



Thematic Review of Moray Self Directed Support

Improvement Action Plan (2019/2020)

August 2019

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This action plan addresses the 9 recommendations made by the Care Inspectorate following the publication of their thematic review of SDS in Moray in June 2019.

The Action Plan will be for the period August 2019 to July 2020.

Recommendation for Improvement (as per CI)	Expected Outcome	What will be done	Start	Finish	Lead Officer
Theme: Key performance outcomes					
1.The partnership should ensure that it is able to robustly record, measure and report on the personal outcomes being achieved as a result of self-directed support on an individual and aggregated basis.	At a H&SCM partnership level:- <ul style="list-style-type: none"> The H&SCM performance framework is reviewed and incorporates an analysis of both SDS related quantitative & qualitative data. 	1.1 Facilitate a workshop with Health & Social Care colleagues that will review Support Plan documentation specifically in terms of recording personal outcomes (Snr Performance Officer)	Sept	Jan	Tracey Abdy
	At a Service level:- <ul style="list-style-type: none"> Both quantitative & qualitative data is effectively used for the commissioning & 	1.2 Hold discussions with Community Care Stats to ensure Business Objects can run reports based on any changes (Support Officer (Research & Information))	Sept	Dec	

	<p>decommissioning of services. Specifically, the reasons for personal outcomes being met or not met.</p> <p>At a Team Level:-</p> <ul style="list-style-type: none"> Social Work & Health colleagues are confident to use both quantitative & qualitative data to inform their interventions and to provide effective support for people who access health & social care services in Moray. 	1.3 Test revised Support Plan/Care Support & Treatment Plan Forms (Issues Log submitted to staff) (tbc)	Oct	Dec	
		1.4 Generate revised personal outcome performance reports on a monthly then quarterly basis from CareFirst. Reports submit to the SDS Steering Group and are incorporated into the Partnership Performance Management Framework (Snr Performance Officer & Support Officer (Research & Information))	Oct	Dec	
		1.5 Workshop held to review Issues Log and to consider outcomes related performance reports generated (tbc)	Feb	Feb	
		1.6 As part of the review of the Support Plans/Care Support & Treatment Plan forms, develop a training programme that will support health & Social Care colleagues to articulate SMART personal outcomes, the adoption of talking points approach and how quantitative and qualitative information can be used to improve professional practice. (Snr OD Advisor)	Oct	Nov	
		1.7 The Practice Governance and SDS Steering Group approve the revised Care Treatment & Support Forms (Service Manager)	Mar	Mar	
		1.8 SMART Personal Outcomes Training	Nov	Nov	

		& Development Programme is agreed by the SDS Steering Group (Snr OD Advisor)			
		1.9 Implement SMART Outcomes Personal Training & Personal Outcomes Training & Development Programme (Snr OD Advisor)	Dec	July	
Theme: Getting Support at the right time					
2.The partnership should ensure that supported people have access to independent advocacy when they need it to support decision-making around self-directed support options, choice and control.	<p>At a Service Level:-</p> <ul style="list-style-type: none"> The Independent Advocacy Contract is reviewed to help ensure that it supports people with their decision making in relation to SDS. <p>At a Team Level:-</p> <ul style="list-style-type: none"> Individuals are fully informed about SDS and confident in promoting formal, independent advocacy. 	2.1 As part of the contract review process, commissioning colleagues analyse the use of formal advocacy data in the context of SDS decision making (Snr Commissioning Officer)	Oct	Nov	Roddy Huggan
		2.2 As per Commissioning timeline, revised contract specification developed (Snr Commissioning Officer)	Dec	Jan	
		2.3 As per commissioning timeline contract submitted for tender (Snr Commissioning Officer)	Feb	Feb	
		2.4 Guidance for Health & Social Care staff to promote formal, independent advocacy is revised and developed. This would also include explaining the support that can also be provided by the SDS Team (Commissioning & Performance Officer (Policy & Procedure))	Sept	Sept	
		2.5 Revised guidance is agreed at the SDS Steering Group and Practice Governance Groups (SDS Officer)	Oct	Oct	
		2.6 Up-take rates of Advocacy services is	Nov	Nov	

