

LEARNING DISABILITY DAY SERVICES

1.0 EXECUTIVE SUMMARY

- 1.1 The purpose of the report is to provide a summary and update on the improvement and development of the Learning Disability Day Services.
- 1.2 The Service Manager for Registered Services had reviewed the quality of the Council operated services and confirmed that the appropriate improvement plans are in place to improve the grades assessed by the Care Inspectorate.
- 1.3 The Helensburgh service, commissioned from Enable, will also be subject to review in preparation for the service being re-tendered in advance of April 2015.
- 1.2 It is the intention of the Adult Care service to provide or commission modern and person centred Day Services based on a framework of providing or developing services that are socially inclusive and provide positive personal outcomes and meaningful activities over the week inclusive of evenings and weekends.
- 1.3. In achieving the aims noted above, it is essential that there is greater consistency across the services in ensuring that they all meet the standards and demands expected by service users and the Care Inspectorate.

2.0 RECOMMENDATIONS

It is recommended that Community Services Committee:

- 2.1 note it is the intention of the Adult Care service to provide or commission modern and person centred Day Services based on a framework of providing or developing services that are socially inclusive and provide positive personal outcomes and meaningful activities over the week inclusive of evenings and weekends.
- 2.2 note the progress in relation to Learning Disability Day Service Inspection gradings.

LEARNING DISABILITY DAY SERVICES

3.0 INTRODUCTION

- 3.1 The last major policy driver in relation to Learning Disability and which had implications for Day Services was the “Same as You” (2000). The Keys to Life and Self-directed Support legislation are the two major pieces of Legislation which are likely to affect and impact the Learning Disability population at the present time.
- 3.2 The Service Manager – Resources has worked alongside the Learning Disability Day Services ensuring that they were not only meeting the needs of their client group but that they were planning and implementing changes and modernising their services. The work ensured they were well prepared for Care Inspectorate visits, are able to meet the challenges of Self Directed Support and develop services which continued to be viable and offer flexible and dynamic services beyond the traditional Day Service model. This flexibility is deliverable given the recent changes to staff terms and conditions which allows for aligning staff to the needs and aspirations of service users.

4.0 RECOMMENDATIONS

It is recommended that Community Services Committee:

- 4.1 note it is the intention of the Adult Care service to provide or commission modern and person centred Day Services based on a framework of providing or developing services that are socially inclusive and provide positive personal outcomes and meaningful activities over the week inclusive of evenings and weekends.
- 4.2 note the progress in relation to Learning Disability Day Service Inspection gradings.

5.0 DETAIL

- 5.1 **Phoenix (Bute) and ASIST (Cowal)**

The services were both inspected by the Care Inspectorate in March 2014 and May 2014 respectively. These two inspections have seen a dramatic turnaround following negative and poor inspections.

Day Services	Care Inspectorate Grades			
	Care & Support	Staffing	Environment	Management & Leadership
Assist	4	4	4	4

- 5.2 ASIST was graded as all 4's under the 4 themes inspected. This should be viewed in an extremely positive and acceptable standard taking the view that the previous inspections undertaken concluded that that the service was in receipt of grading's of unsatisfactory and raised significant concerns regarding the management and leadership of the service.

Day Services	Care Inspectorate Grades			
	Care & Support	Staffing	Environment	Management & Leadership
Phoenix	4	3	3	4

- 5.3 Phoenix was inspected in March 2014 only 6 weeks after the current manager came into post and this inspection has again seen significant improvement in the grading being awarded. The Inspection in March 2014 resulted in grades of two 3's and two 4's being awarded with one requirement and six recommendations. This has to be viewed as positive in light of the previous inspection, January 2013, which resulted in grades of 2 across all inspection themes and ten requirements.
- 5.4 The appointment of a new manager for the service has had a very positive impact which has been testified by the grading's now being awarded. Given the significant improvement, the Care Inspectorate has allowed the dual management registration for both Assist and Phoenix under the leadership of a single manager.
- 5.5 In conclusion, it is evident that both services are moving in the right direction and the staff teams in both services are working to achieve positive outcomes for their service users.

5.6 **Lorn Day Service (Oban)**

Day Services	Care Inspectorate Grades			
	Care & Support	Staffing	Environment	Management & Leadership
Lorn	3	4	4	3

The service was inspected in January 2014 and achieved grades of an acceptable standard. The service was graded on the themes inspected as achieved two 3's and two 4's with several recommendations and requirements. Historically this level of grades has been achieved over recent years. It should be noted that some grades on themes within the quality indicators inspected have been 5's but the overall quality indicator

grades results in 4's being awarded. The expectation is that the updated Improvement Plan will result in improved grading at the next inspection.

