

Integration	Joint	Board
24th 0	ctobe	r 2019

	24th October 2019
Subject:	Community Care Occupational Therapy Update
Purpose:	
	The purpose of this paper is to update the Integration Joint Board on:
	<ul> <li>The current waiting time position for occupational therapy assessment within the community care teams in North Ayrshire</li> <li>Progress made to date to reduce these waiting times</li> <li>Actions planned to further improve this position</li> </ul>
Recommendation:	It is recommended that the Integration Joint Board: - Note the content of this paper - Approve the actions proposed to further improve this position

Glossary of Terms	
HSCP	Health and Social Care Partnership
AHP	Allied Health Professional
IC&R	Intermediate Care and Rehabilitation
OT	Occupational Therapist
IJB	Integration Joint Board

1.	EXECUTIVE SUMMARY
1.1	For some time now, there has been challenge around the capacity of the occupational therapy teams in North Ayrshire, with people waiting longer than is desirable for occupational therapy assessment in community care.
	In March 2019, a paper was brought to the Integration Joint Board to provide assurance around the steps already taken to improve the position. A stretch aim was agreed - that by the end of September 2019, 90% of referrals to community care occupational therapy will be seen within eight weeks of referral.
	This paper summarises the steps taken since February, provides update on the improving waiting time position, and proposes actions to further improve the position.
2.	BACKGROUND
2.1	The primary goal of occupational therapy is to enable people to participate in the activities of everyday life. Occupational therapists achieve this outcome by working with people and communities to enhance individuals' abilities to engage in the tasks or activities they want to, need to, or are expected to undertake, or by modifying the

	occupation or environment	to better support function.
2.2		tains to the occupational therapy input provided by those syrshire Council which have traditionally sat within the
	keep people at home, and a such input has been mainly example, toileting equipmen	esment and interventions which promote independence, at their functional optimum. Traditionally the focus of around the provision of equipment – such as, for any high street, bath lifts or environmental adaptations – from the adaptation, or stair lift, through to complex major
2.3	the current waiting time pos community care teams in N	s tabled at the Integration Joint Board (IJB) to advise on sition for occupational therapy assessment within the orth Ayrshire, progress made to date to reduce these planned to further improve this position.
2.4	highlighted that as of Febru assessment in North Ayrshi highlighted some variance a	vement initiatives already progressed, the paper ary 2019, waiting times for occupational therapy re remained higher than acceptable. Although the paper across teams, as of February 2019 there were <b>226</b> of <b>105</b> days for occupational therapy assessment.
2.5		ed the contents of the paper tabled, and approved the aper. The IJB requested an update paper be brought ss made.
2.6	This paper builds upon the	March 2019 paper, and provides update on
	<ul> <li>Current wait times for</li> </ul>	r occupational therapy assessment
	Actions progressed i	n the last six months
	And outlines plans for conti	nued improvement
3.	UPDATE POSITION SEPT	EMBER 2019
3.1	ACTION PLAN UPDATE	
	Table 1 below provides upo	late against each of the actions approved in March 2019:
	Table 1	
	Action	Update October 2019
3.1.1	A Quality Improvement	The aim was agreed and has focussed efforts in its pursuit.
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	Action	Update October 2019
3.1.1	A Quality Improvement approach is being progressed,	The aim was agreed and has focussed efforts in its pursuit.
	with a stretch aim set that :	A suite of measures are being used to monitor progress and consider impact. These are presented in section 3.2 of this
	'90% of referrals to the occupational therapy team are	paper.
	seen within 8 weeks of referral, by the end of September 2019'	In August 2019, 76% of referrals to occupational therapy in North Ayrshire community care were seen within eight weeks of referral.

