

Welcome

Homecare Provider Forum

22nd November 2023

This Session will begin shortly

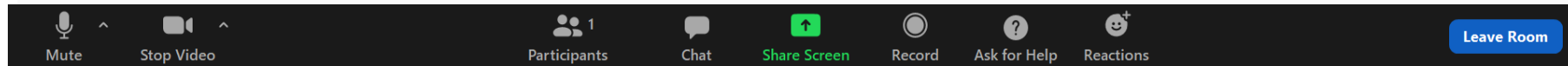


House Keeping

- If you are in the wrong break out room, please click leave and select Leave Breakout room and you will be taking back to main event to be reassigned
- Microphones off unless asked to speak or speaking
- For questions, please add these to the chat box, we will come to these at the end, you may be asked to elaborate over the microphone

In-Meeting Controls

The attendee controls appear at the bottom of your screen. To access the meeting controls, just move your mouse in the Zoom window.



Attendees have access to these features:

Mute or Unmute:



To mute or unmute your microphone, click the ^ arrow next to the picture of the microphone.

Please keep your microphone on mute during the presentation

Start Video or Stop Video:



To turn your camera on or off, click the ^ arrow next to the picture of the video camera.

Please keep your video off during the presentation.



Agenda

	Time
Intro	14:00-14:05
Hydration and UTI- Discussion	14:05-14:10
Action Planning	14:10-14:50
Break	14:50-14:55
Networking	14:55-15:25
Coproduction	15:25-15:45
Dementia Strategy and Feedback	15:45-16:00

Hydration and UTIs

Good hydration (drinking enough fluid) is important for all of us for lots of reasons, including preventing dehydration.

Older adults can be at higher risk of becoming dehydrated and may need to remember to drink regularly throughout the day.

Dehydration is a serious condition which can occur when your body does not get enough fluid to meet your needs. Dehydration can be due to low intake of fluid (known as low intake dehydration) over a period of time. In people who are acutely ill it can occur over a short period of time

You can be at even higher risk of dehydration if you:

- are dependent on others for drinks
- have difficulty swallowing
- have diarrhoea and/or vomiting
- have a high temperature (fever)
- have not drunk enough after strenuous physical activity

How do you manage hydration during visits, and what would help you enhance support?



Action Planning

Bryony Morris
Head of Provider Monitoring and Assurance

Rene Rogers
Business Development Coaching Manager



Contents

- Introduction
- PAMMs Action Plans
- Hints and Tips
- Service Action/Improvement Plans
- Questions

Introduction

- Recognise that Providers often have a number of different action plan requirements
- Good action plans are essential for continuous service improvement and are reflective of effective governance and quality assurance practice
- Action Plans in PAMMs are an integral part of the monitoring process
- An effective action plan should demonstrate lessons learnt as well as how the service will ensure any change in practice has been embedded

Action Plans in PAMMs

Action plans are a contractual requirement:

Following a PAMMS assessment where a Provider is rated 'requires improvement', the Provider shall prepare a plan (an "Action Plan") using the PAMMS Provider Portal, and in accordance with 39.3.2, setting out the steps which the Provider shall take to ensure that each area identified within the PAMMS report as either requires improvement and / or poor ("Performance Default") is remedied, and does not occur again. The Provider shall set out the reasonable timescale within which the Action Plan shall be implemented identifying who shall be responsible for each of the action(s). The Provider shall prepare and submit the Action Plan via the PAMMS Portal to the Council within ten (10) Working Days of the report being published on the Provider's Portal, or such other time limit as specified by the Council

Action Plans in PAMMS

Logged in as haroldpottter191@gmail.com (Provider) [Log Out](#)

PAMMS
Provider Assessment and
Market Management Solution

Training

ADASS East Supported Living Services for Wizzy Care

[← Back to Results](#)

[Summary](#) [Full Report](#) [Areas For Improvement](#)

Care Worker Knowledge & Understanding

The list below contains questions which were scored as 'requires improvement' or 'poor' during the assessment and will form the basis of the action plan which will address these points.

