

AGENDA MANAGEMENT SHEET

Name of Committee **Adult & Community Overview & Scrutiny Committee**

Date of Committee **6 September 2005**

Report Title **Scrutiny Review Occupational Therapy Update**

Summary The Social Care and Welfare Overview and Scrutiny Committee held a Select Committee on Occupational Therapy on 20 January 2004 and subsequently reported its findings to Cabinet on 1 April 2004. This is the fourth update report on progress since the scrutiny exercise took place.

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Would the recommended decision be contrary to the Budget and Policy Framework? [please identify relevant plan/budget provision] No

Background papers Report of the Chair of the Social Care and Welfare Overview and Scrutiny Committee to Cabinet of 1 April 2004 - Reports of the Director of Social Care and Health to Social Care and Welfare Overview and Scrutiny Committee of 20 July 2004, 12 October 2004 and 15 February 2005.

CONSULTATION ALREADY UNDERTAKEN:- Details to be specified

- Other Committees
- Local Member(s)
- Other Elected Members
- Cabinet Member Cllr Colin Hayfield, Portfolio Holder Adult Services – I warmly welcome these moves to develop more effective partnership working, particularly in regard to ensuring that disabled facilities grants can be dealt with more speedily. Joint O.T. appointments with District Councils would appear an encouraging development in this respect.

- Chief Executive
- Legal Alison Hallworth, Legal Services – report noted.
- Finance Martin Jones, Head of Resources Management – report noted.
- Other Chief Officers
- District Councils
- Health Authority
- Police
- Other Bodies/Individuals

FINAL DECISION Yes

SUGGESTED NEXT STEPS:

Details to be specified

- Further consideration by this Committee
- To Council
- To Cabinet
- To an O & S Committee
- To an Area Committee
- Further Consultation

Adult & Community Overview & Scrutiny Committee

Scrutiny Review Occupational Therapy Update

Report of the Director of Social Care and Health

Recommendation

The Committee notes the contents of the report.

1. Introduction

Following the Select Committee held on 20 January 2004, a series of recommendations concerning the development of the occupational therapy service were agreed. This report summarises progress since the quarterly update report to Committee of 15 February 2005.

2. Progressing Select Committee's Recommendations

2.1 *A joint Information Sheet to be agreed by all partners to replace individual organisation sheets.*

Information has been gathered from partner agencies, but upon review it is considered that general statements about organisations will not be of real help to the public. We are already aware that some people find themselves being passed between agencies, which is a cause of real frustration. It is therefore planned that we develop "pathways" which indicate where people need to go for the service they need which can be published in a joint leaflet. This advice is likely to be of more direct benefit than broad descriptions of agency functions.

In order to achieve this, a workshop is being held with NHS colleagues in September and around the same time, meetings are being held with District Council officers to clarify disabled facilities grant processes. These will provide the clarity needed to complete the work. In the meantime, the Department's Public Information Group is currently considering an information leaflet specific to our OT service.

2.2 *Increased and widespread consultation to listen to and react on the views and requirements of user groups at a strategic level and prior to decision-making.*

There are a number of initiatives now in place, which are designed to achieve this objective, e.g. involvement with the Customer First Project for adult services and the Integrated Disability Service forums for children.

The Warwickshire Integrated Community Equipment Service (ICES) Advisory Forum is now operating successfully, and its role is to directly influence the development and delivery of ICES. 50% of its membership is service users.

2.3 *Closer partnership working at strategic level should be encouraged between Housing Departments and OT services, for example, by exploring joint appointments.*

The joint appointments in Warwick and Nuneaton & Bedworth are working well and Senior OT's are maintaining very close working links with District Council Housing Officers. Officers now attend the Countywide Environmental Health Forum, and work is beginning to agree a standardised, consistent process across all districts to progress disabled facilities grants.

2.4 *The development of a staff competency framework in conjunction with the College of Occupational Therapy, should be accelerated and all OT training and career structures should be reviewed to ensure job satisfaction and promotion prospects based on both ability and qualification.*

The staff competency (knowledge and skills) framework has now been completed and testing its value as a tool is being piloted in three areas of the County. It is being used to contribute to a training needs analysis, which will result in the workforce-training plan being updated. We believe that Warwickshire is the only local authority to have developed this tool and are receiving requests for information about it from other counties.

2.5 *Assessments should be delegated to the correct level to maximise efficiency.*

The pilot of the social work/OT integrated duty system was found to have improved the quality of our duty responses and is now being introduced across the County.

2.6 *Integration of Social Services OT Services and Health OT Services should be explored and achieved where practicable.*

Involvement in the Department of Health's Integrated Care Network initiative has been helpful in learning from other counties how they have progressed integrated working. It has also been encouraging to find that the success of our initiatives has placed us ahead of most other contributing counties in terms of developing integrated working.

Since the last report, the Integrated Paediatric Service has been evaluated with a very positive outcome. As a result, an action plan is being developed which will address issues such as the need to integrate IT systems to avoid the need to enter data separately on Health and Social Services databases.

ICES is now functioning well, with initial teething troubles having been addressed. A Pooled Budget Manager has been jointly employed to manage and develop the project on behalf of the Authority and NHS partners.

The integrated discharge service at the George Eliot Hospital has been successful, significantly reducing delays in hospital discharges.

The integrated care pathway for people with chronic obstructive pulmonary disease and the secondment of an OT from South Warwickshire PCT into learning disability services are currently on hold due to issues needing to be addressed within the NHS.

2.7 Reduction of waiting lists must be a priority across the County and systems should be streamlined, and every effort should be made to identify the different methods of working to improve efficiency.

The number of people waiting for an assessment in July 2005 was 334. This is an increase of 53 people over the figure for November 2004, which appeared in the last report. However, the number of people waiting is not a true indication of the availability of the service, as some of them will have been added to the list only the day before the count. What is more significant is the length of time which people wait. In November 2004, the longest waiting time was 20 weeks. At the beginning of July 2005, the longest waiting times were as follows: -

| | |
|---------------------|----------|
| North Warwickshire | 17 weeks |
| Nuneaton & Bedworth | 28 " |
| Rugby | 15 " |
| Stratford | 9 " |
| Warwick | 2 " |

This downturn reflects the fact that we have been carrying 4 vacancies over the past 3 months, 3 of them being in the North of the County. They have now been recruited to and the new staff will be in post in September, so an improvement in our performance is expected.

3. Conclusion

The priorities identified by the scrutiny process will continue to be addressed, with particular attention being paid to the need to keep waiting times to a minimum.

MARION DAVIS
Director of Social Care & Health

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August 2005