

## **Report of Disability Service Manager**

## **Report to Director of Adult Social Services**

## Date: 21 February 2018

# Subject: Establishing an additional four Case Officer Posts within the Skills for Independent Living Service (SkILs)

Are specific electoral Wards affected?	🗌 Yes	🛛 No
If relevant, name(s) of Ward(s):		
Are there implications for equality and diversity and cohesion and integration?	Yes	🛛 No
Is the decision eligible for Call-In?	🗌 Yes	🛛 No
Does the report contain confidential or exempt information?	🗌 Yes	🛛 No
If relevant, Access to Information Procedure Rule number:		
Appendix number:		

#### Summary of main issues

- 1. The Skills for Independent Living Service (SkILs) provide short term intervention, for approximately six weeks that supports people to regain skills and independence following a period of illness, impairment or change in circumstance.
- 2. The service operates between 08.00 22.00, 7 days a week, 52 weeks a year,
- 3. Within the new service model and structure, which was introduced in July 2017, Case Officer posts were developed to undertake the first visit to the customer.
- 4. To facilitate hospital discharges, and to educate hospital staff about the reablement service, a Case Officer was based at St James's Hospital, covering the wards that the Leeds Integrated Discharge Service (LIDS) team support.
- 5. As part of the Spring Budget monies approval was given to the establishment of four additional Case Officer posts who will be able to work across the whole of the St James's site and also the LGI and Chapel Allerton Hospital where LIDS team only have a limited presence.
- 6. The four new Case Officers will work the same rota as the Community Case Officers, and, although predominantly working in the hospital, there will be flexibility for undertaking visits in the Community at times of high demand.

## Recommendations

- 6.1 The Director of Adults and Health is recommended to approve the establishment of an additional four Case Officer posts to provide Leeds Teaching Hospitals Trust wide cover over the three hospital sites.
- 6.2 Implementation will be by Disability Service Manager for Assessment and Provision following approval of the delegated decision report.

## 1. Purpose of this report

1.1 To provide information on the current SkILs staffing structure and the requirement of having additional number of Case Officers to cover the three hospital sites.

## 2 Background information

- 2.1 The SkILs service underwent a major restructure during 2017 which was implemented in June 2017. As part of the agreed restructure the post of Case Officer was agreed and introduced.
- 2.2. Under the new model the Reablement service provides the initial visit to service users to identify reablement needs. The majority of customers are people leaving hospital. These visits are undertaken by the Case Officers.
- 2.3 Under the old structure the LIDS team would make a referral to Social Work for an assessment and an onward referral to SkILs. This created a delay in people being discharged.
- 2.4 The LIDS team only cover a limited number of wards on the St James's site, and although there are discharge co-ordinators on other wards they are not fully aware of the SkILs Reablement service, the entry criteria or the process for referrals.
- 2.6 The Case Officers in the hospital would be working the same rota as the Case Officers in the community so would be available in the evenings and weekends to also talk to families about the Reablement service.
- 2.7 The current service structure is shown in the chart below **Operational (08:00 20:00) Mon Sun**

WNW	ENE	South	Hospital	Shift pattern
1 x Operational Manager	1 x Operational Manager	1 x Operational Manager	1xcase officer	Mon-Fri 8.30-5.00
5 x Case Officers	4 x Case Officers	4 x Case Officers		7 days 8am-8pm
10 x Senior Support Workers	10 x Senior Support Workers	10 x Senior Support Workers		7 days 8am- 10pm split shift
5 x SkILS Teams	4 x SkILS Teams	4 x SkILS teams		7 days

@ approximately	@ approximately	@ approximately	8am-
496 contracted	620 contracted	620 Hours team	10pm
hours per team	hours per team	FTE 16.7 per team	split shift
FTE 13.4 per team			Spiit Shirt

## 3. Main issues

- 3.1 Previously, Social Workers undertook an assessment, developed a reablement plan and made a referral into the SkILs service – this was for hospital discharges and community referrals.
- 3.2 Following the re-structure, for hospital discharges, the LIDS team refer directly into SkILs thereby giving a much quicker response and facilitating timely discharges. For community referrals a 'light touch' assessment is completed by a social worker which is sent to SkILs for the Case Officer to undertake the first visit.
- 3.3 The LIDS team only cover a limited number of wards, all on the St James's site. Other wards have discharge facilitators but they are not fully aware of Reablement and the services they provide.
- 3.4 There is currently one Case Officer who works alongside the LIDS team but there is limited capacity to visit wards not covered by LIDS, or other hospital sites.
- 3.5 The Case Officers will work the same shift pattern as the Case Officers who work in the Community. This will enable the Case Officers to meet and discuss SkILs with families in the evenings and weekends, when most visit the hospital.
- 3.6 There is quite a high turnover of staff on the wards and there is a constant need to educate staff about the SkILs Reablement service to ensure appropriate referrals.
- 3.7 To ensure that the Case Officers do not get de-skilled in undertaking first visits it is proposed that the Case Officers rotate into the hospital on a 6 monthly basis.