- 5.7 In discussion with the LD Social Work Team they value the service and the resources which Lorn Centre is able to offer the service users within the Oban area. Whilst Lorn is well established and well thought of there remains some reservation that the service could offer greater flexibility and be more focussed on alternative ways of providing the service that are focussed on person centred outcomes rather than general service outputs. This will be a key feature of their improvement plan going forward.

5.8 **Woodland Day Centre (Campbeltown)**

Day Services	Care Inspectorate Grades			
	Care & Support	Staffing	Environment	Management & Leadership
Woodlands	Still to be Inspected 5	5	5	5

Woodlands has not received an Inspection since August 2012. The grades achieved by Woodlands have year in year been incrementally improving with the inspection achieved during the course of the last inspection being five's across all themed areas of Inspection . The service has a stable and longstanding group of service users and staff team. The staff team are confident with regards the engagement process with service users and families and carers. The Service is well led and managed. However, while the service has received positive grades, it also could benefit from becoming more community inclusive and more dynamic. This is an area which the Unit Manager and the staff are aware of and will be the focus of the Unit's Improvement Plan.

5.9 **Lochgilphead Day Service**

Day Services	Care Inspectorate Grades			
	Care & Support	Staffing	Environment	Management & Leadership
Lochgilphead	6	5	4	4

The service has recently had an inspection, 28th and 29th August 2014, and was downgraded. The service previously had received two 6's (excellent) in their areas of themed inspection. The grades for Lochgilphead have however been more than satisfactory achieving one 6 (excellent), one 5 (very good) and two 4's (good). The rationale for some of the 4's was for issues relating to building environment.

- 5.10 At the last meeting between the Lochgilphead Social Work Team and the Day Service Management Team it was considered whether the Lochgilphead service could be dual registered, also providing Support at Home. This is due to gaps in the provision of services in this area. Given the limited numbers within such a small service and the perceived limited availability of appropriate service providers in this particular area, this is an option which would benefit from further scoping and exploration.

5.11 Overall, the Lochgilphead service at the present time is managing well and has the potential to improve further without significant input from external management.

5.12 **Greenwood (Campbeltown)**

Day Services	Care Inspectorate Grades			
	Care & Support	Staffing	Environment	Management & Leadership
Greenwood	2	2	2	2

The service received an inspection from 26th through 28th May 2014 .The service had been developed as a Support at Home Service and in its first and previous inspection had been given a relatively positive inspection. It had previously been awarded 4's across all areas and had not been offered any requirements or recommendations following this inspection. In many ways following this inspection there has not been continuing progress and development of the service.

5.13 The inspection in May, following the same themes resulted in 2's across all themed areas and a significant number of requirements, recommendations and areas of improvement. An Action Plan was developed and immediately tackled and resolved the significant and most concerning areas of practice and policy and procedures.

5.14 Work is ongoing within the Greenwood service in response to the poor inspection report. A decision in relation to the ongoing registration will have to be given careful deliberation. While the service was relatively recently de-registered, it is clear that the model of Support at Home has not been implemented effectively and given the relatively high dependency levels of the tenants it may be more appropriately registered as a care home and provide a residential care facility within Argyll & Bute which could provide an alternative to out of authority placements. Ongoing work will continue to address the practice and procedural issues and further consideration will be given in the near future with regards the service direction and registration.

5.15 A more comprehensive report on these considerations will be available in due course with regards to the service's future development and utilisation.

5.17 In achieving the aims noted in 3.1, it is essential that there is greater consistency across the services in ensuring that they all meet the standards and demands expected of our community and the Care Inspectorate.

5.18 As a provider we should always be seeking to attain 5s or 6s across all quality themes, following Care Inspectorate inspections. Anything less than 4s should be seen as unacceptable to us as a provider and purchaser of care home provision.

