



## Integrated Care Pilot in the West



### Project Update – January 2019

Over the past 8 months the Project Team has been working through the key stages of a project plan which we believe will lay the foundations for the Department of Health & Social Care to achieve its strategic objective of implementing integrated care across the Isle of Man. The target population for the pilot are people over the age of 18 registered with the Peel Medical Centre.

- For any model of integrated care to succeed, it must be designed around the health and care needs of the local population. Therefore, the early stages of the project included determining current and projected local population figures and age breakdowns as well as identifying the wide range of statutory, private, voluntary and community organisations currently providing care and support to those living in the West. Collecting data on current levels of Service activity was also an important step in this process.
- The Project Team has learnt a great deal about the importance of partnership working between providers of care and support across all sectors as well as the valuable contribution the community can make in improving the health and wellbeing of the local population.
- The Project Team formulated a plan of communication and engagement with the local community in the West including those receiving and providing care and support as well as other key stakeholders.
- During the first 6 months of the project we engaged with over 800 people from 100 different organisations. All feedback and comments received were analysed and categorised into key themes with proposed solutions identified.
- An important factor in the success of the progress of the project to date has been the work of the Delivery Group which provides robust governance arrangements for the project whilst monitoring progress against the project plan. Comprising of 25 managers and organisational leads from statutory and third sector organisations,

members meet formally every month as well as being involved in a number of project work streams.

- Measuring the success of the pilot is important as it will determine the outcomes for service users. As part of this process, the task of benchmarking has commenced through the work of one of the project work streams. This includes a staff survey which ran throughout the month of December with over 100 staff responding whilst a service user survey will start mid-January. Both will be repeated in 12 months when we will also compare against data around service activity already collected. The Project Team has also identified a number of carers/service users willing to take part in focus groups and interviews as well as case studies.

A Position Paper incorporating all the findings of the project was ratified by the Delivery Group on 13<sup>th</sup> December 2018. The paper includes short term and long term recommendations which we believe will collectively meet the requirements and aspirations identified by the local community. All 42 recommendations were approved by the Executive Steering Group on 20<sup>th</sup> December 2018;

## **SHORT TERM RECOMMENDATIONS**

### **Access to Services**

- Review operational hours for core services
- Tailor directories of services and adapt it to reflect services available in the West
- Streamline referral process
- Establish a single point of access to the integrated care team

### **Resources**

- Foster and support intergenerational work
- Ensure all practitioners are aware of the costs, and availability, of respite care
- Recruit additional Dementia Home Support Workers
- Further develop Older Peoples Mental Health Services, including the Memory Clinic, and group work currently provided in Douglas, and associated contracted services are delivered in the West
- Undertake regular audits and review of service delivery and extend the remit of the Review Officer role.

### **Person Centred Approach**

- Enable EMIS and RiO users to access each other's record systems
- Supply all staff with appropriate mobile technology
- Implement daily integrated care team meetings
- Liaise with hospital services with regard to outpatient appointments
- Incorporate a focus on an enabling approach in all job descriptions

### **Staff Culture and Communication**

- Implement a shadowing scheme for members of the integrated care team
- Co-location of a core group of practitioners

- Create a data sharing agreement
- Create a common consent form

## **LONG TERM RECOMMENDATIONS**

### **Access to Services**

- Support recommendations from the Urgent Care Review 2016.
- Introduce a Local Area Co-ordinator role
- Develop, or extend, the role of Community pharmacist and introduction of a pharmacy technician role
- Implement effective person centred training for staff
- Set up a 'pop up' – 'drop in' shop

### **Resource Issues**

- Further develop a co-ordinated volunteer recruitment service
- Make addressing social isolation everyone's business
- Extend the remit of the Shared Lives scheme
- Review business support services requirements
- Work with Community Stores and the Housing Division to improve access to aids and adaptations
- Develop an assistive technology strategy and implementation plan
- Develop options for intermediate care
- Support the Department of Infrastructure to set up a 'dial a ride' service
- Consider a pooled budget for all community services based on locality

### **Person Centred Approach**

- Develop an integrated care record
- Develop a Single Assessment Process
- Introduce a care co-ordinator role
- Remove the practice of closing cases
- Promote use of tele health and tele medicine approaches
- Set up local health and social events or drop in sessions
- Implement the Patient Activation Measure (PAM) tool and Help to Overcome Problems Effectively (HOPE) course

### **Staff Culture and Communication**

- Eliminate professional jargon
- Further develop an admission and discharge process between community and hospital services
- Implement localised first stage on call arrangements



Work has now commenced planning the development and implementation of each the recommendations over the next two years. Some of the recommendations will involve short pieces of work which we hope to implement within the next six months whilst others will take much longer.

