

**INTERIM STATUTORY FUNCTIONS REPORT
FOR THE PERIOD
01 APRIL 2010 – 30 SEPTEMBER 2010**

CONTENTS SHEET

Older People's Services	3
Physical Health and Sensory Disability Services (PS&D)	9
Mental Health Services	21
Learning Disability Service	28

OLDER PEOPLE'S SERVICES

Section 1: An outline and related commentary on remedial actions adopted by the Service Area to address those areas of non-compliance/difficulties in compliance detailed in the Annual Statutory Functions Report for the period 1st April 2009 – 31st March 2010.

a. Carer's Needs

Complimentary therapies and carers grants continue to be met within the existing ring-fenced funding at the same level as last year. Staff make appropriate referrals in respect of these services and innovative use of grants has continued to assist carers to continue with their caring role.

b. Adult Protection / Safeguarding

A Trust wide Adult Protection Policy & Procedure is now operational. In response to the Regional Adult Safeguarding Strategy and the release of monies from the department, the Trust has made significant progress in the following areas:

- A Specialist Adult Protection Co-ordinator (Band 8A) has been appointed. The post holder will have responsibility for the strategic development of Adult Safeguarding across the Trust.
- A Senior Social Work Practitioner post for Adult Safeguarding is currently being recruited. Mrs Una Macauley, Co-Director, is the Trust Lead on the new Regional Northern Ireland Adult Safeguarding Partnership (NIASP). Mrs Macauley also chairs the new Trust Local Adult Safeguarding Partnership (LASP) which will have its inaugural meeting on 30 November 2010 with wide representation from statutory, voluntary, community service providers.
- The role of NIASP is to develop a strategic approach to safeguarding vulnerable Adults. In conjunction with the LASPs it will set out its strategy with agreed objectives and priorities for its work in a rolling 3-5 years Strategic Safeguarding Plan for Northern Ireland.

The following strategic outcomes will underpin the development of Adult Protection:

- A much broader, more co-ordinated agenda
- Strengthened links with other agencies
- Improved performance, monitoring and information systems
- Revised and amplified procedures
- Development of serious case review processes.

c. Safe and Effective Hospital Discharges / Intermediate Care

In terms of responding to this issue, a number of initiatives are underway:

- A LEAN Project Group has been established, aimed at streamlining the pathway of complex discharges from the acute to the community sector. Daily round-the-board multi-disciplinary meetings have been established. (A formal evaluation of this initiative is currently underway.)
- A liaison strategy has been established with the Ulster Hospital in the South Eastern Trust to streamline the referral pathway for discharges of users resident in the Belfast Trust area.
- Enhanced Home from Hospital Services have been put in place to support non-complex discharges out of hours.
- Escalation processes are in place from social work to senior management regarding delays in complex discharges.
- The Intermediate Care Hub is now operational.
- Social Care Rapid Response services to North and West Sector have been expanded.
- Six additional intermediate care beds have been commissioned in Pine Lodge.
- Regular Hospital Social Work communication meetings have been established with the Northern Trust and Southern Eastern Trust. These have assisted in the facilitation of regional complex hospital discharges.

- A Community Services Modernisation Forum has now been established which has assisted Hospital Social Work to review discharge pathways within the Belfast Trust with a view to streamlining the effectiveness of these where possible.

The development of the integrated teams in North and West Belfast locality will hopefully facilitate an improved service across the hospital and community teams. Ongoing work will continue to enhance integrated multi-disciplinary service delivery processes across social care, nursing and AHP staff. The two Health and Well Being Centres at Shankill and Beech Hall will be operational in the near future and will support integrated working structures and culture.

d. Unmet Need

The Trust policy on access to domiciliary care services has been endorsed and operationalised. The continued modernisation and development of “in-house” home care services have resulted in qualitative service delivery improvements in responding to the delivery of a professional service to meet the increased dependency levels and requirements of a registered home care service.

Early hospital discharge and no increase in availability of home care hours have impacted on day care services resulting in waiting lists in a number of Trust Day Centres.

e. Residential Care / Excellence and Choice

The consultation process has taken place and approval has been secured for the re-provision of Shankill House as a supported living facility for people with dementia. Work is ongoing to reconfigure the service provided within the Trust’s remaining residential homes as part of the modernisation and reform process and will be progressed to meet the needs of other areas including early hospital discharge, respite and rehabilitation.

Section 2: An overview of emerging areas of significance in relation to the discharge of Statutory Functions and challenges/difficulties in achieving compliance in the period since 1st April 2010.

a. Financial Pressures and Workforce Management

The current Trust workforce management process has impacted on service delivery within Older Peoples’ Services. Delays in approval of

replacement of existing posts has meant that some service areas, e.g. domiciliary care are under considerable stress in maintaining levels of service.

The implementation of the Social Care Bank within residential services has ensured the maintenance of regulatory requirements in relation to workforce issues. Staffing levels continue to be monitored as part of RQIA Inspections. Staffing pressures within the statutory residential homes have been reduced due to the Trust's policy of no permanent admissions in the context of a re-profiling of provision as noted above. As such, resident numbers have significantly reduced.

