#### **Performance Monitoring Appendix C.**

- 1) The Partnership should increase the pace of its development of sustainable joint approaches that help to support improvement to:
  - deliver the Scottish Government's delayed discharge target of no delays over two-week duration;
  - ensure fewer older people experience delayed discharge from hospital.
- 2) The Partnership should work with carers and those services that support them to ensure that:
  - · carers are routinely offered a carer's assessment;
  - carers assessments are completed for those carers who request them;
  - offering and completing carers assessments is clearly documented;
  - revisions to future formats for carers' assessments take into account new carers legislation.

#### 3) The Partnership should ensure that:

- pathways for accessing services are clear;
- eligibility criteria are applied consistently across services;
- waiting lists are monitored to manage the allocation of pressurised resources equitably.

## 4) The Aberdeen City Adult Protection Committee should support improvement in adult support and protection by:

- including timescales for all partners for the completion of all stages within the adult protection processes;
- providing oversight of progress against all action plans completed from audits;
- providing oversight and quality assurance of any action plan resulting from the commissioned review of adult support and protection.
- 5) The Partnership should take action to ensure that frontline staff are supported to complete initial inquiries, risk assessments and risk managements plans timeously. This action should include:
  - working alongside Police Scotland to develop a joined-up approach for completing inquiries;

- streamlining its risk assessment frameworks
- ensuring that risk assessments and risk management plans are completed and actioned.
- 6) As part of the continued development of the new integrated arrangements, partners should develop their strategic approach to joint training and development. This should aim to:
  - offer opportunities beyond mandatory training;
  - include the third sector to enhance a shared knowledge of roles and responsibilities,
  - achieve a cohesive approach to care delivery for older people.
- 7) As part of the continued development of the new integrated arrangements, partners should put a formal plan in place that sets out the future allocation of the integrated care fund and set out clear criteria for how these projects would be evaluated.
- 8) As part of the continued development of the new integrated arrangements partners should set a clear timetable to agree and implement the structure for locality management teams.

### DRAFT - INSPECTION ACTION PLAN

# Draft v3 – 26 October 2016

	Recommendation	Areas for Improvement	Update	Lead	Timescale	Reference
1	The partnership should	Limitations to the use of		Delayed Discharge		
	increase the pace of its	legislation relative to the		Group		
	development of	need to gain the consent of				
	sustainable joint	all relevant parties.				
	approaches that help to	Time taken to secure		Sally Wilkins		
	support improvement to:	welfare guardianship for				
	Deliver the SG	individuals.				
	delayed discharge	Increasing the availability of		Sally Wilkins/Tom		
	target of no delays	care at home.		Cowan		
	over two week	Consideration of how		Judith Proctor/Tom		
	duration and	reablement will be delivered		Cowan		
	<ul> <li>Ensure fewer older</li> </ul>	into the future.				
	people experience			Transformational		
	delayed discharge			Programme		
	from hospital	Future resourcing for fall		Falls Steering Group		
		exercise group.				
		Lack of availability of care		Kenny O'Brien/ Jason		
		home places.		Nicol		
				(Bed Base Review)		
		Equitable support for carers.		Sandy Reid (Chairs the		
				Carers Strategy Group)		
		Improve the use and quality		Lynn Morrison/		
		of anticipatory care plans.		Delayed Discharge		
				Group		
2	The partnership should	Slow progress in delivering		Kate Mackay		
	work with carers and	self-directed support.				
	those services that	Easier access to respite		Sally Wilkins		
	support them to ensure	care and day services to				
	that:	support carers and the				
		person cared for.				

	Recommendation	Areas for Improvement	Update	Lead	Timescale	Reference
•	Carers are routinely offered a carer's assessment Carers' assessment are completed for those carers who	Offering and completing a carer's assessment consistent across all teams.  Providing timely support.		Kate Mackay – Performance Lyndsey Flockhart – Operational Kate Mackay – Performance		
•	request them Offering and			Lyndsey Flockhart – Operational		
	completing carers' assessments is clearly documented, and revisions to future formats for carers' assessments take into account new carers' legislation.	Review of documentation should take account of the new Carers' Bill.  Long waits for Multicompartment Compliance		Sandy Reid (Chairs the Carers Strategy Group) David Pfleger		
		Aids (national issue)  Difficulties in increasing care package – adding to pressure on carers.		Hospital at Home Group Delayed Discharge Group Telecare		
		Lack of staffing capacity, restricting the ability of older people to choose the time or provider for their care package.		Self Directed Support (SDS)		
		NHS Staff knowledge/ training about self-directed support	Develop an awareness sheet for NHSG staff about the process of self-directed support.	Self Directed Support (SDS)		
		Low staff morale in some areas.		Joint Partnership Staff Forum (Staff Partnership Action Plan)		

