

Older People's Local Implementation Team – Annual Review 2010-11

Introduction – What is the Older People's Local Implementation Team?

The *Older People's Local Implementation Team* was developed as a direct response to *The National Service Framework (NSF) for Older People (2001)*. This was one of a number of long term strategies designed to improve areas of care and addressed conditions which are particularly significant for this age group: strokes, falls and mental health conditions such as dementia etc. The *NSF for Older People* particularly urged the need for integrated commissioning and delivery of older people's services, the use of a single assessment process across health and social services, provision of services in the home to prevent the need for admission to long-term residential care, and effective rehabilitation services to enable early discharge from hospital.

The National Director for Older People's Health has reviewed progress in a series of three reports *Better Health in old age (2004)*, *A new ambition for old age (2006)*, and *A recipe for care – not a single ingredient (2007)*. The second of these introduced the themes of dignity in care, joined up care and healthy ageing and the third identified ways to reconfigure older people's services, reducing the need for hospital care and increasing community based services. At the same time the Department of Health is running the campaign "*Dignity in Care*, which aims to create zero tolerance of abuse and disrespect of older people within the care system and ensure that all are treated with respect for their dignity, including during end of life care.

For nearly ten years the Older People's Local Implementation Team has been at the heart of changes related to these strategies and been integral to the development and implementation of local strategies to support the National agenda. Recently this has seen the completion of the Older People's commissioning strategy (2009), Local Dementia strategy (2010) and the Prevention and Early Intervention Strategy (2010). Alongside these documents has been a multi-agency team chaired by the Local Authority and vice chair the Primary Care Trust. In addition the chair of Halton Older People's Empowerment Network (OPEN), two other older people representatives and a carers representative also attend the meetings. The meeting has always had strong representation from the public with representation of both older people and carers always being an integral part of the group. This was initially implemented by the inclusion in 2003 of the Older People's Champion being invited onto the Older People's Local Implementation Team with a remit to look at Age Discrimination across Health and Social Care. This role became the Dignity Champion in 2009 and has remained as a valued member of the Board.

This report will outline some of the work that has been carried out by the Older People's Local Implementation Team during the last twelve months. It will also aim to illustrate the challenges that older people in Halton will face in the future and some of the steps and approaches that will be made to overcome these.

Who are the Members of Halton's Older Peoples Local Implementation Team?

| • Name of Member | • Job Role / Role on Older People's LIT | • Name of Member | • Job Role / Role on Older People's LIT |
|----------------------|--|------------------------|---|
| • Brian Miller | • Halton Links Member | • Kate Warbrick | • Divisional General Manager for Unscheduled Care |
| • Cllr Ellen Cargill | • Chair of Healthy Halton PPB | • Bill Rathbone | • Carer |
| • Doreen Shotton | • Dignity in Care Group, Halton Links & board member at Warrington & Halton Hospitals Foundation Trust | • Audrey Williamson | • Operational Director Prevention and Commissioning |
| • Greg Lamkin | • Chairperson of Halton OPEN | • Mark Holt | • Joint Commissioning Manager for Older People |
| • Jackie Johnson | • Divisional Manager of Intermediate Care at Halton Borough Council | • Phil Longworth | • Chief Executive – Age UK Mid Mersey |
| • Marie Mahmood | • Divisional Manager for Assessment for Halton Borough Council | • Pauline McGrath | • Head of Services for Older People at 5 boroughs partnership |
| • Janet Dunn | • Head of Partnership Commissioning for Halton & St Helens PCT / Deputy Chair of Older People's LIT | • Sue Wallace – Bonner | • Operational Director Enablement / Chair of Older People's LIT |

| | | | |
|--|---|--|--|
| <ul style="list-style-type: none"> • Tracy Ryan | <ul style="list-style-type: none"> • Dignity in Care Coordinator | <ul style="list-style-type: none"> • Lis Foster | <ul style="list-style-type: none"> • Services Manager British Red Cross |
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Background – Policy implications

There has been a significant and growing emphasis, in recent national strategy reports, on the need to change the way adult social care services are delivered in response to the demographic challenge of an ageing population, and on the need for a whole system response built around personalised services with increased emphasis on prevention, early intervention and enablement. This has very much been the ethos by which the Older People's Local Implementation Team has operated over the past ten years.

