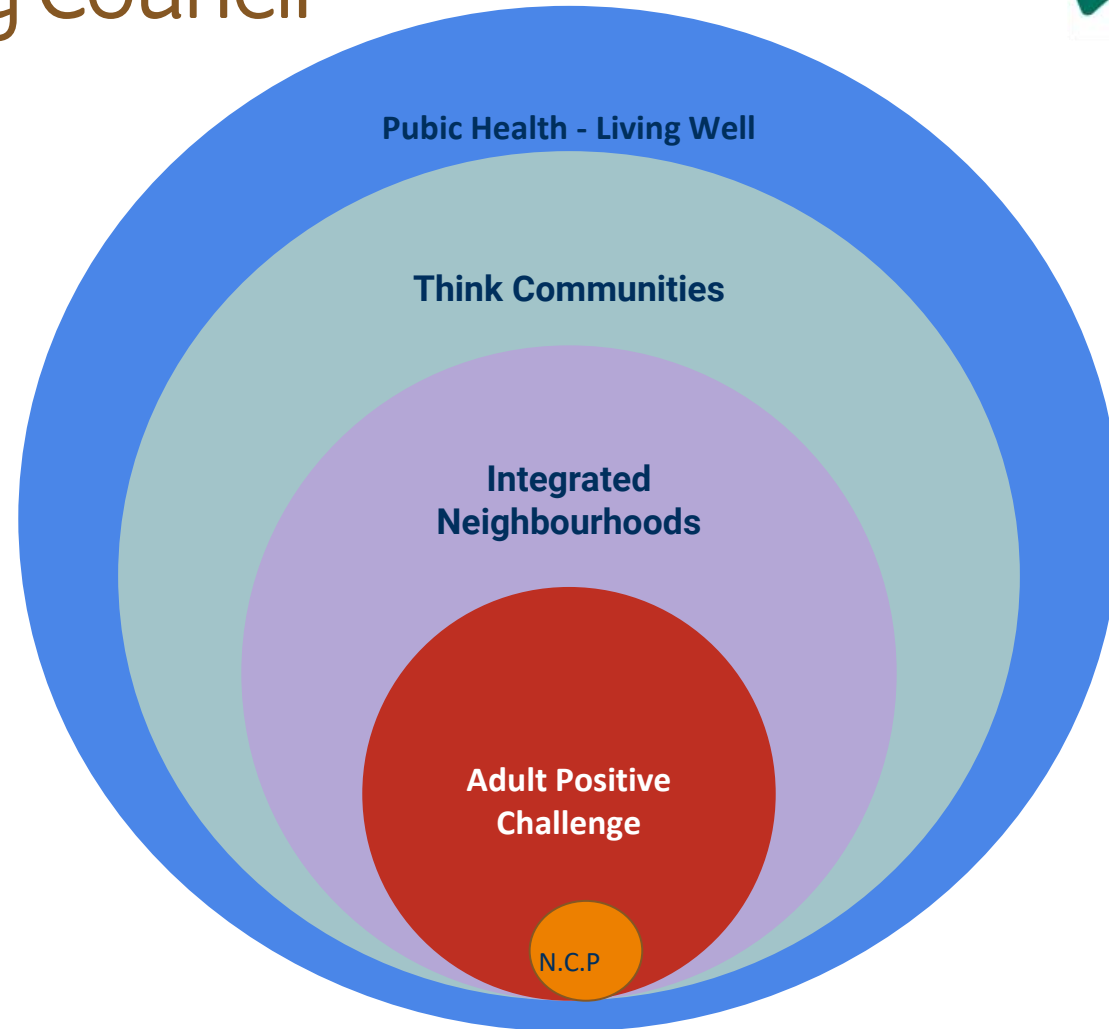


Adults Positive Challenge Programme

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Cambridgeshire
County Council



Rationale

- People have better outcomes when they are supported to remain as independent as possible in and by their communities
- Better outcomes for people cost less
- Better outcomes influences the level of demand placed on our councils in a way that does not rely on cutting services or restricting access

Challenges



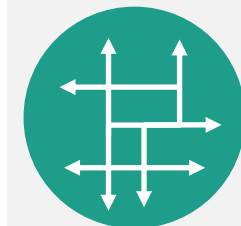
increasing demand



workforce shortages



significant financial constraint



complex system

Where we need to get to



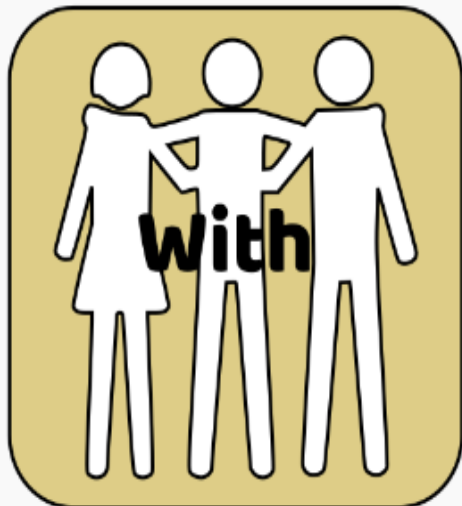
TO =
everything
done is to
us, without
us....