		monitored on a quarterly basis by the SDS Steering Group (baseline to be established) (Snr Performance Officer)			
Theme: Impact on Staff					
3. The partnership should develop health colleagues' knowledge of and confidence in self-directed support to enable them to support its ongoing delivery.	<p>At a H&SCM partnership level:-</p> <ul style="list-style-type: none"> To work with health colleagues to increase their understanding of SDS and the underpinning principles; Senior Management Health colleagues are confident in their knowledge of SDS Develop an SDS induction training for senior health colleagues to complete in relation to SDS <p>At a Team level:-</p> <ul style="list-style-type: none"> Establish if there is an on-line training portal for front line health practitioners where the online SDS training can sit for colleagues to complete as part of their induction. 	3.1 A programme of highly participative SDS workshops is developed for MDT health staff (tbc) in relation to the underpinning principles of SDS. Health colleagues also invited to personal outcome training 1.7. (Snr OD Advisor)	Oct	Nov	Sean Coady
		3.2 Workshops are agreed by SLG	Dec	Dec	
		3.3. The programme of workshops is delivered (tbc)	Jan	July	
		3.4 An on-line training resource for frontline practitioners is sourced and approved by the SDS Steering Group (Snr OD Advisor)	Jan	Jan	
		3.5 Online SDS training resource is promoted and made available (tbc)	Feb	Ongoing	
		3.6 Impact on the training and development activities is evaluated and reported to the SDS Steering Group (tbc)	July	July	
Theme: Delivery of key Processes					
4. The partnership should ensure more explicit recording of discussion relating to self-directed support information, options and personal budgets.	<p>At a Service Level:-</p> <ul style="list-style-type: none"> Ensure that we can demonstrate transparency in relation to the SDS option 	4.1 As part of the review of the Support Plans/Care Support and Treatment Forms (1.1 & 1.3) ensure that the forms facilitate the capturing of SDS conversations (SDS Officer)	Sept	Dec	Sean Coady

	<p>chosen and that people are provided with the appropriate information and support to make an informed decision.</p> <p>At a Team Level:-</p> <ul style="list-style-type: none"> Team members are confident in capturing the key salient points in relation to SDS options and discussions. 	<p>4.2 As part of the development and implementation of a Personal Outcomes based Training and Development Plan (1.7, 1.8 & 1.9), ensure that colleagues are confident and able to complete the revised form (tbc)</p> <p>4.3 The SDS Steering Group receives reports allowing them to monitor and analyse responses given (Snr Performance Officer)</p> <p>4.4 As per 8.1-8.7 of this Project Plan, ensure that, as part of the quality assurance process evidence of conversations is collated (SDS Officer)</p>	<p>Oct</p> <p>Dec</p> <p>Sept</p>	<p>July</p> <p>July</p> <p>Aug</p>	
<p>5. The partnership should make sure that supported people and unpaid carers receive regular reviews of their care and support to maximise the opportunities for ongoing choice and control.</p>	<p>At a H&SCM Partnership Level:-</p> <ul style="list-style-type: none"> The proportion of reviews outstanding after 12 months (service standard) should be incorporated as part of the Partnership Performance Management Framework. <p>At a Team Level:-</p> <ul style="list-style-type: none"> MDT colleagues are able to support the review of personal outcomes in a timely manner and that service users are supported to maximise choice and control over their package giving them the flexibility to move option to achieve this. 	<p>5.1 Review the Unpaid Carers Contract to ensure clarity concerning roles & responsibilities for undertaking Care Plan Reviews (Snr Commissioning Officer)</p> <p>5.2 As part of the development of a Partnership Performance Management Framework (1.4), develop a 12 month service standard for the completion of Support Plan/Care Treatment & Support Plan Reviews for supported people and unpaid carers (Snr Performance Officer).</p> <p>5.3 Develop an improvement action plan that will ensure that the backlog of outstanding reviews can be completed within a realistic timescale for supported people and unpaid carers for (Snr Performance Officer)</p>	<p>Sept</p> <p>Oct</p> <p>Oct</p>	<p>Sept</p> <p>Dec</p> <p>Dec</p>	<p>Sean Coady (for supported people) & Jane Mackie (unpaid carer)</p>

		5.4 Performance reports are submitted to both the SDS Steering Group and ASPMG to allow the effective monitoring of the completion of reviews (Snr Performance Officer)	Dec	July	
Theme: Policy development and plans to support improvement in services					
6. The partnership should establish a clear system for capturing self-directed support performance information and this should be evaluated and used to drive positive change and improvement.	At a H&MSCM Partnership Level:- <ul style="list-style-type: none"> Health & Social Care Moray should be able to use both quantitative and qualitative personal outcomes data to drive systems wide improvement and support transformational change 	6.1 As part of the development of a Partnership Performance Management Framework (1.4), ensure personal outcome reports are generated that not only capture both qualitative and quantitative data but also service standards. (Support Worker (Research & Information & Snr Performance Officer)	Oct	Dec	Tracey Abdy
		6.2 Personal Outcome Reports –including service standards- are interrogated by ASPMG on a quarterly basis (Snr Performance Officer & SDS Officer)	Dec	Ongoing	
		6.3 Personal Outcome Reports—including service standards- are interrogated by the SDS Steering Group on a monthly basis (Snr Performance Officer & SDS Officer)	Dec	Ongoing	
		6.4 Personal Outcome Reports are interrogated by the Strategic Commissioning Group on a monthly basis (Snr Performance Officer & Commissioning Manager)	Dec	Ongoing	
Theme: Management and support of staff					
7. The partnership should develop	At a H&SCM Partnership Level:-	7.1 A Training Needs Audit is undertaken	Oct	Nov	Jenny O'Hagan