In those facilities providing intermediate care, the high turnover and rehabilitation needs of very dependent people who are discharged to meet hospital discharge targets has continued to generate significant operational and staffing pressures.

OPM's professional social work staff base has remained stable.

b. Safeguarding Vulnerable Adults

The development of Safeguarding Vulnerable Adults services at a regional and local level will continue to present significant challenges which will include:

- Availability of resources to respond to the anticipated increased referral rate,
- Subsequent workload and protection planning issues.
- Limited legislative basis for intervention
- Substantial requirements in respect of data collection and analysis.

c. Staff Training

In the context of the Trust's workforce management processes, RQIA's requirements in relation to mandatory training have continued to give rise to significant logistical pressures. However, significant inroads have been made into maintaining the availability of staff to participate in NVQ Level 2 programme.

d. Safe and Effective Hospital Discharges / Intermediate Care

- Targets specified under PFA, particularly the discharge of patients from hospital within 48 hours when deemed medically fit, continue to

present challenges for the Trust to deliver safe and effective care on discharge including:

- The speed of discharge can compromise appropriate care planning and practice.
- Insufficient placement options for EMI Patients to allow for appropriate assessment of need.
- Lack of appropriate Intermediate Care facilities, particularly for users with dementia or cancer.
- Discharge to other Trust areas can cause delays due to funding and availability of Intermediate Care options.
- Logistical issues pertaining to multiple discharge pathways within the Trust.

Section 3: Assurance Arrangements: An overview of audits and related assurance processes within the Service Area in the period since 01/04/10 incorporating the discharge of Statutory Functions

RQIA Inspections have taken place across the Trust within residential, day care and domiciliary care. The standards audited in this period were:

- Complaints
- Vulnerable Adults services.
- Responding to service user's behaviour.
- Activities

The individual inspection reports have reported favourably on Trust performance.

The annual audit of Social Work Supervision and Compliance with NISCC standards will be undertaken in March 2011.

The annual audit of Adult Protection Standards will be undertaken in March 2011.

Social work supervision standards are also audited by managers in Integrated Care Teams on a six-monthly basis.

Section 4: Workforce: An overview of the issues pertaining to the Social Work/ Social Care Workforce

a. Restructuring

There have been significant developments within North and West Locality in establishing Integrated Care Teams. Integrated Team Managers and Social Work Leads have been appointed. They will mirror the role and function of the posts within South & East locality. The Social Work Leads will be accountable at operational level for the discharge of statutory functions. The Provider Unit within North & West locality has also been established with clear roles and responsibilities separate from the integrated teams. The social work assistants within North & West locality have now moved to undertake their new roles within the Integrated Teams and Provider Unit and will work as Social Care Co-ordinators/Home Care Co-ordinators. This has meant considerable training in order to assist these staff to undertake their new roles and functions.

Within South & East locality the reconfiguration of the Integrated Care Teams from 5 to 4 should be completed early in the New Year.

b. Recruitment Workforce Issues

- Integrated Care Teams are piloting a care management role within Intermediate Care to ensure timely discharges and maximise capacity across the two services. Within South & East locality there has been increased partnership working with Integrated Care Teams and the Care & Protection Team in an effort to maximise resources in the screening of investigations.
- Weekend hospital social work posts have been advertised and will be interviewed at the beginning of December 2010.
- The Trust will continue to ensure that professional social work staffing levels are maintained to meet its statutory responsibilities in respect of Older Peoples Services.

Physical Health and Sensory Disability Services (PS&D)

Section 1: An outline and related commentary on remedial action adopted by the Service Area to address those areas of non compliance/difficulties in compliance detailed in the Annual Statutory Functions Report for the period 1st April 2009 – 31st March 2010.

a. Community Care

Domiciliary and institutional care budgets are under significant pressure as a consequence of the financial context, escalating demands, the performance targets detailed in Priorities for Action and hospital discharge targets. Additionally, the service needs of users with significant brain injury, challenging behaviours and related complexities give rise to significant further financial demands as domiciliary and support packages are generally extensive and accommodations are specialised.

Service Users with complex care needs often have a combination of mental and physical health needs which have resulted in a lack of support networks, addiction/behavioural problems and homelessness.

Remedial Action

- Prioritisation of cases within the community care context, specifically hospital discharges and palliative cases.
- Interagency interventions with NIHE and the utilisation of Supporting People Funding to contract with private providers to address highly complex social care and housing situations. Protocols are being developed to streamline service delivery.
- Service developments in conjunction with Mental Health to integrate service delivery more effectively.
- Redesign of service delivery within PH&D Service to target staffing resources more effectively in order to address the increasing demands and strategic priorities.

b. Intermediate care services for People with Physical Disabilities.

