Dale Vye

REPORT TO EXECUTIVE TEAM (OR EQUIVALENT) OF:

COMMUNITY CARE, RHONDDA CYNON TAF COUNTY BOROUGH

COUNCIL, ELDERLY DAY SERVICES.

FROM: DALE VYE

REPORT ON: CHANGES TO OPENING TIMES OF DAY CENTERS.

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1.   Introduction

This report will outline proposed changes to the service model of Day Services for the elderly, making service more people centred and meeting the needs and expectations of carers, families and individuals who access the service. The driver for this report is the Social Services and Wellbeing Act (Wales) 2014.

In discussion with some individuals accessing the service they identified that current opening hours do not meet their needs and this has influenced the report. A more flexible approach is needed to take into account home and work life commitments of individual's families and carers.

Changes allow person centred planning around individuals in order to provide an improved service, promoting social interaction, inclusion and participation. (Preventing loneliness and social isolation among older people).

The report will identify how staff and management can work together to support these changes. This will include staff training, changing work patterns and practices in order to facilitate this. (Bowers, 2011).

Implementing change will allow staff teams, buildings and equipment which are our greatest assets to be utilised to their full potential. Allowing better access to more individuals through partnership working, making services more cost effective and flexible.

Making changes can better meet the needs of individuals, carer's and families in line with legislation and will with partnership working allow RCT support at home services or ILF providers utilize the equipment at centre's . (The Regulated Services (Service Providers and Responsible Individuals) (Wales) Amendment Regulations 2019

1.1 Background: the motivation to change practice

The motivator for change is driven by the Modernisation of Residential Care and day care for older people report to cabinet 21st November 2018. This report is influenced by the social services and wellbeing Act (Wales) 2014 identifying the need to change.

Day services need to modernise in order to better meet the needs of individuals accessing the service, keep up to date and fit for purpose.
At present day services have a limited time of opening (10 am - 3:30pm) Monday to Friday and this limits the support it can provide. On discussion with Individuals living at home with families or carers who work shift patterns it identified the need for a more flexible service over seven days a week that is centred on the individual's home lives.

The proposed changes promote the rights and decisions of individuals (Code of Professional Practice section 1). Allow plans to be person centred on individuals and better assist families and carers who have home and work life commitments. (Dementia, social services and the NHS.)

Implementing these changes will allow day services to better utilise staff teams, buildings and resources. Modernising and taking a more flexible approach to service delivery will enable the service to "Work in collaboration with colleagues as part of a team to ensure the delivery of high quality care to service users and their families." (Code of Conduct for Healthcare support workers in Wales).

The framework day service need to follow to implement the change is (The Regulated Services (Service Providers and Responsible Individuals) (Wales) Amendment Regulations 2019 3.). There are five key principles of the amendment.

