

Dignity Newsletter



Adults, Wellbeing and Health

January 2010 - Third Edition

A Happy New Year to you all. Welcome to the third edition of the Dignity Newsletter. This edition includes information about the third challenge from the Dignity in Care Campaign.

The

Dignity



Challenge

“

Treat each person as an individual by offering a personalised service”

No matter what type of care and support our service users require, each person should feel confident that care requirements have been tailored to ensure that their personal choice has been considered.

Personalised services are about giving a person who is eligible for social care more choice and control over the care and support services that they receive.

This enables independence and flexibility over who provides the care and support and how and when it is delivered. The only condition is that the services that they choose to receive are safe, legal and meet their care and support needs within a certain budget.

By April 2010 a self directed support model will be implemented in Durham and all new service users and reviews of 'stable users' will have increased choice and control over their care and support.

The Department of Health Dignity Campaign has highlighted within its section on personalisation, that it has a shared ambition, to put people first through a radical reform of public services. It will mean that people are able to live their own lives as they wish; confident that services are of high quality, are safe and promote change to the individual's need for independence, well-being and dignity.

Articles in this edition are:

- **Personalising social care and support services**
- **Direct Payments**
- **The vision of essence of care**
- **In house care provider**

Personalising social care and support services

Personalisation and Self Directed Support was launched 2 years ago in November 2007 with the Ministerial Concordat, "Putting People First" - a joint protocol signed by Government ministers and departments, the NHS and CSCI (now Care Quality Commission) outlining the key elements of a reformed social care system for England.

Personalisation is a new way of looking at a persons needs, and with their full involvement, working out how their needs are best met. Provided that a person meets certain criteria they may be eligible for funding towards their care and support.

A person can be as creative as they wish providing the services that they choose to receive are safe, legal and meet their care and support needs, as shown in their care and support plan.

There will be help and support available as each person decides which options are best for them.

In a nutshell - Personalisation is about allowing choice and control for people over their own lives.

From April, everyone in the county who requires care services will have the chance to complete their own self directed support questionnaire, with support available if required. The simple form has been designed to help people identify and describe their own needs.

Although the questionnaire will not be introduced until April, around 900 residents and carers in the county have already been given their own care and support budgets.

In house care provider

Respecting dignity is everybody's business and in County Durham Care and Support a great deal of work is has been done to continue to raise awareness of the Dignity in Care Standards.

Several formal audits have taken place throughout the services to ensure that these standards are being complied with.

Within the recruitment process, questions in relation to Dignity in Care are now included at interview to ensure that the right staff are appointed, to ensure that each service user's individual needs are met in a personalised way.

These questions cover areas such as respect, safeguarding people from abuse, privacy, treating people as an individual, offering choice and control, supporting people to express needs and wants, helping people to maintain confidence and positive self esteem.

Learning outcomes from complaints are shared across all provider services to ensure lessons are learnt and to ensure service improvement.

Staff from the Safeguarding Team have provided Dignity and Safeguarding Alerter training which has been tailored to the training needs of staff in various settings to improve outcomes for the Service User.

A new Medication Policy and Procedure has been developed which covers the whole of County Durham Care and Support Services. This will ensure that the Service User is encouraged and has the choice to manage his/her own medication in a way which is appropriate to him/her. If this is not possible, then staff have a procedure which enables them to support the Service User to manage his/her medication in a safe and secure way.

County Durham Care and Support are reviewing all of the various Support Plans which are currently being used across each service area, with the aim of developing one single Support Plan proforma for the provider service. This will ensure that the support required is recorded in a consistent and high quality way whilst identifying individual choice and a personalised service.

Managers and Supervisors have recently undertaken further formalised Customer Care Training which was delivered by an outside agency. Discussions are currently taking place on how this can be effectively delivered to all front line staff to ensure individual respect, choice and control can continue to be promoted.

Direct Payments

Direct Payments is a key element in the move towards Personalised services and self-directed support.

Direct Payments is money you receive from the council to buy your own care and support services rather than having social care staff arrange them for you.

Direct Payments are not new; they have been available in Durham since the Community Care (Direct Payments) Act 1996 came into force on 1st April 1997.

New Direct Payments Guidance was published by the Department of Health in late 2009 to reflect the changes introduced by

- Mental Capacity Act 2005
- The Health and Social Care Act 2008
- Community Care Services for Carer's and Children's Services (Direct Payments) (England) regulations

The effect of these changes was to extend the use of Direct Payments to people previously excluded because of their mental incapacity to consent or their being subject to various provisions of mental health legislation.