A lack of intermediate care services for people with physical and sensory disability under 65 years old has been previously highlighted. In order to facilitate hospital discharges, it is essential that this provision is developed.

Remedial Action

Access to step down provision, whilst improving, continues to present operational challenges. The PS&D Service is currently involved in modernisation planning with the Older People's Service to ensure equity of access for all service users, particularly those under 65 years.

c. Restructuring

Within the preceding six months the PH&D Team within the South & East sector has experienced significant change, in terms of service delivery with staffing resources migrating towards service commissioning. This will assist with future management and service efficiency.

Remedial Action

Additional staffing resource, coupled with a practice workshop, has been utilised to facilitate the harmonisation process across the Service and effect the organisational change.

d. Interfaces

Discharges from hospitals continue to have a significant impact on across the Service Area with episodes of service users being discharged without the appropriate services in place or having been appropriately assessed in the hospital context.

Remedial Action

Partnership working arrangements and related protocols have been developed to inform working relationships across service interfaces with the Older People Service to ensure safe and effective discharges.

Challenges with regard to accessing information on Mental Health Service Users have led to operational difficulties and duplication in assessment and service delivery.

Remedial Action

- Bi monthly meeting with Mental Health counter parts have assisted information pathways issues. However, access to information systems continues to be reported as an area of concern.

e. Sensory Support Services

In response to the Challenge and Change, SSI Report, there continue to be ongoing working groups addressing the key recommendations and influencing practice developments. Alongside the Regional Group, the five Trusts continue to meet to standardise policy and procedures and share best practice. Whilst the key elements of the work attendant to SSI recommendations have concluded, the Regional Trust Group will continue to meet quarterly to address service developments and assure standards within social work and rehabilitation practice.

Remedial Action

Assistant Services Manager and Senior Social Workers continue to work in partnership with other Trusts to progress service development, particularly training pathways for those in career progression within Sensory Support.

Formal rehabilitation qualification training is an ongoing issue with staff having to travel to England and 'succession planning' are ongoing issues.

f. Direct Payments Scheme

The Priorities for Action target to increase uptake of direct payments presents difficulties in the current fiscal climate.

Remedial Action

The Service Group continues to promote Direct Payments as a method of intervention. One of the Assistant Services Managers is the Trust lead with regard to issues attendant to Direct Payments and participates in the Trust Steering Group with the Service Manager. The Health and Social Care Board is to reconvene the Regional Forum to strategise and streamline issues. It is anticipated that the Trust lead will participate in

the Regional Forum once it is reconvened. Within the Service a working group has been established to address operational issues, to develop other action plans, to standardise practice and to promote this methodology.

g. Day Support Strategy

A review of the Day Support Strategy has been completed by the Service. A work stream has continued to standardise policy and procedures across the Trust. Additionally, a Day Support Forum and User Forum have been convened to explore best practice in service delivery.

Recent RQIA inspections of Trust Day Centres (Island Resource Centre and Mourne Project) have been positive.

The Beech Hall Day Centre will relocate to the Beech Hall Health and Wellbeing Centre in December 2010.

h. Asylum Seekers and Migrant Workers

Clarification is required on the role of Social Services in responding to the needs of minority ethnic groups, migrant workers and asylum seekers. There is a growing demand for services from this group and it has been recognised that, due to the complexities of their status, there may be significant financial implications for providing suitable services to meet assessed needs.

Remedial Action

The Service Manager is participating in a working group to explore policy development to address the needs of this group of users. Managers work in close collaboration with the Homeless Support Team in addressing emergent issues.

i. Community Emergency Response Team

The Trust's Emergency Response Team is co-ordinated by the Service Area Senior Manager. The Coordinator and members of the team have responded to a significant number of alerts and follow up debriefs and participate in training events. The Trust is an active member of Belfast Resilience which provides a multiagency framework within which co-ordinated planning and responses to major incidents in the Belfast area are taken forward.

Remedial Action

- A Procedural manual has been developed for guidance to staff on responses to emergency/crisis scenarios.

j. Community Acquired Brain Injury (ABI)

The need to develop specialist community based services incorporating accommodation, respite and peripatetic supports, has previously been highlighted to the Commissioner. Service Users with significant injuries are often delayed in hospital as a result of not being able to access a suitable community facility.

Remedial Action

- The Service Manager chairs a Trust Wide Working group on Brain Injury Services to standardise processes and services for this client group.
- The Service is participating in RABIIG.
- Service Redesign.
- Quality improvement.
- Improved support for individuals, carers and families.
- Effective engagement and partnership working.

Section 2: An overview of emerging areas of significance in relation to the discharge of Statutory Functions and challenges/difficulties in achieving compliance in the period since 1st April 2010.

a. Children's Issues

Ongoing work has centred on addressing the interfaces across Children's Disability, Family and Child Care and PS&D Services. Workshops will be held to explore interface issues and young carers' needs.

