

AGENDA ITEM NO: 6

Date: 25 August 2011 Greater Glasgow and Clyde

Community Health & Care Report To:

Partnership Sub Committee

Robert Murphy Corporate Director

Inverclyde Community Health &

Care Partnership

Report No:

CHCP/31/2011/GMcC

Contact No: 01475 715377

Contact Officer: Gillian McCready

Service Manager

Older People's Services

Subject: **Review of Homecare Service**

1.0 PURPOSE

Report By:

1.1 To inform members of the outcome of the independent review of homecare services.

- 1.2 To seek approval and support for the outcomes proposed.
- 1.3 To agree reporting arrangements and timescales for implementation.

2.0 SUMMARY

- 2.1 An independent review of homecare services was commissioned for a number of reasons:
 - Changes to the demographic profile with increasing percentage of older people and reduction in people of caring age.
 - Increasing costs for a large service due to increased demands for hospital discharges and reduced NHS continuing care beds.
 - Issues raised by the Care Commission inspection process in terms of the unmanageable span of control for managers of the service
 - The need to look at developing a sustainable service for the future
 - Older People stating that they wanted to live independently at home for as long as possible and being supported by services that were flexible and promoted independence.
- 2.2 The review process looked at both internally provided service and at services commissioned from the independent sector.
- 2.3 Benchmarking was carried out comparing the Inverclyde service with other areas across Scotland.
- 2.4 Consideration was given to development of the emerging theme across Scotland of a reablement model of care.
- 2.5 Government policy has described a vision for older people's services, in a society with far more people living well beyond retirement age, in the work of Reshaping Older People's Care. This vision addresses the right of older people to be helped to lead fuller lives and to continue to play an active role in their communities.
- 2.6 For those who experience frailty and ill health, there should be a range of services that offer people support to remain in their own homes, in recognition that most people choose to remain there as long as they can manage.

- 2.7 A new emphasis on early intervention, anticipatory and planned care has grown but local authorities' ability to respond in this way is constrained by resource implications, arising in large part from the current traditional model of care at home services. More of the same is not an option and service redesign is necessary.
- 2.8 A 'Change Fund' was announced on the 17th November 2010 in Scotland's draft budget for 2011/12. Its purpose is to support a reshaping of care for older people, shifting the focus away from institutional care to community/ home settings while at the same time improving outcomes for those with care needs.
- 2.9 Inverclyde will use this fund to begin to develop a reablement model of care initially through the existing Home from Hospital and Rapid Response services.
- 2.10 The recommendations of the review included:-
 - Development of a reablement model of care supported by Occupational Therapy staff
 - A restructured management to reduce the span of control, enhance day to day operations, improve leadership of teams and assessment/care management and review functions.
 - Modernised rotas that ensure staff deployment to meet the times and days of service user demand.
 - Investment in technology to provide mobile working, electronic monitoring and electronic scheduling.
 - Increased management of the mixed economy of social care market by using re-ablement reviews and by tendering for commissioning by outcomes.

3.0 RECOMMENDATION

- 3.1 Members note the key recommendations of the independent review of homecare services.
- 3.2 Members support the implementation of the key recommendations.
- 3.3 Members agree a reporting schedule for receiving reports on the progress of implementation.
- 3.4 It is recommended that the Committee approves delegated authority to the Corporate Director of Community Health and Care Partnership to issue tenders for an electronic care monitoring system and to accept the lowest or most economically advantageous tender.

