

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: South Ayrshire				
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Name of good practice: Learning Disability Core and Cluster and Community Connections				
<i>Select (x) all areas that apply to your good practice (select more than one if applicable)</i>				
CLIENT GROUP	Children and young people		Older adults	x
	Younger adults	x		
SETTING	City		Remote & rural (incl islands)	x
	Corporate		Urban	x
SERVICE AREA	Addictions		Management team	
	Admission avoidance		Mental health	
	Community care services incl care at home/care homes		Physical disabilities	
	Day services		Physical health	
	Housing incl Homelessness	x	Primary care	
	Intermediate Care incl Hospital at Home		Rehabilitation	
	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	
	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	
	Aligned plans		Infrastructure	
	Clarity of vision	x	Management information	
	Clinical and care governance	x	Shared accountability	x
	Collaborative leadership	x	Strong team ethos	x
	Culture and values	x	Technology	
	Fit for purpose premises		Well-developed lead professional roles	x
	Improvement capacity	x	Well-developed relationships	x
	Other – please specify			

South Ayrshire HSCP

Learning Disability Core and Cluster and Community Connections

SITUATION	<p>Learning Disability Social Work Service worked with service users to offer intensive support in their own tenancy (24/7), care or respite, and support to remain at home with parents who were also trying to maintain employment and undertake their caring role. We also had a small number of young people with a learning disability who were 'looked after', were in transition to adult services and required housing, as well as people who had been in hospital for many years and needed to move to alternative accommodation.</p> <p>Families and people who used services informed us they were lonely, felt isolated and wanted relationships with peers that were safe and not facilitated by a care provider but that could take place in safe spaces and groups. We also used research and looked at maximising positive outcomes for residents in South Ayrshire who required to move on. It was our ambition to have a facility that could meet a broad range of needs and was intergenerational.</p> <p>In tandem, staff had advised that the main issue for ongoing engagement with this group of service users was the social aspect, including the ability to maintain relationships and support to establish regular meetings.</p> <p>The pandemic in March 2020 accelerated thinking as the need to keep people connected and continue to meet their aspirations was very important.</p>
ACTIONS TAKEN	<p>We had worked with housing colleagues to take on a small development in South Ayrshire. In the last quarter of 2019 we began moving some people into a core and cluster setting, whereas previously they had their own individual tenancies and received 24-hour care. The core and cluster had a communal room, enhanced telecare and 24-hour site staff presence.</p> <p>This was a sensitive time as it was the first development of this type and we were moving people from hospital and those who had 24/7 care in the community. Care plans were tailored to individual's needs and included the ability of each resident to grow, learn and develop independence. We identified some young people who were in transition to adult services (having been "looked after") who came from the area and gently supported them to begin to live independently.</p> <p>The development has been opened for 18 months and has been highly successful with all tenants and their attorneys citing this service as "a blessing".</p> <p>Our second core and cluster in Ayr, which was purpose built included 11 flats with a communal area and enhanced telecare. This stalled due to the pandemic however we met remotely with the housing developer and housing association to keep things moving. There was clear evidence that we had to consider our older carers and some complex young people within this development. The social work staff along with our contracts and commissioning team and provider worked to both allay the fears of some parents who struggled with their young person leaving home, and for the parents to develop more equitable relationships with their daughters and sons. The residents moved in during December 2020 and all have settled well. Parents have been highly complementary of our approach.</p> <p>In March 2020, when day services closed and care provision was essential and we could not provide social support, to have a community connector within the team. A worker who had supported our day service in the past arranged events with one of our social workers, such as art competitions, quizzes and more</p>

	<p>importantly window visits whereby he spoke to folk on the phone at their windows. This was innovative and highly successful, along with the walking groups and use of empty day service facilities to have pool competitions, while respecting social distancing and wearing the appropriate PPE. This input, especially for our really isolated families, was critical and well received. Now that restrictions are lifting we are returning to our social events such as our curry club in a local pub.</p>
<p>OUTCOME / IMPACT</p>	<p>The outcome of the core and clusters is 24 residents (2 people are sharing) are living successfully in their own tenancies. They are able to socialise with peers. The risks to them have diminished as there is 24/7 support, which is proportioned to having their privacy and dignity maintained and feeling a sense of achievement.</p> <p>These settings have been of great value and allowed families and workers to feel a sense of relief that people were cared for during the pandemic and beyond. The service users have also developed a greater sense of achievement, autonomy and self-belief.</p> <p>The impact of the community connector post is that our service users and their families have felt connected and cared via robust engagement and support. This was intense at the beginning of the pandemic within learning disability services as our residents struggled to understand the rules on staying at home, social distancing, which left them more vulnerable. We also had a small group who were a risk to others and we had to quickly put measures in place via our community connector to engage with this group.</p>
<p>MEASURES/ INDICATORS OF SUCCESS</p>	<p>The success has been that all residents have settled in and blossomed into more independent autonomous and satisfied adults.</p> <p>Some of the comments below from residents and parents/attorneys are powerful and evidence the success of the work:</p> <p><i>“I recently moved into my own flat and have gained a lot more independence. I moved into the same block as my closest friend and have made a lot more friends since moving in. I have learnt how to do household tasks and learned new skills with my new support team.”</i></p> <p><i>“I have moved into my own flat which I am really enjoying.”</i></p> <p><i>“My daughter moving into her own tenancy at the core and cluster has been very successful. It has increased her independence and she really enjoys having her own space. All the tenants seem to get on well together and enjoy various activities. At home life is easier, I have another child with complex needs and coping with one is much easier than two. There is much less pressure on me.”</i></p> <p><i>“The core and cluster is very well organised, any issues that have arisen have been solved quickly, staff are friendly and I am always kept up to date. The tenancy and the support have really helped to improve her independence.”</i></p> <p><i>“It was lovely to see everyone socialising together in the garden as it was like a community.”</i></p> <p><i>“I love my flat.”</i></p> <p><i>“I would have moved my son out years ago and even considered a flat of his own (as he shares) if I had known how well it has gone and the support that was available to my son.”</i></p> <p><i>“I am part of my community now and feel free.”</i></p>

Even better if ...

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

- We are working to develop more core and clusters with Housing Services
- We are consulting on developing our new Learning Disability Strategy
- We have created an LD Champions Board of carers and service users with a learning disability to affect change and ensure progression of better outcomes/opportunities
- We have an 18-month post to continue the Community Connector/Champions Board Officer to support the work of the Champions Board and keep connecting with socially isolated citizens and connecting them with their peer groups.

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	x
3. Establishing a new focus on mental health	x
4. Securing a sustainable acute hospital service and specialist care service	x
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)*

Tim Eltringham, Chief Officer

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