



Residential and Respite Services Team Plan 2015/16

Team Manager: **Marijke Jenkins**

Service Plan: Social Services

Date signed off: 29th June 2015

Signed off by: **Carys Lord**

Contents

| | |
|---|---|
| Our Contribution to Service Plan priorities 2014/15 | 3 |
| Our Team Plan 2015/16 | 4 |

Team Overview – Residential and respite services

The residential and respite team undertake a number of key roles for the Council. The team provides residential and respite services to older people and older people living with a dementia and in Rhoose Road a respite service to adults with a learning disability. The residential homes are registered with the Care and Social Services inspectorate Wales (CSSIW) and work in accordance with relevant regulatory requirements, relevant guidance and internal and external policies and procedures.

We provide services from 5 different locations:

Cartref Porthceri:

A 32 bed home, located in Porthceri, Barry, registered with CSSIW to provide support and accommodation to frail older people with a medium to high support need.

Occupancy in Cartref is restricted by CSSIW to 30 residents (this includes one respite bed) due to the high number of EMI variations to this registration. A second respite bed is available on an emergency basis only and when collective dependency levels can accommodate an emergency respite placement.

Southway:

A 32 bed home located in Cowbridge, registered with CSSIW to provide support and accommodation to frail older people with a medium to high support need and people living with a dementia.

On the ground floor there are 13 bedrooms (this includes one respite bed) that are occupied by frail older people with a medium to high support need. Following concern expressed by CSSIW about the high number of variations to the frail elderly registration an EMI unit was created on the first floor in July 2011, and up to 10 residents are accommodated there. A further two beds are available on this unit for respite purposes, one which can be booked in advance, the second respite bed is available on an emergency basis only and when collective dependency levels allow.

Ty Dyfan: Managed in partnership with HAFOD until such time in 2015 that the application to change the registered provider (to the Vale of Glamorgan Council) is processed by the CSSIW.

A 32 bed home located in Barry registered with CSSIW to provide support and accommodation to older people with a dementia. Two units of 10 are occupied (this includes two respite beds); a third 12 bed unit is unoccupied.

Ty Dewi Sant: Managed in partnership with HAFOD until such time in 2015 that the application to change the registered provider (to the Vale of Glamorgan Council) is processed by the CSSIW

A 33 bed home located in Penarth registered with CSSIW to provide support and accommodation to frail older people with a medium to high support need.

Rhose Road:

A 3-bed respite facility for adults with a learning disability.

The Team's broad functions are:

- Offer long term and respite accommodation with support to frail older people and older people living with a dementia
- Offer short term respite accommodation with support to adults with learning and associated disabilities
- Provide quality, person centred care which promotes autonomy, attainment, citizenship, individuality, diversity, well-being and inclusion
- Provide services that are in accordance to objectives described in individual care plans
- Provide services that are responsive to demographic changes, assessed need, ongoing and changing demands
- Provide services that meet statutory and departmental obligations
- Provide opportunities to service users to maintain independence, maximise potential and encourages integration
- Work in partnership with key stakeholders to ensure all parties' interests, needs and wishes are determined and responded to

Our Contribution to Service Plan priorities 2014/15

Our contribution to the Service Plan priorities last year:

| | |
|----------------------------|--|
| Service outcome 1 | People in the Vale of Glamorgan are able to request support and receive help in a timely manner |
| Service objective 1 | To ensure that people have access to comprehensive information about social services and other forms of help and support, and are appropriately signposted to help and supported by proportionate assessments, care and support plans and services which meet their individual assessed needs |
| | <p>Great progress has been made in the standardisation of service related documentation and process and is widely available.</p> <p>Rhose Road respite service has finalised their (pictorial) service guide for people with learning disabilities</p> <p>Residential data storage has been reviewed and standardised</p> <p>The format of service users files has been changed to ensure that safer and more inclusive information is available to care staff</p> <p>Reference files and flowcharts have been created to ensure consistency in practice and standards</p> <p>Developed systems in partnership with health professionals to respond more effectively to needs relating to:</p> <ul style="list-style-type: none"> • dementia • behaviour that challenges • podiatry • falls • nutrition |
| Service outcome 2 | The Vale of Glamorgan Council protects vulnerable people and promotes their independence and social inclusion |
| Service objective 2 | Through the Council working in co-ordination with other organisations, to ensure that people are helped to achieve their best possible outcome and that people at particular risk have their well-being promoted and are safeguarded from abuse and exploitation |

Service user plans in Rhoose Road and Residential services reflect information provided in Assessments, Risk profile and care plans.