The change in the structure of the population presents a significant challenge to health and social care services. Life expectancy has increased considerably with a doubling of the number of older people since 1931. Between 2006 and 2036, the number of people over 85 in England will rise from 1.055 to 2.959 million, an increase of approximately 180%. Ill health and disability increase with age and this is reflected in the forecast that the number of people over 65 with a limiting long term illness in England will increase from 3.9 million in 2009 to 6.1 million in 2030 (DH, www.poppi.org.uk) which is likely to be accompanied by an increase in the demand for support across the continuum of need.

The three 'Wanless reports' (DH, 2002, and 2004, Kings Fund, 2006) showed that the cost to the public purse is greater when services are focussed on intensive interventions to manage complex health and social care needs, and that it is cost effective to shift the focus to prevention and the promotion of good health, supporting people in the community and reducing reliance on residential and acute hospital care.

'Our health, our care, our say,' outlined the reform needed in both social and health care services to respond to the demographic challenge and rising expectations in the population. 'High quality care for all', the Darzi report, building on the direction set in the White Paper highlighted the need to improve prevention, deliver services as locally as possible, and deliver patient choice and personalisation. Putting People First and Transforming Social Care have provided clear direction for the required transformation of social care and have made it clear that the new adult care system requires a collaborative approach with a broad range of partners to redesign local systems around the needs of citizens. The need to ensure fair access to quality services delivered in a dignified way have been an important goal of the Older People's Local Implementation Team and will continue to be in the coming years.

Successive Governments have continued to set out a programme of action to achieve a 'shift in attitude and behaviour across society so that old age is no longer perceived as a time of dependency and exclusion.' The "Big Society" and *'Building a society for all ages'* (DWP, 2009) are intended to support changes for individuals, families, for the workplace and economy and for public services and communities. The proposals include: in

- More support to assist people who want to keep working for longer, and to enable businesses to tap into the experience and commitment of older people
- Improved access to support for mid-life decisions on such matters as financial and health concerns through an interactive 'one-stop shop'
- Initiatives to help people as they get older take advantage of sporting, educational or social opportunities including 'all-in-one cards' to give access to a range of local activities
- A 'grandparents summit' to consider the changing structure of families, with more active grandparents having the opportunity to play a greater role in their families lives including caring for grandchildren, and to consider what extra help they may need
- A health prevention package focusing on preventative services for conditions that affect people in later life (such as footcare, falls prevention, continence care, depression and arthritis)
- Recognition for the key role that people fulfil in later life in providing the lifeblood of communities through volunteering, caring and playing an active role in community life, through support for intergenerational projects to breakdown barriers and challenge negative stereotypes.

As the National and Local landscape continues to change at a rapid pace the Older People's Local Implementation Team will continue to consider and act upon new policies, strategies and legislation that will impact on the lives of local older people.

Governance

Figure 1 illustrates the current Governance structure that the Older People's Local Implementation Team operates within. This structure demonstrates the need to agree plans through the Primary Care Trust, Local Authority and the Health Partnership Board. This is particularly important for the four representatives of older people or carers groups who understand how their