Councils may make direct payments to the following people:

Older people and disabled people over the age of 16

- People with physical and sensory disabilities
- People with learning disabilities
- People with mental health issues
- Where a disabled person does not have the mental capacity to consent to a Direct Payment, an appointed suitable person can manage payments on their behalf.

A person with parental responsibility for a disabled child

- Parents and people with legal parental responsibility and who are not necessarily the child's parents

Carers over the age of 16

- Carers who have been assessed as needing services to support them in their caring roles and to maintain their own health and wellbeing

More information about changes to Direct Payments is available at www.durham.gov.uk/directpayments



*I enjoy swimming, watching football and meeting friends.
Direct Payments give me choice and independence.*

Do you or someone you know receive social care?
Find out about Direct Payments

www.durham.gov.uk/directpayments
Telephone: 0845 8 50 50 10 Textphone: 01429 884124 Text messaging: 07786 027280 Email: scd@durham.gov.uk

Your Life Your Choice
Care and support designed with you

Durham County Council

The vision of essence of care

Essence of Care is a government strategy to improve the quality of fundamental aspects of health care for all patients including themes such as privacy and dignity, communication and nutrition.. Essence of Care is now made up of 12 benchmarks with the very recent addition of the new benchmark for the management of pain.

NHS County Durham and Darlington has committed to the implementation of Essence of Care throughout its services as a tool to not only provide a quality measurement for services but to look at developing a holistic and inclusive way of evaluating core aspects of healthcare in partnership with the service user/patient. The first theme to be considered is Privacy and Dignity which was identified by staff as an area that they would like to look at in line with national campaigns and agendas.

We hope that by implementing Essence of Care in a robust manner we will gather valuable information from all of our stakeholders on how they feel that we are meeting and addressing key indicators for quality care in relation to privacy and dignity. As we are designing our tools we are attempting to build in and map across core aspects of other initiatives such as: “The dignity challenge”, “Standards for better health”, “NSF for older people”, “Prison decency agenda” and help the aged “On our own terms”.

By undertaking our benchmarking process we should be able to provide a comprehensive evidence package that outlines our current quality position.

We aim to undertake the benchmarking process (see fig 1) by gathering information in 3 ways:

- 1) Self Assessment to be undertaken by services
- 2) Engagement with service users
- 3) Independent observation of services

Once the information has been gathered we hope to further enhance our services and the patient experience by facilitating the sharing of information across disciplines, services and localities.

We are truly motivated to make a difference by utilising this patient centred approach that allows us not only to engage with our patients but also to engage with colleagues on a continuous basis.

We are a diverse organisation with care being delivered in many different settings across the community ranging from community hospitals, prisons, patients own homes to care homes. We hope to ensure that our processes fully embody what it means to deliver care in these settings and enable all types of services and care providers to get involved in the process.

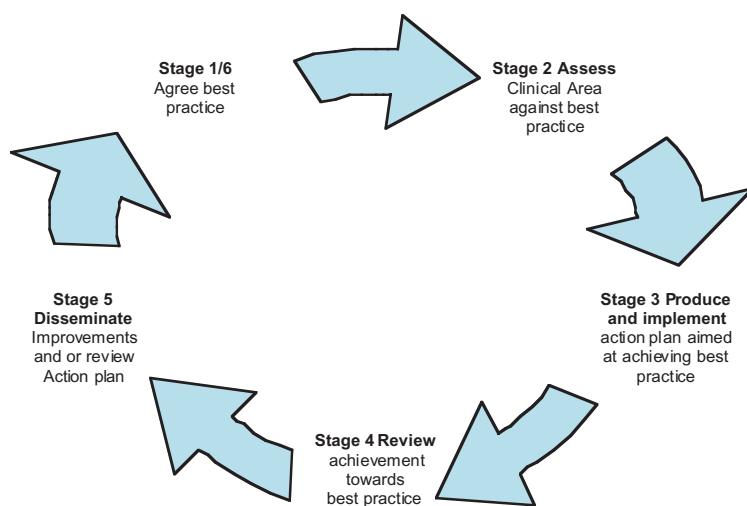


Fig 1
Essence of Care Benchmarking Cycle.

We will be developing educational packages for staff around the benchmarking process and the key themes, creating efficient working groups with lay representation and to build up enthusiasm and momentum for the process within the staff groups.

Please ask us if you would like this document summarised in another language or format.

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