	Recommendation	Areas for Improvement	Update	Lead	Timescale	Reference
3	The partnership should	Centralised referral		Hospital at Home		
	ensure that:	processed (health and		Group		
	<ul> <li>Pathways for</li> </ul>	social work) – services not				
	accessing services	always provided in an				
	are clear	appropriate time frame.				
	Eligibility criteria are	A range of service specific		Lead TBC – clarity		
	applied consistently	criteria led to multiple		required regarding		
	across services;	pathways into services (e.g.		what is required/		
	and	'some older people who had		pathways etc.		
	<ul> <li>Waiting lists are</li> </ul>	places at more than one day				
	monitored to	service, while others had				
	manage the	none and were on a waiting				
	allocation of	list')				
	pressurised	Waiting list for services		Lead TBC – clarity		
	resources equitably.	('nearly a quarter of older		required regarding		
		people'). Some delays		what is required/		
		exceeded 6 months.		pathways etc.		
		Slow implementation of self-		Transformation		
		directed support		Programme Board /Self		
				Directed Support		
		Delays due to:				
		<ul> <li>Increasing level of</li> </ul>				
		demand		Tom Cowan		
		<ul> <li>Lack of care at home</li> </ul>				
		staff across the		Delayed Discharge		
		sectors		Group		
		<ul> <li>Variable range of</li> </ul>				
		services available to				
		older people				
		depending on their				
		location and lack of				
		equity of allocation				
		of scarce resources				

Recommendation	Areas for Improvement	Update	Lead	Timescale	Reference
	Unreasonable delay for 7% of older people in being assessed for key services or support		Delayed Discharge Group		
	23% of older people on a waiting list for services with delays of over 6 months for some: care at home; care home; very sheltered housing and day care.		Delayed Discharge Group		
	Collection of data on unmet need to monitor number of older people waiting for services and manage waiting lists and waiting times and inform future commissioning or services.		Delayed Discharge Group Kevin Toshney – Strategy Tom Cowan - Operational		
4 The Partnership should work with the Aberdeen City adult protection committee to support	Initial inquiries and full investigation not undertaken in an appropriate time frame in some cases.		Claire Duncan		
improvement in adult support and protection by:  • Including timescales	Delays potentially left older people at significant risk of harm over a protracted period.				
for all partners for the completion of all stages within adult protection processes  Providing oversight of progress of	Delays included police completing their inquiries; health staff completing capacity in adult teams to carry out adult support and protection initial inquiries and investigations				
action plans	timeously; lack of discussion and joint decision making in				

	Recommendation	Areas for Improvement	Update	Lead	Timescale	Reference
	completed from audits; and Providing oversight and quality assurance of any action plan resulting from the commissioned review of adult support and protection.	some cases creating significant delays for some individuals.  Completing more detailed assessment than required at initial inquiry stage.  Lack of clear timescales  Lack of clarity as to when investigations needed to be progressed to case conference.  Improve the use and content of chronologies.				
5	The partnership should take action to ensure that frontline staff are supported to complete initial inquires, risk assessment and risk management plans timeously.  This action should include:  Working alongside Police Scotland to develop a joined up approach for completing inquiries.  Streamlining its risk assessment frameworks; and  Ensuring that risk	Review and review the effectiveness of the partnership's governance and oversight systems for adult support and protection.		Adult Support and Protection Short Life Working Group  Supported by:  Adult Protection Committee  Clinical and Care Governance Committee  Executive Team		

	Recommendation	Areas for Improvement	Update	Lead	Timescale	Reference
	assessments and					
	risk management					
	plans are completed					
	and actioned.					
6	As part of the continued development of the new integrated arrangements, partners should develop their strategic approach to joint training and development. This should aim to:  • Offer opportunities beyond mandatory training • Include third sector to enhance a shared knowledge of roles and responsibilities; and • Achieve a cohesive approach to care delivery for older people.	Staff training delivered, in the main, separately by each organisation.  Gaps in specialist dementia training for some staff.  Some slippage in adult support and protection refresher training.  Challenges in attending training because of workload pressures and shift patterns for some staff.		Alex Stephen/Organisational Development		
7	As part of the continued development of the new integrated arrangements, partners should put a formal plan in place that sets out the future allocation of the integrated care fund and			Kevin Toshney  Transformation Programme Board & Worksteams		

	Recommendation	Areas for Improvement	Update	Lead	Timescale	Reference
	set out clear criteria for how these projects					
8	would be evaluated.  8 As part of the continued development of the new integrated arrangements partners should set a clear timetable to agree and	Gaps in available care provision and the constant struggle to secure services for older people and their carers could be demoralising for staff.		Tom Cowan Kevin Toshney		
	implement the structure for the locality management teams.	Do more to support a collective responsibility for improving the quality of adult support and protection across all agencies involved in public protection.		Tom Cowan Kevin Toshney		
		The partnership needs a greater impetus to create a more settled structure.		Judith Proctor Tom Cowan		