

‘Integration Matters’

September 2016

Keeping you informed about Health and Social Care Integration in Angus



Vicky Irons, Chief Officer

Welcome to the September edition of ‘Integration Matters’. Since the last edition we have achieved another significant milestone with the publication of our Strategic Plan for 2016-2019.

The Plan is built upon the importance of equal partnership, and sets out the vision and future direction of integrated health and social care services for the next three years in Angus.

It is the product of wide consultation and I would like to take this opportunity to thank everyone who has given us their comments and asked questions. I would like to stress that the Strategic Plan is not a static document, and it will be reviewed and renewed on a three year basis. I would encourage you, if you have not already done so, to have a read through the Plan (**see link on p.5**) so you are aware of what our priorities are for the next 3 years of the Partnership.

Our next important task is to identify the priorities of our four localities and develop an action plan to turn our aspirations in to a reality. Locality planning is a key part of health and social care integration and a legal requirement under the Public Bodies (Joint Working) (Scotland) Act 2014. In developing our plans we will actively listen to and involve people who live in the localities, to ensure we create sustainable health and social care services for the future in Angus that have been framed by the very people who live there.

One thing is for certain – that a period of change lies ahead. Much of what is required can be done in local communities, by making better use of the resources and assets that already exist in each neighbourhood. I encourage you to embrace the opportunities that come with change because, without it, we will not be able to deliver the high quality services that people in Angus expect.

At its heart, health and social care integration is about enabling services to work together effectively to support people achieve the outcomes that matter to them. I look forward to working with all of you to achieve our vision “to place individuals and communities at the centre of our service planning and delivery in order to deliver person-centred outcomes.”

Vicky Irons

In this edition of Integration Matters you will find:

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- ★ We need your input!

If you have any questions or good ideas then let us know by emailing us on :

hscianguis.tayside@nhs.net

Technology Enabled Care (TEC Fund)

Angus has been awarded £155,000 from the Scottish Government Technology Enabled Care (TEC) Programme for 2016/18. Over the next two years the funding will be directed towards ensuring that outcomes for individuals, in home or community settings, are improved through the application of technology as an integral part of quality cost-effective care and support.

The funding will be used to appoint a Telecare Development Officer who will increase awareness of TEC options available in Angus and how to access them. We will also further develop Video Active and purchase more Truecall Call Blockers (more information below & overleaf). We will also be working with Scottish Fire and Rescue to enable more people who are deaf to be supported by a specialist smoke alarm.

Angus is also hosting a Tayside wide TEC Programme funded initiative and has been awarded £87,500 to introduce telehealth monitoring in Tayside. The monitoring system is called "Florence" or "Flo" for short. Florence is a communication system that uses text messages to help service users and their healthcare professional monitor and manage their medical condition more closely. Flo will be piloted to support weight management, undernutrition, smoking cessation and heart failure. It will also be piloted in Edzell GP Practice to monitor blood pressure.

VIDEO ACTIVE

In line with the National Telehealth and Telecare Delivery Plan for Scotland, the Angus Health & Social Care Partnership is striving to expand the use of NHS video conferencing facilities in Care Homes, to other partners, and for clinical consultations. We will soon be launching 'Video Active', which will give people the opportunity to participate in a seated physical activity (SPA) class that is happening in one of four Leisure Centres across Angus, while they remain in their own environment - whether that be a Care Home, a community venue or a Day Care Centre. We are presently testing SPA sessions between Webster's Sports Centre, Kirriemuir and St David's Care Home, Forfar with an official launch to follow in the early autumn. The sessions will be added into Angus Alive's adult timetable as an addition to the current 'Be Active Live Well' programme.



Residents at St David's Care Home in Forfar waiting to 'tune in' to the SPA session

VIDEO CONFERENCING



Joyce McGinley from eHealth installing and testing the equipment at Seven Arches

We are also testing the use of video conferencing to inform clinical decision making in the Seven Arches unit within South Grange Care Centre, Monifieth. Seven Arches provides high dependency care for young adults with complex, acquired brain injuries. The use of VC within the unit has the potential to improve the primary-secondary care interface within the unit by providing the opportunity for all specialist healthcare professionals to participate in multi-disciplinary reviews with the patient. There will be no requirement for the patient or the clinicians to travel, which will enhance client care and improve patient outcomes. It is also envisaged that multi-disciplinary polypharmacy reviews via VC has the potential to reduce prescribing costs.