The particular needs of young carers including initial referral and assessment processes linked to UNOCINI, collation of information and development of services are central issues.

b. Transitional Work

The PS&D Service, in conjunction with the Learning Disability Service, is engaged with the Children's Disability Service to manage the transition processes to ensure user-centred pathways. Protocols will be established to promote seamless and streamlined transition arrangements. An Assistant Service Manager participates in the Regional Transitions Group for children with complex needs to develop processes for integrated pathways across Service Areas.

c. Autism

The development of integrated transitions planning arrangements from Children's to Adult Services for users within the Autistic Spectrum is a key priority for the Service.

d. Carers

An Assistant Services Manger and Senior Social Work staff participate in the five work streams to support of the implementation of the Trust's Carers Strategy. One Assistant Service Manager is also identified as a Carer Link to support the service developments for Carers and ensure adherence to DHSSPS standards.

The increasing demand for assessment of Carers/Young Carers' needs has had a significant impact on the Carers budget. A cap had been set on the Carers grant award. Additionally, to afford carers greater flexibility and choice; a cash grant is available to allow Carers to purchase complementary therapies at a place of their choice rather than with contracted providers.

The Young Carers working group is addressing age appropriate resources, respite and identification processes for Young Carers.

Data collection continues to pose challenges. However, the Carers Co-ordinator in conjunction with the Information Officer, is endeavouring to standardise the collation of assessments against referral patterns.

e. Direct Payments

The PS&D Service continues to sustain approximately 37% of the Trust's total number of Direct Payments. The Service is currently

developing practice and service delivery to respond to the area of personalised budgets.

f. Disability Strategy

The DHSS&PS has launched a work stream to develop a strategy to improve outcomes and support for those with physical and sensory disabilities. The PS&D Service Senior Manager represented the Trust on the workstream. The strategy is currently out for consultation shortly.

g. Interface with Older People's Services

The operationalising of the Integrated Care Teams (ICT) and redesign of the traditional Home Help Service to a Homecare Service has established core Trust-wide threshold criteria for service access.

An RQIA requirement in relation to the purchaser/providers split within the Homecare Service means that each case requires a key worker and designated provider manager. In the North and West sector this has led to the re-absorption of approximately 330 cases to monitor home help activity. This has placed significant pressure upon current social work resources within the PS&D Service.

h. Buildings' Access

Mount Oriel is in an ideal location but access to office by service users/staff/students is by way of stairs and thus not accessible to wheelchair users nor people with mobility problems.

The Everton Complex building does not facilitate Sensory Impaired Service users' access.

The following in particular have caused problems for service users:

- There is no appropriate lighting within the complex for those with Sensory Impairment;
- There is no appropriate signage
- No appropriate interview rooms
- No facilities to undertake rehabilitation
- No facility with which to undertake group work, a primary method of intervention
- Poor acoustics, which inhibits communication for people with hearing loss

- No loop system
- The majority of service users are over 65 and the current facility does not have direct linkage to older people's services.

The Trust has previously addressed these issues with the Commissioner in the context of its overarching estates' situation.

Sensory Support staff are actively involved with architects in the modernisation of Trust buildings to ensure Disability Discrimination Act, compliance. The Sensory Support Team is providing training to the Trust and community providers regarding visual access.

i. Respite

The Trust has previously addressed with the Commissioner the need for significant investment in respite provision.

j. Personal & Public Involvement (PPI)

The Service Manager is a member of the Trust Personal and Public Involvement Group which meets periodically to discuss and resolve pertinent issues with public and voluntary sector representatives.

The Service Group has a significant number of contracts with voluntary and community based organisations and has established good working relationships with local groups and communities. The strategic emphasis on preventive, community based, locally accessible services will necessitate enhanced engagement and commissioning initiatives with community providers.

A working group has been established in the preceding six months to catalogue PPI activity and to develop methodology to increase and target activity across the sector.

k. Administration Support

There is an urgent need to stabilise the administration staffing base to maximise the 'professional' resource within the Physical and Sensory Disability service.

l. Community Development

The Service Manager is a member of the Trust Disability Steering group which brings together staff from all Service Areas as well as a wide

range of voluntary and community groups to develop co-ordinated and integrated service priorities and delivery pathways.

m. Vulnerable Adults

The Service has fully implemented the Trust's Vulnerable Adults Policy and Procedures. The Service has experienced a significant increase in workload volumes attendant upon the enhanced profile of Vulnerable Adults issues, the complexities and demands of the work and the requirements of the Designated and Investigative Officers.

The PH&D Service has experienced an increase in the requirement for formal assessments of capacity across a wide range of issues, generating significant resource demands which are likely to increase with pending legislative reforms.

n. Clinical and Social Care Governance

The Service has regular quarterly forums led by the Service Manager and attended by Service governance staff. The Service complies with Significant Incidents Procedures.

o. RQIA

The inspection process for the Day Centres and RQIA Review of Sensory Support services are placing additional and significant workload pressures upon staff.

Two Day Centre facilities have been commended in the 2010/2011 inspection. The Mourne Project was identified as leading in the development and delivery of services.