3.1.2	Equipment training will be	An element of equipment training has continued, alongside joint
5.1.2	rolled out across other professional groups, to improve early access to low risk, high volume equipment, and protect occupational therapy capacity and specialist	working to promote confidence and competence amongst staff groups who would not traditionally provide such equipment, freeing up the specialist occupational therapy time and skills for complex cases  Further discussions are planned, with the appropriate stake
	skill set for more complex situations.	holders to support roll out of this approach across wider staff groups.
3.1.3	Professional triage of occupational therapy referrals through the IC& R hub will continue, with a 'rehab first' approach being promoted wherever possible.	Triage of referrals by the Senior Occupational Therapists has continued, aligned to the Intermediate Care and Rehabilitation hub, with a significant proportion of requests for assistance being streamed to other community rehabilitation options, in support of a right service, right time approach.
		Further, this provides a new assurance that for those who do require to wait, they are waiting in the right place, with risk managed – urgent need being passed to Intermediate Care Team for immediate response.
3.1.4	Housing options approach will continue, with plans to train local staff to become trainers in this approach; cascading a 'housing options' approach across services which enables practitioners to have early conversations with regards to long term suitability of homes	Housing options 'train the trainer' training has been completed. Officers from North Ayrshire Health and Social Care Partnership (HSCP) are currently working with the other two Ayrshire Local Authorities to provide a sustainable training programme in Ayrshire and further embed this approach across practice, ensuring early conversations with people around the long term sustainability of home accommodation.
3.1.5	Internal professional work will continue, promoting joint working, joint training and reducing unnecessary transitions between the different components of the occupational therapy profession in North Ayrshire	Joint working continues to embed across occupational therapy within NAHSCP, with mentoring approaches enabling straightforward adaptation work to be progressed without onward referral.  The Complex Case forum has reduced in frequency as a result of regular professional supervision, and associated decreased demand for such a forum.
3.1.6	The occupational therapy workforce will be increased, within existing available resources, to create additional capacity and further narrow the gap between referrals and allocations.	The timescales associated with recruitment processes have meant that some appointees to these temporary posts have only taken up post in recent weeks with others still awaiting confirmed start dates. An appropriate level of induction will require to be completed before the value of this additional capacity can be realised.
	Use Care & Repair budget of £125K, to employ additional assessment and review	In addition, movements within the existing workforce, and a 10% absence rate have further limited the availability of occupational therapy over the last few months.
	<ul> <li>capacity as follows:</li> <li>North - 1WTE OT, for 11 months</li> <li>South – 1WTE OT &amp; 0.5 WTE OTA, for 11 months</li> <li>Extend the 3 Senior OT grade 11 for 12 months.</li> </ul>	As a result, despite timeous action to recruit as approved, additional capacity within occupational therapy has not yet been experienced

### 3.2 CURRENT WAITING TIME POSITION

3.2.1 As of the 1<sup>st</sup> September 2019, there were **195** people waiting an average of **65** days for occupational therapy assessment in North Ayrshire.

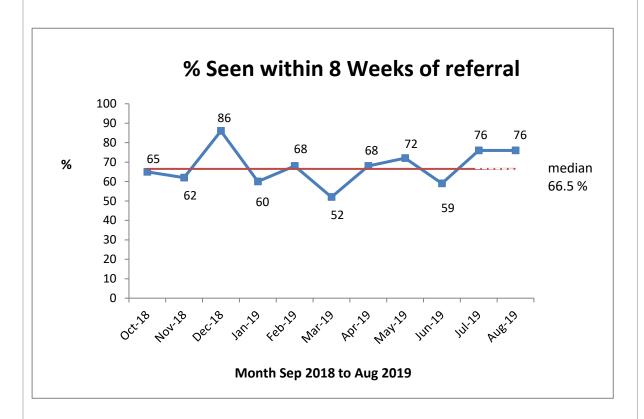
Since the last report to IJB in March 2019, there has been little significant change to the number of people waiting for assessment.

There has, however, been an increase in the number of referrals received, and continued challenge around the capacity of a small and fragile workforce.

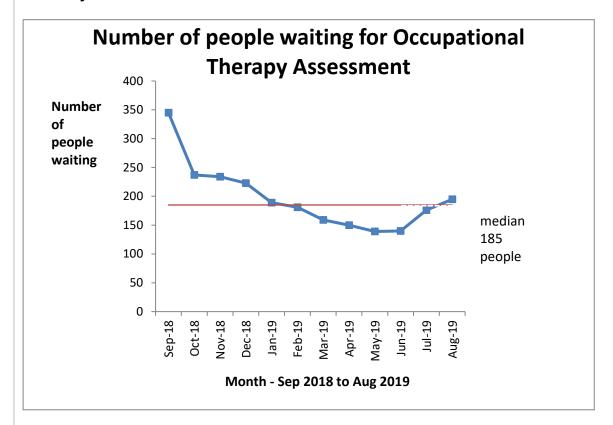
Despite this, the average waiting time has considerably decreased to 65 days, bringing achievement of the set aim closer.