Meanwhile, the foundations for an operational Western Integrated Care Team are now being laid with identified representatives from statutory and third sector organisations providing care and support in the West scheduled to meet every two weeks to engage in co-designing operational processes and procedures as well as share in joint training events.

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### **The Integrated Care Project Team**

Paul Jackson

Rosaleen McCaffrey

Margaret Swindlehurst

Adrian Tomkinson

**7<sup>th</sup> January 2019**



## Integrated Care Pilot in the West



### Project Update – February 2019



Following the Executive Steering Group meeting in December 2018, work is now well underway with the planning and implementation of the recommendations detailed in our document ***Foundations of Integrated care; A position paper for a pilot in the West***. All 42 recommendations are designed to collectively meet the requirements and aspirations identified by the local community and those delivering care and support in the West of the island.

Service Managers, Operational Leads and Practitioners from Statutory and Third Sector organisations involved in the pilot have volunteered to join work streams which will be responsible for implementing each of the agreed recommendations. Supporting the project on a number of these work streams are other key stakeholders including representatives from the Business Support Services, General Technology Services within the DHSC, and representatives from other Government Departments including Department of Infrastructure, Department of Transport, Office of Human Resources, Information Governance Team, Keyll Darree Education and Training Centre and the Isle of Man Constabulary. Of the 42 recommendations 18 are short term actions which we have scheduled to complete within 6 months whilst the remaining 24 will take up to two years to implement.

Meanwhile, the foundations for implementing an integrated care team in the West are now being laid with representatives from the following Statutory and Third Sector organisations meeting every two weeks:

- ❖ *Community Mental Health Service for Adults*
- ❖ *Corrin Memorial Home*
- ❖ *Crossroads Care*
- ❖ *Dementia Home Care Team*
- ❖ *District Nursing*
- ❖ *Home Care*
- ❖ *Hospice Isle of Man*
- ❖ *Hospital Services (Complex Discharge Coordinator)*
- ❖ *Long Term Conditions Coordinator*
- ❖ *Occupational Therapy*
- ❖ *Older Persons Mental Health Service*
- ❖ *Peel Day Centre*
- ❖ *Pharmacy Technician*
- ❖ *Physiotherapy*
- ❖ *Podiatry*
- ❖ *Public Health*
- ❖ *Reablement*
- ❖ *Registrations and Inspections*
- ❖ *Social Work*
- ❖ *Speech and Language Therapy*
- ❖ *Western Live at Home*



The meetings are being held with kind permission of Peel Commissioners and staff and residents of Mylchreest Court Sheltered Housing complex who allow us to use their meeting room. Following initial introductory sessions and presentations about each other's current roles and responsibilities work is now progressing well on drafting operational guidelines including the team's aims and objectives, roles and responsibilities and details of how the team will function day to day. Agreeing a process for accessing the team for support through a single point of contact is currently underway.

Earlier this month meeting was pleased to welcome members of Sir Jonathan Michael's team of Consultants from the Independent Review of Health and Social Care. They took the time to talk with members of the operational team, asking and responding to questions as well as participating in the scheduled group work.

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Identifying the training needs and formulating a training plan for members of the team will commence in the near future and we are grateful to colleagues at Keyll Darree, the DHSC's Education and Training Centre who have offered to support the project with this task starting with formulating and completing a training needs analysis.

Focus groups are currently being planned with members of the public from the West, many of whom are users of services and carers, all of whom expressed an interest in being involved in the work of the pilot project at our public engagement event last September. These groups will help to inform some decision making going forward as we develop, implement and evaluate the pilot. The Project Team also plan to hold further public engagement sessions in Peel in the Spring.

Measuring the success of the project is important as it will determine the outcomes for those using services. With the valuable support of our partners at the Hospice Isle of Man Research Team we have commenced the task of collecting and analysing feedback from those receiving services in the West as well as those providing services. Our staff/provider survey was completed in December with over 100 staff responding. Our service user survey started mid-January and will run until the end of March. Both surveys will be repeated in 12 months when we will compare against data currently being collected and analysed.



On 25<sup>th</sup> February 2019 we will implement the very first stages of a pilot for an operational model of integrated care in the West of the island. Members of our integrated care team will be meeting daily to organise and coordinate care and support for new contacts to the team as well as those already receiving services including those with complex needs where practitioners require support with decision making or assistance from other members of the team.

