A CASE STUDY IN INTEGRATED WORKING BETWEEN HEALTH AND SOCIAL CARE

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Introduction - My Journey

• Employed in a Social Care and Health setting for 21 years (predominately Adult Services)
• Previously worked in two Local Authorities and have been with my current employer for nine years
• Roles include – Administration, Care Assistant, Home Care Manager, Review Officer, Access Worker, Contracts Officer, Customer Care Manager/Designated Complaints Officer, Community Care Worker and Social Worker
• Qualified as a Social Worker in December 2011
• Student placements in a Fostering and Adoption Team and a Community Learning Disability Team (CLDT)
• Social Worker in a CLDT since January 2012
Objectives

• An overview of the organisation

• Assessing the lessons from the forerunner of integrated services

• Pointing the way for strategic and practice lessons

• Overcoming common hurdles to promote successful partnership working
An overview of the organisation
Torbay and Southern Devon Health and Care NHS Trust (TSDHCT)

- Torbay and Southern Devon Health and Care NHS Trust (Referred to as the Trust for the purpose of this presentation)
- A NHS organisation responsible for providing community health services in Torbay and Southern Devon
- Adult social care in Torbay – Torquay, Paignton and Brixham).
- The Trust is an integrated health and adult social care organisation which provides services to around 375,000 people.
- The Trust employs approximately 2000 staff including frontline health and social care staff, such as district nurses, occupational therapists and social workers amongst many others
- Operates from different premises across Torbay and South Devon such as community hospitals and clinics.
History of the Trust

- Torbay Primary Care Trust became a statutory body on 1 October 2000
- On 1 October 2005 became Torbay Care Trust (taking on responsibility for social care in a partnership agreement with Torbay Borough Council from December 2005)
- From October 2005 the Trust had responsibility for both commissioning and providing integrated health and social care services
- From 1 April 2011 it has also been responsible for community health care services in the southern part of Devon (roughly the districts of Teignbridge, South Hams and West Devon.
- On 01 April 2012 we became The Torbay and Southern Devon Health and Care NHS Trust.
History of the Trust (2)

- April 2012 the Trust separated the commissioning and provider responsibilities and healthcare commissioning became the responsibility of the South Devon and Torbay Clinical Commissioning Group and Northern, Eastern and Western (NEW) Devon Clinical Commissioning Group in April 2013.
- Adult social care commissioning returned to Torbay Council in December 2014.
- Torbay and Southern Devon Health and Care NHS Trust had a budget of around £125m for 2012/13.
- The Trust also works with a range of local voluntary sector organisations, and with several NHS providers and local authorities.
- The Trust recently began a process to join with a bigger NHS organisation to create an Integrated Care Organisation.
Assessing lessons from the forerunner of Integrated Services
Adult Health and Social Care in Torbay

• The Trust was originally formed in the belief that bringing health and social care services together would better meet the needs of the individuals who required care and support.
• Piloted in Brixham in 2004 health and social care workers were brought together into a single team under the leadership of a manager in charge of all health and social care services.
• A story was developed about “Mrs Smith, a typical older person” who needed a range of services.
• By planning services to suit someone with complex needs the Trust improved its ability to deliver care across the whole organisation.
• Torbay was one of the first areas in the country to benefit from this integration of health and social care and ‘the Torbay model’ and ‘Mrs Smith’ has been of growing national and international interest ever since.
What did “Mrs Smith” want?

• A Single Point of contact

• Quick & responsive services

• Tell her story just once

• Professionals that talked to each other
Torbay Zone Teams (1)

- The Trust provides many of its services via zone teams which are clustered around GP Practices.
- The Zone teams contain co-located multi-disciplinary teams
- Health and Social Care decisions and arrangements can be made in one place
- The zone team covers all health and social care needs for adults in the community
- Timely intermediate care and re-ablement service including crisis intervention.
- Simple nursing procedures to the most complex of cases
- Links are made to specialist services such as mental health teams as required
Torbay Zone Teams (2)

- Brixham
- Torquay
- Paignton
- Community Learning Disability Team
Zone Teams - Multi-disciplinary and Co-located

- Zone Manager/deputy
- Professional discipline Leads
- Administration
- Health and Social Care Co-ordinator
- Social Worker
- Community Care Worker
- Occupational Therapist
- Physiotherapist
- District Nurse
- Community Matron
- Support Worker Intermediate Care (SWIC)
- Broker
Intermediate Care

