REPORT TO:	Health Policy and Performance Board
DATE:	17 September 2019
REPORTING OFFICER:	Strategic Director – People
PORTFOLIO:	Health and Wellbeing
SUBJECT:	Transforming Domiciliary Care (TDC) Programme
WARD(S)	Borough Wide

# 1.0 **PURPOSE OF REPORT**

1.1 Provide Health Policy and Performance Board with an update on the progress of the Transforming Domiciliary Care programme and information on Premier Care – lead provider for commissioned domiciliary care in the borough

# 2.0 **RECOMMENDATION**

(1) the report be noted.

#### 3.0 SUPPORTING INFORMATION

#### 3.1 Background

As people are now living longer, expect to live in their own homes for longer and have different family and informal support the way care and support is provided needs to change to reflect this.

Halton Borough Council has been working with a range of partners to develop how domiciliary care is delivered in the borough – this is the Transforming Domiciliary Care Programme.

Domiciliary care is the term used to describe the help some adults need to live as well as possible with any illness or disability they may have.

It can include help with things like:

- getting in and out of bed
- washing, dressing
- getting to work
- cooking meals
- eating
- caring for families

• being part of the community

# Transforming Domiciliary care (TDC) project

The aims of this project are to: progressively refine and implement an outcomes model into a workable, effective solution, delivering clear outcomes for service users; work on managing demand and improving capacity.

The main work streams are:

- Capacity and demand management
- Service user assessment and management
- Workforce development

# 3.3

3.2

# **Capacity and Demand Management**

3.3.1 Reablement First

In 2018 Halton moved to a 'reablement first' model for all people being discharged from hospital (where unknown to care services) and is planning to extend this to all referrals of people assessed as being eligible for care. This approach ensures a short period of assessment, care and support to ensure all opportunities are explored to maximise independence and ensure long term care needs are fully understood. This combines HBC reablement staff with Occupational Therapy and Social Work support in a multi-disciplinary team approach.

#### 3.3.2 Multidisciplinary Approach to Capacity and Demand

During winter 2018/19 additional occupational therapy and social work support was used to support flow into and through care. This enabled improvement's in information, ensuring people get to the right service and issues and associated reviews of people in domiciliary care could occur more timely. This will continue in 19/20.

#### 3.3.3 Moving with Dignity (Single Handler Care)

Halton Borough Council usually commissions two staff for moving and handling of individuals with limited mobility, particularly if they require certain pieces of equipment to assist them in their transfers from bed to chair, chair to stand.

Singled handled care equipment is now available to reduce the need for two people and help maintain dignity of individuals by only needing one person, which could be family members, to support people/loved ones

Work to roll out the equipment and practice of singled care is ongoing. Training for staff from all areas is ongoing In addition Halton is working with STHK trust to roll out the use of singled handled care. This work involves a number of trusts and local authorities across Cheshire and Merseyside. The project aims to ensure that pole in hospital will receive singled handled equipment, regardless of their postcode and be discharged home with the equipment.

#### 3.3.4 Medication Management

Work is ongoing between Premier Care and NHS Halton CCG Medication Management Team. This has included the production of standard operating procedures, review of training requirements and revision of policy. Reablement services are also involved with review of paperwork regarding medication to ensure that the two services paperwork is harmonised.

In July 2019 Halton became the lead council in a national project looking to develop IT support / solution to issues connected with the prescribing, dispensing and administration of medication in people's own homes. Working with 4 other councils and match funding from the LGA, an independent sector IT provider has commenced working up a potential platform that connects to pharmacy systems so care providers can get an up to date medication list and administration chart. The product is due to be in test phase in the new year with project completion by summer 2020

# 3.3.5 Quality Assurance

Work is ongoing between Premier care and Halton Borough Councils Quality Assurance team to improve the quality assurance framework that can be audited against the agreed contractual standards and is meaningful for people to maintain high standards of service delivery.

3.4

# Service User Assessment and Management

#### 3.4.1 Review of Care Process

A Review of Current pathways and processes has been undertaken to determine how things are currently done, at what point, who is involved and what documents are involved – This process has shaped the work to date and associated work stream

- Reablement First. This will ensure that no person receives long term care support at home without receiving a full assessment from Reablement service first.
- Outcome Framework Tool. An outcome focused tool has been agreed and implemented across Premier care. This tool helps staff to work with individuals to identify goals whilst on the service and map the person and service progress in achieving those goals.

• Documentation a task and finish group has been working to review all current documentation across care and support services. This will ensure that people will receive a seamless service and transition between In house and agency provision of care

# Workforce Development

3.5

Premier care have produced a recruitment strategy. This work is ongoing with Skills for Care supporting moving to a 'values based' recruitment process. When finalised Premier are aiming to ensure that they have processes in place to meet the demand and recruit people who's values align with providing direct care.

Work is advanced in identifying the key roles and responsibilities involved in the assessment and provision of care and support. As this work progresses the group will identify how best to effectively use the skills and expertise available to ensure the best quality of service provision for residents of Halton.

Preliminary work has been undertaken looking at options in relation to Apprenticeships as a route into the care sector.

# 4.0 **POLICY IMPLICATIONS**

The Care Act 2014 came into effect in April 2015 and replaced most previous law regarding carers and people being cared for. It outlines the way in which local authorities should carry out carer's assessments and needs assessments; how local authorities should determine who is eligible for support. The Care Act is mainly for adults in need of care and support, and their adult carers. This programme aligns to the Care Act.

#### 5.0 SAFEGUARDING IMPLICATIONS

Model should ensure that people's needs are met appropriately reducing the risks of safeguarding incidents.

#### 6.0 **FINANCIAL/RESOURCE IMPLICATIONS**

6.1 Implementation of the model will ensure Helton can meet the demand of the increasing population within the budget allocation, ensuring quality of care for people within their own homes

#### 7.0 OTHER IMPLICATIONS

- 7.1 Nil
- 8.0 **RISK ANALYSIS**
- 8.1 N/A