

DUNDEE CITY COUNCIL

REPORT TO: Social Work Committee 16th January 2006

REPORT ON: Joint Community Care Plan 2005 - 2008

REPORT BY: The Director of Social Work

REPORT NO: 24 - 2006

1.0 PURPOSE OF THE REPORT

1.1 This report seeks committee approval of the Joint Community Care Plan 2005-2008.

Copies of the plan have been passed to each of the group secretaries and is available in for inspection in the Members' lounge.

2.0 RECOMMENDATIONS

It is recommended that the Social Work Committee;

2.1 Note and approve the content of the Joint Community Care Plan 2005-2008; and

2.2 Approve the publication of the plan.

3.0 FINANCIAL IMPLICATIONS

3.1 The revenue costs of implementing the recommendations in this report will be contained within existing Social Work Department budgets.

4.0 LOCAL AGENDA 21 IMPLICATIONS

4.1 The plan will impact on the following key themes:

- Local needs are met locally;
- All sections of the community are empowered to participate in decision-making;
- People live without fear of violence or persecution because of their personal beliefs, race, gender or sexuality; and
- Health protection and care of the sick.

4.2 The plan will enable Dundee City Council and NHS Tayside to deliver community care services which take account of some of the most vulnerable members of the community, including frail older people, people who are chronically sick or disabled and homeless people.

5.0 EQUAL OPPORTUNITIES IMPLICATIONS

5.1 The involvement of service users and partner agencies was a key principle in developing the plan. This was achieved by ensuring that all relevant partners had the opportunity to participate and contribute to the Joint Strategic Planning Groups, forming partnerships to promote equality.

5.2 Measures were taken to eliminate discriminatory practices and procedures and promote active participation in the community.

6.0 MAIN TEXT

6.1 Section 52 of the National Health and Community Care Act 1990 inserted a new section 5A into the Social Work (Scotland) Act 1968. This requires Local Authorities to prepare and publish a plan for the provision of community care services in their area. Health Boards should consider the health needs of the local population and specify the proposed actions to achieve a balance of care from institutional to community care.

6.2 The plan, covering a 3-year period from 2005 - 2008, identifies local needs and specific actions to provide services to meet those needs. It addresses the needs of the following groups:

- Older people;
- People with learning disabilities;
- People with physical disabilities;
- People with sensory impairment or loss;
- People with mental health problems;
- People with acquired brain injury;
- People who have problems associated with drug or alcohol misuse;
- People who have blood borne viruses;
- People who are homeless; and
- Carers.

An executive summary of the plan is attached to this report (Appendix 1).

6.3 The Strategic Planning Groups developed the individual client care group sections of the plan. Each Strategic Planning Group has multi-agency representation that includes representatives from service users, carers, advocates, Health, Housing, voluntary organisations and the independent sector. The plan contains details of responsibilities for the actions to be taken.

6.4 The plan aims to reflect both the achievements over the last few years and to set out the vision for community care over the coming three years. It reflects the significant resources invested by the partner agencies to ensure that a wide range of services is in place to meet individual need. The following are a few examples of some of the achievements since the last plan:

- Redesigned and expanded local authority day care provision and day hospital provision within the Psychiatry of Old Age Service;
- Increased funding of the Older People Engaging Needs (OPEN) Project to provide a range of health and well-being improvement activities for older people living in the community;
- Re-structured day opportunities, increased tenancies with support and resettlement from hospital for people with a learning disability;
- Increased representation and involvement of people with a learning disability in planning processes through advocacy support, focus group discussions, conferences and the Dundee newsletter 'Your Say';
- A local agreement between the Social Work Department and Health will see the development of a joint equipment service;
- Improved interagency working has stream-lined assessment activity and contributed to a reduction in delayed hospital discharges;
- Development of a Transitional Living Unit as a smart home assessment facility for people with acquired brain injury;
- Establishment of a Managed Clinical Network in Tayside for people with a stroke, which develops links across organisational and professional boundaries;

- Establishment of a Health and Local Authority Employment Partnership project to support people with mental health problems into training and employment;
- Resettlement of people with mental health problems from hospital into their own tenancies in the community;
- Revision of guidelines for HIV counselling and testing;
- Launch of Topaz Community Detoxification and Rehabilitation service for people who are detoxifying from drug use;
- Development of multi-agency standards for good discharge planning for homeless people.

6.5 The pace of policy development both nationally and locally has ensured that development of community care resources has remained in a state of constant review and progression throughout the past few years. The injection of new monies and policy developments in relation to the Joint Future agenda has enabled partner agencies to reconsider models of service delivery and the scope of these.

6.6 In recent years, much of community care planning has been set out in other plans, strategies and agreements, for example the Partnership in Practice (Pip) agreement, the extended Local Partnership Agreement (elpa) (2004), the Homelessness Strategy (2003-2006), Dundee City Drug and Alcohol Action Team Corporate Action Plan (2005-06) and the Older People Balance of Care Report (2006). Information contained within these strategies and plans is synthesised and incorporated within the Joint Community Care Plan.