Service user's support needs are reviewed at regular intervals, involving service users, carers and other professionals.

Standards are measured by CSSIW and during three monthly PIC visits.

New staff rotas have been introduced across 4 homes to ensure a person centred response to residents needs at the busiest times

A yearlong 'Butterfly' dementia training programme has been completed by 3 Managers to aid culture change in dementia care

All managers, deputy managers and senior carers have completed a 'creative leadership course', to aid more effective management

Ty Dewi Sant has been named a CCfW finalist in the category "Excellent outcomes in the care of older people"

Reminiscence projects were researched and progress has been made in implementation

Residential infection control policy and procedures were reviewed and updated

Falls risk assessments introduced to ensure appropriate and timely responses to identified risks and as a preventative measure to unnecessary/premature admission to hospital/nursing care

Maintained Environmental Health food score of 5 across all facilities

Responded to 'Cheshire West judgement' by seeking DOLS authorisations for all residents lacking capacity

Prepared for and implemented Allergen legislation requirements

Completed practise Flowcharts to simplify processes and aid staff in safe service delivery

100% TDRS and PDRS and contributed to development of annual training plan to ensure staff are knowledgeable and prepared to respond to change in service demands and have the necessary knowledge base to deliver person centred care

Dementia champions have been appointed across 4 facilities to work collaboratively to identify options for engagement

| | |
|----------------------------|---|
| | <p>and meaningful activity for residents with a dementia</p> <p>Effectively monitored staff performance and capability and where necessary and if appropriate implemented capability or disciplinary procedures to address developmental needs/poor practise/non compliance</p> |
| Service outcome 3 | Social Services in the Vale of Glamorgan review, plan, design and develop quality services that deliver best value for money to improve outcomes for individuals |
| Service objective 3 | To have in place clear planning and programme management processes, which are identified in commissioning strategies and annual commissioning plans, and help ensure an appropriate range of services that deliver equity of access, joined up services and best value from a variety of providers with defined, proportionate budgets directed to meeting service priorities |
| | <p>Monitored effectiveness of agency staff contract, maintaining and sharing essential data with relevant stakeholders to ensure quality provision and best value</p> <p>Secured 'places' for 4 homes on Welsh Government funded three year project to take part in critical analysis of the effectiveness of a digital administration medication system which is expected to reduce both the number of medication errors and the staff time involved in the administration of medication</p> <p>Prepared for transfer of registration of HAFOD homes</p> <p>By means of ongoing review and creative use of resources, and by identification of efficiencies, remained 'in budget' for Residential services and ensured actual spend was equivalent to that in previous financial years, this despite growing costs of staffing, services</p> <p>Reviewed all Residential staffing establishment records to ensure accuracy and appropriateness of information held across all relevant council departments and to reduce reliance on agency staff</p> <p>Reviewed Rhoose Road staffing establishment and maximised staffing resources to achieve more efficient use of staffing resource</p> |