☐ Responsiveness to the reforms introduced by the social services and
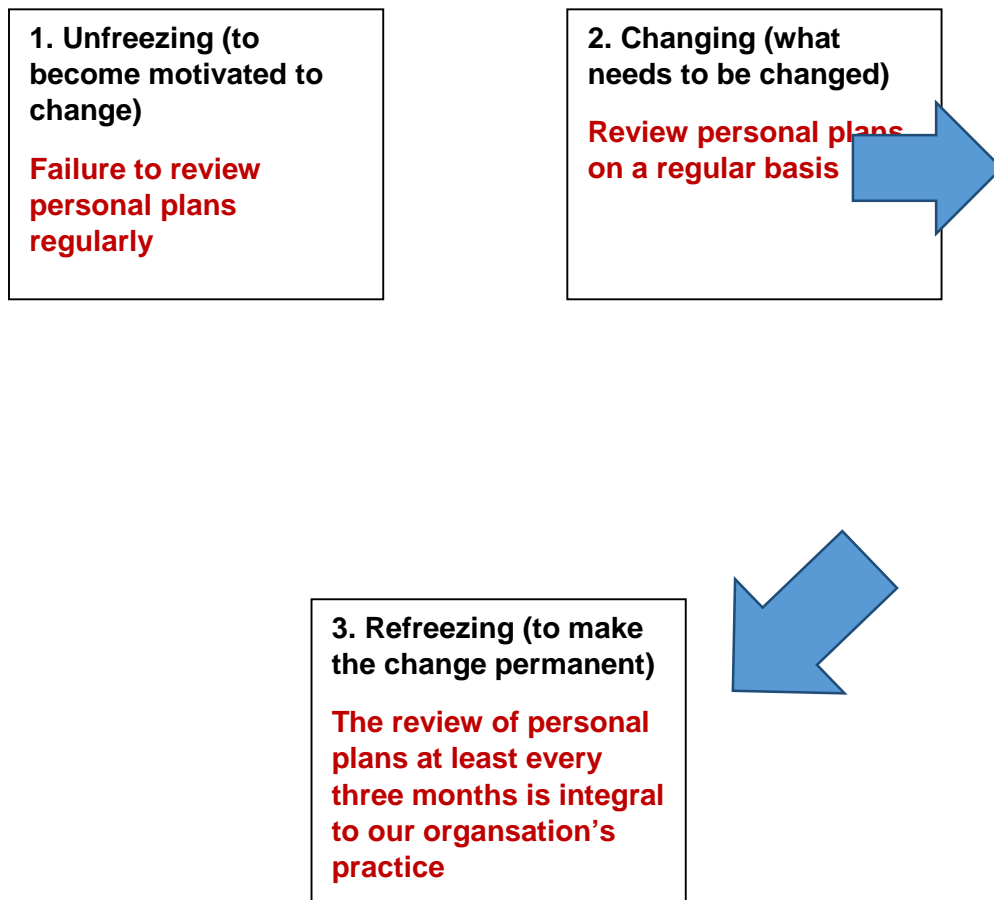
wellbeing Act (Wales) 2014.

☐ ensuring citizens are at the heart of care and support

☐ developing a coherent and consistent Welsh approach

☐ tackling provider failure

☐ Responsiveness to new models of service and any emerging concerns over the quality of care and support services.

Benefits to the individuals

- Day Centre times that better meet the needs of individuals, families and carers.
- reduced cost in homecare packages
- Allow families and carers who work full time a weekend respite break
- Access to fully equipped bathing facilities that may not be available at home reducing cost to social services in having to adapt homes in order to supply these facilities.
- Reducing stress ay home and avoiding respite over weekends because of the work commitments of carer's working shift patterns.
- Access to fully equipped buildings with bathing, hoisting facilities and changing beds to be utilized by partner agencies in case of breakdown in individual's homes or issues encountered out in the community.

1.2   Application of Lewin's (1951) model of change: summary of the change to practice

Applying Lewin's model of change (1951) to the need to introduce a clear record keeping system in relation to the review of personal plans

1. Unfreezing (to become motivated to change)

Failure to review personal plans regularly

2. Changing (what needs to be changed)

Review personal plans on a regular basis

3. Refreezing (to make the change permanent)

The review of personal plans at least every three months is integral to our organsation's practice

1. Unfreezing (to become motivated to change)

Implementing change and changing the mind-set of staff is imperative to meeting individual's personal goals and providing them with a unique person centred service.

- Staff will need to be made aware of how the changes will benefit both the

individual and staff to assist in providing a safe modern up to date service.

- At this stage good staff communication is essential (The social care Manager 24). Management will need to conduct regular team meetings, supervisions and appraisals.

- Individuals, carers, families and other professionals will need to be involved enabling us to move on to the next stage.

2. **Changing (what needs to be changed)**
   Review personal plans on a regular basis

- Staff working patterns including hours will need to be altered to better meet the needs of individuals.

- Staff will have to be supported throughout to reinforce the benefit of change and to show the benefit to individuals, cares and families.

