

## Appendix 1:

### Progress Report on the Action Plan for implementing the recommendations of the 'Scrutiny Review of Older People Services: User and Carer Involvement in Services', September 2004

Recommendation (in italics) and Proposed Action	Progress
<b>1 USER AND CARER INVOLVEMENT</b>	
<p><b>1.1</b> <i>The introduction of the User and Carer Involvement policy by December 2004.</i></p> <p>A draft User and Carer Involvement Policy for older people will be produced and implemented, following extensive consultation with the older people and professionals, by the subgroup of the multi-agency East Sussex Older People's Strategy Group (by December 2004).</p>	<p>(See also next item) A draft strategy for ensuring older people's involvement in the improvement of public services across East Sussex has been produced based on feedback from the 'All Our Futures!' conference and active involvement of a reference group of older people from across the county. The focus of the strategy, in accordance with the Scrutiny Review recommendations, is on enabling the involvement of all older people using a citizenship approach rather than only on users and carers of health and social services.</p> <p>A copy of the draft strategy is attached (Appendix 2). An extensive consultation programme, in line with Compact consultation requirements, is running from January until April 2005. Copies of a summary 'flyer' have been widely distributed through existing older people's networks.</p>
<p><b>1.2</b> <i>Continue developing appropriate means whereby carers and users are involved in planning of services, exploring a range of options around representation.</i></p> <p>Develop a strategy to take forward the User and Carer Involvement Policy enabling the involvement of older people in the design and delivery of services using a citizenship approach. (SSBP 5.9.1e)</p>	<p>As reported to the Scrutiny Committee in September the 'All Our Futures!' conference was very successful. The report of the conference (attached in Appendix 3) has been widely circulated to our partners in the statutory and voluntary sectors as well as to those who participated. As a consequence, Shropshire County Council, a beacon status authority for involving older people, and East Sussex have successfully bid for additional funding from the Office of the Deputy Prime Minister to further develop this work through events, training and consultancy support from Shropshire older people. A second conference will be staged in October 2005, steered by a group of older people. In addition the Discretionary Grant within the 2004/05 Community Partnership Fund has been used as support the development of local older people's forums and to ensure that harder to reach older people can become involved.</p>
<p><b>1.3</b> <i>Increase the methods of gathering information from users and carers beyond questionnaires and forums. Consider approaches suggested in the Better Government for Older People (BGOP) report.</i></p> <p>A range of methods of engagement will be considered and</p>	<p>An important part of the strategy referred to above is developing a range of different means to engage with older people across the county and to ensure appropriate links are developed to ensure the views of excluded or isolated groups are included. See also the above items for ways in which these are being developed. Older people who are engaging in the Strategy are guiding the development of involvement.</p>

<p>agreed as part of the production and implementation of the Policy outlines. As a first step a day conference identifying national models of good practice will be held by September 2004.</p>	
<p><b>1.4</b> <i>A report to the Social Services and Health Scrutiny Committee in September 2004 on the way in which the outcomes from the 'Listening to People and Responding' report are changing services to older people.</i></p> <p>To continue to develop quarterly monitoring of customer feedback and link with feed back from the Complaints and Compliments process in order to identify ways to improve services (SSBP 3.9.1c &amp; 3.9.1d).</p>	<p>The quarterly monitoring process continues to develop with increased emphasis on identifying what action has been taken as a result of feedback. Links with the Complaints and Compliments quarterly reporting process have been established during 2004/05.</p>
<p><b>2 COMMUNICATIONS</b></p>	
<p><b>2.1</b> <i>Address the issues raised about communications with the public by using a variety of ways in which information about services and support can be made more widely available. Such ideas might include use of photographs, website, targeting of families, promoting a better image.</i></p> <p>Review of information provided to the public, with particular reference to the type of material given to users and carers prior to admission and discharge from hospital. (SSBP 3.9.5a)</p> <p>Revise annual Communication Strategy in the light of the Review.</p>	<p>Information provided to the public is continuously being reviewed and refined as a consequence. Currently a number of focus groups set up through local voluntary groups including Age Concern are looking at the content, format and design of Social Services material, including that available on the website. Groups are also being asked where they want to obtain social care information from. When the current public information leaflets are revised in September they will feature comments from service users.</p> <p>The 2004 edition of 'Better Care Higher Standards', the booklet and leaflet has been widely circulated and promoted for use within the hospitals by both Social Services and health staff.</p>
<p><b>2.2</b> <i>Carry out a survey with the people of East Sussex on the part that the 'image and perception' of Social Services plays in the apparent failure to take up services, and act upon its findings</i></p> <p>Carry out a survey on the image and perception that older people in a healthcare setting have of Social Services and recommend action. (SSBP 3.9.5b)</p>	<p>Development of the research brief for the 'image and perception' survey began in August but was delayed due to other negotiations with our NHS partners at the same time. To understand perceived barriers to seeking support from Social Services from people in hospital a detailed proposal was submitted to the NHS East Sussex Research Ethics Committee for permission to contact patients. The Committee did not approve the proposal in its current format for a number of reasons including the need to conduct the interviews in a confidential area in hospital, which is not available. Consideration is now being given to how to proceed with this recommendation and the</p>