Performance is illustrated further through the following charts:

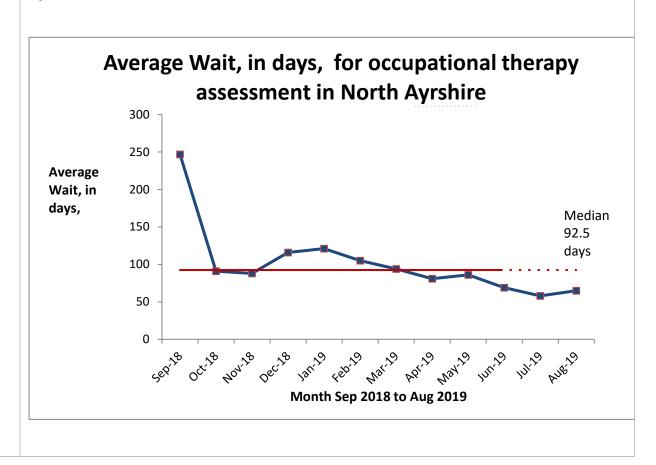
## 3.2.2 Chart 1 - Percentage of People Being Seen by Occupational Therapy Within Eight Weeks of Referral



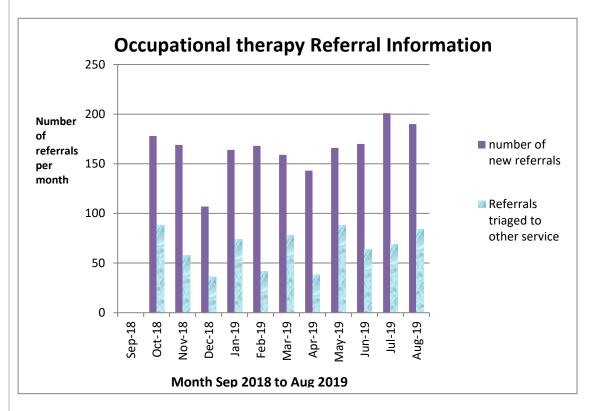
# 3.2.3 Chart 2 - Number of People waiting for occupational therapy assessment in North Ayrshire



# 3.2.4 Chart 3 - Average Wait, in days, for occupational therapy assessment in North Ayrshire



### 3.2.5 | Chart 4 - occupational therapy Referral Information



#### 4.0 PROPOSALS

4.1 Despite the small scale, and fragile nature of the substantive workforce, coupled with increased demand for occupational therapy, it is encouraging to see that the average days waiting for assessment has reduced considerably since the paper brought to IJB in March 2019.

Further, there can be a level of assurance accepted that the triage approach is ensuring people are streamed quickly to the service most likely to best meet their needs, and that those who do require to wait for occupational therapy assessment are those people who require such specialist assessment, with high risk cases being addressed appropriately.

That said, there has been little change in the number of people waiting for occupational therapy assessment, and the overall aim has not yet been achieved.

It is, therefore, proposed that the improvement approach continue, with the following focus:

- Continue the triage approach to referrals, with a focus on process to ensure maximum efficiency
- Continue the internal professional work around joint working and supervision to support effective, safe, evidence-based practice which takes a 'rehab first' approach
- Continue to progress plans around equipment training; to protect specialist occupational therapy capacity for complex cases and improve experience around access to simple, low risk equipment solutions.
- Continue work with electronic systems to ensure accurate data for performance monitoring and reporting
- Given the timescales around recruitment, and within recurring available finance, seek to extend new recruits beyond original timescales.

4.2	Anticipated Outcomes
	The approach taken to date, and outlined as planned above, seeks to ensure the best outcomes for the people of North Ayrshire, and best use of the occupational therapy resource available.
4.3	Measuring Impact
	A suite of measures including referral numbers, service activity, and waiting times will continue to be monitored, with regular reports to the Director of North Ayrshire HSCP, and North Ayrshire Health and Care Governance group, and future update report back to IJB on progress.
5.	IMPLICATIONS

Financial:	Nil
Human Resources:	Nil
Legal:	Nil .
Equality:	Nil
Children and Young People	Nil.
Environmental & Sustainability:	Nil
Key Priorities:	The content of this paper relates to the HSCP's strategic priorities around early intervention and prevention, and bringing services together
Risk Implications:	The steps already taken, and actions proposed in this paper seek to mitigate risks associated with people waiting for community care occupational therapy assessment
Community Benefits:	Nil

Direction Required to	Direction to :-	
Council, Health Board or	No Direction Required	Χ
Both	2. North Ayrshire Council	
	3. NHS Ayrshire & Arran	
	4. North Ayrshire Council and NHS Ayrshire & Arran	

6.	CONSULTATION
6.1	The attached report has been developed in consultation with the Senior Occupational therapists, the AHP Leadership team, and the Community Health and Care senior management team in North Ayrshire.
7.	CONCLUSION
7.1	This paper has provided update to the Integration Joint Board on :

The improving waiting time position for community care occupational therapy assessment in North Ayrshire

And

Actions planned to further improve this position

#### The IJB are asked to:

Note the content of this paper

Approve the actions proposed within, to further improve this position

## For more information please contact

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