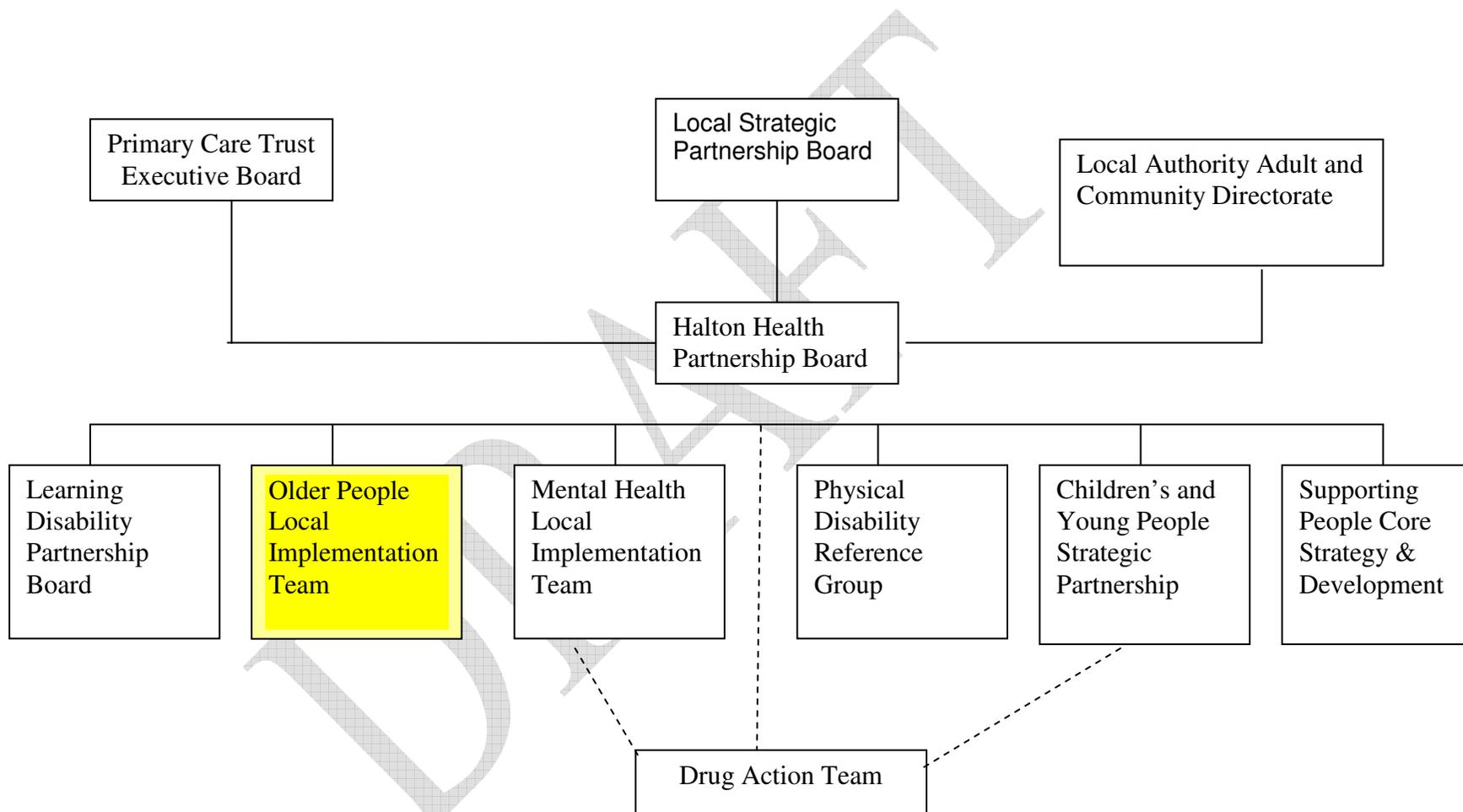
views are considered across the wider system.

“I feel listened to and comfortable that my views and ideas are considered by the Older People’s LIT”

Quote from service user representative

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Governance arrangements for the Older People's Local Implementation Team



Progress

- Older People's Commissioning Strategy (2009-2014)

The Older People's Commissioning Strategy outlines the following three key areas that the Older People's Local Implementation Team (Older People's LIT) oversees.

- **Older People's Mental Health –**

The Older People's Local Implementation Team was heavily involved in the completion of the local dementia strategy and the associated action plan. This has seen a continuation of support for Dementia Peer support groups delivered through Age UK and The Alzheimer's Society. The Older People's LIT has also been involved in expanding these groups to cover weekends, thus offering people diagnosed with dementia and their carers an opportunity to offer community support outside of the traditional Monday – Friday 9.00 – 5.00. This was only possible by the relationships and support of the Older People's LIT and the comments below from carers show the positive impact of the new service.

“Weekends are always the hardest time for me, I feel alone, and the Sunday Group helps me to manage the whole week.”

“The people are so friendly; it's good to have somewhere to come on a Sunday”

“It's great to meet people in the same boat as us, it really helps!”

Older People's Mental Health will continue to be a priority for both the Older People's LIT and Halton Older People's Empowerment Network (OPEN) as they ensure the timely and effective implementation of the dementia strategy. The Older People's LIT will also continue to be involved in ensuring the successful development of the Assessment, Care and Treatment Service, first discussed at the Older People's in January 2009. This will be further enhanced by Halton OPEN who have agreed that Dementia will be one of their key priorities for 2011.

- **Accommodation based services –**

The Older People's LIT is concerned with two specific areas of accommodation for Older People; the quality of care for people living in residential or nursing homes and the increased provision of Extra Care Housing in the borough. To support these two areas there are specific workstreams that are being developed through the Older People's LIT.

Firstly draft plans are being developed with Halton OPEN to recruit and train peer reviewers and mystery shoppers. These volunteers will support the existing monitoring processes that are in place in the borough for residential, nursing homes as well as in other areas such as contact centre and information provided for older people.

