

Herefordshire County Council

Next Stage Integration Project

Emerging Themes from Team Workshops – April/May 2013

Introduction and Background

As part of the arrangements to manage the process needed to bring the Section 75 Agreement with Wye Valley NHS Trust to a conclusion in September 2013 and also to manage the changes needed to bring about cost reductions associated with the Herefordshire County Council shortfall in budgets in 2013 and beyond, a series of meetings/workshops have been held with Adult Social Care teams/Integrated teams associated with the Section 75 Agreement.

The workshops involved a series of meetings in which information was given on the following:

- The reasons for ending the Section 75 Agreement and what this will mean for Herefordshire County Council (HCC) staff. I.e The secondment of staff will end on 13th September 2013 and all HCC staff will be taken back into the direct employment and management of the Council.
- The continuing emphasis on integration with health professions and teams as the means for best delivering an effective pathway of care for service users
- The significant shortfall in funding facing HCC and the need for reduction in staff numbers together with the need to consider delivery of services in different ways in order to streamline pathways of care.
- The next steps and timescales for decisions within the Council

Staff were asked to give their views re strengths and weaknesses of their current services and to contribute any views they have on what might be done to bring about more effective ways of delivering their services and bring about cost reductions.

The following is a summary of the key themes and comments made by staff as part of this exercise. The comments are grouped together under a number of key areas.

Integrated Team Working

The majority of neighbourhood teams agreed there was real benefit to working together with health colleagues as this resulted in improved understanding of roles and responsibilities and this resulted in a more holistic and smooth delivery of service to service users. City South Team have really excelled at this and now have regular MDT meetings involving GPs from each of the 4 practices they serve on a rota basis.

Most teams acknowledged that their case load was generally low and there were waiting lists but this was levelled against the working processes in place for the county

Most teams felt there was real benefit from being co-located in offices so multidisciplinary team working was facilitated and even more from open offices which can facilitate closer working.

IT systems were not joint with health and this was seen as an obstacle to joint and close working.

Teams working in rural locations commented that their time would be better used if mobile and flexible working arrangements and facilities were introduced. Currently staff have to return to the office, which can mean a 30 minute journey , in order to input assessment documentation.

Neighbourhood teams commented upon the difficulty in gaining access to and a response from Mental Health teams. Once in contact , their advice and support is invaluable but gaining access currently requires referral via a GP and hence there is an inevitable delay. Some clarification is need re their crtiteria for accessing services.

Safeguarding advice and support was valued but the processes could also be remote and inefficient.

Some teams have high levels of agency staff which are seen to be costly and inefficient with low levels of continuity for service users.

The role of the Local Access Points was appreciated but the process for screening was flawed and inaccurate. It was felt that a training programme was needed for the staff involved or qualified staff involved in the screening process.

Reablement services are being diluted with users blocking the system for up to 12/14 weeks rather than the six weeks prescribed. There is a shortage of places to move onto. Reablement state that they are making a real difference to the long term ability of users to maintain independence. However they are providing palliative and longer term care in appropriately due to a lack of other services.

Assessment, Review and Approval Processes

There was unanimous agreement that the current assessment process was too long and repetitive and posed real problems for service users in going through the process. The process was too time consuming.

Staff felt that the whole process of approval, which involved repeated referral to managers for approval on sections of assessment was demotivating and deskilling. The impact was that they felt untrusted. The impact for service users was great in so far as there were real delays in approval .

Structure and Organisation

Some views were expressed that Health had 'taken over' in many ways and there had been a diminution in the role and influence of social workers. There needs to be a re balancing according to some staff members.

No views were expressed about the teams geographical spread and population served by each team.

There were some views expressed that some of the central team functions should be dispersed into the neighbourhood teams eg safeguarding , reviewing in order to streamline processes and reduce confusion.

Some teams including day services are wary of being contracted out although others have some good ideas about income generation eg from training and advice to nursing homes etc.

Staff Retention

Staff commented upon the poor rates of pay when compared to neighbouring counties.

They also point to the abnormally long processes which they are working with which demotivate staff.

There were several comments made about the lack of opportunities and support currently for unqualified staff to take training and therefore become qualified staff. This would provide a recruitment track for the future and reduce the reliance upon agency staff..

Day Opportunities Staff/Services

Staff were all concerned that the impact of planned changes on service users and their carers was taken into account and handled sensitively as there were some very vulnerable individuals involved which may result in breakdown of placements

Staff are very proud of the innovative services they provide and do not want to lose the reputation which has been built up not just locally but on a national basis

Day service staff play an important role in alerting potential safeguarding issues and there needs to be consideration to how this alert is maintained in the new structure

Day services provide value for money and are low cost for the range of services provided

Staff are very willing to embrace change but would like to be involved in planning the changes in order to safeguard users and carers as much as possible

Consultation

All staff were appreciative that someone had gone to meet with them and would welcome other opportunities to be more involved in planned changes.

Face to face meetings are preferred rather than email communications.

Many staff voiced the desire to be involved in changes, which affect them and for their views to be taken into account.

Grace Hampson

29th May 2013