Cont.

Dr Alan Cook, Medical Director – Operational Unit, NHS Tayside, who visited Seven Arches recently, said:
"Video conferencing solutions provide the opportunity for improved access to clinical support and expertise. Patients who are in Seven Arches will be able to access some medical consultations without all of the logistical difficulties of physically getting to a hospital outpatient clinic, and using the video link is intended to improve the patient's experience of the outpatient appointment. I look forward to seeing the outcome of the introduction of this technology into Seven Arches which has the potential to enhance timely, effective, and safe delivery of care."

CALLBLOCKING UNITS

Since the successful piloting of callblocking technology in Angus in 2013, this initiative has rolled out to 20 local authorities in Scotland. The initial pilot group quickly expanded to 80 installations and this figure has stayed stable, in the range of 80 to 100 users. These consumers have generally either been scammed or have been at a high risk of being taken advantage of. The installations have given tangible protection to the individuals and reassurance to their families (especially if they do not live close by), allowing people to feel safer while remaining in their own homes.



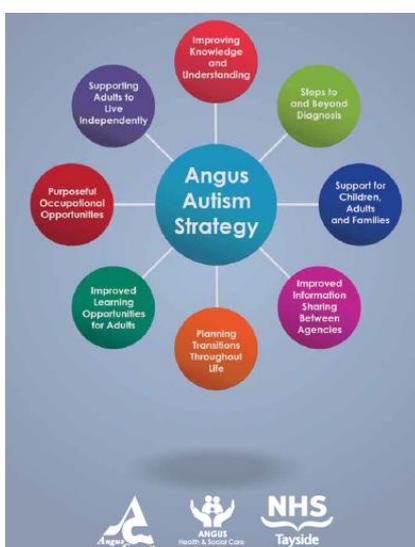
The funding of an additional 80 Units per year for the next two years via the Scottish Government Technology Enabled Care Fund will allow us to increase capacity. Along with the appointment of a Technology Development Officer, who can assist in the promotion of the use of the technology more widely, this gives us the opportunity to meet the need to protect vulnerable consumers from the risks associated with unwanted calls, be that aggressive sales practices, scams or frauds, all of which can impact on the health and wealth of some of the most vulnerable members of our society.

We know that the provision of the technology to those with diagnoses of dementia, brain injuries or physical limitations has been valuable. We hope that other groups such as those with mental health conditions can also be assisted. The technology offers various levels of protection from unwanted incoming calls and can also be used to block some outgoing calls (obsessive phoning of particular numbers can cause significant unwanted bills). All of these groups and more, as well as their families, can be helped to feel better supported. The challenge now is to reach out and identify who can be assisted, and we hope that professionals and carers will use this opportunity to assess the value of such an intervention to the people they support and care for.

If you are aware of someone who may benefit from a callblocking unit, please contact the Angus Council Trading Standards section on 01241 435600 to discuss a referral or the process involved. The documentation to support an application can also be obtained by emailing Tradstand@angus.gov.uk.

Brian K Smith, Senior Trading Officer, Angus Council Communities Department

Angus Autism Strategy



The Angus Autism Strategy aims to highlight the supports and services people with autism and their families' value and wish to be further developed in Angus.

It provides a plan and a vision for the future based on recommendations from the Scottish Strategy for Autism on how services should be improved, and informed by engagement with people who have autism in Angus and their families.

It recognises the progress that has been made over the past 2 years and sets out a plan for how outcomes might be achieved locally over the next 5 and 10 year period.

The strategy can be viewed at:

http://www.angus.gov.uk/downloads/file/2440/angus_autism_strategy

Partnership Working with Penumbra



Bill Troup, Head of Angus Mental Health Services congratulated Penumbra, one of its key partners in delivering a number of new initiatives and receiving the maximum scores in a recent Care Inspectorate Inspection. It is a great example of how the new Health and Social Partnership is working collectively to improve people's wellbeing through promoting informed self-management.