The other two Centres are preparing for their inspections.

p. Community Care Budget

The overarching budgetary context has exacerbated fiscal pressures across direct provision, day care, domiciliary services, direct payments and respite. Direct Payment assessments are considered within a robust scrutiny process and are prioritised accordingly. High cost cases give rise to budgetary pressures and governance issues in terms of risk assessment and management requirements related to planning for individuals with complex needs.

Service users with challenging behaviours require significant staff, management and direct service time to ensure safe and qualitative provision.

q. Acquired Brain Injury (ABI)

The Service Sector continues to experience challenges in securing appropriate community placement facilities. In the absence of same, service users are delayed in hospital or unable to access requisite supports on discharge.

r. Waiting Lists

The rise in Service volumes has generated significant pressures across the delivery system with attendant implications for the future discharge of statutory functions.

The Service is engaged in an ongoing process of modernisation and reform to position itself to respond to the current and pending financial and performance challenges.

Within this context, the Service is pursuing a model to assist in the assessment and management of risks emerging from accumulating waiting lists.

Respite

There are two commissioned beds which are over subscribed and by default the service users are placed within residential facilities which may not be the best placement to attend to their needs. There are no respite options available to young service users other than Taylor House commissioned from Leonard Cheshire.

Section 3: Assurance Arrangements: An overview of audits and related assurance processes within the Service Area in the period since 01/04/10 incorporating the discharge of Statutory Functions.

- The Service ensured compliance with NISCC regulatory requirements. All relevant staff have maintained their registration and PRTL requirements. The Service Group has implemented the Trust procedure for the assurance of the registration status of social work staff and those social care staff in respect of whom the Trust requires registration. Compliance was assured through a Service Group audit.

- Compliance with the Trust's Supervision Policy is assured through an ad hoc Service audit. File audits are undertaken periodically by Senior Social Work personnel and Assistant Service Managers.
- Social work and social care staff have Personal Contribution Plans in place which focus on their individual learning and development needs.
- A Service Peer Support Forum meets bi-monthly to explore 'Best Practice' experiences and intervention strategies.
- Day Care files are audited monthly by Assistant Service Managers. This ensures that training requirements are being met.
- Direct Payments: A proposal has been approved to undertake audits across the Service Group for compliance with the Direct Payments policy. The Physical Disability and Sensory Support service sector is taking the lead in this auditing process.
- A qualitative audit specifically addressing the impact of Direct Payments on outcomes for service users is being undertaken across all recipients of Direct Payments. This Service Sector is taking the lead in this process.
- Service users in receipt of social work interventions are periodically surveyed for satisfaction. A random sample is taken from the current caseload every quarter.
- Monthly activity returns are provided from social work staff in relation to the discharge of key statutory functions.

Section 4: Workforce: An overview of the issues pertaining to Social Work/Social Care Workforce.

The Service has had a relatively stable workforce since the last reporting period. Two Social Workers and one Assistant Service Manager will be vacating posts in the immediate future. The Service will continue to prioritise the discharge of its statutory responsibilities.

MENTAL HEALTH

Section 1: An outline and related commentary on remedial action adopted by the Service Area to address those areas of non compliance/difficulties in compliance detailed in the Annual Statutory Functions Report for the period 1st April 2009 – 31st March 2010.

a. Social Work role in Multi Disciplinary Teams

The Band 7 social work practitioner job description has been reviewed and there is an expectation that Band 7 staff take more complex cases, provide a consultative role to the team on childcare matters, vulnerable adult referrals and other statutory functions. The job description, when agreed, will be distributed to each social worker

As part of the restructuring of Community Mental Health Teams, the role of social worker will be defined in order that service users will receive a professional social work service when required and to ensure a consistent approach to the delivery of statutory functions across the teams.

In addition to the roles they share with their multi disciplinary colleagues such as assessment and monitoring the mental health of individuals on their caseloads, therapeutic interventions, assessment and management of patients discharged from hospital under enhanced discharge procedures, social workers also have particular responsibility for providing a social work service to individuals in hospital, the delivery of vulnerable adults protection services, contributing to mental health review tribunals and other statutory functions.

The current vacancy controls place operational pressures on the teams to provide these services effectively, particularly given the increased demand for social work interventions.

As social workers work in integrated teams, it is difficult to quantify their workload compared to their other professional colleagues. However to date the completion of social circumstance reports, mental health review tribunals and vulnerable adult investigations have been a social work function. The following table shows the increase in demand for these services in the last 5 years. Please note that the numbers of vulnerable adults relates only to those that went to investigation and does not include the high numbers of referrals that are screened by the

designated officers as not suitable but often advice given as to how they should be monitored or managed within the relevant service.

	04/05	05/06	06/07	07/08	08/09	09/10
SCR	15	35	28	21	17	12
ASW assessments				269	283	294
MHRT	22	38	54	57	61	81
VA investigations	5	5	28	50	55	65

Please note that Social Circumstance reports are only completed when the nearest relative makes the recommendation that their relative should be compulsorily admitted. Therefore as nearest relative applications are reducing, the requirement for ASW assessments is increasing.