Our Team Plan 2015/16

| Service Outcome 1: | | | People in the Vale of Glamorgan are able to request support and receive help in a timely manner | | | | |
|---------------------------|---|---|--|--|-------------------|--------------------|--|
| Objective 1: | | | To ensure that people have access to comprehensive information about social services and other forms of help and support, and are appropriately signposted to help and supported by proportionate assessments, care and support plans and services which meet their individual assessed needs | | | | |
| Ref. | During 2015-16 we plan to: | Success Criteria/ Outcomes we'll achieve from this action are: | High, Medium or Low priority | Officer responsible for achieving this action | Start date | Finish date | How will the work be resourced? |
| SS/A060 | Introduce and monitor '1000 lives' nutritional assessments in response to advise from health colleagues | Service user's nutritional needs are identified and responded to | Medium | Managers Care Staff Support workers/Carer drivers Catering staff Liz Hendy | 1/7/15 | 31/10/15 | Existing staff resources |
| SS/A011 (CP/HSC W5) (IO2) | Prepare for and implement Digital Medication system in residential care for older people | Reduced level of risks associated with medication Administration. Improved use of staff resources. | High | Managers Care Staff | 1/8/15 | 1/10/15 | WAG funding |
| SS/A059 | Create emergency /respite bed in TD | Services are cost effective, | Medium | Managers | 01/07/15 | 01/11/15 | Existing budget and staffing |

| | | | | | | | |
|--|---|--|--------|---|---------|---------|-----------------------------|
| SS/A021 (CP/HSC W7) (IO2) Obj 2 SS/A055b (CSSIW/A REF/IP2/2 011) (IO2) Obj 3 | and TDS | preventative and all homes are able to respond to emergencies and demographic/ need | | Marijke Jenkins Care Staff | | | resources |
| From previous plans: C9 | Maintain consistency of service user plans and associated reviews | Service user and associated plans accurately reflect support needs, are safe, person centred and outcome focussed | High | Managers Marijke Jenkins Care Staff Support workers/carer drivers | Ongoing | Ongoing | Existing staff resources |
| From previous plans: C9 | Ensure that service user and associated plans and delivery focus on positive outcomes for service users | Provision of measurable outcome data for efficacy of services | High | Managers Marijke Jenkins Care staff Support workers/driver carers Catering staff | Ongoing | Ongoing | Existing staff resources |
| C3 | Maintain files/records to required standard in line with agreed format and in preparation of file audits /inspections | Standards are consistent, meet VOGC agreed format and are effectively monitored | Medium | Managers Marijke Jenkins Liz Hendy Care staff Support workers/driver carers Catering staff | Ongoing | Ongoing | Existing staff resources |

| | | | | | | | |
|-------|---|--|------|--|---------|---------|--------------------------|
| IHSC6 | Ensure that Requests for Service and assessments are complete and all relevant information regarding risk factors is identified, recorded and reviewed. | Assessments, referrals, service plans and risk assessments are completed in accordance with good practice and risks to self and others are assessed to inform placements | High | Managers Marijke Jenkins Care staff Support workers/carer drivers | Ongoing | Ongoing | Existing staff resources |
|-------|---|--|------|--|---------|---------|--------------------------|

| Service outcome 2 | | | The Vale of Glamorgan Council protects vulnerable people and promotes their independence and social inclusion | | | | |
|-------------------------------|---|--|---|--|-------------------|--------------------|--|
| Service objective 2 | | | Through the Council working in co-ordination with other organisations, to ensure that people are helped to achieve their best possible outcome and that people at particular risk have their well-being promoted and are safeguarded from abuse and exploitation | | | | |
| Ref. | During 2015-16 we plan to: | Success Criteria/ Outcomes we'll achieve from this action are: | High, Medium or Low priority | Officer responsible for achieving this action | Start date | Finish date | How will the work be resourced? |
| SS/A064 HSCW13 CR12 | Respond effectively in situations when people are at risk of Deprivation of Liberty, neglect or abuse | Continued compliance with relevant safeguarding guidance/ legislation and staff respond to concerns | High | Managers Marijke Jenkins Support workers Care, domestic and catering Staff | Ongoing | Ongoing | Existing staff resources |
| From previous plans: CPE 7 | Ensure equality and diversity continue to form an integral part of our service planning and delivery | Services contribute to the Vale Equalities Scheme and ensure equality regarding the Welsh Language, Equal Opportunities' and Race Equality | High | Managers Marijke Jenkins Liz Hendy Support workers Care, domestic and catering staff | Ongoing | Ongoing | Existing staff resources |

