Framework for Integrated Personalised Care

Welcome

Framework for Integrated Personalised Care

Agenda

- Welcome
- Introduction to the framework
- Partnership working and key principles
- Practice guidance
- Limitations, roles and responsibilities
- Summary
- Your questions

We will be using menti.com throughout the session to gain anonymous insights and feedback so if you could please have your phone or another device ready that would be helpful

Framework for Integrated Personalised Care

Presenters:

Tracy Ward

Assistant Director of Integration, Access and Prevention, Leicestershire County Council

Jennie Palmer-Vines

Head of Personalisation Leicester, Leicestershire and Rutland Integrated Care Board (ICB)

Go to menti.com and
use the code 88 31 66 5

MENTI
QUESTION 1:

Are you aware of the Health & Social Care Protocol (2014)

Framework for Integrated Personalised Care

Introduction to the Framework for Personalised Care

Framework for Integrated Personalised Care

Working in partnership

Leicestershire County Council

Leicester City Council

Rutland County Council

NHS Leicester, Leicestershire and Rutland

NHS Leicestershire Partnership NHS Trust

Framework for Integrated Personalised Care

Background

- A review of the LLR Health and Social Care Protocol (2014) has been taking place since 2019 in a context of growing demand, with increasing complexity of need across all health and social care partners and against a backdrop of ongoing budgetary pressures and significant challenge in relation to capacity across all parts of the system.
- In addition to this, there has been an ongoing drive towards integration across Health and Social Care, including the development of Primary Care Networks, Integrated Neighbourhood Teams, Home First and the effective utilisation of the voluntary sector and wider community assets.

Framework for Integrated Personalised Care

Key findings from the review

- A shared agreement was still required, but current tasks were outdated or restricted
- Training is required to support the implementation of any revised Protocol
- The delegation of tasks improves patient experience
- There was a lack of visibility and ownership of risk at senior management level in the delivery of the existing Protocol
- An understanding of the principles of the existing Protocol was not widely embedded across health and social care at a grass roots level.

Framework for Integrated Personalised Care

Video content

https://youtu.be/ofqD0K8MbcE

The LLR Framework for Integrated Personalised Care was developed by system partners

- East Leicestershire and Rutland Clinical Commissioning Group
- Leicester City Clinical Commissioning Group
- West Leicestershire Clinical Commissioning Group
- Leicester City Council
- Leicestershire County Council
- Rutland County Council
- Leicestershire Partnership Trust
- Midlands & Lancashire Commissioning Support Unit
- Primary Care
- Independent Sector Providers

The new Framework for Integrated Personalised Care

The Leicester, Leicestershire and Rutland (LLR) Framework for Integrated Personalised Care will supersede the LLR Health and Social Care Protocol (2014) from 1 October 2022.

The LLR Framework for Integrated Personalised Care has two parts

Part A - Management Guidance

Identifies the principles, statutory duties and national guidance that underpin and inform decision making around the delegation of support tasks between Health and Social Care.

Part B - Practice Guidance

Identifies the elements required to support appropriate delegation and aims to help registered practitioners and commissioning workers understand the decision-making process involved in safe and effective delegation of a task from one provider or organisation to another.

Framework for Integrated Personalised Care

What are the key principles?

- Care and Support is person-centred
- Efficient use of resources
- Trusted Assessment
- “If you’re there and competent to perform a task, then do it!”
- Timely, effective reviews of care and care planning
- MDT decision making
- Asset-based approach to care planning
- Make Every Contact Count
- Effective clinical governance

Go to menti.com and
use the code 88 31 66 5

MENTI
QUESTION 2:

How clear do you find the information we have just shared with you?

Go to menti.com and
use the code 88 31 66 5

MENTI
QUESTION 3:

How beneficial do you think the new framework will be for your client group ?

Framework for Integrated Personalised Care

Practice Guidance

Framework for Integrated Personalised Care

Practice Guidance

The Practice Guidance is for registered practitioners, commissioning staff and provider organisations engaged in the planning and provision of health and social care support to individuals.

The Practice Guidance identifies the elements required to support appropriate delegation and aims to help registered practitioners and commissioning workers understand the decision-making process involved in the safe and effective delegation of a task from one provider or organisation to another.

