

Integration and OTs Challenges and Opportunities

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health & social care
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2020 Vision

Our vision is that by 2020 everyone is able to live longer healthier lives at home or in a homely setting.

We will have a healthcare system where we have integrated health and social care, a focus on **prevention, anticipation and supported self-management.**

When hospital treatment is required and cannot be provided in a community setting, day case treatment will be the norm.

Whatever the setting, care will be provided to the highest standards of quality and safety, with the person at the centre of all decisions.

There will be a focus on ensuring that people get back to their home or community environment as soon as appropriate, with minimal risk of re-admission.

“The 2020 Vision:” Scottish Government 2010

National Clinical Strategy

Challenges

- Demography
- Changing Patterns of illness and disability
- Relatively Poor Health of the population and persisting inequalities in health
- Balancing health and social care based on need
- Workforce issues
- Financial pressures
- Pressure to provide new treatments
- Remote and rural

Health and Social Care Delivery Plan

- Better Care

Ultimately, individuals and... their families should be at the centre of decisions which affect them..... Success should be measured by better outcomes for individuals....

- Better Health

Services need to be designed around how best to support individuals, families and their communities and promote and maintain health and healthy living.

- Better Value

Improving outcomes... through integration

Integration: Purpose and 9 National Outcomes

How should OTs contribute to these?

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.
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.
3.	People who use health and social care services have positive experiences of those services, and have their dignity respected.
4.	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
5.	Health and social care services contribute to reducing health inequalities.
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.
7.	People using health and social care services are safe from harm.
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.
9.	Resources are used effectively and efficiently in the provision of health and social care services.

Building a Culture of Collaboration

- Multitude of professions involved in integration
- Varying culture
- Varying professional autonomy
- Differences in attitude to risk enablement
- Professional silos and pigeon holes
- Competition for resources

We require a framework for collaboration

Personal Outcomes: Talking Points

Quality of Life	Process	Change
<ul style="list-style-type: none"> • Feeling safe • Having things to do • Seeing People • Staying as well as you can • Living where you want/as you want • Dealing with stigma/discrimination 	<ul style="list-style-type: none"> • Listened to • Having a say • Treated with respect • Responded to • Reliability 	<ul style="list-style-type: none"> • Improved confidence/morale • Improved skills • Improved mobility • Reduced symptoms

Focus on Personal Outcomes

- Personal Outcomes: “Talking points”
- Hard to change behaviours
- Culture of “plug and play”
- Focus on process and paperwork can mean assessment by “numbers”
- Difficulty in getting “analysis”

Good Conversations

- Need to slow down to save time and money later
- Find out what's important to people
- Involves giving away professional “power”
- Emphasis on therapeutic engagement

Not clear that there is a shared understanding at the moment that this is a priority

OT Integration: Form and Function

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- Intermediate Care Team
- Domiciliary Team
- Ward Based Teams
- Specialists in MH or LD
- MSK
- Re-ablement and care at home
- Social Work equipment and adaptations

Multi-Disciplinary Team Working

- Primary Care: Anticipatory Care Planning
- Support with Re-ablement in Care at Home and promoting maximal ADLs
- Holistic approach: equipment **may** be required
- Building resilience in individuals and with carers
- Specialist assessment and intervention
- Focus on the community?

The challenge for OTs

- In times of scarcity need to be assertive
- What is your unique role and how does this contribute within MDT working?
- Be confident..... IJBs need all the advice they can get!