- Intermediate Care for people over the age of 18, who need a short period of rehabilitation, treatment or care.
- This may be due to a recent illness, a hospital stay or a reduction in their ability to remain independent at home.
- The aim is to help people to be as independent as possible supporting them safely in their own home wherever possible.
- Provide assessment
- Agree what is important to the individual
- Make a plan to meet needs
- Work with individuals to carry out a rehabilitation programme
- 7 days per week service
- Ability to respond rapidly to prevent escalation in need
- Ability to facilitate earlier discharge
- Working in partnership with GP colleagues
Community Learning Disability Team

• The Community Learning Disability Team (CLDT) is a group of professional staff from different organisations:

• Torbay and Southern Devon Health and Care NHS Trust

• South Devon Healthcare Foundation Trust

• Devon Partnership Trust

• Provide assessment, support, advice and therapeutic interventions to people who have learning disabilities.
CLDT Multi-disciplinary

- Community team involvement of professions
- General Manager
- Nursing and Social Care Leads
- Administration
- Physiotherapy
- Senior Community Officer (Intensive Assessment and Treatment Team IATT)
- Occupational Therapy
- Speech and Language Therapy
- Consultant Psychiatry
- Consultant Psychology
- Social Work
- Community Care Worker
- Primary Liaison Nurse
CLDT - Redesign

• 11 May 2015 – first phase of integrating the CLDT into the Zones
• Improved access to primary care and mainstream services for people with learning disabilities
• Enhanced support to mainstream services to enable them to meet the needs of people with learning disabilities
• Timely specialist intervention for people with learning disabilities
• Clear mechanisms to support the continued development of good practice and oversight of quality and safety
Pointing the way for strategic and practice lessons
Strategic Lessons

• Co-location promotes communication
• Funding streams and budgets can make the process of meeting needs simpler
• Single HR & Finance support functions
• Shared IT function across agencies (can be different)
• Central Support Team – performance/data, contracts etc.
• Easier to share information
Strategic Lessons (2)

• Prevention can be the key to reducing the need for long term intervention. This can often be more expensive in the short term.

• Different initiatives and priorities can come fast and furious and it can be difficult keeping up with the pace of change. Double in an integrated organisation.

• Strategic operation needs to understand how the frontline works.

• Access to health systems.
Practice Lessons

• Co-location promotes communication
• Single assessment process – people tell their story once
• Joint working can reduce the amount of time and interventions an individual needs to be subjected to
• Safeguarding can be ‘owned’ by everyone
• Networking increases professional circle of support
• Partnership working
Overcoming the common hurdles to promote successful partnership working
Medical Model verses the Social Model

- It could be easy to lose the identity of a Social Worker within a NHS organisation
- Conversely Nurses can feel they are becoming ‘administrators’ rather than practitioners
- Caution – not to view an individual as the sum of their medical conditions
- An holistic approach which provides an opportunity to work with the ‘whole’ person
- Direct comparison of working in a social care environment against an integrated organisation
Respect for each other’s profession and learn together

- A big machine cannot function without all of it’s cogs working in sync
- We can all be a little ‘precious’ about our professions
- Take time to explain about your profession and listen to other professionals.
- Learning from other professionals informs and improves my practice
- Co-working enhances each other’s practice
Respect for each others profession and learn together (2)

• Find the commonalities. It can be surprising that all the professions have the well-being of an individual at the centre of their practice
• Checks and balances in a multi-professional working relationship – ‘why are you taking this approach/doing that’?
• Opportunity for non-social work professionals to consider a different perspective
• Barriers still exist and difficulties still arise
Working in partnership with professionals, individuals and carers/families

- To view individuals as the expert of their situation
- Can be overwhelming for individuals/carers to face the ‘force’ of many professionals intervening in their lives
- Support individuals to make informed choices for themselves, including positive risk taking
- Keep individuals at the centre of practice – organisational policy and procedure can impact on this
- Encourage individuals to maximise ‘natural support networks’
- Focus on strengths and maximising peoples abilities
- Sign-posting, information and advice
Where do we go from here?

- The Care Act and The Torbay Model - Still some way to go but on the right path
- Integrated assessment
- Strengths based approach
- Preventing needs/rehabilitation
Information

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• Torbay and Southern Devon Health and Care NHS Trust – www.torbaycaretrust.nhs.net