Recovery Planning Workshop
Participant Feedback

MENTI – 'wordle' feedback

What 3 words would you use to describe how you have felt about the ASC response to the COVID 19 Pandemic?

We would like to know how you think this event has gone. What 3 words would you use to describe what it has been like to participate in the workshop?
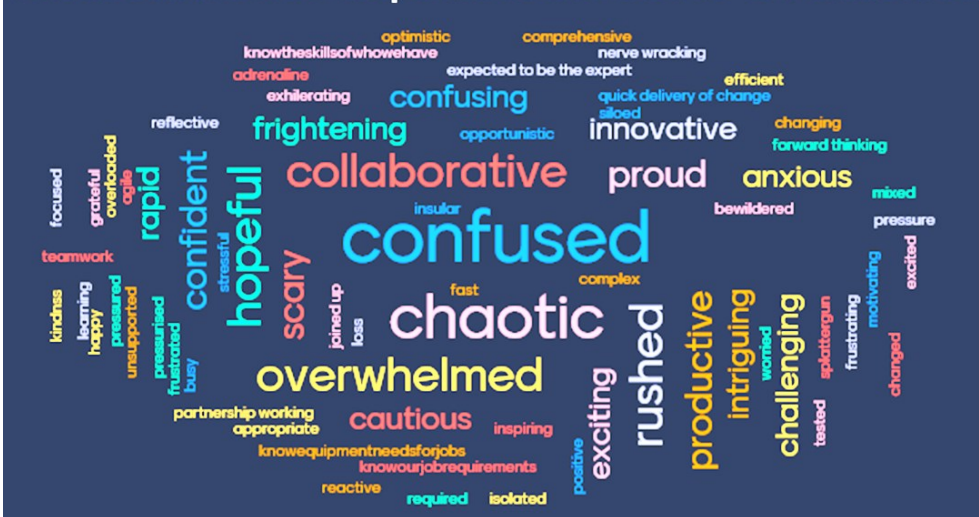
Based on discussion today what 3 words would you use to describe how you feel about the recovery planning we will need to do?

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Key Themes - Integrated virtual hospital discharge arrangement

- Delivering D2A through the Integrated Hub model has worked differently in each locality

- Community health and social care relationships have been enhanced

- Opportunities for developing OT role in the HUB models

- Opportunity to review portals and ensure they are fit for any future modelling

- Opportunity to review the Interoperability for any future modelling

Key Themes - Enhancing the Reablement Model

- Visiting in the home environment improves assessment of need and risk

- Joint working with OT's supporting Peri's to undertake the first START visit has worked well during the emergency planning

- Upskill all our staff to be able to cope with moving and handling and reablement ethos and skills to promote independence

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Key Themes - Day Services

- Opportunity to look at how technology may support day services in terms of new tools being available for community support: video catch-ups etc.

- Opportunity to explore if OTs assist within day services and PIW's providing some support as part of MIS?

Key Themes - Brokerage service for sourcing homecare packages

- Review brokerage service against how the portals operate

- Need to take a whole system view of the end-to-end process and make sure process fit for the future

- Want to prevent frontline staff referring to a range of different options – clearer process opportunity

- If Portal not able to secure provider is there a need for small Brokerage service

- 2 carer packages: we need to ensure that OT single handling review these cases

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Key Themes – COVID19 Emergency Workflow

- Staff working across hospital settings have found it easier to use and are keen to keep it.

- Opportunity to explore developing this as a hospital discharge workflow but need to acknowledge what the new workflow doesn't provide e.g. financial assessments, recent rate changes.

- The workflow has had an impact on current reporting and manual information recording systems that sit outside Mosaic are being built.

- Opportunity to explore maximising DIT to commission START

Key Themes – 7 Day Services

- Recognition from staff that 7-day working has been more productive for some teams than others

- To retain 7 day rotas need to review both business need and then also staff flexibility as this has been easier due to lockdown and crisis - staffing attitudes to weekend shifts on a voluntary basis will not remain post lockdown.

- Majority view at workshop was that 7-day working (as developed during the pandemic period) was not really needed.

- Recognition that any future development of 7-day working would need to consider the impact on support services outside of the Adult Social Care & Public Health portfolio.

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Key Themes – Bishops Court and Short Breaks

- Council was able to respond quickly and effectively despite initial challenges re lack of bed equipment and ICT connectivity.

- Council could consider having a stock of basic equipment in storage (beds etc) should a bedded facility need to be set up at speed again in the future.

- Going forward, need to consider whether there is a gap in the ongoing short term bed provision in the south.

Key Themes - Care Support and Enablement

- Support to providers during emergency support is thought to have worked well.

- Opportunity to put learning from the response into practice with the new tender for Care, Support and Enablement.

- Opportunity to review outreach packages to put in place more time limited, rather than open-ended, support to people in the community.

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Key Themes - Humanitarian Assistance Group

- Build on learning from Iain Macmillan's report for LRF about duplication of activity across partner organisations and approach to data sharing/data capture.

- Harness potential of Community Support Hub volunteers to provide ongoing below social care threshold support /link to existing community asset development.

- Explore potential of internally developed tool to replace need for Nott Help Yourself.

Key Themes - Deployment (including recruitment campaign and fast-track recruitment)

- Fast track recruitment and deployment worked well – especially the online training which could be completed remotely before people started in their new roles.

- Going forward, cohorts of existing staff could be inducted and trained, ready to be used as a 'bank' / to be on standby for any future deployment required to a specific area. This could be done by matching skills and experience typically available in one type of service to the skills and experience likely to be required by another type of service.

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Key Themes – CRITICAL Team OPEL Reporting

- Team Managers felt that the OPEL summary page produced gave good overview and found it useful to continue

- Opportunity for further development as more specialist teams found framework difficult for their area - e.g. MASH/ICLES

- Opportunity to enhance further with link to provider/capacity and flow dashboards development

- Training Opportunity as some Hospital teams, found the changes implemented for hospitals time consuming

Key Themes – Provider Dashboard

- Learning from creating this dashboard can be used to help creation of any other dashboards which may be required in future. Both ICT & PIP Teams think it should be possible to create future dashboards even quicker than this one was created.

- Going forward, need to consider how this dashboard could be linked to other local and national data capture systems re providers.

- In the meantime, QMM Team have identified additional data that it would be good to include on the Provider Dashboard going forward – such as DOLs info.

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Public Health Feedback

- Recognition that good partnership working through the Local Resilience Forum structure has delivered good outcomes and solutions where system blockages previously existed

- Staff highlighted that the intensity of workload during the emergency response was unsustainable and prioritisation was required to avoid burnout

- Recovery presents an opportunity to capture and enhance good practice that has been borne out of the emergency response. This is especially the case for commissioned services that have maximised digital opportunities in service delivery