C06	Staff confirm they have received appropriate training in respect to infection control and are able to explain how to prevent infection. Care workers are able to explain how they ensure appropriate waste management.	Poor ★☆☆☆☆
C08	Staff confirm that they have received appropriate training on how to use equipment safely and that they are confident to do so and that support is available if required.	Poor ★☆☆☆☆
C13	Where appropriate and when asked agency staff confirm that they have been inducted to the service appropriately.	Poor ★☆☆☆☆

[Create Draft Action Plan](#)

Action Plans in PAMMs

Click **New Action** to add an action to the Plan and complete the information.

1. **Description** – describe the action which is going to be taken and how it is going to be implemented.
2. **Questions** – tick all questions which are addressed by this action (more than one can be selected).
3. **Assignee** – enter the names of the people responsible for managing the implementation of the plan (more than one can be added).
4. **Planned Completion Date** – select the target date the Action should be completed by. Different Actions can have different Completion Dates.

Select **Add Action**

Select **Submit Draft Action Plan** when the plan is complete.

Once the Monitoring Officer has received your Draft Action Plan, they will review it. They will contact you if they need to discuss it further with you.

Action Plans in PAMMs

Once your Action Plan is approved:

- You can return to your Action Plan at any time to add information via the **Comments** icon
- The comment will automatically populate against all areas the Action has been linked with
- You can upload evidence via the **Attachment** icon – please be mindful of GDPR!
- When an action is complete tick **‘completed by provider’**
- Once approved your Monitoring Officer will mark the action as **Approved by Assessor**
- Once the Action Plan has been completed click **Submit Action Plan.** If your Monitoring Officer is satisfied with it then a note will appear on your assessment explaining that Actions have been taken to address areas non-compliance which are now complete

Hints and Tips

Consider a SMART approach:

Specific

Measurable

Achievable

Realistic

Timely

- Ensure Actions address wider service improvements, not just the specific area identified!
- Ensure effective communication with your monitoring officer around expectations and if there is any delay expected
- Consider RAG rating your actions

Service Improvement plans



How can I add value to the formation of my Service improvement plan/ action plan?

- Governance and quality assurance system reviews
 - Organisation chart – roles and responsibilities
 - Supervision | spot checks | observation | appraisal trackers
 - Quality assurance tracker – incorporating compliments | complaints | grumbles | safeguarding
 - Templates utilisation | evidencing compliance in daily notes | ensuring competency checking
 - Audits – tool for continuous improvement activity
 - Feedback – internal surveys | IFS | 6C's Culture Check
 - Recruitment & Retention – induction process | international recruits
 - Link SIP in with PIR

Service Improvement plans



Supervision, Appraisal, Spot Check and Observation Matrix																	
								Supervision	Staff Briefing								
Name of Organisation	Parttime/ Bank	Key: Did not occur						Booked	Need to book	Completed	Completed	Need to action/ follow up (Note any outcomes to link into relevant staff meetings or refresher training)					
Staff Name	Session Category	January	February	March	April	May	June	July	August	September	October	November	December	Additional Comments / Actions			
Name	Supervision	01/01/2023					02/06/2023	02/07/23			Need to book		Need to book	i.e. 01/01/23: Issue raised that manual handling was not done correctly and the supervision form needs to be signed by staff member			
	Appraisal			01/03/2023										01/03/23: Would like to be Medication Lead			
	Spot Check/ Observation				01/04/2023		01/05/2023			01/05/2023		Need to book					
Name	Supervision																
	Appraisal																
	Spot Check/ Observation																
Name	Supervision	Not working	Not working														
	Appraisal	Not working	Not working														
	Spot Check/ Observation	Not working	Not working														
Name	Supervision	Not working	Not working														
	Appraisal	Not working	Not working														
	Spot Check/ Observation	Not working	Not working														

Service Improvement plans

ACTION NO	Date entered on Plan	Source: CQC/ PAMMs/ HCPA	KLOE Standard / Pamms Ref No	Category	Priority Red - High Amber - Medium Green - Low	ISSUE/S HIGHLIGHTED IN LAST CQC/ HCC INSPECTION REPORT (it would be a good idea to link it in with the relevant KLOE/ PAMM's Code)	ACTIONS & PROGRESS UPDATES Describe clearly, corrective action To be Taken / Taken	ACTION OWNER	LEAD RESOURCE/S To implement change/s
#		i.e. Safe (tbc)	i.e. S1.1		RAG	Reviewing and agreeing priority areas from CQC/HCC/CCG/HCPA action plans	Please use this column to also provide any updates (these should be dated i.e. 01/01/22: Newsletter to include Visiting Protocol)	Name/s	Name/s
1	dd/mm/yy	PAMM's		Care & Support Planning		MCA, training is needed and should have 95% compliance . A plan is needed to sustain ongoing training			
2		PAMM's		Training		Training Matrix is not currently fit for purpose (not user friendly, difficult to pull out key information for governance purposes)			
3		CQC		Recording and Reporting		Insight Mandatory training is not at a satisfactory level			
4		CQC		IPC					
5				Safeguarding					
6				Medication Management					