What do we mean by delegation

The undertaking of tasks on behalf of a partner agency referred to as ‘delegation’, meaning that staff from Health may undertake some Social Care tasks and staff from Social Care may undertake some Health tasks.

These are referred to as ‘delegated tasks.’

The healthcare tasks that are delegated to adult social care may be delegated to social care workers who provide services to all people in all settings (i.e., people’s own homes, day care centres, registered care homes, supported living units).

Competency and oversight

- All staff will receive appropriate training and will be assessed for competency for any task that they are required to undertake.

- Proper clinical oversight will be maintained over the person's health needs in relation to any delegated healthcare task.

Framework for Integrated Personalised Care

Process for delegation

Delegation should be recognised as something that is a considered process and be properly supported.

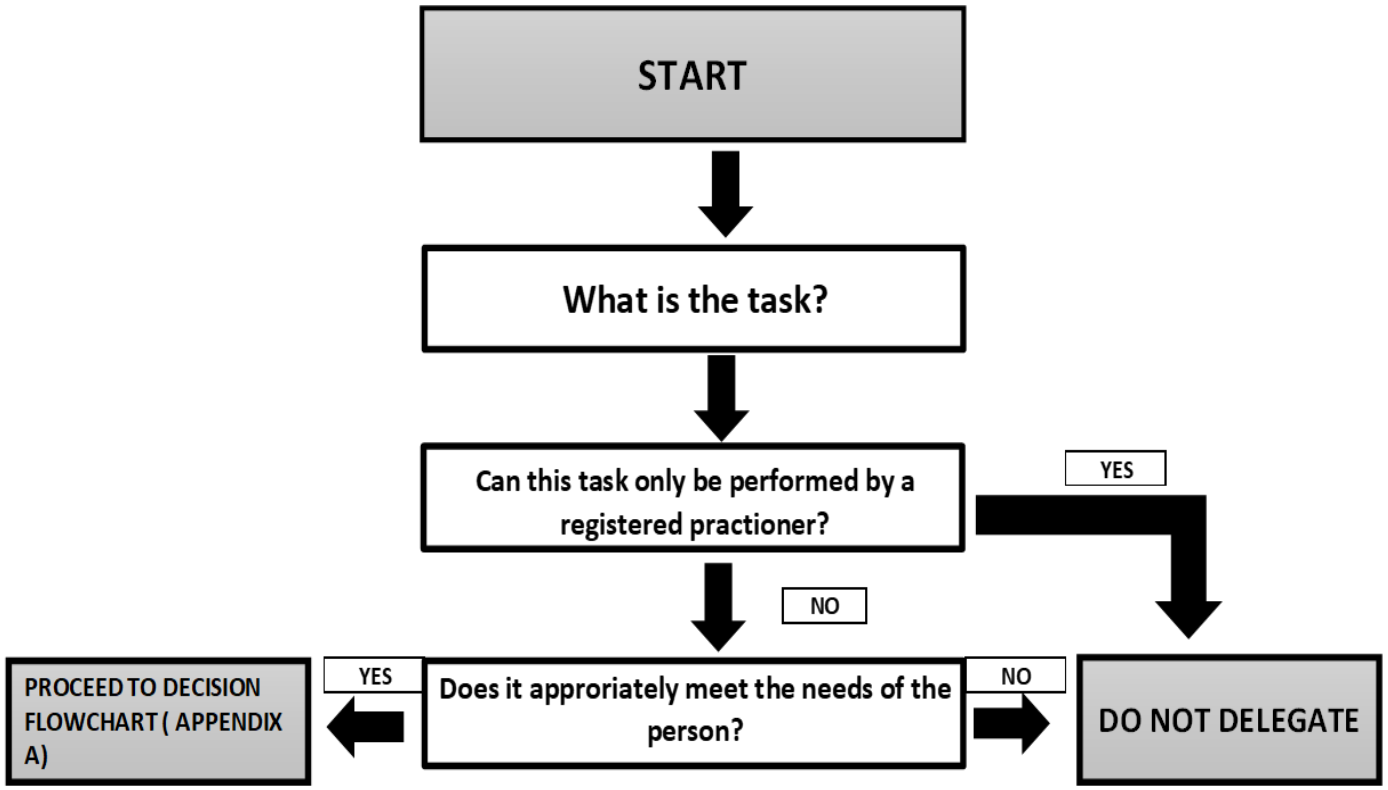
This will help ensure that the support needs of the person are always paramount, that tasks taken on by Health and Social Care workers are appropriate, and that individual workers are provided with relevant training and assessed as competent to perform the task.