- Other professionals involved in the planning of the individuals care packages need to be kept up to date with the changes so that support at home and transport can be changed to suit the individual's needs.

- Staff will need to update and amend care plans with individuals to include any changes.

- Transport plans and risk assessments will need to be set up to support the change.

3. Refreezing (to make the change permanent)

- Regular reviews with individuals including advocates or other professionals to ensure the new model of service meets their needs.
- Staff supervision, team meetings and appraisal to identify any issues they are encountering with the changes. (Stoltenberg & Delworth 1987)
- Timescales will be drawn up and both management and staff will work together towards addressing issues related to the change.

- Reinforcing to all involved the benefits of the change, acting on any feedback and working together in a partnership to ensure that the change is permanent.

2. **Evidence – enriched practice**

Developing Evidence Enriched Practice (DEEP) will allow day service to Bring together a wide range of professionals and evidence, enabling us to promote meaningful relationships between care providers and individuals accessing services. Evidence enriched practice promotes a better understanding of individuals, their needs and values (Blood Imogen, 2013).

The Joseph Rowntree Foundation carried out research to look at how evidence can enrich practice.The evidence from the *"A Better Life"* programme was encapsulated in seven challenges.

To:
• develop more positive images about old age – no 'them and us';
• see the person behind the label or diagnosis;
• ensure that all support is founded in and reflects meaningful and rewarding relationships;
• focus on the strengths of older people and create opportunities for them to give as well as receive;
• treat older people as equal citizens, with rights and responsibilities;
• listen and respond to what older people say;
• develop innovative ways of supporting older people, and improve existing services which can
Include addressing ordinary things that mean a lot.

Having an understanding of DEEP facilitates a partnership when drawing up care packages as it collates all available information and allows care plans to be holistically centred on the individual, taking into account the biological, social

and psychological factors that lead to wellbeing (Engel, 1977).

Evidence enriched practice can allow service providers to take a human rights approach to providing services to individuals and this includes the right to a family life (Human Rights Act 1998 article 8).

Correct use of DEEP can help avoid a one size fits all management style. (addas.org). Gathering evidence and partnership working are advised when designing care plans together with individuals. Taking this approach when setting up services ensures plans are drafted in a person centred way.

Reviewing service with Mrs. P it was identified that there were issues regarding her having to get up early in the morning, as she stated "I am not a morning person" and when she returned home from centre as her daughter worked afternoon shifts and was still at work.

Mrs. P and her grandchildren argued about Television programmes. Mrs. P stated her son in law was struggling to cope and she wishes she could watch her programmes at centre and go home later when her daughter was home as this would empower her to take the pressure off her son in law, lead to harmony at home and wellbeing for Mrs. P.

Unfortunately with the structure in place at the moment we could not accommodate the times that were needed. This resulted in the family being in crisis and Mrs. P going into a residential home.

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3.   **Implementation: key issues to be considered**

Key issue 1 – anticipated implication of the change to practice for an individual or individuals accessing and using the organisation's services

An anticipated implication to the change is improved wellbeing (Measuring well-being). Individuals should observe greater power and choice over the way day care is delivered, which should promote social interaction and reduce the risk of social isolation leading to wellbeing (Loneliness in older people – NHS).

Individuals who access day centre can be fully involved in the planning of the way their service is put together from onset. When the referral is made the individual will be contacted to discuss service allowing them to express their wants and needs or choose to involve other professionals or advocates to speak on their behalf (Older People's Access to Independent Advocacy in Wales).

Day services will work with individuals to put together a plan that will make the way that the team provides support unique. Individuals will have the freedom to choose which days they attend and the hours that suit their needs enabling them to support family or carers with work commitments.

Individuals care needs do not stop because it is the evening or weekend and day service need to change the way it is provided to take this into account. Allowing individuals to choose when and how their service is delivered (Know your rights, older people's commissioner for Wales).