Service Improvement plans

PROGRESS RAG KEY: Enter Due Date & % Complete		QUALITY OF EVIDENCE RAG KEY:					
Not Started/Overdue		Poor Evidence					
In Progress		Adequate Evidence					
Complete		Good Evidence					
START DATE	TARGET COMPLETION DATE	Where can documents evidencing the action taken be found	Has lessons learnt been conducted? (Document dates and key learning)	Who is aware of this & How were they made aware? (i.e. via newsletter/ documented in 09/09/23 team meeting minutes)	What was the Outcome	Additional Comments Note how people who use the service/s will be affected by you not taking the corrective action	
	dd/mm/yy 55%						
	dd/mm/yy 0%	Training Matrix, Trainers notes and competency tests, as part of spot checks and supervisions. Information to be made available on website and in the service users folder as well as via newsletters.					

Any Questions?

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Creating a cleaner, greener,
healthier Hertfordshire





Co-production in Hertfordshire



Co-production

Co-production is an approach where we bring people together to have their say on local services and influence how they may be delivered in the future.

This includes people who have used our services (known as 'experts by experience'), carers, voluntary sector organisations and our own staff.

By doing this we are creating equal partnerships between people who use services, their carers and professionals.



Co-production



Ladder of co-production



Co-production

Co-design

Engagement

Consultation

Informing

Educating

Coercion



Doing with
in an equal and
reciprocal partnership



Doing for
engaging and
involving people



Doing to
trying to fix people
who are passive
recipients of service



Coproduction in Hertfordshire



The Basic Principles



➤ Equality

Everyone is equal and everyone has assets

➤ Diversity

We must be proactive about including people

➤ Accessibility

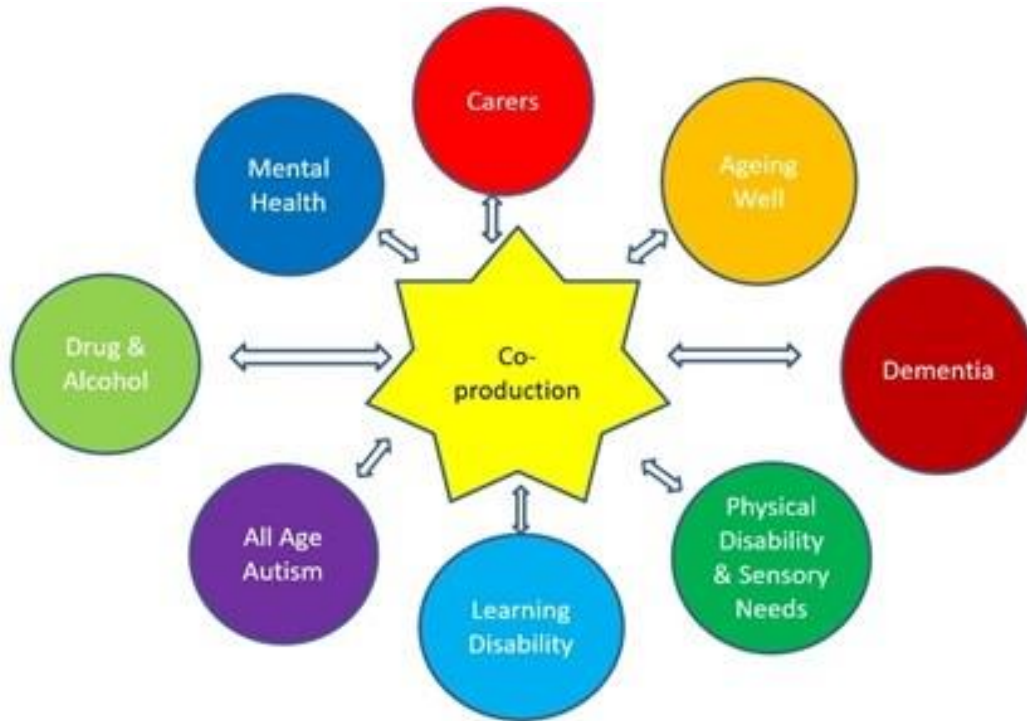
Everyone must have the same opportunity to take part fully