Whilst many care providers will be contracted to undertake delegated tasks in line with the Framework, all tasks must still be formally identified and accepted by the provider. Additionally, competency to carry out the task safely and appropriately must be established.

Framework for Integrated Personalised Care

Can the task be delegated?

Decision Matrix One- Can the task be delgated?



Limitations

In some instances a task may not be considered appropriate for delegation, either for a specific patient or on a broader basis. Some tasks must be done by a registered nurse and cannot be delegated. Typically, these tasks might include:

- Administration of intravenous (IV) drugs
- Some complex dressings for wounds
- Insertion or removal of catheter

Framework for Integrated Personalised Care

Roles, responsibility and accountability

Accountability for delegation is a consideration for all those involved, including senior managers, registered practitioners and commissioners.

Delegated tasks will be identified and agreed through the locality MDT (usually the Integrated Neighbourhood Team). It is anticipated that the majority of these will be straightforward and appropriate, with the relevant training and assessed competency, and will be clearly incorporated into the support plan without alteration.

Where the task cannot be incorporated into the support plan without alteration, the MDT will agree a new support plan, apportioning the cost of any additional commissioned time.

Framework for Integrated Personalised Care

Registered practitioners

- A registered practitioner who delegates a task remains accountable for the appropriateness of the delegation and ensuring that the person who does the work is able to do it. They cannot delegate that accountability.

- However, provided the decision to delegate is made appropriately they are not accountable for the decisions and actions of the organisation or associated Health and Social Care workers to whom they delegate. The individual organisation is accountable for accepting the delegated task and responsible for their actions in carrying it out in line with the training received.

Framework for Integrated Personalised Care

Clinical oversight

- Clinical governance needs to include arrangements for ongoing clinical oversight and contact arrangements for advice and reassessment. This is particularly important where a patient's needs are known to be changing or fluctuating, but it must be in place in all circumstances.

- MDT decisions to delegate health tasks to social care must take account of clinical risk and the clinical record must reflect the outcome decision in respect of managing the complexity of that risk.

Framework for Integrated Personalised Care

Case study

I was in hospital and needed help to get home. We had a meeting and it was agreed that when I went home that the people best placed to support me would be people I know and trust.

I have a carer 7 days a week, twice a day. I needed a steroid cream applying to my lower leg twice a day. I can't reach my leg to do this for myself and in the ward meeting it was agreed I needed to have this cream. I asked if the carers could help me.

The reply I received was, yes, if they are shown and trained to apply the cream. My response was yes, I would like that to be the case as they already help me and I know them. Before I went home, my carers were trained on how to apply the cream.

When I went home for the first week, I had some nurses come in as well as my care team. Now my carers apply the cream, write in my records they have done so, record any changes and the District Nurse comes once every 10 days to check up on me. I don't have lots of different people coming in to do things for me, which I like. I can get out and about and I feel safe, living at home.

Go to menti.com and
use the code 88 31 66 5

MENTI
QUESTION 4:

Do you feel like you have enough knowledge (or access to tools) to be able to roll out this new way of working with your colleagues?

Framework for Integrated Personalised Care

When will the new Framework supersede the Health and Social Care Protocol?

1 OCTOBER 2022

Framework for Integrated Personalised Care

Support availability

- Published Material - https://resources.leicestershire.gov.uk/fipc
- Video - https://youtu.be/ofqD0K8MbcE

Framework for Integrated Personalised Care

Any questions?

Go to menti.com and
use the code 88 31 66 5

MENTI
QUESTION 5:

Reflecting on this update about the framework, is there anything else you would like us to take away and consider?