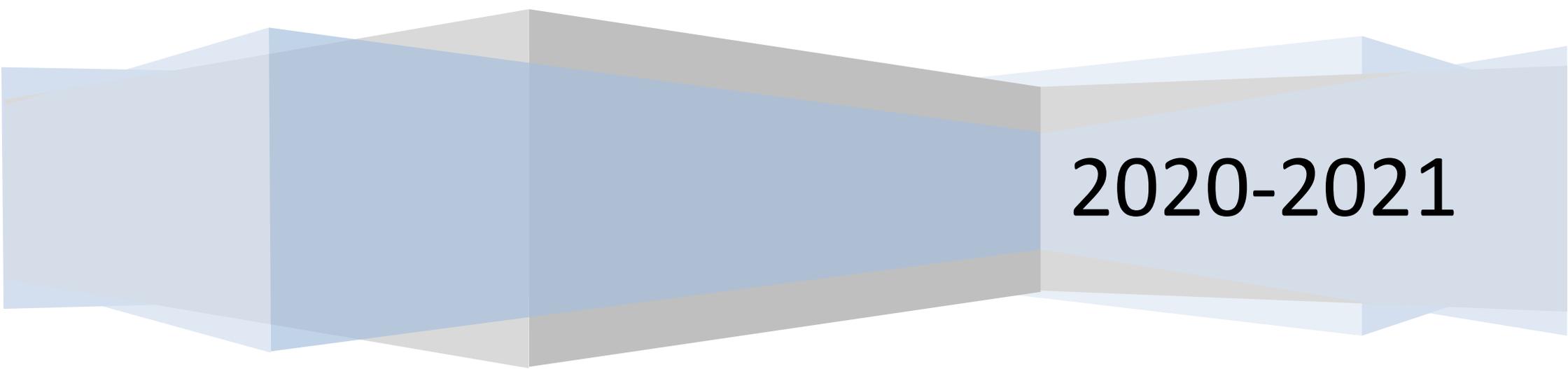


NHS Highland: Adult Social Care Directorate

Service Remobilisation Plan

NHS Highland: Adult Social Care

Version 2



2020-2021

1. Introduction

The Service Remobilisation Framework comprises 4 elements:

1.1 Phased Approach

A charted description of the phases we will go through on the route to Remobilisation

1.2 Outcomes Triangle

A visual representation of how Service Users' and Carers' Outcomes and will be delivered through the meeting of Service Delivery Outcomes and Remobilisation Objectives

1.3 Remobilisation Plan

A work-plan to describe the detailed activities necessary to deliver our Remobilisation Objectives and, in turn, our Service Delivery Outcomes

1.4 Good Practice Indicators/Performance Measures

A set of high level assurance indicators/performance measures for our Remobilisation

