability Resource Centre to deliver the services it provides more conveniently to the rural communities of South Ayrshire. Headway Ayrshire is also exploring opportunities to develop service provision in the rural areas of South Ayrshire.*

8. PRIORITIES IF ADDITIONAL FUNDING IS MADE AVAILABLE.

- *Increase numbers of qualified Occupational Therapy staff to allow wider development of the role of Occupational Therapists in delivering high quality community care services to people with disabilities.*
- *The proposed "Up and About" project, initially aimed at older people, will have a 0.5 Occupational Therapist post. By integrating this post with existing Occupational Therapy services, the potential to develop community rehabilitation services as part of mainstream provision can be maximised.*
- *Appointment of Information Officer to carry out pro-active development of information services to people with disabilities including a database of short break provision.*

SERVICES TO PEOPLE WITH A PHYSICAL DISABILITY & HEAD INJURY

ACTION	2000/2001	2001/2002	2002/2003	2003/2004	2004/2005	PROVIDER	FUNDING SOURCE
SUPPORT SERVICES							
Biggart Hospital	42580	42580	43857	45173	46528	Local Authority	Social Work, Housing & Health AAHB
Ayr Hospital	18950	18950	19519	20104	20707	Local Authority	Social Work, Housing & Health AAHB
Disability Resource Centre	633090	633090	652083	671645	691795	Local Authority	Social Work, Housing & Health AAHB
Rapid Response Team	21320	30170	31075	32007	32968	Local Authority	Social Work, Housing & Health AAHB
Carers Services	27940	27940	28778	29642	30531	Voluntary Sector	Social Work, Housing & Health AAHB
Sheltered Employment - 6 places	50550	50550	52067	53628	55237	Local Authority/ Private Sector	Social Work, Housing & Health Employment Service
RESIDENTIAL CARE							
10 places	206900	206900	213107	219500	226085	Independent Sector	Social Work, Housing & Health
RESPIRE CARE							
8 places	3650	3650	3760	3872	3988	Independent/ Voluntary Sector	Social Work, Housing & Health
SUPPORTED ACCOMMODATION							
Margaret Blackwood Housing Association	296550	296550	305447	314610	324048	Margaret Blackwood Housing Association	Social Work, Housing & Health AAHB
Community Alarm Service	8300	8300	8549	8805	9070	Local Authority	Social Work, Housing & Health Strategic Services
DAY CARE							
Hayfield - 1 place	12780	12780	13163	13558	13965	Hayfield	Social Work, Housing & Health
Red Cross	7540	7540	7766	7999	8239	Red Cross	Social Work, Housing & Health
Independent Living Service/ Direct Payments	210410	210410	216722	223224	229921	Independent Sector	Social Work, Housing & Health AAHB
Home Care Service	633410	633410	652412	671985	692144	Independent Sector/ Local Authority	Social Work, Housing & Health
Flexible Care Packages	117980	117980	121519	125165	128920	Independent Sector	Social Work, Housing & Health
Meals at Home	6410	6410	6602	6800	7004	Local Authority	Social Work, Housing & Health
Equipment and Adaptations	500190	378990	390360	402070	414133	Local Authority	Social Work, Housing & Health
Total	2798550	2686200	2766786	2849790	2935283		

ACTION	2000/2001	2001/2002	2002/2003	2003/2004	2004/2005	PROVIDER	FUNDING SOURCE
SUPPORT SERVICES							
Support Services	11840	11840	12195	12561	12938	Headway Ayrshire	Mental Illness Specific Grant/ Social Work, Housing & Health
Total	11840	11840	12195	12561	12938		