➤ Reciprocity

People need to receive something back and to have shared expectations



Hertfordshire Model



- 5 Statutory staff
- 5 Experts by Experience
- 5 Voluntary Sector Representatives
- Co-chairs
- Meet quarterly
- Terms of Reference
- Hertfordshire Standards
- Task and Finish group (ad-hoc or board roles)



Why Co-produce?

- How would you know what people need from services if you don't work with them
- Whole system approach – people use and receive support from across the system so we need to work together to make change
- Learn and develop your skills set
- Make new connections and build better relationships within the community
- Learn new ways of working to keep up with the ever changing demand and needs of the services



What is in it for an Expert by Experience?

Training and self
development
opportunities

Their experiences will
influence service design,
improving services for the
future

Meet new people

User Involvement
fees/expenses

CV and
references



Co-production Team

Co-production Boards – administrative support to boards

Community Outreach - Awareness of co-production to the public to ensure diversity across the boards and co-production projects

Project support – Promotion of co-production to staff to improve the use of co-production throughout the commissioning process/cycle, strategies and all other projects

Delivery of Co-production Training

Monthly Virtual Coffee Mornings



How to deliver co-production

Diversity and Equality are important to make sure that different experiences and views are being represented in a co-production exercise

- Face to face, Online, Phone calls, Surveys, Accessible Information
- Board roles, Workshops, Focus Groups, Task and Finish groups (there are long term and ad-hoc roles available)
- Community Outreach and Drop In sessions (promote diversity and inclusion)

Training and support are available via the Co-production Team

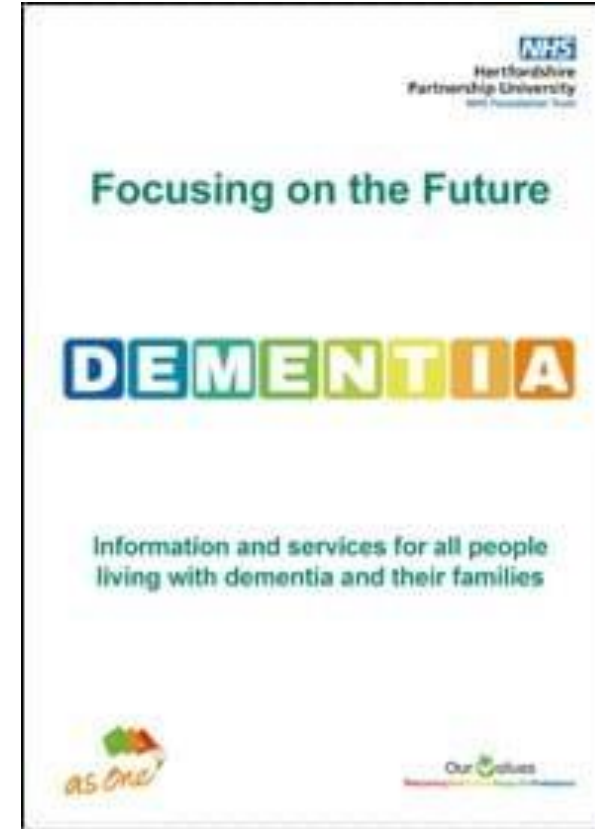


Examples of co-production

Hertfordshire
Dementia Strategy
2023 -2028

Hertfordshire All Age
Autism Strategy

Hertfordshire Direct
Payment Support
Service



Co-Production for Care Home Residents

How can we link residents within care homes so they feel part of the Co-Production process?



Co-production Contact Details

Website:

[Co-production in Hertfordshire | Hertfordshire County Council](https://www.hertfordshire.gov.uk/coproductio)

Email:

coproduction@hertfordshire.gov.uk

Telephone:

01438 843708



Michelle Airey

Head of Education and Quality Improvement

Hertfordshire Dementia Strategy

2023-2028



Our vision is of a county where people affected by dementia have access to timely, skilled, and well-coordinated support from diagnosis to end of life, which helps achieve the outcomes that matter to them.