<p>and implement a learning and development strategy to address health and social care workforce self-directed support learning and development needs.</p>	<ul style="list-style-type: none"> To ensure all key staff –across both health & social care- receive SDS training appropriate to their needs and H&SCM further strengthens it approach to personalisation 	<p>which is focused on further embedding SDS across health and social care (Snr OD Advisor)</p>			<p>& Health colleague (tbc)</p>
		<p>7.2 Based on the insights gained from the audit, an overarching SDS training and personal development programme aimed at IJB members, senior management and Health & Social Care front line members of staff is developed. The training & development programme will incorporate 3.1-3.6 & 4.2 of this improvement action plan and induction and on-going refresher training (Snr OD Advisor)</p>	Dec	Dec	
		<p>7.3 The SDS Training and Development Programme is approved by the SDS Steering Group, OMT,SMT and IJB (Snr OD Advisor)</p>	Dec	Jan	
		<p>7.4 The SDS Training and Development Programme is implemented (Snr OD Advisor)</p>	Jan	July	
		<p>7.5 To review training delivered and obtain feedback from attendees to develop training material and plans for next year (Snr OD Advisor)</p>	July	July	
Theme: Leadership and direction that promotes partnership					
<p>8. The partnership should regularly evaluate the effectiveness of communication about self-directed support and its impact within self-directed support delivery in the partnership.</p>	<p>At a H&SCM Partnership Level:-</p> <ul style="list-style-type: none"> Capture the lived experience of accessing SDS (all options) 	<p>8.1 To develop a rationale for undertaking quarterly telephone surveys of people who access SDS (options 1-4) (SDS Officer)</p>	Sept	Oct	<p>Roddy Huggan</p>
	<p>At a Service and Team Level:-</p>	<p>8.2 SDS Steering Group agree to the</p>	Oct	Oct	

	<ul style="list-style-type: none"> The findings and key insights gained from the engagement activities is reported to Health & Social Care MDT colleagues 	telephone survey audit. Insights reported to this Group (SDS Officer)			Jane Mackie	
		8.3 Audit is implemented (SDS Officer)	Nov	Every quarter		
		8.4 To develop a rationale for an annual postal survey (SDS Officer)	Dec	Dec		
		8.5 SDS Steering Group agree to the postal survey rationale. Key insights reported back to Steering Group (SDS Officer)	Jan	Jan		
		8.6 Postal Survey Implemented (SDS Officer)	Feb	Feb		
		8.7 To develop a rationale for an annual focus group of people who use SDS and Carers (SDS Officer)	Mar	Mar		
		8.8 SDS Steering Group agree to the annual focus group rationale. Key insights reported back to Steering Group (SDS Officer)	May	May		
		8.9 Findings disseminated to all Teams, SLG and IJB (SDS Officer)	July	July		
9. The partnership should ensure that it takes a whole system strategic approach to supporting implementation, evaluation and continuous improvement of self-directed support across health and social care. This approach should	At a H&SCM Partnership Level:- <ul style="list-style-type: none"> The right stakeholders are present and have direct input into the development of SDS 	9.1 Review the membership of the SDS steering group to ensure that there is a health representation. (SDS Officer/Steering Group)	Aug	Sept		
		9.2 Consider how to most effectively engage with colleagues and stakeholders	Aug	Oct		

<p>ensure that partners are fully involved, and the partnership can demonstrate a shared approach to the implementation of self-directed support.</p>	<ul style="list-style-type: none"> • Leadership and governance which allows for wider partners to have an active input and remain informed as to key updates relating to SDS. • Ensure clear and consistent linkages the Strategic Commissioning Group, Localities and Practice Governance Groups 	<p>in the context of the new H&SCM management and locality structure (SDS Officer/ Steering Group)</p>	<p>Every Quarter</p>	<p>Every Quarter</p>	
		<p>9.3 As per the actions outlined in this Improvement Plan, Performance Reports, Lived Experience Insights are circulated to SLG, the Strategic Commissioning Group, Locality Management Groups and IJB (SDS Officer)</p>			