7.0 CONSULTATION

The Chief Executive, Depute Chief Executive (Finance), Depute Chief Executive (Support Services) and Director of Housing were consulted in the development of the plan.

8.0 BACKGROUND PAPERS

8.1 None

Alan G Baird
Director of Social Work

Date: 06 Jan 2006

Dundee Joint Community Care Plan 2005 – 2008

Executive Summary

Introduction

This is the 3^d Dundee Joint Community Care Plan and is for the period 2005-2008. The plan sets out the priorities for the development of community care services, highlighting the key issues for people living in Dundee and details the actions to be taken over the next three years.

Service Values

Dundee City Council recognises the need to attain equality for all citizens of Dundee. The values that underpin the planning and delivery of community care services as set out in the plan are:

- Achieving Individual Potential;
- Choice;
- Consumer Voice;
- Empowerment;
- Equality;
- Equity;
- Partnership;
- Public Accountability;
- Respect;
- Rights; and
- Quality.

Service aims

Our service aims are to:

- Achieve comprehensive, joint and inclusive assessments;
- Identify and challenge disadvantage and discrimination;
- Continuously improve the quality, efficiency and effectiveness of the services we provide; and
- Make the best use of our resources by providing flexible, responsive and safe services.

National and Local Priorities for client groups

Older People

The proposals in the plan reflect the vision of service redesign and development to meet the needs of older people, articulated in the Dundee Local Partnership Agreement. The key outcomes sought by the vision are that older people should be supported to stay in their own homes.

Dundee City Council and NHS Tayside have adopted a balanced approach in their agreed policies for health and social care services for older people in Dundee, recognising that people have different needs and that services have to be provided within available resources. On this basis the main policy and priorities agreed are:

- Through the partnership, to achieve a fair and realistic balance in the provision of care, addressing the need to redesign and develop services which will help people to stay as healthy,

safe and independent as possible, and to provide sensitive and individually tailored support to enable people to remain in, or to return to, their own homes.

- For older people who are unable to remain in their own homes, to provide a range of alternative provision which will be of a high standard, and which will address the needs of people on an individual basis.
- At a broader level the partners will work to forge closer links with the wider community planning and health improvement agendas to provide a firm basis for the development of the Community Health Partnership.

People with a Learning Disability

'The Same as You?' Report provided a strategic agenda for change in Scotland to move services away from specialist, segregated provision for people regarded as impaired, towards supporting ordinary living, social inclusion and citizenship for a marginalized sector of society.

The Dundee Partnership in Practice agreement is committed to forward planning of financial resources to produce services that will deliver economies of scale in terms of staff costs, and person centred solutions. The main objectives are to:

- Continue to change day opportunities from congregate to dispersed models;
- Continue to develop accommodation with support, for people with learning disabilities to enable them to move away from congregate living settings;
- Resettle the remaining Dundee residents from Strathmartine Hospital and reconfigure in-patient services;
- Increase employment opportunities for people with learning disabilities;
- Implement day opportunities for people with challenging behaviours including those with Autistic Spectrum Disorders; and
- Implement accommodation with support provision for people with complex needs including Autistic Spectrum Disorders.

People with a Physical Disability

The integration of health and social care provision is a very high priority of the Scottish Executive. The 'Joint Future' Report has taken forward this agenda. It has required joint planning on a number of areas. This has particular impact on occupational therapy services with regard to hospital discharge and the provision of equipment. The local agreements established as a consequence will produce improvements in support for disabled people particularly with regard to the provision of equipment and adaptations. Dundee City Council and NHS Tayside have reached agreement in principle to review equipment provision and rehabilitation services.

Key objectives in working with and providing services to people with physical disabilities are to:

- Involve people with disabilities and their carers in the planning process and develop services on the basis of need in partnership with them;
- Plan to take account of the nature of specific disability issues whilst addressing common needs that affect a wide range of people;

- Promote a flexible, co-ordinated and comprehensive approach to meet the needs of service users and carers;
- Enable people with disabilities to live as independently as possible within the community;
- Encourage direct service user involvement in the delivery of training initiatives; and
- Improve choice and access to services.

People with an Acquired Brain Injury

ABI is every bit as much a chronic disease and a societal challenge as a clinical emergency. The brain injury agenda needs to engage issues such as equity of access and social inclusion that have a resonance far beyond the responsibilities of the NHS and Dundee City Council. The main aims for the service are to:

- Establish a Managed Clinical Network for Acquired Brain Injury;
- Develop the Transitional Living Unit and protocols for its use as an assessment facility, for the determination of equipment needs for individuals with Acquired Brain Injury; and
- Develop systems and protocols within the Transitional Living Unit for applying remote rehabilitation techniques to patients with ABI.