Angus Integrated Mental Health Services have successfully worked with Penumbra for a few years now and are delighted that Penumbra have recently agreed to pilot a Peer Work Link Service at Springfield Medical Centre (East Practice), which will see their peer worker offering one-off appointments to patients who require low level mental health support. The peer worker will provide an empathic and informal approach to helping people gain access to support at an early stage in their recovery.

Penumbra are registered on the SDS (Self Directed Support) Framework and are working closely with partner organisations to further implement SDS in mental health services across Angus. Funds are available for short breaks for Carers of those experiencing mental health difficulties. Penumbra have recently linked in with Angus Carers to look at opportunities for supporting carers in Angus.

Two members of staff currently deliver Motivational Interviewing training across the organisation. A further two staff members undertook WRAP (Wellness and Recovery Action Plan) facilitator training in June and hope to begin delivering this soon.

The wider mental health service continually encourages people to become involved in activities that promote recovery and social inclusion. Upcoming activities by Penumbra include a trip to Glen Doll and Branching Out Project (run through the Forestry Commission and allows individuals work towards a John Muir Award).

For the first time, they have developed a six week POWWOW (Penumbra workshops on wellbeing) block specifically aimed at those aged 16 - 25years, and have also introduced POWWOW sessions within the Mulberry Unit at Stracathro, which will run on a monthly basis.

Their most recent Care Inspection took place in April 2016. The service was awarded Grade 6 scores for the areas of 'Care and Support' and 'Leadership and Management' (resulting in a score of 6 in all four areas). Feedback included *"a high quality service where outcomes, as reported by service users, were high. A service where a culture of inclusion and person centred support was provided by staff, who were also well supported, trained and enabled to be leaders"*.

Sharlaine Walker, Planning Manger for Adult Mental Health Services in Angus said *"I believe that our outcomes based commissioning in Adult Mental Health is now starting to return huge dividends for the population of Angus. I've always believed that skilled people don't need to be told how to do their job, just support them to deliver pre-set outcomes within a safe framework and the creative results can be quite amazing. Indeed this kind of feedback from the Care Commission is testimony to that vision."*

The picture above shows colleagues Sharlaine Walker, Angus Health and Social Care Partnership and Ashleigh McLeod, Assistant Support Manager, Angus Nova Service.

Independent Living Angus



Need a bit of help to live at home?

Most of us want to live independently and remain safe and active but don't always know what help and support is available.

If you or someone you know is affected by illness, disability or are getting older, and are finding everyday living tasks difficult we can help you find out about a range of supports and services available in Angus.

Visit our online self-help service for professional advice and guidance:

www.independentlivingangus.org.uk

Or get in touch with First Contact:

FirstContact@angus.gcsx.gov.uk or 01307 475242



ANGUS
Health & Social Care
Partnership

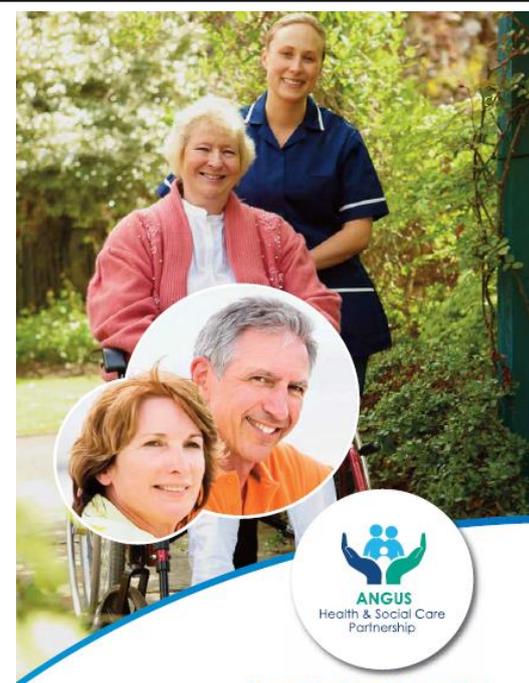
Angus Strategic Plan

The Angus Health & Social Care Partnership's Strategic Plan 2016-2019 has now been published. This has been shared widely with staff, partner organisations, third and independent sector and members of the public.