Robert Murphy
Corporate Director
Inverclyde Community Health & Care
Partnership

4.0 BACKGROUND

- 4.1 In October 2009 the Health and Social Care Committee approved the commissioning of an independent review of home care services. The review process focused on all local authority provided home care services as well as those services purchased from the independent sector. The review commenced in June 2010 and the final draft report was received in February 2011.
- 4.2 The terms of reference of the review were to map out the current service delivery model, identify what works well and potential areas for improvement and provide an option appraisal for future delivery of home care services.
- 4.3 There are a number of features of Inverclyde's current service and delivery profile, which need to be taken into account in considering the best approach for the development of home care services.
 - The balance of care in Inverciyde shows both a high use of care home beds per 1000 population aged over 65 years and an equally high usage of 10+ hour home care packages, against the Scottish average.
 - The Inverciyde figure for Older People supported in Care Homes is the third highest in Scotland (rate per thousand aged 65+).
 - Inverclyde has the second highest number of older people receiving intensive home care (10+ hours per week 2008/9 rate per 1000 population aged 65+).
 - Inverclyde Health and Care Partnership has the fifth highest use of emergency hospital beds day by people aged 75 plus who have 2 or more admissions.
 - The Inverciyed population is projected to change from 2010 where the percentage of people aged over 65 years was 18.2% to 28.7% by 2030.
- 4.4 In 2009 the care commission identified two key areas of concern in their inspection report of homecare services. These were the span of control for managers of homecare services and the limited number of service reviews being completed because of lack of capacity within the system.
- 4.5 The structure of the service relied on office based staff, providing less client contact time than would be expected.
- 4.6 Over the past 9 months two additional posts have been introduced to the homecare service, providing additional capacity to carry out individual service reviews, focusing mainly on hospital discharges and services provided through the independent sector. These posts identified a reduction in service of around 122 hours per week, highlighting the importance of capacity to complete service reviews.
- 4.7 During the review period a pilot looking at the use of an electronic care monitoring system was implemented as part of the wider modernisation and efficiency of the service and evaluation of this system has been taken into consideration in the recommendations.
- 4.8 The overarching driver for delivery of good quality services was determined in the National Framework for Joint Services which identified clearly the outcomes wanted by Older People.
 - To be helped to be more independent
 - To have choice and control over how they manage their lives
 - To stay in their own homes whenever it is possible, with customised support
- 4.9 A national development programme for the development of a reablement focused support for older people was being developed through the period in which the review was undertaken. This would promote the philosophy of independence and rehabilitation, providing older people with support to regain their skills as opposed to doing things for them, moving away from the dependency culture.

- 4.10 The reshaping care for older people's agenda also supports this move to support independence, ensuring older people remain active as part of the wider community for as long as possible.
- 4.11 The review process entailed scrutiny of the current home care service delivery arrangements. The review focused on the following key functions and elements of the service:
 - Management structure
 - Service delivery model
 - Infrastructure and IT requirements
 - · Workforce planning issues
 - Commissioning arrangements
 - Implications for demographic growth and future demand
 - Reablement model of care
- 4.12 The introduction of the Change Fund in April 2011 has offered opportunities to use bridging finance to establish reablement within the homecare service while at the same time restructuring the management of the service to enable the span of control and review issues to be addressed.

5.0 PROPOSALS

5.1 Management Structure

Home care management arrangements are located within the wider remit of Older People's services. This also includes day care, respite and other services not directly linked to home care provision.

- 5.2 The review recommended a management structure which allowed for a reduction in the span of control and increased contact with service users. A reallocation of tasks between Team Leader posts will provide leadership and development across the service, but post numbers will remain unchanged.
- 5.3 The proposals include the creation of Senior Home Support Worker posts and deletion of Home Support Officer posts. The Senior Home Support Worker posts will have their work time split with 30% of their time spent on staff supervision and arranging cover for leave and sickness and 70% of their time carrying out homecare duties.
- 5.4 A new post of Business Support Officer will be created to ensure that monitoring and reporting mechanisms are in place to track the effectiveness of the service and also to inform future service delivery and redesign.
- 5.5 Three Home Support Managers will be responsible for development of reablement across three geographical areas.
- 5.6 Details of the full staffing implications are attached in appendix 1.

Appendix1

6.0 SERVICE DELIVERY MODEL

- 6.1 Development of a reablement model of care will alter the access point to homecare, with all new referrals being directed through this service. This will allow for assessment and review of each care package to be an ongoing process, taking account of changing needs.
- 6.2 The Senior Home Support Worker posts will have responsibility for up to 15 staff as part of a team. These posts will have a working knowledge of what is required for each service user and will be in daily contact with the staff.

- 6.3 This will ensure that the Home Support Manager has adequate time to complete assessments and reviews to meet the requirements of the Care Commission.
- 6.4 Existing homecare service users will continue with their current service at present and this will only change following a review of service or a change in circumstances such as a hospital admission or increased frailty where a reablement service may be introduced.
- 6.5 Scotland Excel is currently developing a procurement model for meals services across Scotland. Inverclyde staff have been actively engaged in this process and a review of meals on wheels will be carried out to link into this process.

