

# Safe systems, pathways and transitions

## Indicative score:

**3 - Evidence shows a good standard**

## What people expect:

“When I move between services, settings or areas, there is a plan for what happens next and who will do what, and all the practical arrangements are in place. I feel safe and am supported to understand and manage any risks.”

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## The local authority commitment:

We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.

## Key findings for this quality statement

The commitment to partnership working and to the provision of personalised care had led to improved outcomes for people when they were moving between services. One of the challenges for integrated working was the issue of information sharing through the computer systems. The local authority is working with health partners regarding this and so far, has achieved read-only access for staff in the integrated teams.

A fully integrated hospital discharge team started working together a year ago and is achieving positive outcomes for people being discharged from hospital. The team worked closely with the other services available for people who required varying levels of support when discharged from hospital. This varied from a voluntary service providing transport and shopping, to the reablement team providing longer-term support. The local authority's data, as well as national data, showed that the support had enabled increased numbers of people to return home and remain at home rather than requiring longer-term support such as residential care.

The local authority was one of the first in the country to implement the Trusted Assessor system, with some regulated providers carrying out the assessments for people waiting for discharge from hospital. This, along with the development of other services, such as the Community Connectors scheme, some with partner organisations, has led to improved pathways for people ready to be discharged from hospital. There were additional plans that could be quickly implemented to support at times of pressure, such as during the winter, when there are likely to be higher than usual admissions to hospital.

The contracts team had a risk management system in place for providers of homecare and residential/nursing homes. This ensured that support was provided to those where there were concerns about the quality of the service being provided. The providers spoke highly of the relationships with the contracts and commissioning teams and about the positive partnership working that took place, even when dealing with challenging issues. This meant that the providers had a good understanding of the services that are going to be needed in the future and felt part of the discussions and planning for this. The providers also found that due to their positive relationships, they were more likely to speak to the local authority teams for advice and therefore any issues could be dealt with at an early stage.

The pathway for people in transition from children's to adult's services was not always as seamless for families as it could be. The local authority is currently planning for additional frontline social workers to take a lead on transitions within the social work teams.

Risk assessment was a core aspect of the assessment of people's needs alongside the focus on personalised care and support. Social work staff who we spoke with were aware of the legal frameworks in which they worked, as well as the importance of respecting individuals' choice. Staff told us that they were able to obtain the service of an advocate when people required one. The advocacy provider confirmed this and that they were able to provide advocates for support with Care Act assessments in a timely way.

The development of the multi-agency Team Around the Adult service aimed to provide additional support to those people who have complex needs and require that support to maintain their safety and wellbeing. This meant that the most vulnerable people received the support from the most appropriate professional at any specific time and we heard examples of positive outcomes for people.