<p>Ensure the survey results and actions are published in the local media. In line with the County Council Communications steer.</p>	<p>views of the Scrutiny Committee are sought.</p>
<p><b>3 DEVELOPMENT OF QUALITY &amp; CHANGE MANAGEMENT UNIT</b></p>	
<p><b>3.1</b> <i>The developments already started within the Quality and Change Management Unit, as outlined by the Head of Quality and Change Management in her report to the Board, continued and refined in light of the recommendations in this report.</i></p> <p>The Divisional Business Plan will outline the work of the new unit which will incorporate, during 2004, the Communications Unit and Complaints Unit in order to develop a greater focus on customer care.</p>	<p>Following the disaggregation of the Performance and Quality Division, the remaining members of the Quality &amp; Change Management Team will be transferred to the Policy and Strategy Unit of Adults Social Services and continue to carry out their core function within that setting.</p>
<p><b>4 HOSPITAL DISCHARGE</b></p>	
<p><b>4.1</b> <i>The referring of the matter of reviewing hospital discharge arrangements across the East Sussex Hospitals NHS Trust to the Health Overview and Scrutiny Committee for its consideration.</i></p> <p>Scrutiny Review Report to be put on the agenda of the next Health Overview and Scrutiny Committee on 15/06/2004.</p>	<p>This was referred to the Health Overview and Scrutiny Committee held on 15 June 2004. Cllr Slack undertook a fact finding exercise between September and December 2005.</p>
<p><b>4.2</b> <i>The adoption and implementation of the draft Discharge Policy as a matter of urgency with a report back by September 2004 on progress.</i></p> <p>Consult with key partners and gain agreement for implementation of the draft Discharge Policy by July 2004.</p>	<p>As reported to Scrutiny Committee in September 2004 the Discharge Policy has been agreed by all relevant agencies and implemented through a multi-disciplinary/multi-agency discharge team (ADAPPT) at both the Conquest Hospital and Eastbourne DGH. A formal evaluation of this approach has not yet been completed but initial indications are that the integrated team has improved patient flows through, and out of the two Acute hospitals. However, it is anticipated that the formal review will identify some areas where joint development could further improve the process.</p>

<p><b>4.3</b> <i>Developing discharge and exit plans so that older people leaving treatment are not isolated but can emerge back into the community with confidence and a sense of identity and purpose.</i></p> <p>Implement agreed care management arrangements within the hospital teams, ensuring that each patient who is the responsibility of social services has a care plan.</p>	<p>Both multi-disciplinary/multi-agency discharge teams at the Conquest Hospital and Eastbourne DGH have implemented Care Management arrangements that ensure the timely provision of care plans as an integral part of a patient's discharge plan. The phased introduction of the Single Assessment Process at both Acute hospitals has further underpinned this approach.</p>
<p><b>4.4</b> <i>Making more robust the referral systems in the hospital setting so that issues around the stigma of social services, losing of patients through ward changes and addressing ICT problems are tackled.</i></p> <p>Review with the Health Trust , the referral systems to ensure that patients are not “lost”. Continue to work to resolve technical challenges. Incorporate the action recommended from the survey work outlined in 2.2 above</p>	<p>The multi-disciplinary/multi-agency approach at the Conquest Hospital and Eastbourne DGH provides a single point of access for all Health and Social Services referrals from the wards that ensures that patients are supported through the discharge process. Work is ongoing to address ICT interface issues identified by the Scrutiny Review.</p>