7.0 INFRASTRUCTURE & IT REQUIREMENTS

- 7.1 The review report highlighted the reliance on paper based administrative support arrangements and emphasised the need to move towards the development of electronic care monitoring.
- 7.2 A pilot of the use of an electronic care monitoring system has been underway since February 2011 in the Kilmacolm area. This has to date produced very positive results in terms of streamlining systems and also ensuring that resources are used as efficiently as possible and that additional information is available to staff about clients.
- 7.3 The benefits of the system to date include the following:
 - Ability to monitor planned versus actual time
 - Appropriate use of staff experience and training
 - Lone worker security
 - Remove paper timesheets
 - Increased information for carers about service user needs
 - More accurate information on independent sector provision
 - Increased confidentiality
 - Reduced phone calls one message to 15 staff at one time
 - Reduced postage and delivery
 - No missed calls
- 7.4 The pilot phase is due to be completed in August 2011 with an evaluation forming the basis of a tender exercise to establish an electronic care monitoring system across the whole homecare service.
- 7.5 A costing to continue with the pilot until November has been obtained and is attached Appendix 2 as appendix 2.
- 7.6 It is proposed that the use of a framework agreement and limited tender process is undertaken and work has begun to develop the necessary documentation to take this forward. The target date for completion of the process being set as November 2011.

8.0 WORKFORCE PLANNING ISSUES

- 8.1 Full participation and support by staff side representatives has taken place as part of the review process.
- 8.2 The introduction of Senior Home Support Workers will give a carer structure to homecare staff that has not previously been available.
- 8.3 Job descriptions and Person Specifications have been agreed and graded for all posts being introduced.

- 8.4 Training programmes for Senior Home Support workers is currently being developed Appendix 3 to ensure they have the necessary information and skills to take forward the new tasks. Attached is an action plan for recruitment and training of staff. See appendix 3.
- 8.5 A programme of meetings has taken place with all management staff affected by the changes and individual meetings have also enabled staff to explore all options available to them with time to make decisions about possible changes.

9.0 COMMISSIONING ARRANGEMENTS

- 9.1 Currently a mix of internally provided and externally purchased service is available across Inverclyde with the split being approximately 29% of service users having service from external providers and 71% of people receiving in-house service.
- 9.2 The redesign of service provision through reablement will impact on the longer term maintenance type services. The outcome of the service redesign will be monitored and a clearer picture of future purchasing intentions will become apparent over the coming year.
- 9.3 A commissioning framework will be developed based on this information, identifying clear intentions of percentage split between in house and purchased service for the future. This work will begin in July 2012.

10.0 IMPLICATIONS FOR DEMOGRAPHIC GROWTH & FUTURE DEMAND

- 10.1 A total of 1,113 individuals currently receive a home care service in Inverclyde equivalent to 77.5 per 1000 population aged 65 and over. Projected increases in Inverclyde's older population could result in a significant increase in demand for home care services, if the current rate of home care uptake remains unchanged.
- 10.2 Over recent years the actual number of service users has not changed noticeably but the balance of care towards personal care increases year on year with 100% of current service users receiving personal care. The number of service users requiring assistance from 2 staff members at a time to assist with moving and handling has increased by 46% between 2007 and 2009.
- 10.3 Considering the population projections and the increase of the percentage of the population aged over 65 a change in service delivery is essential. Based on the increase to 28.7% by 2030, the Council could see an increase in demand for home care services of around +15% by 2018 and +35% by 2028. This is clearly unsustainable.

11.0 REABLEMENT MODEL OF CARE

- 11.1 The Reshaping Care for Older People agenda has identified that there is a growing number of older people in the population but also that older people are clear that they want to live independently for as long as possible in their own homes.
- 11.2 A roll out of reablement services is taking place across Scotland with many different forms being developed. Reablement is based on an approach which aims to help people do things for themselves and as such is a change in culture for many service providers. Key elements include:
 - Integration of services across health and social care
 - Changes to the assessment and care management process
 - User identified outcomes being central to the reablement process
 - A reablement approach is integral to the development of personalisation
 - Evidence suggests that homecare reablement can have a significant impact on the subsequent use of homecare in the longer term.