The figures since March 2010 to date would appear to indicate that, if they were to continue at the same rate, there will be a further increase in these functions. In the six month period since April there have been 51 vulnerable adult investigations.

b. ASW Assessments/other agencies

The Regional ASW group continues to review the issues in relation to accessing PSNI and ambulance services for community assessments. Local discussions have taken place but, given the increasing pressures and limited resources available for all agencies, it is unlikely that this issue will be resolved without Departmental or legislative intervention.

c. Direct Payments

While the Service continues to improve its performance in this area from 1 in 2008 to 10 in 2010, implementation of Direct Payments remains a challenge for the Service. Creative ways of promoting the use of Direct Payments in all areas of the Service are considered and training in same is mandatory for all professional social work staff. In addition, the Service is exploring how the personalisation agenda can be promoted within the recovery ethos of the Service.

d. Under 18's

There were six under 18's admitted to adult psychiatric wards in the six month reporting period compared to seven in the same reporting period last year. The Trust has robust policies and procedures to manage such episodes which require the deployment of significant staffing resources and generate major logistical issues for the service. All admissions of under 18's are reported as adverse incidents and each case is reviewed closely by both acute psychiatric services and CAMHS.

e. Modernisation Agenda

Current financial constraints are impacting on the delivery of mental health services. However, while the case for additional investment in mental health services will have to be continually pressed, the Service is determined that delivering change which enhances the treatment and care of service users and provides more effective support for carers should not be put on hold while higher levels of investment are sought. The Service strives to deploy existing resources in different ways in order to achieve real benefits for service users and families.

Two workshops have been held to review existing structures and to consider how the Service can be modernised further in order to provide a safe and effective service within available resources. A Modernisation Project Team, chaired by the Director of Primary and Social Care is being established and a number of work streams will be developed in order to progress the modernisation agenda further.

f. Resettlement

The resettlement process is continuing and patients are moving to facilities within the community as they arise or funding is available. There are other individuals who could be resettled if additional care management monies could be found. It should also be noted that these individuals require high levels of support following discharge and therefore enhanced community services are also required.

g. Interface with Children Services

Although the Trust has developed improved working relationships with Children's Services and the recommendations of the various reports and case management reviews have been implemented, it is recognised that this an interface which requires ongoing attention. To support staff in

relation to childcare issues, funding had been obtained from HWIP investment to employ a Band 7 social worker.

The Mental Health Service is participating fully in the implementation of the Regional "Think Individual, Think Family" Project. All Service assessment documentation has been screened to ensure that information on family members is included and new multi disciplinary documentation for all service areas has been developed. This is currently out for consultation.

Regular audits have evidenced that the recommendations of the O'Neil Report have been implemented. In December 2010, a further multi disciplinary audit will be undertaken to explore the impact on practice in the Service.

Child Protection, UNOCINI and working with parents who have mental illness training are mandatory for all staff.

h. Review of Shannon

The Trust has undertaken a multidisciplinary review of the operation of the service and the model of treatment and care to inform future development plans for Shannon Clinic. A range of recommendations were made which are in the process of being implemented. The Operations Manager for Hospital Resettlement Services has been moved to Shannon to provide strategic direction and leadership.

i. Young carers

The issue of how we support young carers is one of the priority areas within the Trust's strategy for Carers. The Associate Director of Social Work in Mental Health chairs a Trust working group comprising of representatives of all Service Groups and voluntary organisations to develop an action plan in relation to meeting the needs of young carers.

Section 2: An overview of emerging areas of significance in relation to the discharge of Statutory Functions and challenges/difficulties in achieving compliance in the period since 1st April 2010.

a. ASW Role

In March 2010, there were 24 Approved Social Workers who are aged 50+. Seven have Mental Health Officer status. Since then, two ASW's

have retired so the need to plan for ASW succession is a priority. In addition, indications are that the New Mental Health and Capacity legislation will demand increased functions for ASW's such as only ASWs being permitted to provide MHRT reports and assessments for capacity. This will have significant resource implications for the Trust

The Trust is reviewing its selection procedures for the ASW Programme to ensure that workforce planning needs are appropriately addressed.

b. Impact of Modernisation Agenda and Financial Restraints on Social Work and Social Care Provision

One of the major challenges of the modernisation agenda is how we not only maintain current services but also improve the quality of care within the exacting financial climate. With all the competing pressures, the importance of deprivation, access to employment, housing and other social and environmental factors is often underestimated and yet should be a key factor in the assessment process within a bio-psycho-social model. By ensuring that there are sufficient social workers within multi-disciplinary teams, including hospital settings, the Service is seeking to promote a more holistic view of the individual and, ultimately, a more cost effective treatment model which does address the underlying factors that impact on an individual's mental health.

c. Interface with Children Services

The Mental Health Service is participating fully in the implementation of the Regional "Think Individual, Think Family" Project. Although significant work has been undertaken within the Belfast Trust in relation to this, the Service looks forward to learning from other partners in the Project and implementing further examples of good practice.

