

Report to: Adult Social Care and Community Safety Scrutiny Committee

Date of meeting: 9 March 2017

By: Director of Adult Social Care and Health

Title: Health and Social Care Connect

Purpose: To consider performance to date and future direction of the service

RECOMMENDATIONS

The Committee is recommended to:

- 1) consider and note the current performance of Health & Social Care Connect.**
 - 2) consider and note the proposals regarding the future of the service in relation to the development of the NHS111 Local Clinical Hub.**
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1 Background

1.1 Health and Social Care Connect (HSCC) is the streamlined point of access into adult community health and social care services in East Sussex. It is delivered by East Sussex County Council Adult Social Care in partnership with East Sussex Healthcare NHS Trust (ESHT).

1.2 HSCC operates 8am to 10pm seven days a week including Bank Holidays, and is available to GPs, community health services, social care, hospitals, care homes, South East Coast Ambulance NHS Foundation Trust (SECAmb), other statutory agencies, the voluntary, community and independent sectors, and the public.

1.3 HSCC's key functions are:

- Providing information, advice and signposting enquirers to appropriate adult community health and social care services.
- Undertaking initial adult social care and carer assessments, transferring clients requiring more detailed assessment onto the appropriate team, and coordinating simple services, urgent packages of care, and urgent respite care.
- Managing referrals into community health and social care services such as district nursing, intermediate care beds and joint community rehabilitation, this includes triaging to determine urgency and need and finding suitable alternatives if the service requested is not available.
- Managing and redirecting adult safeguarding concerns from the public and professionals.

2 Supporting information

Context

2.1 HSCC has been developed, commissioned and implemented as part of the East Sussex Better Together (ESBT) programme to develop a fully integrated health and social care system in East Sussex by 2018. In December 2015, High Weald Lewes Havens Clinical Commissioning Group took the decision to formally withdraw from ESBT but committed to the continued delivery of HSCC through its Connecting 4 You programme.

2.2 HSCC has been created by fully integrating into a single service three separate existing services: ICAP (Integrated Community Access Point), which managed community health referrals,

CAT (Contact and Assessment Team), which undertook social care assessments, and Social Care Direct, which provided a public adult social care helpline. Operating hours were extended in the new service to 8am-10pm seven days a week including Bank Holidays.

2.3 HSCC has been implemented in stages commencing with an enhanced service for GPs in April 2015 and concluding, in October 2016, with integrating and extending public access from 8am-5pm Monday to Friday to 8am-10pm seven days a week. [Appendix 1](#) summarises the development of the service in detail and the outcomes that have been achieved.

Performance

2.4 Initially only health referrals management was available 8am-10pm seven days a week including Bank Holidays. A key improvement has been extending public access and the availability of social care assessments to 8am-10pm seven days a week.

2.5 Since HSCC launched in April 2015:

- Demand for its services has increased year on year with total contacts received increasing from 82,701 in April to December 2015 to 93,943 in the same period in 2016, an increase of 14%. Of these contacts, 48% are for information, advice and signposting; 11% are for social care and carers assessments and 41% for community health referrals.

	Apr 15- Dec 15	Apr 16- Dec 16	Difference	% change
L1 Access handled	36,814	38,258	1,444	4%
L1 Access received	42,404	45,519	3,115	7%
L2 Health	33,385	38,437	5,052	15%
L2 Assessment	6,912*	9,987	3,075	44%
Total (using L1 received not handled as looking at demand)	82,701	93,943	11,242	14%

*Transition from CareFirst to LAS (Liquid Logic) meant a change in how this measure was reported. Therefore, percentage change in demand at L2 Assessment is indicative only.

- Members of the public are receiving social care assessments faster with 72% being completed within 28 days during the 12 months to end of October 2015 compared to 70% completed within 28 days for the 12 months to end of October 2014.
- Staff vacancy rates have reduced from 21% in May 2016 to 2% in Dec 2016 which, coupled with extensive training and enhanced ICT and telephony, has substantially increased HSCC's capacity to manage increased and increasing demand.
- The service is increasingly popular amongst service providers with the number of different community services for which HSCC manages referrals growing from 10 to 15, and others are in the pipeline.
- Between April 2015 and June 2016, 29 complaints were received of which 7 were upheld.

2.5 Satisfaction surveys run with professional users of the service, the public and HSCC staff have provided useful intelligence for service improvements but indicate high levels of satisfaction across all three groups in relation to the appropriateness of the service offered, the ease of accessing it and the speed of response.

"Very impressed with [your] response ... everything is professional, very quick, and top notch ... most impressed with service". Professional service user

"I can't say enough good things... I subsequently have spoken to a few other people in the village and they said we are so fortunate to be in East Sussex as the service is so good". Public service user

"If you enjoy helping vulnerable people in the community and striving for a good outcome, and always do your best by them, then [HSCC] is the place to work" Member of staff

Future direction

2.6 In addition to its programme of continuous improvement, the future direction for HSCC will involve increased engagement with Integrated Locality Teams and the development of the NHS 111 Local Clinical Hub for East Sussex under the Urgent Care transformation programme. The Local Clinical Hub will deliver services 24 hours a day seven days a week within HSCC. This service needs to be Operational from April 2019 and will form an integral part of HSCC's service model. Developments are in the very early stages.

3. Conclusion and reasons for recommendations

3.1 The Committee is recommended to consider and note the report and the proposals for the future direction of HSCC.

KEITH HINKLEY

Director of Adult Social Care and Health

Contact Officer: Steve Hook, Head of Assessment and Care Management

Tel. No. 01273 481116

Email: steve.hook@eastsussex.gov.uk