- 11.3 The Change fund will support the development of reablement as bridging finance, with targets and development being monitored through the Change Plan steering group.
- 11.4 The move towards reablement, will develop a model of care that will include support from occupational therapists with reablement being provided for an average of 6 weeks for all new referrals and hospital discharges.
- 11.5 There is an expectation that people also requiring a reassessment due to a significant change in circumstances will go through the reablement service, but that long standing service users will not. The initial stages will be developed through the existing Rapid Response service and Home from Hospital service.
- 11.6 A reablement Development Leads post will be recruited to take forward the wider development of reablement for a period of 1 year as part of the Change Plan. An occupational therapist will also be appointed to work with homecare staff to develop individual care packages for service users.
- 11.7 Staff within the current workforce will be offered the opportunity to begin to develop the reablement model. An ongoing programme of training will be developed to cover all homecare staff eventually as well as care managers and District Nursing staff.
- 11.8 Awareness raising sessions will also be developed over the coming months to share the proposals for a change in service with service users, carers and the wider population.

12.0 KEY MILESTONES

ACTION	TIMESCALES
Development of outline business case for Electronic Care Monitoring system	August 2011
Develop and implement reablement	September 2011 onwards
Complete staffing structure for homecare workforce	Begin September 2011 Complete February 2012
Purchase and implement an electronic care monitoring system	November 2011
Evaluate progress made and targets achieved	April 2012
Development of a commissioning framework	July 2012

13.0 IMPLICATIONS

13.1 Legal:

13.2 Finance. Attached in Appendix 4 a consolidated financial summary. The indicative future annual savings, in excess of existing targets, are:

Cost Centre	Budget Heading	Budget Year	Proposed Spend this Report	Virement From	Other Comments
Home	Staffing /	2011/12	£ nil	n/a	Indicative level of
care	Payment	2012/13	(£12,000)		savings per
	to	2013/14	(£233,000)		current
	Providers	2014/15	(£220,000)		assumptions
		2015/16	(£172,000)		

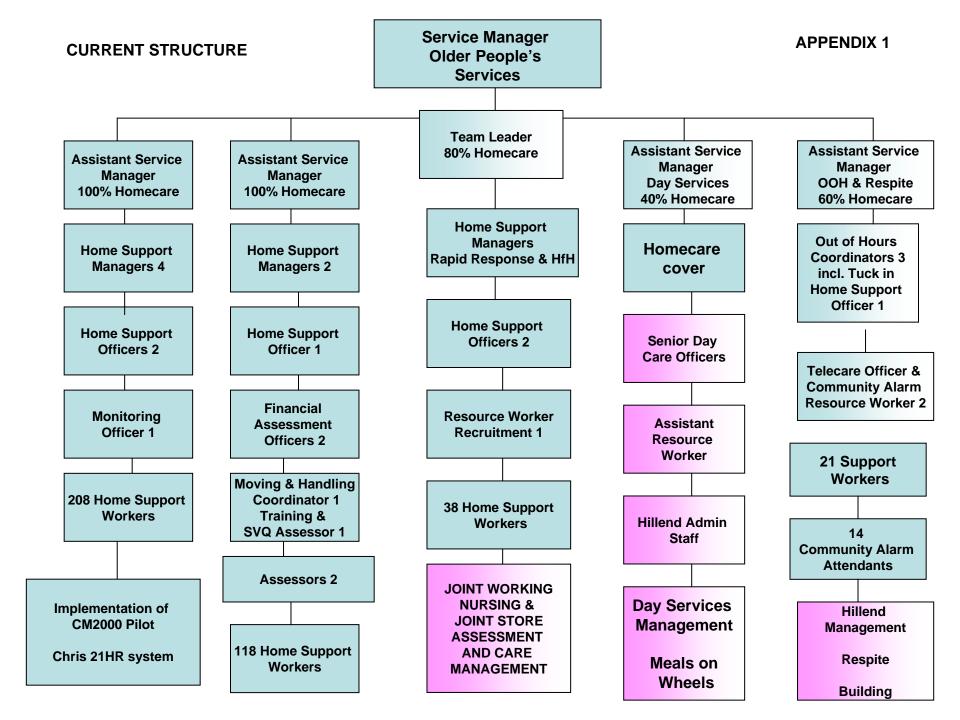
13.3 Personnel: Attached in Appendix 1 current and proposed staffing implications.