In addition, the Addiction Service is implementing the "Hidden Harm" strategy and all professional staff in addictions have been trained in "Taking the Lid Off".

d. Adult Protection Referrals

There has been an increase noted in the number of adult protection referrals within the Service, particularly in relation to requests from the PSNI for ABE trained social workers. Adult Protection investigations are complex and therefore resource intensive placing considerable pressures on the work of the teams.

Section 3: Assurance Arrangements: An overview of audits and related assurance processes within the Service Area in the period since 01/04/10 incorporating the discharge of Statutory Functions.

a. Compliance with NISCC regulatory requirements

All social workers and all of the social care workers who are required to register with NISCC have done so.

The Mental Health Service has implemented the Trust procedure for the assurance of the registration status of social work/social care staff. Compliance has been assured through audit.

b. Audits/Assurances Process

The Service is planning an audit to establish staff knowledge and practice emanating from the operationalising of the O'Neill Report recommendations in December 2010.

The Mental Health Service has standardised processes in relation to the Mental Health Order (NI) 1986 across the Trust and staff training has been introduced across all disciplines. The Service conducts quarterly spot checks on forms and processes and the Trust has been commended by RQIA on the improvements that have been made.

Regular audits are conducted in relation to the Discharge Guidance 2009 to ensure compliance.

The Mental Health Service was audited by the Trust in relation to ensuring that the Trust Registration and Verification Policy was being adhered to. The conclusions of the audit were positive.

In February 2011, the Trust will audit the ASW Service against Standards 1, 3 and 4 of the SSI Quality Standards for Approved Social Work. It is anticipated that Standards 2, 5 and 6 will be audited in 2011-2012.

An audit centred on the impact on the number of detentions following the operationalising of the Home Treatment Services is being considered for early 2011.

Section 4: Workforce: An overview of the issues pertaining to the Social Work/Social Care Workforce.

Workforce Issues

The Trust's current workforce management arrangements have impacted on the recruitment of social work posts with an attendant escalation of capacity pressures in the context of increasing service delivery demands.

The modernisation agenda is a managed process which incorporates logistical and situational dimensions in relation to workforce management issues in particular. In that regard, the Service is presently absorbing through redeployment a significant number of nursing staff into community posts with an inevitable impact on the current balance and profile of nursing vis a vis social work.

In this context the Service will continue to ensure that it has sufficient professional social work capacity to deliver its requisite statutory services.

The Associate Director for Social Work participates in the HSCB/DHSSPS working group on developing a policy for mental health social work. She has been tasked with developing a social history format that reflects the language and ethos of the recovery model.

LEARNING DISABILITY SERVICE

Section 1: An outline and related commentary on remedial action adopted by the Service Area to address those areas of non compliance/difficulties in compliance detailed in the Annual Statutory Functions Report for the period 1st April 2009 – 31st March 2010.

The Learning Disability Service Area identified a number of areas of difficulty in the 2009-2010 Statutory Function Report.

These were as follows:

a. Difficulties in providing appropriate provision for the needs of children leaving the care system

Remedial Action

The Service has now agreed a transition process with the Children's Disability Service and is developing a similar protocol with Family and Childcare Service. These processes are designed to ensure the early identification of those with complex needs who will require adult services and allow for timely planning to meet their needs.

The Service Area is also currently planning the establishment of a new outreach service aimed at meeting the social support needs of young people with a learning disability who have been reluctant to engage in more traditional services. It is hoped that this new scheme will provide a service to a number of care leavers.

The Service Area has agreed with Family and Childcare Service the transfer of GEM scheme funding for eligible placements to the Families Matters scheme to allow the continuation of former foster placements for young people with a learning disability.

The Service Area has also used some of the funding it received for demographic adjustments to provide some high cost packages for care leavers.

b. Mental Health Review Tribunal decisions which direct discharge with immediate effect continuing to cause both resourcing difficulties and risk management difficulties

Remedial Action

There have been no further discharges of this nature in this reporting period.

The Service continues to incrementally develop a Community Forensic Service. A forensic psychologist is due to take up post in January 2011 and a service model will be further developed by that person.

The “Promote” service for people with mental health difficulties has now been established and is receiving referrals. It is anticipated that this new service will provide an input for some of those who could present with risk management issues on discharge.

The Service continues to implement the Promoting Quality Care guidance on risk assessment and management.

c. Lack of consistency in Mental Health Review Tribunal judgements around the definition of severe mental handicap and severe mental impairment. This uncertainty causes problems for staff in knowing whether or not aspects of the Mental Health (NI) Order 1986 apply to certain clients.

Remedial Action

The Trust has highlighted this issue in its response to a recent consultation on legislative reform.

d. Resource Related Difficulties with Service Provision

Remedial Action

The Service continues to refine and develop screening, assessment and prioritisation processes to allow for the most equitable and appropriate use of resources.

