

Embedded and emerging good practice in health and social care

Aligned to the [Framework for Community Health and Social Care Integrated Services](#)

Health and Social Care Partnership: North Ayrshire				
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Name of good practice: Trindlemoss Court and Warrix Avenue				
Select (x) all areas that apply to your good practice (select more than one if applicable)				
CLIENT GROUP	Children and young people		Older adults	x
	Younger adults	x		
SETTING	City		Remote & rural (incl islands)	
	Corporate		Urban	x
SERVICE AREA	Addictions		Management team	
	Admission avoidance	x	Mental health	x
	Community care services incl care at home/care homes	x	Physical disabilities	
	Day services	x	Physical health	x
	Housing incl Homelessness	x	Primary care	
	Intermediate Care incl Hospital at Home		Rehabilitation	x
	Justice services		Social care services	x
	Learning disabilities	x	Supported discharge	x
	Other – please specify			
ELEMENTS of FRAMEWORK	Anticipatory care planning		Live independently at home or in a homely setting	x
	Assets based approach	x	Manage own care	x
	Connect with communities	x	Reablement	
	First point of contact		Seamless working with acute	x
	Enhanced care in care homes / supported accom	x	Short term targeted interv to meet more complex needs	
	Fully integrated community teams	x	Teams aligned with general practice	
	Other – please specify			
ENABLERS	Agile working		Information sharing	x
	Aligned plans	x	Infrastructure	x
	Clarity of vision	x	Management information	x
	Clinical and care governance	x	Shared accountability	x
	Collaborative leadership	x	Strong team ethos	x
	Culture and values	x	Technology	x
	Fit for purpose premises	x	Well-developed lead professional roles	x
	Improvement capacity	x	Well-developed relationships	x
	Other – please specify		Collaborative commissioning	

North Ayrshire HSCP

Trindlemoss Court and Warrix Avenue

SITUATION	<p>North Ayrshire HSCP identified a lack of suitable community supports and independent living options for people with learning disabilities.</p> <p>This lack of opportunity had resulted in a small number of people remaining in learning disability assessment and treatment beds inappropriately and acute mental health beds, for significant period of times, resulting in poor outcomes and impacting on capacity for acute services.</p> <p>This approach also created significant levels of stress for families and carers, as a small number of people were housed in specially commissioned supports out with the local area.</p> <p>As a result of this approach learning disability and mental health teams were fragmented managing multiple sites and complex care pathways.</p>
ACTIONS TAKEN	<p>A suitable site became available in North Ayrshire and the partnership in collaboration with North Ayrshire Council and NHS Ayrshire & Arran developed an integrated business case to jointly purchase, fund and commission the Trindlemoss building and Warrix Avenue development alongside this. The business case was driven by the HSCP and supported by the Council and NHS Board with significant capital investment. The Trindlemoss learning disability building is on the same site as Warrix Avenue.</p> <p>A nine-month period of refurbishment created a fit for purpose site:</p> <ul style="list-style-type: none">• Trindlemoss Court – day opportunities is a state-of-the-art building for people with learning disabilities to take part in activities, maximise their skills, and have therapeutic opportunities such as hydrotherapy, sensory experiences, and outdoor spaces. Operated by in-house local authority employed team.• Trindlemoss Court – supported accommodation 20 homes for people with learning disabilities who need high levels of support and who would benefit from a closer peer group community, as well as inclusion in the wider community. Each individual has their own tenancy in a home developed in partnership with North Ayrshire Council Housing services. All homes are fully technology enabled and will be tailored to each individual's specific needs. The supported accommodation model incorporates a support base within the housing complex, with 24-hour care available. Mixed model of care with in-house care at home service meeting personal care needs and commissioned adult providers meeting social needs.• Trindlemoss Court – care home for adults with complex learning disabilities is a small care home unit for people who have highly complex needs, such as autism and is supported by HSCP specialist NHS and care staff.• Warrix Avenue – step/down rehab a community based mental health rehabilitation service with nine houses which effectively closed a ward in the acute hospital to provide a community-based recovery model supporting mental health clients to move to greater independence, care is delivered by specialist HSCP NHS employed teams.