| | | | | | | | |
|--|--|---|--------|---|---------|----------|--|
| From previous plans: SS04/5 A015 A020 | Consider options for greater service user and carer involvement in service planning/review | Services are responsive to client needs and preferences | Medium | Managers Dementia champions Marijke Jenkins Support workers Care, domestic and catering Staff | Ongoing | Ongoing | Existing staff resources |
| From previous plans: SS04/5 A015 A020 | Consider inclusive and meaningful activities for residents, including those residents living with a dementia | Activities are inclusive, outcome based and person centred | High | Managers Dementia champions Care, domestic and catering Staff | Ongoing | Ongoing | Existing staff resources Transport costs if activities outside the home |
| From previous plans: SPE 5 | Standardise residential 'in house' QA systems and create yearly reports (with Laura Eddings) | Service specific QA system that informs practise | High | Managers Marijke Jenkins Liz Hendy | 1/7/15 | 31/12/15 | Existing staff resources |
| From previous plans: C8 | Monitor DBS, capability and training needs of team | Team members are skilled to provide a safe, informed and responsive service | High | Managers | Ongoing | Ongoing | Existing staff resources |
| From previous plans: C11 | Ensure Health and Safety in all aspects of service delivery | Safe service delivery | High | Managers Marijke Jenkins Support workers Care, domestic and catering Staff | Ongoing | Ongoing | Existing staff resources |

| Service outcome 3 | | Social Service in the Vale of Glamorgan review, plan, design and develop quality services that deliver best value for money to improve outcomes for individuals. | | | | | |
|--|--|---|-------------------------------------|--|-------------------|--------------------|--|
| Service objective 3 | | To have in place clear planning and programme management processes, which are identified in commissioning strategies and annual commissioning plans, and help to ensure an appropriate range of services that deliver equity of access, joined up services and best value from a variety of providers with defined, proportionate budgets directed to meeting service priorities | | | | | |
| Ref. | During 2015-16 we plan to: | Success Criteria/ Outcomes we'll achieve from this action are: | High, Medium or Low priority | Officer responsible for achieving this action | Start date | Finish date | How will the work be resourced? |
| SS/A069 | Ensure staff and services are prepared for the implementation of the Social Services and Well-being Act 2014 | Staff have a good understanding of the implications of the Act and work in accordance to legislation | High | Managers Marijke Jenkins | July 2014 | 31 March 2016 | Staff to attend training – hourly rate applicable for attendance |
| SS/A070 | Implement all areas identified for improvement during audit processes and inspections | We demonstrate progress and improvement. Registered status and food scores are protected | High | Managers Marijke Jenkins Support workers Care, domestic and catering Staff | Ongoing | Ongoing | Existing staff resources |
| SS/A060 SS/A001 (CP/CYP 6) Obj 1 SS/A039c (CSSIW/A | All residential information is accurate and accessible so that they are clear about the practice and quality standards expected. | SOP, Service Specifications and other documentation is accurate, accessible and shared with relevant parties. | Medium | Managers Marijke Jenkins Support workers Care and catering Staff | 01/05/15 | 31 March 16 | Existing staff resources |

| | | | | | | | |
|---|---|--|--------|--|---------|---------|--------------------------|
| REF/IP2/ 2011) Obj 1 | | | | | | | |
| SS/A055b (CSSIW/A REF/IP2/ 2 011) (IO2) SS/A068 | Ensure expenditure, Agency Use, Staffing and occupancy levels are monitored effectively | Services are cost effective and responsive to demographic/ need | High | Managers Marijke Jenkins Liz Hendy | Ongoing | Ongoing | Existing staff resources |
| SS/A055b (CSSIW/A REF/IP2/ 2 011) (IO2) SS/A068 | Review residential staffing structures | Staff resources are managed effectively and staffing levels are proportionate and safe | Medium | Managers Marijke Jenkins | 1/7/15 | 1/11/15 | Existing staff resources |