

### **APPENDIX 2**

Priority: Living Well

Sub-Priority: Integrated Community Social and Health Services

Impact: Helping more people to live independently and well at home

#### What we said we would do in 2014/15: -

## 1. Continue the integration of community based health and social care teams within three localities.

Progress Status	Progress RAG	Α	Outcome RAG	G	
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The Centre Manager at the Quay Health Centre has confirmed that an agreement has now been reached at WG that Social Services can be co-located alongside health staff within the centre.

Early indications of progress were identified in this quarter relating to the South Locality; progress will be reported in full in Q2.

Subject to partners being able to contribute to plans to progress, the milestones cited remain achievable from a Social Services perspective.

### Achievements will be measured through

- Development of our second co-located team in 2014/15
- Plans developed for our third and final co-located team in 2015/16

- Development of our second co-located team by March 2015
- Plans developed by March 2015 for our third and final co-located team in 2015/16



# Risk to be managed – Ensuring effective joint working with BCUHB to achieve common goals.

(a	s if tl are r	no res in to I the	Current Actions / Arrangements in place to control the risk		et Sc it is	ore now)	Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	ac cc sa arr	Target Score (when all actions are completed / satisfactory arrangements in place)	
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)
М	М	Α	Discussions take place at Health Wellbeing and Independence Board and Strategic Locality Group meetings. Issues escalated if required to the Strategic Partnership Group	M	M	A	Escalation process in place including Strategic Partnership Group, Strategic Locality Group and Locality Groups.	Chief Officer  – Social Services	<b>←→</b>	L	L	G



Progress Status

Progress RAG

A

Outcome RAG

G

Flintshire County Council remains committed to supporting this work. BCUHB are considering revised business models for roll out but no further details were available during this quarter.

### Achievements will be measured through

- Agree and implement the business case for ECS in the North East & South Localities
- Improved experiences of patients

- Agree the business case for ECS in the North East Locality by November 2014
- Implement the business case for ECS in the North East Locality by March 2015
- Agree the business case for ECS in the South Locality by November 2014
- Implement the business case for ECS in the South Locality by March 2015
- Collection of a further 3 patient stories by March 2015



# Risk to be managed – Ensuring that the new model does not result in unexpected increased costs to the Council

(a me	s if tl are r	no res in to I the	Current Actions / Arrangements in place to control the risk	Net Score (as it is now)					Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	ac co sa arra	when tions mple tisfac	are eted / etory ments
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score		
(L)	(I)	(LxI)	Continued dialogue at senior manager level. Awaiting	(L)	(I)	(LxI)	Upon receiving details of the proposed service model,			(L)	(I)	(LxI)		
М	н	R	decisions from BCUHB in order to assess any impact.	М	M	Α	consideration will be given to the impact and if appropriate senior level discussions will take place with BCUHB managers re alternative options	Chief Officer  – Social Services	<b>←→</b>	M	M	Α		



# 3. Ensure that effective services to support carers are in place as part of the integrated social and health services.

Progress Status Progress RAG G Outcome RAG G

Training on Carers Needs Assessments by NEWCIS has been rolled out following the successful pilot last year. This has now been supplemented by training on the identification and assessment of young carers, delivered by Barnardos. We continue to help parents and carers of children with a disability to access carers services through Bridging the Gap funding.

### Achievements will be measured through

Plans to support carers are agreed and implemented

Achievement Measure	Lead Officer	2013/14 Baseline Data	2014/15 Target	2016/17 Aspirational Target	Current Outturn	Performance RAG	Outcome Performance Predictive RAG
SCA/018c - The percentage of identified carers of adult service users who were assessed or reassessed in their own right during the year who were provided with a service.	Chief Officer – Social Services	85%	75% - 80%	90%	85%	G	G

<sup>\*</sup>Latest data from March 2014



4. Ensure Single Inte	egrated Plan (SIP	) priorities are prod	gressed through localities.

Progress Status

Progress RAG G Outcome RAG G

Locality Leadership Team plans contain a number of commitments that are relevant to commitments made within the SIP. There are opportunities to develop this further through the year. Governance arrangements for the LLT's are in place (albeit with an ability to further strengthen its role) with the Strategic Locality Group.

### Achievements will be measured through

Improved communication and governance arrangements to ensure that localities deliver the priorities of the SIP.

- Inclusion of relevant SIP priorities in the Locality Leadership Teams plans by March 2015
- Achievement of relevant outcomes in Locality Leadership Teams plans by March 2015



## 5. Effective and efficient use of Intermediate Care Funds to support individuals to remain in their own homes.

Progress Status Progress RAG G Outcome RAG G

Action areas have been agreed and project briefs developed for a range of areas.

Regional project lead post in place.

Local project management mechanisms within existing resources have been agreed and implemented.

Outcome measures have been proposed to WG at programme level. Decision awaited. Local performance measures being agreed with project leads.

Step down beds purchased and being used within 3 local authority care homes.

Assessment bed (for dementia) has been commissioned from a nursing home in Caergwrle.

Funding has been allocated to the voluntary sector to support people living at home.

Significant level of activity has commenced and continues to implement the action plan.

### Achievements will be measured through

- Agree and implement action plan for use of Intermediate Care Funds
- Independent evaluation of outcomes achieved

- Agree an action plan for use of Intermediate Care Funds by June 2014 Achieved.
- Implement the action plan for use of Intermediate Care Funds by March 2015
- Determine process for evaluation of outcomes by March 2015



Risk to be managed – Spending the Intermediate Care Fund on services that we can continue with once the funding stream has finished.

me	s if t	no res in to I the	Current Actions / Arrangements in place to control the risk	Net Score (as it is now)					Future Actions and / or Arrangement to control the risk	Manager Responsible	Risk Trend	ac co sa arra	Target Score (when all actions are completed / satisfactory arrangements in place)	
Likelihood	Impact	Gross Score		Likelihood	Impact	Gross Score				Likelihood	Impact	Gross Score		
(L)	(I)	(LxI)		(L)	(I)	(LxI)				(L)	(I)	(LxI)		
M	н	R	Clear exit strategies are in place for ICF projects, including time limited posts.	L	L	G	N/A	Chief Officer  – Social Services	N/A	N/ A	N/ A	N/A		