Title of Report:	Newbury and District CCG and West Berkshire Council Provider Engagement Project: Health and Social Care
Report to be considered by:	The Health and Wellbeing Board
Date of Meeting:	28 November 2013

Purpose of Report: For information and discussion.

Recommended Action: To agree and gain the support of the Health and Well Being Board to implement the mandatory training criteria for long term conditions within the Service Specification.

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Objective

The purpose of this project is for Health and Social Care to work with Care Providers to raise awareness of effective management of patients with Long Term Conditions, specifically Diabetes, Coronary Heart Disease, Chronic Obstructive Pulmonary Disease, Dementia and End of Life / Palliative Care and identify their training needs. This recognises that in West Berkshire, there is an increasing elderly population and the focus is on supporting people to remain independent within their own homes. It also recognises the benefits to individuals who need both their Health and Social Care needs met, in order to maintain their quality of life. An increased awareness of Long Term Conditions for Care Providers will reduce the requirement for hospital admissions/crisis interventions and delay the need for residential or nursing home care. This project will deliver on key aspects related to the care of patients in line with Long Term Conditions, End of Life, avoidable admissions and integration agenda.

Issues

The Provider Engagement Project has evolved as a result of work previously undertaken to review the training domiciliary care providers accessed, the majority of which is commissioned from the private sector.

A deficiency reporting system has been introduced by Social Care to identify specific areas of concern. Community staff are able to raise a deficiency concern using the BHFT Datix system, highlighting concerns regarding packages of care, etc. This is used as an opportunity to discuss with agencies specific issues and to work in collaboration to

mitigate risks and work on embedding changes in working practice with measureable and sustainable outcomes.

Private Care Providers are only required to provide the basic induction training and mandatory training according to CQC guidelines and they do not specify any further training as essential. However any care and tasks undertaken by a social carer must be supported by robust training programme to support safe delivery of care.

Consequently any other training the Care Providers undertake is at a cost to the Agency, which reduces their incentive to provide further training. Currently there is no standardisation of training across Social Care providers and this is reflected in the inability for them to manage the needs of patients effectively, who are living with more complex conditions.

The quality of care must be improved and standardised if we are to reduce unplanned hospital admissions, or the need for institutional care and improve the engagement and interface between Health and Social Care. This must be supported by a training programme that raises carers awareness to feel empowered to deliver safe quality care within the home, reducing unplanned hospital admissions and increased crisis care packages.

Integration

Newbury & District Clinical Commissioning Group (CCG) is working with Berkshire Healthcare Foundation Trust (BHFT), West Berkshire Council and a range of other partner organisations, to develop an integrated model of care know as Case Coordination. An important part of this model is Case Management, which is based upon a Multi-Disciplinary Team (MDT) case review, supported by Community Matron / Assistant Practitioner. They will use the ACG risk stratification tool, and discussion with GPs and Social Care Practitioners, to identify patients who would most benefit from case management within a MDT setting, with the aim to prevent avoidable admissions and ensure early intervention within the appropriate setting. In order to support this project and the wider integration agenda we need to commission Care Providers equipped with the skills to support these vulnerable individuals.

Training

Following discussions with local care providers we recognise the need to develop a joint Health and Social Care training package that supports and raises the awareness of carers. This programme needs to be cost effective utilising existing resources available within local Health, Social and Voluntary organisations. We would recommend that the training programme initially focuses on five key conditions. The training programme will be supported by a competency framework. The five key areas will be:

- Diabetes
- Chronic Obstructive Pulmonary Disease (COPD)
- Coronary Heart Disease (CHD)
- Dementia
- End of Life / Palliative Care

Recommendations

- To agree the Service Specification For the provision of Community Home Care Services
- To gain the support of the Health and Well Being Board.
- To map the current training offered by the Council and Local Health Providers, and develop a joint Long Term Conditions training programme and Competency Framework
- Identify resources required to develop and sustain the training programme
- Identify performance measures

Executive Report

Appendices

Appendix 1

SWOT analysis

Benefits	**Threats**
• Supporting the Integration agenda. • Promotes quality of life and independence • Supports Care Coordination • Supports Palliative Care / End of Life agenda • Promotes carer empowerment and job satisfaction • Reduced cost to Health and Social Care economy • Joint working across groups	• Lack of Care provider engagement • Time constraints on carers to attend training • Unable to manage increasing demand of care need • Capacity of training providers to deliver the programme
Opportunities	**Risks**
• Improve Communication • Avoid duplication • Enables continued collaborative working on future service development • Networking opportunities and enhanced understanding of roles • Developing career pathways for carers.	• Lack of engagement • Lack of commitment • No reduction on hospital admissions • More costly care packages • Increased dependence on services • Carry on as we are