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Health and Care – putting the customer at the centre

This note discusses a scheme which looks at the social and health services and the integration between them. The work was launched in autumn last year, commencing with a pilot at the beginning of the year, with a team of workers from the Council and from the Health Service working from Ysbyty Alltwen, Tremadog. The early results are promising and serve as a basis for expanding the work.

Background

This is collaborative work between the Council's Adults, Health and Well-being Department and the Betsi Cadwaladr University Health Board to look at physical impairment services and older people services.

The aim is to focus on what is important for the client, and to avoid a situation where failure leads to the same person being re-assessed or re-referred to the service time and time again.

Through implementation based on the individual's needs, the intention is to break the historical trend of placing an individual in a 'box' or 'category' for the convenience of public services despite the individual's real needs.

Councillor Gareth Roberts, the Council's Cabinet Member for Adults, Health and Well-being Services stated:

“Unfortunately, work arrangements often seem to hinder rather than support staff in doing their work. Under the pilot scheme, the work team from the Council and the Health Board gained an understanding of the implications of the existing work arrangements and began to build a new work system which focuses on what is important to the client.

This work has seen a significant change in direction in health and care services arrangements where we place the patient's wishes at the heart of our work and adapt the service around the needs of the individual. Through expanding our understanding and our experiences within the field, different and improved methods of providing services are coming to light. Rather than sticking to the old way of doing things we are adapting our arrangements in order to place the client at the heart of the work.

In the long run, this means that everybody will benefit - the client receives a better service and the public services are able to respond to needs sooner and within strict budgets.”

How the change was introduced

Under the pilot scheme, new work arrangements were established. For example, it was important that the team bore in mind what the purpose of its work was, namely to help vulnerable people to live their lives how they want to live them, and a method of working where staff can focus on what is important for the client was defined. The team is experimenting with different methods of working and is learning through experience.

New arrangements coming to fruition

As part of the new procedure, the following changes are coming to fruition:

- Front line workers are leading on the change based on experience of real cases
- One team of workers from the health service and the social care service working from a community hospital
- Everyone working on the same Information Technology system
- A scheme that, in the long run, will lead to less paperwork and more time to be spent with clients
- The same person keeping all elements of the individual's history who is able to bring in the relevant expertise at the right time
- Measures that enable us to understand and improve
- Skills that are helping people to help themselves and reduce the dependency on public services.

Next steps

Gradually, the scheme will move on to receive all referrals from surgeries in Blaenau, Penrhyndeudraeth, Porthmadog and Cricieth; commencing in the Eifionydd area. More health and social care workers will be pulled into the team to serve these areas.

The team will also be testing the new way of working with higher numbers and a broader variation of cases, as well as building on the strengths of individuals and communities.

Councillor Gareth Roberts added: *"This scheme is in Alltwen as we have successfully put the Gwynedd Way theory at work in the real world. We have learned a lot from the work, we are only starting but the early signs are promising and it is the Council's aim to look at other fields where we can change our way of working to put the customer at the heart of the work."*

Lessons learnt from the project

Placing the client / patient at the heart of the work: In order to get to grips with the client's real needs, both the Health Services and Social Services are required, but both organisations have different priorities. They have their own budgets and management structures, and

often the aims are not based on what is important to the client/patient. This can lead to organisations working contrarily to each other.

Establish the need of the patient / client from the very beginning: Before introducing the changes, there was a danger that the same people were coming back to the service as not enough time was being spent at the beginning to understand what was important. In one recent example, an enquiry was noted as a housing matter which was not a priority for the team. But after spending time with the individual it was clear that he was a vulnerable individual with complex problems.

Eliminate unnecessary bureaucracy: Paperwork can hinder staff's efforts to address the needs of the customer - in this specific project it was seen that paperwork was excessive, for example a form with over 100 pages to fill for four hours of home nursing care. Joint budgets, improved collaboration and trusting in front line workers to do the right thing based on their knowledge would mean less time spent filling in forms and more time working towards the objective of supporting vulnerable people.

Understanding the real need from the beginning can save money: Of the 25 cases that the team has been dealing with up to now, it is clear that there are creative and varied ways that we can address people's needs, and that a traditional care home package or a placement in a nursing or residential home is not always the best solution. It is early days, but the results suggest that initial investment into understanding what is important to the individual could lead to commissioning less of the traditional expensive services. For example, installing a stair lift in the patient's home could enable them to go straight home from Ysbyty Gwynedd without having to spend time in a community hospital.

As the work is developing, we are collating evidence for the types of results that people wish to realise, and how we as a council can collaboratively meet the requirements in the best way with our partners. Maintaining a close relationship with local communities, third sector organisations and private providers will be an integral part of this work.

Sharing of ideas

If you have any ideas, please share them with us, so that together we can improve the quality of life of the people in Gwynedd. Could you please share them by e-mailing all relevant information to TeleriSamuelToohill@gwynedd.gov.uk