FOR =
everything
done is
done for
us, without
us....




WITH =
nothing for
us, without
us....



BY = done
by us, for
ourselves
and each
other



A large group of approximately 50 people, including men and women of various ages and ethnicities, are gathered on a green lawn. They are all smiling and waving their hands towards the camera. The group is arranged in several rows, with some people in the front row kneeling or sitting. The background shows a large tree on the left and a clear sky. The overall atmosphere is positive and energetic.

What is our
ambition?

Vision for ASC

People are supported to remain as independent as possible in and by their communities

What this means

- ✓ A more localised approach to supporting citizens, where people feel connected and able to help themselves and each other
- ✓ Focusing on early intervention and prevention, and maximising people's independence at every interaction
- ✓ Delivering services for the future in an efficient and affordable way

How will this improve outcomes...



Now: Over 40% of staff see the role of ASC to be providing people with the services they ask for

Future: My role is to help people to achieve the outcomes that matter to them in their life



Now: Over 50% of cases could have been prevented, delayed or reduced through effective targeting of preventative services

Future: I know how I will prevent, delay or reduce issues now and in the future which will stop me living a meaningful life



Now: Carer breakdown is a factor in over 40% of cases, yet only 75% of identified carers receive support or signposting

Future: I am aware of the wide range of options that mean the person I support and myself can continue to live a good life our way



Now: 60% of staff would like to help people take more calculated risks in order to improve outcomes

Future: I support people to positively manage risks to achieve what they wish for from day-to-day life

Changing the Conversation | Strengths Based Approach best for people

Changing the Conversation aims to embed a **person centred, strengths-based, community connected, and outcome focused approach**

By utilising **strengths based approaches** to find different ways to **work with people to maximise independence** we can help adult social care become **more sustainable** whilst **improving outcomes** for people

- Looks for potential and helps people to realise this by facilitating creative and tailored options which are not limited by a 'menu'
- Recognises achievements by reducing formal support preventing a reliance on paid for services
- Most people don't want services – intrusive and disruptive
- Avoids 'community institutionalisation' and links people back into their communities
- Utilises what's available – default is not a paid for service

Adults Positive Challenge Programme

Workstreams

Neighbourhood based operating model

- Disruption plan
 - Hybrid model with primary care
 - Practitioners can access list of community assets
 - Relationships with the vcs
- Learning from Neighbourhood Cares Pilot

SRO – Jackie Galwey

Carers

- Staff have right conversations with carers
- Commission carer services with prevention lens
- Right support is available to carers
- Improve offer for self funders / web info

SRO - Helen Duncan

Embedding TEC

- Promoting TEC in childhood
- Staff have right conversations re TEC
- Improve offer for self funders
- Review range of TEC equipment available

SRO Jackie Galwey

Changing the conversation

- Maximising independence at every interaction
- Workforce development approach to strengths-based practice
- Outcomes orientated
- Embed practice

SRO Tina Hornsby

Commissioning

- Evaluation of prevention and early intervention
- Adopt an outcomes approach
- New models of care/ care suites

SRO - Oliver Hayward

Targeted reablement

- Focused on goals
- Therapy input
- Linked into wrap around community support
- Working with right people (admissions avoidance, bridging solution)

SRO – Debbie McQuade

Panel

- Improving panel efficiency and effectiveness
- Increasing panel compliance to Care Act principles

SRO - Helen Duncan

Preparing for Adulthood

- Changing practice and commissioning
- Promoting independence in childhood to reduce lifetime cost
- Enablement approach

SRO – Graham Puckering

Examples of Changes and their Impact

Changing the Conversation through Public Information

Peterborough Information Network -
expanding the Directory to be a resource for all
adults. [PIN](#)

Guide to Independent Living - produced in
hard copy replacing the Care and Support
Directory

Think TEC First

Overview

Mr B had recently been diagnosed with dementia and moved into Extra Care housing. Mr B did not recognise he had memory problems and lacked insight into his condition. He was fiercely independent and became very defensive when his son showed concern about him becoming muddled with his medication. Tension was building between Mr B and his son, causing arguments when his son visited him.

Consequently a care package was introduced to prompt Mr B to take his medication twice daily. Mr B had no other care needs and made it quite clear to all concerned that he disliked having these calls.

Intervention

Introduction of a **Pivotell medication dispenser** that enabled Mr B to independently take the right medication, at the right time. Staff agreed to initially monitor how he was managing the dispenser and it soon proved to be successful. His son was more than willing to be responsible for filling the dispenser every 2 weeks and the support from care staff was withdrawn.

Outcome

Mr B was more settled in his new surroundings as he felt more in control of his life now there was less intrusion. This improved his self-esteem, self-worth and confidence.