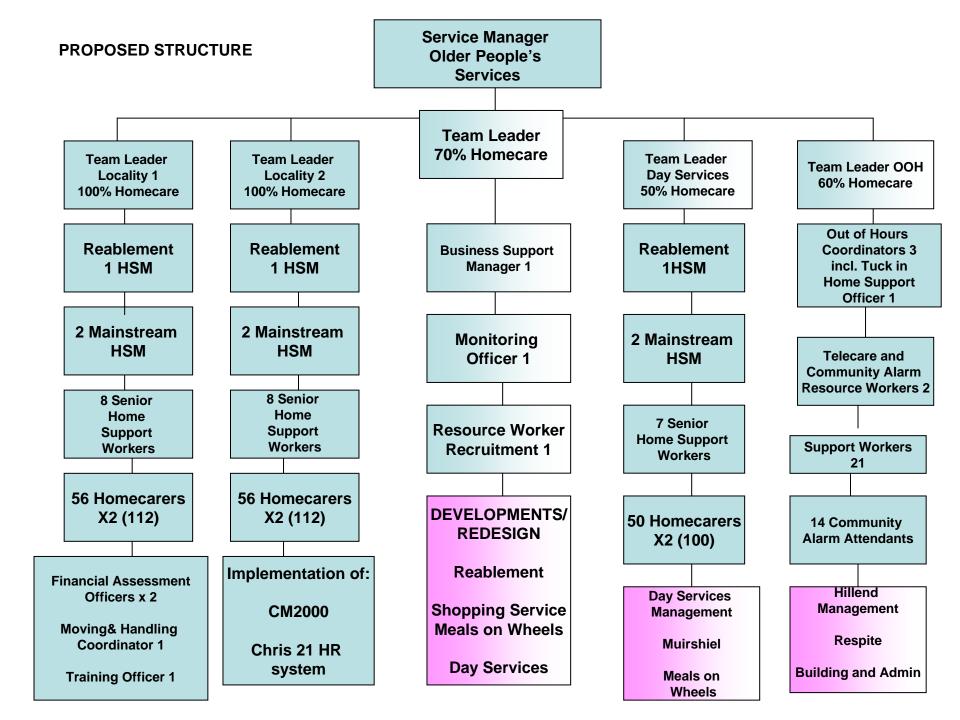
14.0 CONSULTATION

- 14.1 Consultation with staff and other agencies has taken place as an integral part of the review process.
- 14.2 A plan for wider consultation and communication of the proposals once approved will be rolled out over the next 4 months with full implementation being proposed for February 2012.

15.0 LIST OF BACKGROUND PAPERS

- 15.1 Appendix 1:Current and proposed staffing details
- 15.2 Appendix 2:Costings for the continuation of the electronic care monitoring system to November 2011.
- 15.3 Appendix 3: Action plan for implementation of the review including recruitment, training and development of reablement
- 15.4 Appendix 4: Consolidated financial summary.





SERVICE USER PRICING UNIT PRICES

Order for the services listed below, submitted to Care Monitoring 2000 Ltd of Four Oaks House, 160 Lichfield Road, Sutton Coldfield, B74 2TZ, Tel: 0121 308 3010, Fax: 0121 308 3030, Website: www.cm2000.co.uk ("CM2000") by:

Customer details:						
Company name	Inverciyde Co	ouncil				
Address I	Hillend Centre					
Address 2	2 East Crawfo	ord S tree	t			
Address 3	Greenock					
Post code	PAI5 2BT					
Website	unau invoselu	do gov uk				
Telephone number	01475 71717		•			
Fax number						
Email	Joyce.allen@i	nverclyde	e.gov.uk			
			_			
Please supply the followi	ng services:					
Minimum Supply Level		N/A		Ser	vice Users	
Ongoing / Monthly charg	ges:		Qty		Unit cost	Commentary
Device application costs			15	@	£20	The unit cost is per device, per month
(200MB per month data Monitoring / Scheduling			Devices 5	<u> </u>	£48	The unit costs is per concurrent licence, per month
Total costs for 3 month	pilot extension	1			£1,620	
Up-front, one-off items:			Qty		Unit cost	Commentary
N/A						
Notes I 1. All service provision is sul costs stated above. 2. Our standard payment tel 3. Replacement C7 handset	rms are 14-days.					dard Terms and Conditions. VAT will be added to the
Authorisation by Custon						
to submit this Order on beh whereby CM2000 will supply	nalf of the Custon y the above servi	ner and, suices for the	bject to CN			ndard Terms and Conditions and that I have the authority ndicated below, enter into Agreement with CM2000
Signed by or on behalf of	f the Customer	r:				
Name of signatory:						
Job title/role/capacity:						
Job title/role/capacity: Date:						when complete please fax to: 0121 308 3030
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Date of Agreement / /2011