In relation to Extra Care Housing a new development is in the process of being agreed and a sub-group of the Older People's LIT, including older people's representatives, will be set-up to ensure that the services and the care needs of new residents are clearly consulted on and agreed.

- **Quality of life –**

Keeping people in good health both physically and mentally remains as a core element of the Older People's LIT. The key driver for this has been the completion of the Prevention and Early Intervention Strategy 2010-15. This document is pivotal to the work of the Older People's LIT and the action plan outlines seventeen areas for implementation. To support this four sub-groups have been developed. Three of them are tasked at particular areas Telecare, Intergenerational and Partnerships in Prevention and each of these feeds into the overarching Prevention and Early Intervention Steering Group.

The Older People's LIT has already overseen the development of:

- A telecare strategy
- A draft intergenerational strategy (due for completion in March 2011)
- A performance framework
- Redesign of low-level prevention services

By developing it's own performance framework the Older People's LIT is able to monitor performance of individual services, take a strategic overview of gaps, increased need or demonstrations of best practice. This also helps to understand the impacts, both positive and negative, of changes to service, funding or availability. An example of the performance framework report is available at Appendix 1.

Halton Older People's Empowerment Network (OPEN)

Halton Older People's Empowerment Network (OPEN) was established in 2003 to initially allow local older people the opportunity to have their say about the implementation of the National Service Framework for Older People (2001). Although the network has changed over the seven years since it was established the principles have remained, it's a place that older people can be heard. During it's time it has become more and more influential and being seen as the most important forum to consult with older people in the borough. The network has travelled a long way since its inception and now has over 700 members including its own Executive Committee, Chair Person, Treasurer and Executive Board Members.

Halton OPEN offers membership to anybody aged over 50 living in Halton. The network shares information with its members through newsletters, holding an Annual General Meeting and hosting regular focus groups on various topics. They hold monthly meetings, where the Executive Committee considers a range of issues which are raised by the members of the network. The Committee along with the Joint Commissioning Manager for Older People then agree and decide upon the priority areas to focus on. These priority areas are then consulted on through a range of different ways including focus groups, questionnaires and newsletter responses.

2010/11 has seen a change of emphasis for Halton OPEN, now working directly with the Older People's Commissioning Manager and developing their own action plan that prioritises Dementia, Physical and Sensory Impairment and Customer Services. Plans are being developed to train members to become mystery shoppers to help give a more real account of older people's experience in accessing services. This will further enhance the involvement of older people in the planning and monitoring of the services in the future.

The Dignity Challenge

All of the areas covered in this document are underpinned by the need to deliver quality services for older people whilst maintaining the highest level of dignity. The Older People's LIT has a sub-group specifically looking at Dignity and ensuring that the Dignity challenge is fully implemented across the whole sector. The Dignity Network is a multi-agency group and all representatives are signed up as Dignity Champions for their organisation, this ensures that all areas of service are considered and the many elements of good practice are quickly and easily shared. The Dignity Challenge has ten elements to it and apply to any provider of services, they are:

Respect - Support people with same respect you would want for yourself or a member of your family

Abuse - Have a zero tolerance of all forms of abuse

Privacy - Respect people's right to privacy

Autonomy - Maintain the maximum possible level of independence, choice and control

Person-centered Care - Treat each person as an individual by offering a personalised service

Self-esteem - Assist people to maintain confidence and a positive self-esteem

Loneliness & Isolation - Act to alleviate people's loneliness and isolation

Communication - Listen and support people to express their needs and wants

Complaints - Ensure people feel able to complain without fear of retribution

Engage with Care Partners - Engage with family members and carers as care partners

The Older People's LIT was instrumental in the development of a dedicated post of Dignity Co-ordinator to implement the Dignity Challenge across the borough. This post is the only one of its kind in the country and played an important role in the recent Care Quality Commission inspection which resulted in an Excellent rating in Safeguarding. This work is further strengthened by the fact that both the Chair of the Dignity Network and the Dignity Co-ordinator sit on the Older People's LIT Multi-agency board and are able to directly feed into the meeting progress and potential issues.

Challenges

Despite positive moves in a number of priority areas the Older People's Local Implementation Team faces some major challenges over the next twelve months. Liberating the NHS (2010) is a Government strategy that will see the end of Primary Care Trust with responsibility shifting to GP Consortia. It will also see the introduction of Healthwatch and increased requirements on professionals to consult with people who use services. There can be no doubt that this will be a very turbulent time, particularly as it coincides with difficult economic times and a reduction in public spending, however it also offers older people an opportunity to get their voice heard in a new and exciting way. The Older People's LIT plans to ensure that Older People are fully involved in meaningful consultation no matter how services are redesigned in the future.