Our priorities

The following key themes were identified through our work with people affected by dementia, our voluntary sector partners, health and care professionals and providers.

These form the priorities for our Strategy and delivery plans:

- 1) Promoting Health and Wellbeing.
- 2) Enabling Equitable and Timely Access to Diagnosis.
- 3) Ensuring People with Dementia have Equitable Access to Appropriate Health and Care Services.
- 4) Supporting People Affected by Young Onset Dementia.
- 5) Supporting Carers of People with Dementia.
- 6) Preventing and Responding to Crisis.
- 7) Developing Dementia-Friendly Communities

[Click here for full strategy details](#)

Feedback from Dementia Survey

- 50% of respondents not aware of strategy
- 77% of respondents feel confident in using support services
- Identified a gap in awareness of different services available and how to link with local groups and day opportunities
- Need greater support for crisis and behaviour support
- Different expectations for crisis response and challenges with timeframes
- Different approaches and understanding of behaviour support
- 80% of respondents have received good dementia training but need further more detailed education needed for all staff
- Lots of useful resources identified across providers to be shared
- TNA- EOL, Medication and identifying signs of distress, deterioration associated with dementia key education areas
- Number of examples identified where provider is no longer able to meet the behaviour needs of the individual

[Click here](#) *to complete in full if you haven't already*

Add Homecare Charts

Dementia Support Feedback

What challenges do you face and what support would you like to see?

Care Home Support Service Directory

[View all services](#) [Filter By](#) [Search](#)

Type of Service

[Admission Avoidance](#) [Community Trust Specialist Teams](#) [Emergency/ General](#) [End of Life Support](#) [Enhanced Care Home Support](#) [Equipment](#) [Learning Disability Support](#) [Mental Health](#) [Sensory](#)

Location

Town/Village/City

NHS Locality

[Dacorum](#) [Hertsmere](#) [Lower Lea Valley](#) [North Herts](#) [St Albans](#) [Stevenage](#) [Stort Valley and Villages](#) [Upper Lea Valley](#) [Watford and Three Rivers](#) [Welwyn and Hatfield](#)

Area of Hertfordshire

[East and North](#) [South and West](#)

Availability

Service Hours

[06:30-23:00](#) [08:00-18:00](#) [08:00-20:00](#) [08:00-22:00](#) [09:00-17:00](#)

Service Days

[7 days a week](#) [Monday - Friday](#)

- Please note some areas around Royston fall under Cambridge and Peterborough for health related support.

[Find services](#)

[Service Webinar 6th November- Click here to book](#)

New Ways of Working

- Digital Records:
76% Hertfordshire Care Providers are using a DSCR
- New Delegated Health tasks
- Virtual Wards and Hospital at Home
- Interoperability across Health and Social Care
- Planning for new roles- Nursing Associate
- What else is new?

**What does this mean
and why it effects
culture?**

Expectations...

- Set
- Led
- Understood



Digital Care Records

Achieving Quality
Recording and
Supporting Your Staff



Recording in a Digital World

Next steps

SCAN ME



- What are your challenges?
- What do you need as Managers?
- What do you staff need ?



Delegated Health Care Tasks

Person-centred, safe and effective delegation of healthcare activities to care workers can enable people to have more choice and control of when and how things happen, with an opportunity to provide a better experience of care.

A delegated healthcare activity is an activity that a regulated healthcare professional, such as a nurse, nursing associate, occupational therapist or speech and language therapist, delegates to a care worker or personal assistant.