Expected Service Commencement Date / /2011

INVERCLYDE HOMECARE REVIEW ACTION PLAN

Action	Issues/links	Lead person	Timescale	
Meet with HR to work out implications for displaced staff	Costings for redeployment, termination, implications for return to substantive	Barbara McQuarrie	End May	
	posts etc.			
Meet with HR to work out process for	Re-ablement HSM post vs Mainstream	Barbara McQuarrie	End May	
HSM posts	posts.			
Agree remit and grading for Senior Home support Worker posts		Barbara McQuarrie	May	
Meet with Staff side and Home	Timescales for changes – linked to	Gillian McCready	May	
Support Officers	wider change programme and possible impact on admin requirements			
Meet with CM2000 to look at progress	Link to corporate mobile working	Gillian McCready	May	
and costings		Janis Delaney Brian Moore		
Develop and agree remit for Business	Link to Derrick's team	Gillian McCready	May	
Support Manager post				
Identify additional change	Link to change plan and reablement	Gillian McCready	June	
management capacity to drive the review forward				
Map out process for communication	Identify impact on admin processes	Team Leaders Homecare	June	
and management of Senior Home support Worker posts				
Begin work to look at re-drawing of		Team Leaders Homecare	June	
boundaries to split into localities				
Identify advertising and selection	Internal process and back fill	Barbara McQuarrie	July	
process for Senior Home support				
Workers				

Appendix 3

Action	Issues/links	Lead person	Timescale
Develop training programme for Senior Home support Worker posts	Link to training section	Team Leaders Homecare	July
Visit Perth and Kinross and other areas to look at re-ablement		Team Leaders Homecare, OT, Frail Elderly	July
Begin HR process		Barbara McQuarrie	July
Staff briefing sessions on homecare review and re-ablement development	Link to change plan	Gillian McCready Joyce Allan	August
Evaluate CM2000		Janis Delaney Gillian McCall	August
Tender process			To be agreed
Agree IT system and costings and roll out programme		Brendan Hurrell Lesley Bairden Gillian McCready	
Advertise for backfill of Senior Home support Worker posts		Team Leaders Homecare	September
Implement new HSM posts	Link to Re-ablement development		September
Implement new boundaries		Team Leaders Homecare	September
Begin training for Senior Home support Worker posts		Team Leaders Homecare	October
Finalise HR issues for termination of posts		Barbara McQuarrie	November
End date for Home Support Officer posts		Barbara McQuarrie	February 2012

		2012/13 £'000	2013/14 £'000	2014/15 £'000	2015/16 £'000
Employee Costs:					
	Management	(233)	(233)	(233)	(233)
	Homecare Workers Change Fund:	186	158	171	188
	Management	135	77	77	77
	Homecare Workers	200	200	200	100
		288	202	215	132
Electronic Scheduling & Monitoring		94	93	93	124
Gross Costs		383	295	308	256
Savings: Internal ES&M Capacity Free Up External ES&M Capacity Free Up		(86) (38)	(287) (126)	(287) (126)	(287) (126)
Purchase Homecare - Existing Reviews		(44)	(88)	(88)	(88)
Reablement Savings		0	0	0	(177)
		(168)	(501)	(501)	(678)
Change Fund/Earmarked Contribution		(377)	(277)	(277)	0
Gross Income		(545)	(778)	(778)	(678)
Saving Before Wo Workstream Targ Saving After Work	et	(162) 150 (12)	(483) 250 (233)	(470) 250 (220)	(422) 250 (172)