The Service reports on unmet need on a regular basis and, due to the current financial pressures, is reporting an increased level of unmet need.

- e. Resource related difficulties in resourcing adult protection plans – this relates particularly to cases where the alleged or actual perpetrator also has a learning disability and increased supervision is required in an environment where others may be vulnerable.**

Remedial Action

The Service is fully cognisant of its duty to provide adequate protection plans and has treated this as a priority area for resources. However, in some cases, the lack of resource has led to a reduction or a cancellation of service provision for the alleged or actual perpetrator.

- f. Increased caseload numbers without any corresponding increase in service provision.**

Remedial Action

The Service continues to prioritise as required. Work has been undertaken on avoiding any duplication of services and clarifying core roles and responsibilities.

- g. Delayed discharges from Muckamore Abbey Hospital.**

Remedial Action

The vast majority of patients are discharged from Muckamore shortly after their period of assessment and treatment. However, when a patient cannot be discharged back to their original address, the Trust has struggled with identifying suitable community accommodation and support and funding such packages which usually have high costs. The Belfast Trust currently has 14 adult delayed discharge patients in Muckamore Abbey Hospital.

The Service has recently established an inter hospital and community working group to work on this continuing concern. The group aims to give a priority focus to these cases and promote good co-ordination and planning to ensure discharge takes place if at all possible. We have implemented processes to ensure that all such patients have detailed assessments of their support needs and existing community resources

are identified to meet these needs where possible. However, the lack of appropriate services and the lack of resources to fund such services remains a major difficulty. The Service has continued to highlight this issue to the Commissioner.

Section 2: An overview of emerging areas of significance in relation to the discharge of statutory functions and challenges/difficulties in achieving compliance in the period since 1st April 2010.

a. Deprivation of Liberty Safeguards for Those who Lack Capacity.

The Department revoked its Interim Guidance on this issue dated 1/3/2010. and issued new interim guidance on 14/12/2010. Deprivation of Liberty issues continue to be of major significance in the Learning Disability Service Area. A substantial proportion of the clients' situations would meet the criteria laid down in the Bournewood case. This applies to hospital settings and community settings such as nursing and residential units.

The Service also has to make welfare and adult protection decisions for adults who lack capacity in these matters. The lack of a legislative framework in which to make these decisions is very problematic. The Service is hopeful that the pending new legislation will address these issues. In the interim, the Service is considering the recent guidance and its application to current practice.

b. PSNI/Social Services Interface in Vulnerable Adults Processes.

The Service has noted an increase in vulnerable adult cases where a lack of police resources has caused some difficulty. We have been informed by the PSNI that a lack of police personnel is the reason for some delays in investigation and some lack of availability to attend meetings.

Section 3: Assurance Arrangements: - An overview of audits and related assurance processes within the Service Area in the period since 01/04/10 incorporating the discharge of statutory functions.

The Community Teams' Handbook remains in operation and is regularly updated. The Handbook specifies expectations, procedures and protocols for all aspects of the teams' work including statutory functions responsibilities such as the operation of Vulnerable Adults Procedures,

carers' assessments, direct payments, supervision and the use of The Mental Health (NI) Order 1986.

The Service requires Team Leaders to carry out random file audits on a monthly basis during supervision and Operations Managers to monitor the quality of file audit on a three-monthly basis. Operations Managers are also tasked with carrying out a monthly audit of the quality of supervision provided by Team Leaders.

The Service collects a wide variety of statistics on a monthly basis. These include statistics on case numbers, vulnerable adult activity, Mental Health Order activity, carer's assessments, direct payments and unmet need. These are monitored at Operations Manager level for compliance with requirements and for emerging issues and trends.

The Service Area was recently audited internally as part of a Trust wide audit for compliance with professional registration requirements. The audit provided assurance on the Service's compliance with NISCC regulatory requirements.

The Service Area's compliance with RQIA requirements for the use of The Mental Health (NI) Order 1986 forms was recently audited internally as part of a Trust wide audit. Again no concerns for the Service were noted.

An internal audit of the Service's compliance with the O'Neill Report recommendations is underway.

The Service has also recently commenced an internal audit of any restrictive practices in operation.

The Service has revised its financial support arrangements and is in the process of forwarding financial support plans for all service users who lack capacity and who are supported with their finances by Trust services to the Office of Care and Protection for their authorisation.

Section 4: Workforce: An overview of the issues pertaining to Social Work/Social Care Workforce.

The Trust's vacancy management strategy has impacted on the Service's delivery capacity. There are currently two social work vacancies in the Service Area. The reduction in staff combined with an

increase in the Service's caseload places considerable pressures on staff and negatively impacts on the quality of service provided to service users.

The impact on the Service's capacity to maintain levels of service provision will be compromised if the current vacancy management arrangements pertain. Staff find it very stressful and distressing not to be able to offer appropriate provision for their clients and this affects their morale.