Son had peace of mind and his anxiety levels were reduced. Visits became less confrontational to the benefit of both.

Cost Savings

Approx. £50 p/w or £2600 p/a - The medication dispenser paid for itself within 2 weeks.

“I call it my magic machine. I don't have to fiddle around sorting my tablets out anymore, they just appear like magic!”

Can Reablement enhance independence?

Overview

Mr D was admitted into hospital due to pneumonia. He was discharged from hospital with the Reablement team going in 4 times a day. The Occupational therapist went out to Mr D to do an assessment and set his goals, around washing and dressing, meal preparation and medication management. When the occupational therapist went out to do their assessment Mr D mentioned that his mobility was not as good prior to being in hospital. Mr D was not confident using the oven as his wife always cooked for him before she passed away, he was confident in preparing cold meals and hot/cold drinks.

Intervention

The reablement physiotherapist managed to work with Mr D to not use any walking aids and to use a walking stick for outdoor mobility rather than a frame he was discharged from hospital with. The occupational therapist also assessed Mr D for various pieces of equipment such as a shower chair for sitting when he strip washes, a perching stool for the kitchen so he can sit at the kitchen table to eat his meals. The Occupational therapist also placed chair raisers on Mr D arm chair and measured up for a second banister rail for Mr D stairs, grab rail for the front door and a newel post on downstairs post. Care and repair completed this work. A tab timer (Assistive tech) was also suggested to support Mr D with remembering to take his medication. A tab timer was set up to alarm when it was time for Mr D to take his medication.

The Care support worker did a monitoring visit every week with Mr D daughter present and supported Mr D to access Icare meals 7 days a week. During each monitoring visit Reablement calls were reduced each time as Mr D was making progress each week.

Outcome

Mr D was able to independently get in and out of his property, and up and down his stairs.

Mr D was able to meet his own personal care need and access adequate hot and cold meals.

Mr D was then independent with taking his medication. Since Reablement Mr D has not needed the tab timer and is taking his medication independently.

Mr D finished Reablement independent and met all his Reablement goals and needing no ongoing support. The equipment and the support he had while with Reablement supported Mr D to become independent again.

Cost Savings

Avoidance of long term care and support package at an average monthly cost of £621

Supporting Carers to continue caring for loved ones

Overview

Mrs C is a lady in her 80's with dementia. She was discharged from hospital following a UTI and returned home. She needed to have a bed downstairs due to poor mobility. Mrs C's husband was frail and had health problems of his own, needing oxygen at night. Mr C was concerned he wouldn't be able to cope looking after his wife. He was also worried that she may fall when trying to get out of bed and that he wouldn't know what she was doing during the night whilst he was sleeping upstairs.

Intervention

A **movement sensor** was provided and placed on the floor beside Mrs C's bed downstairs, including a **vibrating alarm pager**. Both of these provisions would alert Mr C as soon as his wife was sitting on the edge of the bed. Mr C kept the pager in his pocket during the day and on his bedside cabinet at night.

Provision of a **mini CCTV camera** was set up unobtrusively and angled so it could focus on Mrs C when she was in bed. Mr C had a small handheld **night vision monitor** that enabled him to see his wife from his bed upstairs. It also had a microphone that could be switched on to hear any sound. This helped Mr C decide whether he needed to go down to attend to his wife or not.

Outcome

Risk of falls greatly reduced

Peace of mind, re-assurance and feeling of relief for carer

Mr C was able to conserve his energy, reducing the impact on his own health condition.

The couple could remain living together in their marital home

Cost Savings

Potential hospital admission and consequential social care costs avoided due to these preventative measures

Necessity for respite care reduced as carer supported to avoid a crisis developing.

Potential long term residential dementia admission avoided

What are service users and carers saying?

Quote from the Reablement Service User Satisfaction Survey

“I am very happy and grateful for the reablement service. After an extended stay in hospital and the fear of my condition having a permanent effect on me already being disabled, I am most satisfied with service. My confidence had been knocked severely and I feared being on my own and unable to cope. They have restored my confidence (and that of my husband). Just having someone with me whilst I have washed/showered myself and prepared lunch has been an absolute godsend. During the time that I have had the reablement service I have realised that my condition does not have to restrict my normal activities any more than normal. It is an excellent service and I would highly recommend it to everyone experiencing difficulties. Thank you so much for all the care, and understanding - long may the service continue”.

Quote from the Reablement Service User Satisfaction Survey

“The Reablement support workers were very supportive, pleasant and kind. The physio was able to push me, with a great sense of humour, to use my rollator outdoors and succeeded in getting me to climb our staircase on three occasions and therefore getting me over my reluctance and hopefully will help me to start using a walking stick”.

Quote about a medication dispenser

“I call it my magic machine. I don't have to fiddle around sorting my tablets out anymore, they just appear like magic!”

Quote from a carer about a range of TEC put in for the person they care for

“It's made my life so much easier, I couldn't be without it.”