The plan sets out the vision and future direction of health and social care services in Angus. It takes forward the approach of strategic commissioning recommended by the Scottish Government. It is not a list of actions outlining everything that Angus Health and Social Care Partnership are doing or plan to do over the coming years. The detail about how we make those steps will be developed through our four localities and Angus-wide engagement structures in collaboration with all partners in the public, independent and voluntary sectors, and in local communities, over the lifetime of the plan.

An electronic copy of the Strategic Plan can be accessed here:

http://www.angus.gov.uk/downloads/20351/angus_health_and_social_care_partnership



Strategic Plan 2016 - 2019

Angus Care and Repair - Dementia Enablement Project



Angus Care and Repair has been awarded three year funding from the Life Changes Trust to provide customised support services for people affected by dementia.

The money will be used to improve the homes, independence and confidence of people living with dementia, ensuring that they receive equipment and adaptations to assist them to continue to live independently within their own homes for as long as possible.

For people living with dementia, the need for equipment or adaptations can arise from a change in how they perceive their surroundings due to cognitive confusion. A shiny door threshold can appear like a step, once familiar sounds can be misunderstood and previously simple tasks can become difficult.

Adaptations can range from fitting handrails, improving lighting, changing floor coverings, removal or repositioning of mirrors, mounting signage on doors to give clearer direction and highlighting light switches and electrical sockets.

Small changes to the home environment like these have been shown to reduce falls, accidents and confusion. This can lead to an increase in confidence and independence, and even better physical health. Early intervention could also be less costly in the long run.

Many of the specific changes needed are preventative in nature and are enabling or re-enabling, and while these physical changes in the home need not be dramatic, often the improvements in well-being and confidence for a person with dementia can be significant.

For more information about the service or to receive an enablement check from the Dementia enablement officer please call 01307 463232. This service is open to anyone living in Angus who is diagnosed, going through diagnosis or feel they are affected by dementia.

Photo opposite shows Grant Langlands, Angus Care & Repair Dementia Enablement Officer, at the dementia open day at the Forfar community gardens.



Did you know

- The number of people living with dementia in Angus is 2329. However, it is estimated that only 64% of people living with dementia have a clinical diagnosis.
- Dementia costs the country more than cancer, heart disease and stroke put together.

Hospital Discharge Audit

A recent audit revealed that 38 patients were discharged from Angus hospitals in July 2016, and 27 (71%) were discharged within 72 hours of being assessed as ready for discharge.

As we continue to make improvements to the hospital discharge pathway we expect this number to increase so that we can meet our strategic aim to reduce beds days lost to delayed discharge by 50% over the next year.

Meet our new Clinical Director

Dr Alison Clement



Dr Clement took up the post of Clinical Director (part-time) on 1 August 2016.

My background:

I am an Angus GP and proud of it. I studied in Dundee then trained to become a GP qualifying in 2004. I was a locum GP working in practices and in the out-of-hours service before settling down as a partner in Monifieth where I have remained since 2009.

My favourite part of my job has been working with our multi-disciplinary team. Our practice was fortunate to be one of the first practices in Angus to get the 'enhanced community support' model of care. This means that we have a team based in our health centre which works together to ensure our elderly patients get what they need and when they need it. It is this sort of team-working that means I love being a GP. The reason I applied to become Clinical Director is because I want to make sure we continue to find these new ways of working which are better for patients and get them rolled out to everyone who needs them.

My new role:

When I first started as Clinical Director people kept asking me what a Clinical Director actually did. What actually is the point of me? There are 3 parts of my job:

- 1. Clinical leadership:** I am the person responsible alongside the Chief Social Worker and the Lead Nurse for ensuring that the services we provide are safe and effective for all the people who use them and also the staff who provide them. This is called clinical, care and professional governance.
- 2. Operational leadership:** I give the clinical knowledge necessary to the senior management team so that they can make the right decisions about how resources are spent. I don't have any control over any staff or budgets myself – that is for the managers.
- 3. Strategic leadership:** I help make sure that all those involved in making decisions about how services should be developed work together to get the best ways of working across the whole of Angus (and the Tayside-wide services that the Angus IJB has responsibility for).

My priorities:

Making sure that what we do is evidence based to ensure good quality and safe care in this time of tight finances. When we try new things we ensure they are properly evaluated to check if our good ideas worked and we also find out what works well in other area to try it here too.