1.5 Appendices

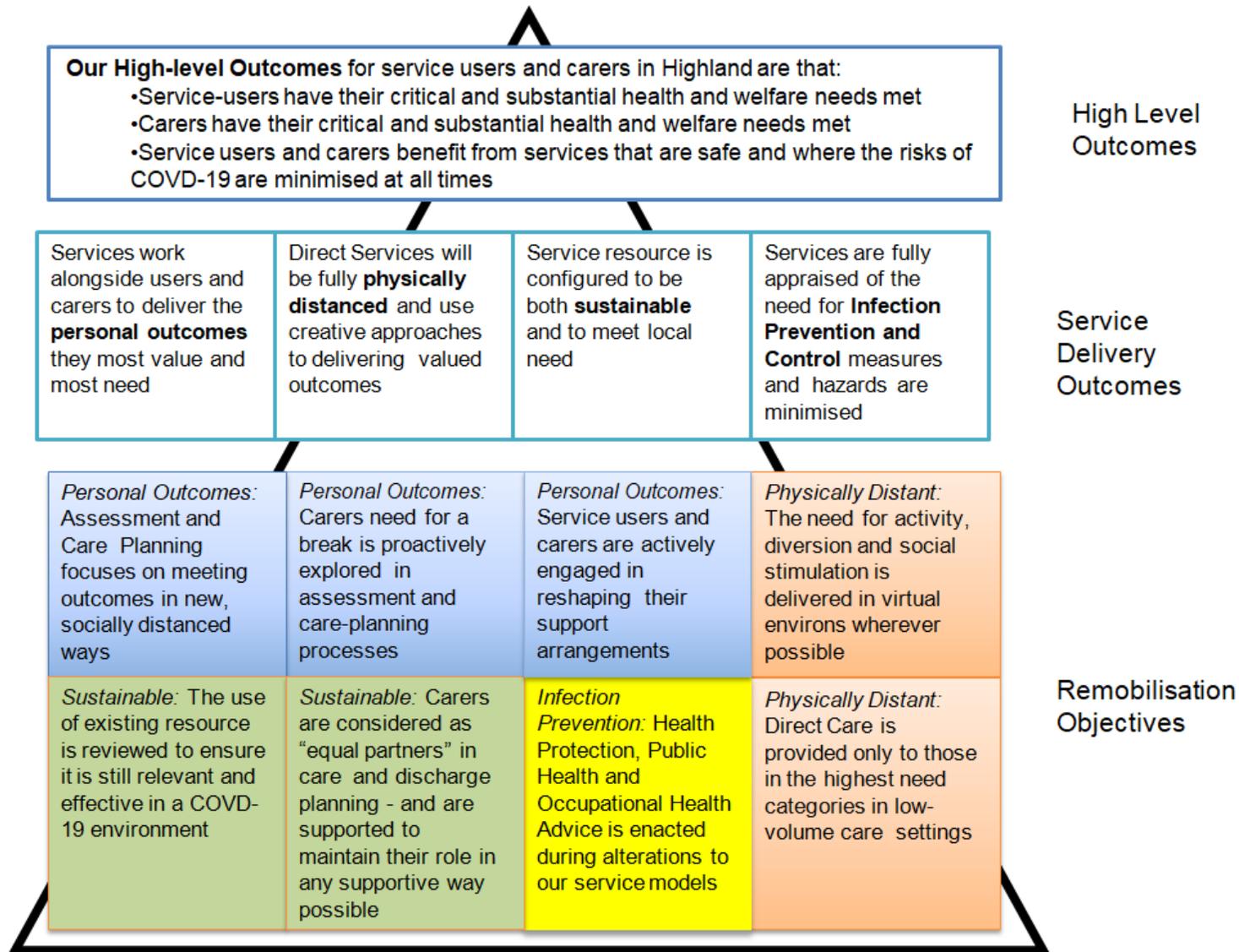
1.5.1 Specimen (Individual) Service Remobilisation Plan

1.5.2 Specimen Service Risk Assessment

2 Phased Approach

<h3 style="text-align: center;">ASC Guidance across all phases</h3>			
Follow HPS Guidance		Consider safe level of service Risk assess ahead of remobilising	Use socially distanced supports wherever possible Understand the needs of unpaid carers
<p>LOCKDOWN: High viral Load</p> <p>Prioritise: Adult Support and Protection Critical need in the community Carer Support via socially distanced routes. Flexible reactive response to Covid impacts</p> <p>Rationalise: Full Assessments Allocation processes Respite, Short Breaks Day Services Transport Training & Placements</p>	<p>PHASE 1: Virus not contained</p> <p>Prioritise: Adult Support and Protection Critical need in the community Carer Support via socially distanced routes and exceptional access to day services short breaks. Flexible reactive response to Covid Impacts</p> <p>Rationalise: Full Assessments Allocation processes Respite, Short Breaks High-volume Day Services Transport Training & Placements</p>	<p>PHASE 2: Risk of spread remains</p> <p>Prioritise Adult Support and Protection Critical/Substantial need in the community Carer Support via socially distanced routes and access to day services and short breaks. Exceptional Respite, alternative Short Breaks Allocation processes Reactive response Capacity 'Teams' type training</p> <p>Rationalise: Full Assessments Respite in any high risk environ High volume Day Services Transport Placements</p>	<p>PHASE 3: Viral risk is controlled/low</p> <p>Prioritise Adult Support and Protection Critical/Substantial need in the community Carer Support via socially distanced routes and access to day services, 'respite' and short breaks Allocation processes Flexible reactive responses 'Teams' type training Placements restart Full Assessments</p> <p>Rationalise: High volume Day Services Transport</p>