Person Specific Tasks

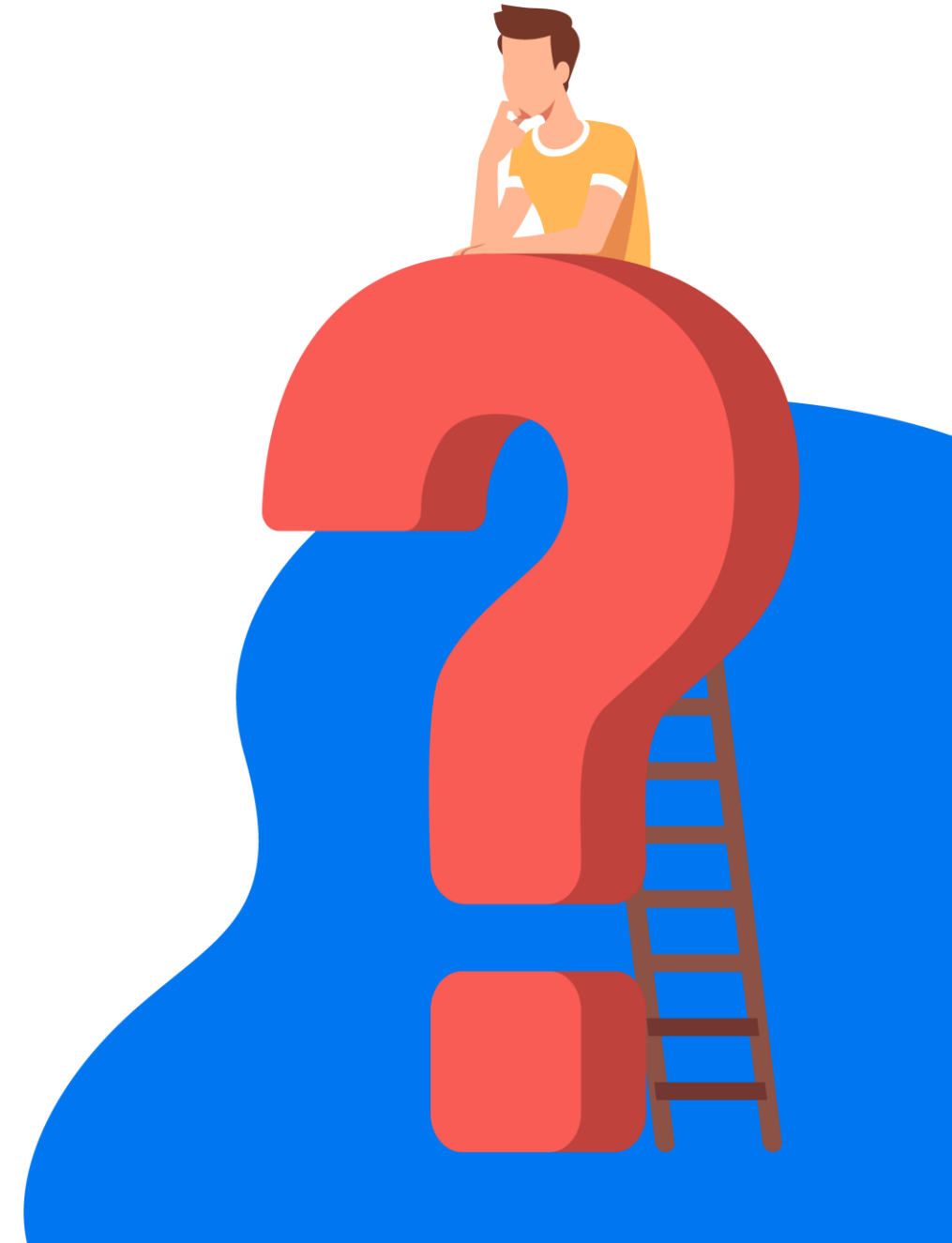
Delegated healthcare tasks are specific to the individual.

