



Llywodraeth Cynulliad Cymru
Welsh Assembly Government

Framework of Services for Older People

Background

The headings for the Framework of Services for Older People document are laid out in draft below. The layout of the Chapters will help to further explain what the Framework is about and stimulate individuals and organizations to provide examples of good practice.

The headings are designed to stimulate thinking and should not be taken to imply a wish to compartmentalize services under restrictive headings. We are seeking contributions about services capable of responding to the range of individual needs in a flexible, coordinated and integrated way.

There may be areas where the headings in this draft are not appropriate. We will amend the draft outline as required to capture examples of good practice. See Chapter 5 for service categories.

The document will reference examples of good services valued by older people, carers and those professionals who work with them and will be supported by a website to provide more detailed information.

You may wish to reference examples of work completed in relation to other strategies. This may include work, for example, completed for the Strategy for Older People.

The Framework will provide a useful resource for those planning and developing services in the future.

Proposed Outline of the Framework of Services for Older People Document

Chapter 1

Introduction and Principles Underpinning Service Delivery and Desired Outcomes of Service Delivery

Chapter 2

Setting the Context

- Demand – population projections
- Messages about sustainable models of service delivery in terms of finance and workforce (use Care Strategy 2003 and PSSRU projections)
- Relationship to all relevant Welsh Assembly Government Strategies

Chapter 3

Consultation with older people and carers

It would be helpful to know of any good examples of consultations with older people and carers. Background information concerning:

- Focus or purpose of consultation?
- How it was organized?
- Who was engaged? E.g. age group
- How many participated?
- Report of outcomes of consultation

Link to the results of the Care Council for Wales Care at Home project.

Chapter 4

Commissioning Services for Older People

Link to the *Fulfilled Lives, Supportive Communities* Commissioning Framework and Guidance. Information for commissioning services for older people will be included in the Framework appendices.

Examples of management of change would be very welcome e.g. old services de-commissioned and replaced by new services.

This Chapter will include references to potential for formal partnerships between Local Authorities and Local Health Boards; and partnerships between Local Authorities.

It would be helpful to receive positive examples of collaborative working. This could involve collaborative work on identifying people at risk (case finding, chronic conditions, falls, etc) or in terms of providing services. Collaboration may involve a county-wide initiative or GP practice or work with Third sector in one community. It could involve the co-location and remodeling of services.

Chapter 5 Examples of Services valued by Older People

The services below range from those involved with prevention to those targeted at people with critical or substantial needs.

5.1 Information to the public about services available to Older People

The quality of information to the public is crucial to help individuals and families to make informed decisions. Examples of developments in this area would be very welcome.

The quality of information is usually better where the Local Authority has a public information strategy with a dedicated information officer, and where the roles of other managers and staff for the provision of information are carefully defined; i.e. managers and staff do not abdicate their responsibilities because there is a dedicated Information Officer.

The Information Strategy will also be more effective if it encompasses the contribution of other information providers. These will include agencies in the statutory sector such as, for example, the NHS, the Department of Work and Pensions and the independent sector such as Age Concern/Help the Aged Cymru, Alzheimer's Society, Care and Repair Cymru, Citizens Advice Bureaux, Crossroads, etc.

The Information Strategy should also make reference to the importance of the role of the Older People's Commissioner for Wales as an independent advocate for older people and to the Commissioner's powers to review public services in Wales.

Some authorities have also worked hard to make their information accessible to hard to reach groups by providing material in BSL and foreign languages.

The Information Strategy also needs to ensure that frontline workers have accurate information about services.

Good quality information about services and financial issues welfare benefits, paying for care, equity release, etc provided by a friendly face or in an easy to understand format is essential to help older people make informed decisions free from fear. Older people may well need high quality face to face support to go through, understand and apply information to their own individual circumstances as well as advocacy to assist them to act on it. The information on its own, however well written or presented, or however friendly the person giving it out, will not be enough. Some people wish help to prepare in advance, e.g., as health deteriorates.

Recognise the new aspect of silver surfers and family use of IT for information sources and information exchange/feedback.

People who wish to purchase their own care also need access to good quality information. CSSIW registered providers are required by regulation to provide

good quality information for the public. The UKHCA and other professional associations also provide information.

This service may require improved co-ordination between statutory and independent sectors at the national level.