The Older People's Local Implementation Team will need to consider a number of other changes both Nationally and Locally. The development of Health and Wellbeing Boards will change the current Governance and Commissioning structures that The Older People's LIT currently operates in. This is further complicated by the plans to shift the delivery of Public Health from Primary Care Trusts to Local Authorities in the coming years. These shifts will need to be carefully considered by the Older People's LIT to ensure that local older people are still able to have a voice and feel supported.

In relation to performance the Older People's LIT needs to ensure that its current performance framework, despite evolving well, is considering other policy documents such as the operating framework for adult social care. It also needs to improve communication with the Local Involvement Networks

(LINKs), to avoid duplication and improve the quality of the evidence that they are producing.

The Way Forward

2010/11 will see the Older People's LIT continue to drive forward the work that has already seen significant progress as identified in this report, however it will also see the following actions:

- The new priorities being discussed and agreed
- Links with GP consortia being developed
- Performance monitoring of the redesigned Low-Level Prevention services
- Enhanced links with Halton OPEN
- Develop joint working with Halton OPEN and Local Involvement Networks (LINKs)
- Consider the future positioning, terms of reference and structure of the Older People's LIT in relation to local recommendations for commissioning and Health and Wellbeing Boards.
- Further develop the Older People's LIT performance Framework to cover any specific requirements of the Operating Framework for Adult Social Care.

Appendix 1

OLDER PEOPLE'S LOCAL IMPLEMENTATION TEAM PERFORMANCE OVERVIEW

The table below shows the number of Green, Amber, Red ratings (for 2010/11) these form the overview of progress against the 150 different targets that the Older People's LIT are involved in. These targets relate to relevant areas of work in voluntary sector, Carers, Dignity, Dementia, Prevention and Early Intervention, Stroke and Housing.

Green ratings are only given if a target has been completed or is progressing inside of the timescale agreed. Amber includes areas that are progressing, but there is some possibility of not achieving agreed timescale.

| | | |
|----------------------------|-----------|--------------|
| No of targets = 150 | | |
| Green | 79 | 52,6% |
| Amber | 62 | 41.3% |
| Red | 9 | 6% |

Below each of the three ratings data is collected to evidence the rationale for a Green, Amber or Red rating. The following are some examples of the work that has been carried out and overseen by the Older People's LIT.

1.1 GREEN RATING

- Halton OPEN has seen a significant improvement in its performance and activity, planned focus groups and the establishment of a newsletter are further enhancing their work.
- Red cross merged service, Home from Hospital has over performed against its targets by 21%.
- The Dementia reading group has increased people accessing the service by 7% and has now developed into a stroke reading group working with the Stroke Association
- Prevention and Early Intervention steering group has now been established, along with performance framework, governance and associated working groups
- Dignity action plan is 100% green and plans to evaluate the impact of the dignity service are currently being developed.
- Dementia Peer support groups operating in Runcorn and Widnes with a Sunday group now operating
- Dementia steering group established
- Project Manager in place looking at implementation of the dementia strategy including Assessment, Care and Treatment Service.
- Work has progressed on 24 hour access to Thrombolysis
- Increased speech and language therapy support to stroke patients

1.2 AMBER RATING

The following areas have been rated as amber and will need increased scrutiny to ensure that they achieve related targets.

- Dignity awareness raising has improved in patches in relation to carers and complaints procedures, however there are still inconsistencies that need to be addressed.
- Numbers attending the participation groups have increased slightly, but still need to increase further
- Alzheimer's Society performance has improved, it is hoped that this trend will continue with additional support given to strengthen the organisation.
- Some targets within the Prevention and Early Intervention strategy remain amber as it is too early in the process to properly rate them, these include end of life, intergenerational and financial planning.
- Refresh of the accommodation strategy has been allocated, however still needs to agree acceptable timetable for completion.
- Some targets within the dementia strategy have been rated amber as timetable is currently being developed as part of the dementia steering group.

1.3 RED RATING

- Three services have been late in providing monitoring data so have been graded as red. Older People's commissioning manager will continue to chase these projects.

- Some delays on housing services due to waiting for the decision in relation to Extra Care funding
- Work has not yet started on the public health awareness campaign associated with raising public awareness of dementia. This is being addressed by the dementia steering group.

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