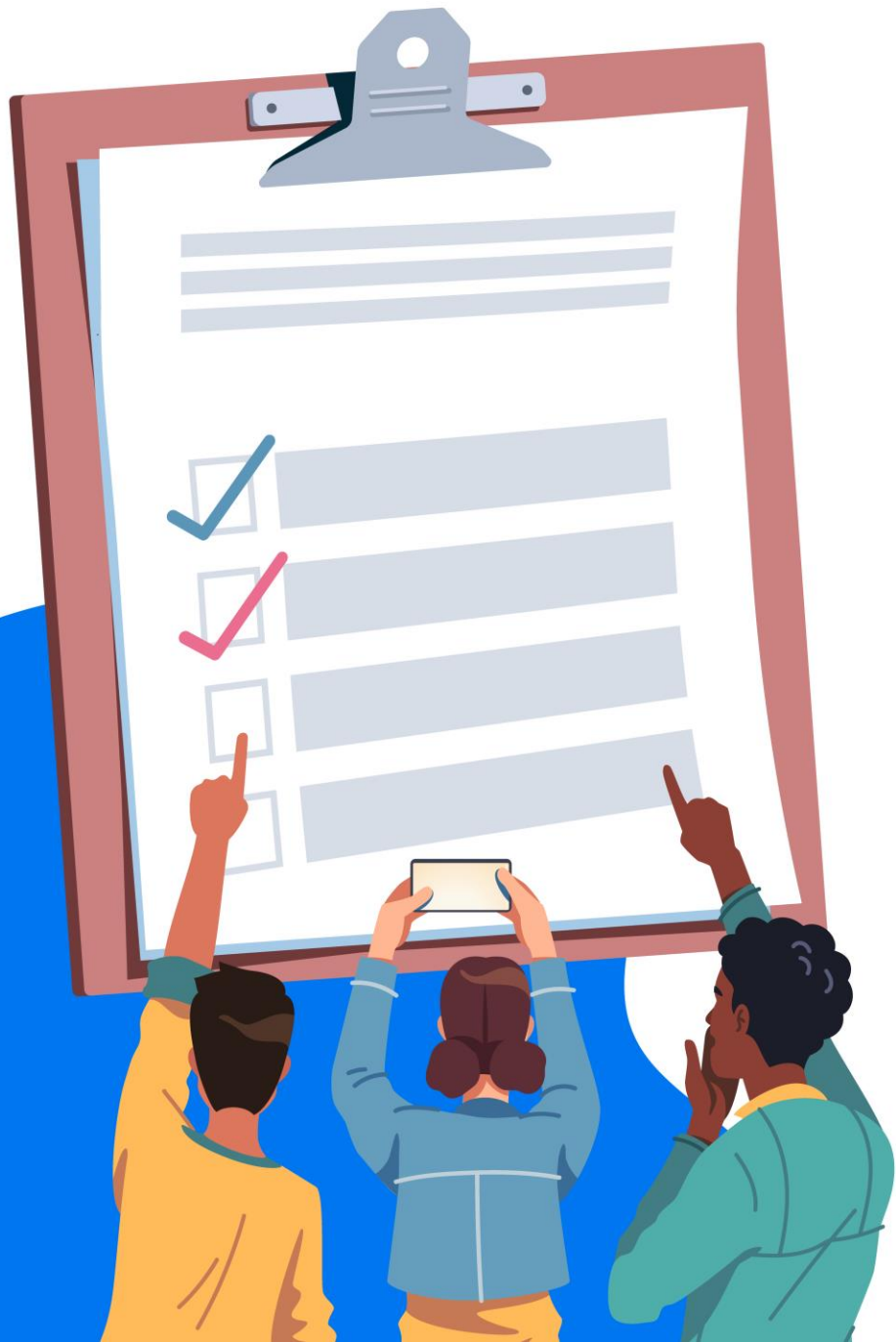
Care Staff should have further training and assessment to deliver a healthcare task they have already been trained on to a different individual.



Why is this important?

- ✓ Safety
- ✓ Liability and Accountability
- ✓ Clear Governance
- ✓ Good system working
- ✓ Timely Care
- ✓ Career Development
- ✓ Clear roles and responsibilities in and out of service





What we're doing?

Stage 1

- Survey- CQC Registered Services

Stage 2

- Identify Training Needs
- Identify required competencies
- Create Template policies, procedures and processes- Agreed across system

Stage 3

- Guidance and Training

SCAN ME



Upcoming Events and Training

[Data Protection: Roles & Responsibilities for Managers & Proprietors- 23rd November](#)

ICB Webinars

Webinar	Date	Time	Link
Reducing Harm from Omitted and Delayed Medicines	27/11/2023	11:00	Register here
Self-administration of Medicines	04/12/2023	11:00	Register here
Hydration Prevention is better than cure!	06/12/2023	10:00	Register here
Medication Waste Reduction in Care Homes	11/12/2023	11:00	Register here
Constipation	13/12/2023	10:00	Register here

Breakout Room Discussion

What do you want out of future forums?

What challenges are you facing and what support would you like to see?

Sharing any good practice?

Feedback

Webinar evaluation form