5.2 Support at Home - Domestic Help

- Facilitating help with cleaning, ironing, shopping, gardening, home repairs and maintenance

5.3 Support at Home - Personal Care

- Unpaid family and community support
- Re-ablement services (link to SSIA Re-ablement work)
- Falls prevention
- Long term care – home care
- Direct Payments
- Floating Support Specialist Care – Dementia
- Care Council for Wales Care at Home work

5.4 Avoiding inappropriate hospital admission and Home from Hospital

- Rapid response to avoid hospital admission
- Intermediate care services
- Emergency volunteer services
- Transitions service in residential settings - focus on re-ablement prior to returning home.
- Volunteer service - welcome home from hospital
- Rapid Response Adaptations via Care and Repair Cymru to support safe discharge

5.5 Support in maintaining the home or finding suitable alternative accommodation (links to National Housing Strategy)

- Home safety checks, i.e. provided by Care and Repair Cymru and the Fire Brigade
- Brokerage service - facilitate handyman/ gardener
- Facilitate help with utilities
- Adaptations / Disabled Facilities Grants/ Rapid Response
- Facilitating access to Sheltered accommodation
- Extra Care Housing - mixed tenure - rent or purchase - part rent/purchase.

5.6 Occupation/ Day Care Opportunities

- Promoting skills/ independence

- Small scale workshops – productive – service to community
- Reducing isolation
- Examples of innovation e.g. rural provision
- Opportunity to discuss community structures e.g. meeting friends in the pub for lunch; social interaction via church, evening classes etc. The value of exercise for wellbeing – this can be walking, gardening (use it or lose it)
- Community integration

5.7 Assistive Technology to support independence and safety

- Telecare
- Telehealth
- Community Equipment
- Wheelchair Services

5.8 Support for Carers

- See information above
- Carers support groups; carers' centres; advice and information services; help lines
- Carers assessments
- Respite care within the home; away from home; holidays. Reference day care
- Reference Telecare and community equipment
- Support for carers themselves, e.g. balancing work and caring, support for their own well being. This would be consistent with the Carers Strategy and essential if we wish carers to carry on caring for as long as possible.

5.9 Residential & Nursing Home Care

- Examples of incentives to promote service change
- Examples of service changes to respond more effectively to local need
- Examples of promoting independence in residential care
- Diversification – transition service – respite care – step up/ step down intermediate care – assessment – people returning home
- Evidence base regarding activity (see NICE guide)
- Examples of where people have moved back into their own home following period in residential care.
- Any examples of research concerning admission to residential care would be very welcome.

5.10 Sensory Impairment

Visual Impairment

- Low vision services provided by NHS
- Rehabilitation

- Evidence of seamless service between low vision services, ophthalmic clinics, rehabilitation workers and specialist social workers together with local Third sector organizations

Hearing Impairment

- Evidence of good links between audiology departments and social services
- Evidence of specialist assessments being undertaken by appropriately qualified staff
- Access to communication support

Deaf Blind

- Evidence of specialist assessments being undertaken by appropriately qualified staff
- Specialist services provided - communicator guide

5.11 Mental Health and Promoting Mental Well-being

Examples of services helping people with dementia or depression or suffering loss and bereavement may be included in categories above. Please highlight them as appropriate.

- Evidence of training
- Specialist services – home care
- Reducing isolation / loneliness
- Access to counseling

5.12 Health Services

The Framework needs to be linked to Dr Chris Jones Primary and Community Health Strategic Delivery Programme, the Chronic Conditions Management Framework and others. However, there needs to be reference to services which are often perceived as low priority but which can make a huge difference to the quality of life for older people. These may include, for example:

- Local foot care initiatives
- Management of incontinence
- Support with medication

5.13 Remodeling and co-location of services between agencies to respond to needs more flexibly.

5.14 Protection of Vulnerable Adults

5.15 End of Life Care

5.16 Assessment and Care Management / Care Programme Approach (CPA) – Access to Services.

The Unified Assessment Process (UAP) has now been in operation for some time. It will shortly be subject to review. The purpose of the UAP was to provide a single mechanism for assessment to bring the contribution of professionals together to develop a coherent care plan. It was an attempt to move away from subjecting the individual to serial assessments with unconnected inputs from a range of agencies.

It would be helpful to hear from LAs/LHBs who believe they have implemented the UAP successfully with their partners and from NLIAHs Community of Practice on UAP.

It would also be useful to hear views from people who have been assessed.

It would be helpful to know where people funding their own care have access to care management services.

Are there good examples of how the UAP relates to other assessment mechanisms?

Are there good examples of information sharing protocols between agencies?

Are there good examples of self referral or self assessment?

6. Service Evaluation

Examples of evaluations conducted which demonstrate the effectiveness of services and or the value placed on them by older people and carers would be very helpful. We also need to share good practice in terms of service evaluation.