<p>OUTCOME / IMPACT</p>	<p>By developing Trindlemoss Court and Warrix Avenue, we have seen the following outcomes:</p> <ul style="list-style-type: none"> • Collaborative whole system leadership to implement a shared vision, to better support people with learning disabilities and mental ill-health. We believe in person-centred, wrap-around care that focuses on each individual's personal outcomes and keeps people in the heart of their community. • A fit for purpose site has reduced delayed discharges for people in learning disabilities and mental health assessment beds and the return of people placed out with the local area, bringing them closer to carers and family. • Clear professional leadership and clinical and care governance processes to support the development of integrated NHS and social care teams, with a shared culture and sharing clinical and care information to support personal care plans and people's outcomes. • The building of positive relationships across the whole system has been a major success across health, social care, housing, with carers, families, and the local community. • A new facility for extended assessment within Trindlemoss rather than at a hospital site to support community rehabilitation. This approach has brought specialist services closer to the community. • Relocation and reduced beds from Arrol Park (LD Assessment and Treatment Unit historically inappropriately used to accommodate LD delayed patients), which closed early 2020 with the Assessment and Treatment Service moving to Woodland View Hospital (facilitated by freed up ward moving to Warrix Avenue). • Integrated pathways and commissioning arrangements developed with Housing Services to support sustainable tenancies. • Clarity around legal and financial guardianship issues – this learning has been rolled across other new supported accommodation models. • Trindlemoss Day Opportunities - have been involved with a learning collaborative along with seven other services across Scotland, organised by Healthcare Improvement Scotland and aimed at sharing experiences and planning for developing learning disability day services. <p>In Ayrshire and Arran, North Ayrshire HSCP has the lead partnership responsibility for acute mental health and learning disability services, as a result of having control and oversight over the whole pathway and system we have been able to take forward this significant programme of work to reduce the inpatient bed compliment for these services and putting in place community alternatives.</p>
<p>MEASURES/ INDICATORS OF SUCCESS</p>	<ul style="list-style-type: none"> • Reduced delayed discharges for people with learning disabilities and mental health • Shared assessment and personal outcomes • Reduced delays for community assessment • Clear pathways to support hospital discharge • Clear pathways to develop housing tenancies and supported accommodation models • Specialist services in community settings • Return of people placed out with the local area • Service users, carers, and family views • Levels of technology solutions and digital accessibility • Integrated management, health and social care teams • Integrated financial management • Site usage for wider community events

Even better if ...

(enablers to further the principles of integration and result in even better outcomes if ...)

The start of the project and the collaborative purchase and commissioning of the site was complex and demanding. Had the HSCP a direct commissioning and capital budget this process would have been quicker and more straightforward. There remains operational issues that arise re maintenance and conditions of occupancy agreements between parties.

Commissioning and workforce issues for each part of the development were complex and there was not a one size fits all solution, as can be seen from the mixed model of care delivery. This created tensions and continues to re employers, terms and conditions etc. One integrated workforce would have been far easier to manage and plan for.

NATIONAL HEALTH AND WELLBEING OUTCOMES

1. People are able to look after and improve their own health and wellbeing and live in good health for longer.	x
2. People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.	x
3. People who use health and social care services have positive experiences of those services, and have their dignity respected.	x
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	x
5. Health and social care services contribute to reducing health inequalities.	x
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.	x
7. People who use health and social care services are safe from harm.	x
8. People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	x
9. Resources are used effectively and efficiently in the provision of health and social care services.	x

Health and Social Care Scotland's 5 Essential Elements ([click link to listen to statement of intent](#))

1. Transforming the approach to improving health, wellbeing and independence	x
2. Building stronger community care systems and primary care services	
3. Establishing a new focus on mental health	x
4. Securing a sustainable acute hospital service and specialist care service	
5. Strengthening future partnerships to ensure a modern sustainable workforce	x

Links to any published reviews/evaluations

Before submitting this example of good practice please ensure approval and sign-off by your head of service / chief officer.

*Approved for online publication
(signature and position)*

Caroline Cameron, Chief Officer

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