3 Outcomes Triangle



4 Remobilisation Plan

Meeting Personal Outcomes: Reshaping Care Plans			
	Activities	Outputs	Outcomes
2020-2021	Care Planning at a personal level is revisited to ensure personal outcomes are delivered safely and sustainably for those in greatest need	Reviews of individual's care plans produce new or adapted ways of delivering valued outcomes. Full Assessments replace Partial ones.	Personal outcomes are delivered in new and/or adapted ways for Adults in Need
	Carers under greatest pressure have their needs assessed and care plans reshaped	Professionals (Social Workers, Lead Professionals, Nurses and Carers Link Workers etc.) liaise to identify Carers at particular risk; and act together to engage them in assessment and care-planning processes	Services to carers are shaped to meet the most urgent needs for Carers
	Service users and carers are actively engaged - at a service level to describe how they see their needs and outcomes being met in "Covid-proof" ways.	Engagement and collaboration in rearranging service and support arrangements to service users and carers is carried out by Registered Services and Teams	Service provision is reshaped – as far as possible - in line with service users' and carers' aspirations and anxieties
Providing Physically Distanced Services			
	Activities	Outputs	Outcomes
2020-2021	Necessary "in-person" services are delivered at a physical distance.	Group working and/or social environments are restructured to allow for safe in-person attendance	Service Users and Carers benefit from their attendance at Service provided outwith their home Individuals and Carers are confident in our service provision.
		Times for Attendance are extended to allow for more service users to benefit from in-person services across the length of the day and week	

Services are provided Sustainably			
	Activities	Outputs	Outcome
2020-2021	The efficacy of our service delivery strategies are reconsidered in the light of the COVID environment	Traditional service models are reshaped (where old service delivery strategies are now not possible or no longer sustainable)	Local need is met more effectively: and numbers benefitting from restructured services are maximised.
		New service models are consulted upon and agreed with service users, carers and corporate partners	
		Resources are freed from current service delivery options to support new ways of working	
Infection is prevented			
	Activities	Outputs	Outcome
2020-2021	All 'in-person' service reconfiguration is fully informed by Infection and Prevention Control Good Practice	Environments and ways of working are restructured in line with IPC good practice	"Hands-on" and "Face to face" services are as safe as possible and service-users, carers and staff are protected.
		Clear and accessible risk assessments and risk-managements plans are in situ ahead of Services restarting/ remobilisation.	

The Remobilisation Plan (above) describes a framework where the work we do (our activities and outputs) to reshape and restart our services is translated into positive outcomes for service-users and carers. This is the work that will support our "Phased Approach" to moving across the four key pillars detailed above. Short term service remobilisation plans will be prioritised for resetting of day care and respite, providing support to carers (including providing alternative types of Short Break) and to resume full, functional care assessments.

5 Good Practice Remobilisation Indicators

- Day and Respite Services are remobilised;
- Services are restarted for all service users where appropriate, safe and necessary;
- Carers benefit from Short Breaks;

- Partial Assessments are replaced by Full Assessments; and
- Communication and Collaboration with internal and external stakeholders.

Good Practice Indicators	Measures / KPIs	Targets	Current Performance	B	R
				A	G
1	Day Services are remobilised	% of Services Registered to provide day care are active and able to offer services safely	(TBC) 75% by Sept 20	TBC	
		Number of Day Care service users are increased in line with specific mobilisation plans	To increase the number of service users attending day care, using April 20 as baseline	TBC	
2	Respite Care Services in a care home and at home are remobilised	% of Services Registered to provide respite care are active and able to provide services safely	(TBC) 75% by Sept 20	TBC	
		Number of Respite Care service users are increased in line with specific mobilisation plans	To increase the number of service users accessing respite care, using April 20 as baseline		
3	Services are restarted to all Service users	% of Service Users whose Care Plan is currently inactive or abridged	(TBC) 50% by end Sept 20 (TBC) 25% by end Oct 20	TBC	
4	Carers benefit from Short Breaks	% of Carers with Eligible needs who report they are receiving a short break currently; or have one now planned	(TBC) 20% by end Aug 20 (TBC) 50% by end Oct 20	TBC	
5	Communication with internal and external stakeholders	Communication Strategy to be developed	Plan in place for Sept 20	TBC	
6	Full Social Care Assessments are available to all eligible Adults in Need	Partial assessments are replaced by Full Assessments	(TBC) Nil Partial Assessments for those not in Shielded Category by Oct 20	TBC	

6 Appendices

APPENDIX 1: Specimen (Individual) Service Remobilisation Plan

APPENDIX 2: Specimen Service Risk Assessment