People with Mental Health Problems

The 'National Framework for Mental Health Services in Scotland' gives the policy context for developing mental health services locally. In response to this, NHS Tayside reported on 'The Future of Adult Mental Health Services' in May 2004 and is now taking forward the modernising and redesign of General Adult Psychiatry Services. This will focus on local provision of community mental health teams and developing the community infrastructure to support people in their own homes, including the resettlement of people from long stay hospital care. This development is being taken forward in Dundee through the Mental Health Strategic Planning Group.

In preparation for implementation of the Mental Health (Care & Treatment) Act 2003, a Tayside Joint Implementation Group produced an implementation plan on the key strategic and statutory areas for development. This is currently being implemented. The local priorities mirror the national priorities and are reflected in the workplan of the Joint Mental Health Strategic Planning Group. There is also a need to ensure strategic aims dovetail with local community planning, social inclusion and promoting public health agendas. The main objectives are to:

- Establish a pattern of service provision within the agreed financial framework;
- Provide services in a range of community settings at home, in primary care, in day bases and in community centres;
- Prevent inappropriate admission to hospital by providing alternative service responses; and
- Promote early hospital discharge and maintain individuals within community settings in order to prevent unnecessary re-admission to hospital.

People with Substance Misuse Problems

The national priorities set by the Scottish Executive are outlined under four pillars: Culture Change and Communities; Prevention, Education & Young People; Provision of Support & Treatment Services; Protection, Controls & Availability. The key objectives are to:

- Reduce binge drinking;
- Reduce hazardous or at risk drinking by children and young people because of the particular health and social risks;
- Reduce the proportion of young people reporting use of illegal drugs;
- Reduce harm to children affected by substance misusing parents / carers through improved multi-agency support to parents and children;
- Provide equitable, accessible and inclusive services to address the needs of those who experience problems with alcohol;
- Reduce waiting times for drug treatment and rehabilitation services;
- Increase the number of drug misusers in contact with treatment and care services and successfully completing treatment;
- Increase the number of people recovering from drug and alcohol problems entering training, education and employment;
- Reduce the number of drug related deaths; and
- Reduce the proportion of under 25's offered illegal drugs.

People with Blood Borne Infections

This section recognises the increasing trend of those infected or affected with Blood Borne Virus (BBV) including Human Immunodeficiency Virus (HIV) and Hepatitis C (HCV) and includes partners, carers, relatives, as well as those with concerns that they may be HIV positive. Planning for services to children and young people affected by HIV is covered within the Dundee City Council Integrated Children's Services Plan 2005-2008. Strategic planning recognises the need to include HCV in response to the increasing numbers of people affected and the growing need for services. This plan takes account of the BBV strategy for Tayside, which is currently under development.

National policy objectives outlined in the Proposed Action Plan in Scotland - Hepatitis Care are to:

- Reduce the transmission of HVC among current injecting drug users (IDUS);
- Diagnose infected persons, particularly those who are most in need of therapy; and
- Provide the optimal care and support for HVC diagnosed persons who are able to benefit.

The primary strategic aims are to:

- Develop responsive services for people with HIV and in addition to recognise the shifting need for increased service planning for people with HCV; and

- To ensure individuals benefit from services that support them in their own homes and avoid unnecessary admission to hospital or other forms of institutional care e.g. residential or nursing home.

Homeless People

The Scottish Executive's vision is that everyone should have access to good quality, warm and affordable housing. By 2012, all people who are unintentionally homeless will be entitled to a permanent home.

Local service priorities include:

- Plans to improve access to health care services for homeless people by 2007;
- Explore ways in which problems related to mental illness and substance misuse can be addressed;
- Raise awareness of the health needs of homeless people through training and education;
- Provide ongoing support to minimise risks of substance misusing behaviour for homeless people; and
- Develop strategies and interventions to support homeless people with mental health problems.

Specific targets for the coming year:

- If homeless health outreach team evaluation is positive, seek sustainable funding;
- Assessment of long term hostel users health and social care needs in two local hostels and make recommendations, based on needs identified;
- Highlight gaps in service in health and social care provision and seek solutions;
- Development of referral pathways between homeless services and health services, to prevent homeless families becoming lost to health services;
- Start to implement discharge standards; and
- Provide basic awareness raising training on homelessness.

Carers

Supporting carers is a key priority for the Scottish Executive under its Strategy for Carers in Scotland, first published in November 1999, and more recently reinforced with the introduction of new provisions under the Community Care and Health (Scotland) Act 2002. These provisions, which legislate for carers' assessments and carers' information strategies, fulfill a commitment by the Executive to introduce new legislation to ensure that the priorities of Scottish carers are addressed and to allow carers' needs to be met more directly.

Locally we are committed to the national strategy and to the delivery of improved outcomes for carers and those they care for in Dundee. We work very closely with the Princess Royal Trust Dundee Carers Centre and other voluntary agencies in the city with an interest in carers' issues.

Priorities for the life of the plan are:

- The involvement of carers in the strategic planning of services;

- To increase awareness of carers' issues and the impact of caring;
- To improve support to 'hidden carers' who traditionally have been out-with mainstream carer activity;
- To improve carer consultation; and
- The improved availability of information to carers.