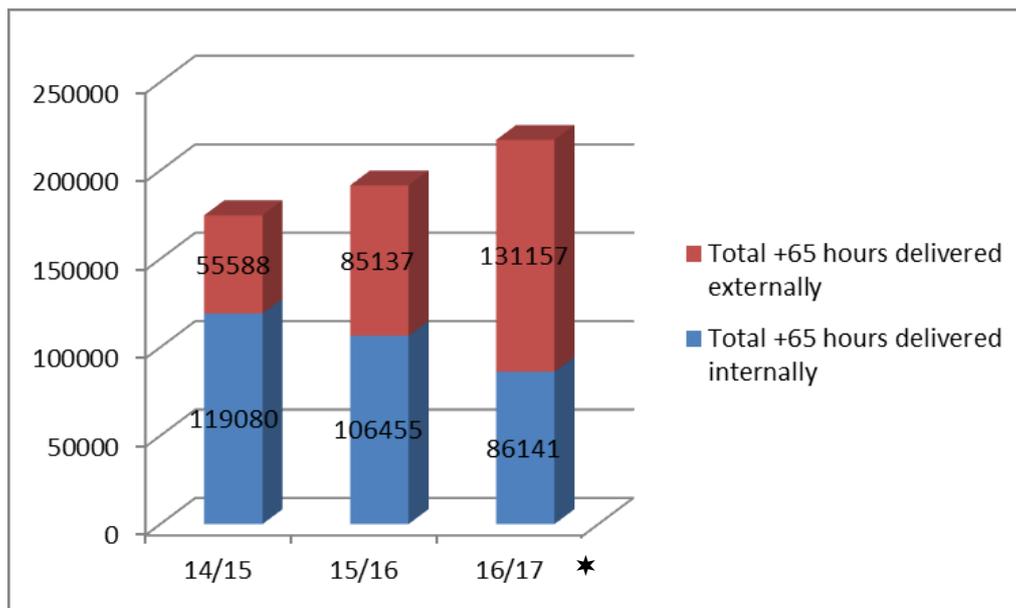
We have done a lot of good work on elderly care in Angus but we do need to ensure this is extended to the whole Angus populations – I want to ensure fairness and transparency so that we can all benefit from this success story. And also to look at our younger people who may have different problems needing our help including mental health problems.

I believe in the 'bottom-up' approach. I want to see true influence of those on the ground and to ensure that all agencies are treated as equal partners in care. I want to work in an environment where it doesn't matter if you are a social care officer, a medical consultant or a volunteer driver – we all work together to improve the lives of the people who need us. This ensures safety where people can raise problems they are experiencing, quality as it is an effective way of working, and a lot of fun - a place where people want to be.

Help to Live at Home

Help to Live at Home (HTLH) is an ambitious 3-5 year change programme which aims to help an increasingly aging demographic in Angus to continue living in their own homes. The programme moves the focus of directly provided social care to providing responsive, preventative and enabling services in a more aligned way, whilst transitioning day to day personal care to private sector partners. Significant progress has been made at a time when demand for care at home continues to grow, and service users are increasingly able to choose services that best meet their outcomes.

Number of hours delivered – split between internal and external (over 65s only)



* 16/17 – Projected annual figures based on current weekly provision.

Help to live at home is also using technology to assist in managing staff resources more efficiently and supporting staff to work in a more agile way. We have successfully tested the use of smartphones which will facilitate better communication with staff out in the field, enhance personal safety, and enable staff to be more efficient and effective in ensuring that information on service users' welfare is recorded and communicated with multidisciplinary teams.

Phase 2 of the programme aims to redesign our internal services to be less fragmented and more flexible in supporting people who require help over a short-term basis. In addition we are working with external partners to ensure that there are a range of high quality and sustainable care services available in all areas of Angus.

A further update on progress will be provided in our next edition of 'Integration Matters'.

We need your input!

The next edition of the Newsletter will be circulated in December 2016. Before then we need to know what you are doing what is working well what would you like to change as we go forward?

The deadline for articles is 18 November 2016 so get those fingers typing or pens writing and submit your article to us by Emailing hscianqus.tayside@nhs.net.

Thank you