Key issue 2 – any identified challenges to the change to practice (e.g. resources, time, resistance or conflict)

Staff may be a challenge in the change and it will be vital that managers work closely with the team to promote desire and drive for the change. Managers should encourage staff members to have input into how the new model of service should be delivered and treat them as valued partners when working out how shift patterns will be drawn up and service delivery is carried out. (Power point presentation Theoretical approaches on humility and leadership).

Managers may need to involve human resources and trade unions in discussions in order to provide information of what needs to change and why it needs to change. Following policies and procedures will be vital to avoiding conflict during this stage of the change (RCT Managing Change Policy).

Recourses may be another challenge as day services will be open longer hours and accessed by more individuals with different needs we may need extra aids or equipment. The service will need to work in partnership with other professionals to ensure that the resources and equipment are available to facilitate the changes.

Transportation may be a barrier and Managers will need to involve social workers, care managers and RCT community care transport division when planning routes times and delivery of transport to and from centre.

- **Key issue 3 – Need to undertake a risk assessment**

The changes identified in the report will need to be risk assessed in order for the safety of both individuals accessing service and staff. Safety will need to be at the forefront of any changes and managers will have to be vigilant in drafting and monitoring new risk assessments to ensure they are fit for purpose.

Partner staff using day centre equipment will carry out the same checks as day centre staff and plans will need to be put in place to ensure this is adhered to. Risk assessments and safe systems of work will need to put in place to ensure the maintenance of the safety of both individuals and staff. Plans can be generic be to individual tasks, these plans will apply to outside providers as well as day centre staff. (Risk assessment – HSE).

Managers need to ensure appropriate plans are put in place to minimise risks. All risk assessments should be signed by appropriate staff and stored away safely. Although the dynamics of the centres will not change managers need extra vigilant in ensuring the parameter lighting is checked on a regular basis and so individuals can be evacuated safely in the event of a fire.

4. Conclusion

In Discussions with individuals accessing the service it was identified that day care was falling short of meeting the needs of individuals whose families had home and work life commitments.

The plan calls for the extended hours of day services to include evenings and weekends to better meet the needs of individuals. The plan calls for better holistic partnership working to facilitate the change and empower individuals through involvement leading to wellbeing (McLeod, 2018).

Gathering Evidence and collating information will ensure that the new model is fit for purpose and satisfies the needs of the individuals, families and carers who access it.

Criteria.
Complex need that cannot be met in the community will be such as

- Onset dementia, Alzheimer's at too early a stage to warrant an EMI setting but warrants the need of an assessed needs centre.
- Individuals needing personal care assistance, hoisting, assisted bathing or specialist equipment.
- Unmet needs out in the community.
- Parkinson's, stroke where individuals may need more than one carer to meet their needs.
- Mental health issues i.e. Anxiety, Schizophrenia, depression and social isolation.

Individuals will be assessed by assessor care managers, social workers or health professionals and referred to day services when needs cannot be met in the community and a specialist building along with specialist equipment is required to meet the needs of individuals and promote wellbeing.

5.   Recommendation or recommendations

Based on this report, some recommendations to improve based on the subjects discussed include:

- Reducing the day centre buildings from five down to two, one to cover the Rhondda and Taf Ely areas and one to cover the Cynon Valley Taf Ely areas, the Tonyrefail building is already large enough to accommodate this change.

- Better communication between partner services for more efficient cross collaboration (Learning to Collaborate: Lessons in Effective Partnership Working in Health and Social Care) Will identify the individuals who will benefit from access to fully trained staff teams and specialist buildings.

- More streamlined and efficient work rotas to ensure service needs are met to a higher standard

- Better utilization of resources already at the service's disposal

- More person centred planning of risk assessments and care plans to ensure they are an even better fit for purpose

- Better Training and development for staff

- More flexibility in the service for the needs of individuals to better take into account outside influences such as home life commitments.

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