As the work streams complete the task of implementing each of the 42 recommendations over the next two years each of these single measures will move us progressively from current working practices to a fully operational model of integrated care in the West.

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If you have any further questions please contact the Integrated Care Project Team on

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## Integrated Care Pilot in the West



### Project Update – March 2019

Work is now well underway with the planning and implementation of the recommendations detailed in our document ***Foundations of Integrated care; A position paper for a pilot in the West.*** Managers and Practitioners from Statutory and Third Sector organisations as well as representatives from other key stakeholder groups involved in the pilot have joined together on work streams responsible for the implementation of each of the recommendations. Of the 42 recommendations 18 are short term actions scheduled to complete within the next 6 months whilst the remaining 24 will take up to two years to implement.

As the work streams complete the task of implementing the recommendations, each single measure will move us progressively from current working practices towards a fully operational model of integrated care in the West.

### **The Integrated Care Team**

We are pleased to welcome two new members to our Integrated Care Team.....



We would like to congratulate Lee Wright who has recently been appointed to the post of Sergeant in the Western Neighbourhood Policing Team. Sergeant Wright takes up his post in early April and will be meeting up in the near future with our current team members with whom he will be working in partnership with as part of the project.

Also joining us soon will be a representative from the Mental Health Services' Community Wellbeing Service which offers a range of brief psychological interventions that can help people experiencing common mental health problems like anxiety, stress, panic and depression to support themselves and make positive changes.



Meanwhile members of the current Integrated Care Team in the West continue to meet every two weeks with work progressing well on developing operational processes including a common consent form, a single point of access/referral processes, operational policy and a single assessment tool. These meetings are held by kind permission of Peel Commissioners and staff and residents of Mylchreest Court Sheltered Housing complex who allow us to use their meeting room.

On 25<sup>th</sup> February 2019 the very first stages of an operational model of integrated care in the West of the island was launched with Practitioners now meeting every Monday and Thursday at Peel Resource Centre. This is an opportunity for practitioners to coordinate care and support, share decision making and provide each other with support and supervision. This includes a core group of Practitioners present at every meeting (including Social Worker, Home Care, Long Term Conditions Nurse, Community Mental Health Practitioner, District Nurse and Third Sector representative) with representatives from other teams attending as required. The meetings will increase in frequency to discuss and allocate new contacts to the team once the new referral/contact form and process have been tested and implemented.



**Project update – your feedback is welcome**

**The Integrated Care Project Team**  
Department of Health and Social Care

Integrated care means offering the public the services they need at the right time, in the right place, as close to home as possible.

Following on from our public engagement session on the 19<sup>th</sup> September 2018 when we sought your ideas and views on developing health and social care services in the West, we would like to invite everyone to our April drop-in event.

We can update you on our progress to date, give you the opportunity to be introduced to members of the team and share your views and suggestions.

**Date: Monday 15<sup>th</sup> April 2019**  
**Time: call in anytime between 4pm - 8pm**  
**Venue: Peel Day Centre, Derby Road, Peel**  
(Turn down the lane opposite the entrance / exit opposite Shoprite car park)

**Refreshments will be served and all are welcome!**

In September 2018 we held a public engagement event in Peel when we sought the ideas and views of the local community on developing health and social care services in the West.

The Project Team has arranged a follow up event on 15<sup>th</sup> April 2019 between 4pm - 8pm. Posters have been distributed around the West of the Island and shared on various social media platforms.

The event will be an opportunity for members of the public to meet the Project Team and Practitioners to hear more about the progress of the project to date and plans for the future. Everyone will be made most welcome and refreshments will be served

## **Focus Groups**

The first of our focus groups has been organised with members of the public from the West, including users of services and carers, all of whom expressed an interest in being involved in the work of the pilot project at our public engagement event last September. The first group will be held at Mylchreest Court Sheltered Housing complex on Tuesday 23<sup>rd</sup> April 12pm - 1pm. Group member's thoughts, ideas and feedback will help to inform decision making going forward as we further develop, implement and evaluate the pilot.

## **What's in a name?**

Our Integrated Care Team in the West will soon have a new name which will more accurately reflect its role and function. Practitioners and Managers from the teams and Services providing care and support in the West suggested a number of team names and voted for their top 3. The final decision from the shortlist will be made by members of the public, Service users and carers who are currently in the process of voting for their favourite

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