5.19 There are a number of areas where we can develop a more systematic approach to grading improvement and retention. These are:-

- Ensuring that Learning Disability Services update their self-assessment on a 2 monthly basis. Currently Day Services as with other registered services, tend to revisit self-assessment only on the prompt from the Care Inspectorate that an inspection is forthcoming and our practice is reactive rather than proactive . The self-assessment tool should be seen as one of continuous improvement. All Registered Managers will now be required to report the detail of their self –assessment updates to their regular meetings with the Service Manager (Resources). This will importantly allow initiative sharing across units with the potential to link neighbouring Managers together to share approach and content.
- All recommendations and requirements emanating from Care Inspections will now be captured on a separate data base by the Service Manager (Resources), who will require evidence that improvements have been made before non-conformities can be signed off. This is consistent with the Quality Assurance thrust of Adult Services and is in line with the likely evidence required from any future Care Inspectorate audit of Adult Care Services.
- The adoption of a growing number of Standard Operating Procedures (SOPs) across adult care registered services covering key areas such as we have already developed on respite admission, the content and management of service user files and nutritional policy. These documents will be controlled, in terms of issue and update through SharePoint, following the adoption of a common format.
- The adoption of the now operational Monthly Returns from Registered Managers, which cover key performance areas of attendance at work, budget performance, staffing, service user reviews, service plans, care inspectorate grades, training and health and safety matters. This provides a useful insight over time in relation to a unit's performance and allows cross consideration of issues for instance, the relationship of absence to overspends in staffing budgets.
- Consideration of the benefits of adopting a peer review programme especially around Senior Care Workers to allow the experience of short term placements out with their own unit to evaluate different approaches to effective management.
- The sharing of “excellence “ in bringing to the attention of all registered Managers the unique features which have resulted in our units receiving 6s in Care Inspectorate grading's across quality themes. This will be organised through Mangers regular meetings and will look to the adoption of recognised good practise across all units

5.20 Future and Ongoing Work

Meetings have been established and are currently ongoing between the Day Service Management Teams and their aligned Social Work Teams. There is a need to improve relationships and the interface between the teams and also to develop an improved understanding of roles and remits. These ongoing meetings are a pre-requisite to generating increased understanding and should seek to offer direction and establish future service provision and flexibility.

- 5.21 Strategic Finance is currently working to establish new rates across all Internal Day Services. The current applicable rates across all Council operated services would make them uncompetitive when Self Directed Support is fully implemented. The Council operated services need to be more financially competitive to flourish and grow in line with the introduction of SDS. The Council operated services are well established and embedded in their communities and going forward these services need to provide a high quality, personalised and financially viable Day Service in their respective areas.
- 5.22 The Service is looking to develop and implement a programme of Stakeholders Days throughout all the Council Day Services. The development of co-production across all services would be beneficial in establishing and modernising the services. The recent questionnaire and Audit provided internally by the Council only provided a measure of validation that the services were effective, person-centred or were in need of modernising. A series of Stakeholders Days involving all partners and agencies would provide more detailed information and be an opportunity to take steps to modernise and develop these services. These carefully planned events would not require any external input or intervention and they would be coordinated and planned by the Day Services Management Team. Logically these Stakeholder days would be progressed once the previous two items above have been progressed
- 5.23 The management teams in the Services will also benefit from additional or supplementary training in areas such as Leadership and Management. The Service Manager is committed to providing support, guidance and advice around taking the service forward and having a direct input into staff meetings. This will be progressed via the Social Work Training Board as required.
- 5.24 The Service Manager for Registered Services will be involved in working in partnership with the Commissioning Team to evaluate the current engagement with the externally sourced Day Service in Helensburgh & Lomond, currently provided by Enable Scotland. This will involve evaluating their delivery and achievements and to be involved in the tendering process during 2015 once the current contract expires.
- 5.25 It is intended that the model of services to be re-commissioned externally next year will mirror the model of in house services and that Care Managers and the Service users will effectively commission

services from the in-house service in the same manner that they would via the independent sector.

6.0 CONCLUSION

- 6.1 All the services continue to benefit from working closer together. The standardisation process has progressed beyond the standardisation of Care Plans and Systems which are now in place with each service now working with person centred plans and an outcome based approach
- 6.2 The services will benefit from improved structures in place for meeting with Area Team Social Work colleagues in order to focus on shared goals and aspirations. The Day Service will develop a better understanding of the concept of the Care Manager and Service Users being the customers who commission person centred and innovative outcomes rather than the Day Services providing general outputs of service delivery

7.0 IMPLICATIONS

- 7.1 Policy: In line with the national Same as You Policy
- 7.2 Financial: None
- 7.3 Legal: None
- 7.4 HR: None
- 7.5 Equalities: None
- 7.6 Risk: Reputation to Council
- 7.7 Customer Service: Improvement of services provided

Cleland Sneddon
Executive Director of Community Services

Policy Lead: Councillor Douglas Philand

24 November 2014

For further information contact: Gordon Murray
Learning Disability Manager
Tel: 01369 708627