#### 4. Corporate Considerations

#### 4.1 Consultation and Engagement

4.1.1 The posts that are being created are more of the same posts which are already on the structure, with the same job descriptions. Details of the changes have been shared with the trade unions who are supportive of the proposals.

## 5.0 Equality and Diversity / Cohesion and Integration

5.1 An Equality Impact Assessment has been completed.

## 6.0 Council policies and City Priorities

6.1 The proposal aligns to the Delivering Better Lives programme of the Best Council Plan and impacts on all the outcomes that people with care and support needs in Leeds:

- Are contributors to their community and live healthy, fulfilling lives with adequate access to, and choice and control over any support that they may need
- Stay independent for as long as possible
- Live safely and with dignity
- Are treated as 'whole people' and have an altogether smoother, more seamless, less fragmented experience of their health and social care services
- Have access to a greater choice of services that are geared to respond to people's specific needs
- 6.1.2 It contributes to the key performance indicators of:
  - Increase proportion of older people (65 and over) who are still at home 91 days after discharge form hospital into reablement/rehabilitation services
  - Increase the proportion of older people offered reablement service following hospital discharge

## 7.0 Resources and value for money

- 7.1 The posts are being funded from the Improved Better Care Fund for 17/18 to 19/20.
- 7.2 With the enhancements that the rota working includes, the cost of the four posts is £146,340 per annum. (Appendix 1)
- 7.3 Approval was given for spend of £134,348 per annum from iBCF for each of 18/19 and 19/20 with a half year effect approved for 17/18.
- 7.4 A Budget Action Plan is in place for reablement to monitor the number of people receiving reablement which translates to an anticipated benefit to the Community Care budget. The BAP is being reviewed in light of the new service model.

## 8.0 Legal Implications, Access to Information and Call In

This is a Significant Operational Decision and not subject to call in.

## 9.0 Risk Management

- 9.1 There is a risk, that if ward staff are not aware of the services that SkILs can provide, some people who may benefit from the service are not referred.
- 9.2 Currently the Case Officer only works on a limited number of wards on the St James's site. There may be people on other wards/hospital sites who would benefit from Reablement who are not currently referred.
- 9.3 To ensure that the Case Officers do not get de-skilled in undertaking first visits it is proposed that the Case Officers rotate into the hospital on a 6 monthly basis.
- 9.4 To ensure that processes are well embedded in hospital teams so that when funding ends in 19/20 referrals to SkILs are 'business as usual'.

## 10 Conclusions

10.1 The Reablement 'SkILs' team is a short term intervention, for up to six

weeks that supports people to regain skills and independence following a period of illness, impairment or change in circumstance.

- 10.2 The service was restructured in June 2017 and the post of Case Officer was created to improve the responsiveness of the service to undertake the first visit.
- 10.3 There is one Case Officer based in the hospital who works closely with the LIDS service to facilitate timely and appropriate referrals to SkILs.
- 10.4 Additional Case Officer posts would be able to cover all three hospital sites, and more wards to inform ward staff about the benefits of SkILs and how to refer into the service.
- 10.5 With the Case Officers working the same rota as the community staff they will be on the wards in the evenings and weekends to also liaise with families and carers.

#### 11 Recommendations

- 11.1 The Director of Adults and Health is recommended to approve the establishment of an additional four Case Officer posts to provide Leeds Teaching Hospitals Trust wide cover over the three hospital sites.
- 11.2 Implementation will be by the Disability Service Manager for Assessment and Provision following approval of the delegated decision report.

#### **12** Background documents<sup>1</sup>

- 1 Costing for 4 x C3 Case Officer on rota
- 2 C3 Case Officer Job Description
- 3 Case Officer rota

<sup>&</sup>lt;sup>1</sup> The background documents listed in this section are available for inspection on request for a period of four years following the date of the relevant meeting. Accordingly this list does not include documents containing exempt or confidential information, or any published works. Requests to inspect any background documents should be submitted to the report author.