

# Care provision, integration and continuity

#### Indicative score:

3 - Evidence shows a good standard

## What people expect:

"I have care and support that is co-ordinated, and everyone works well together and with me."

## The local authority commitment:

We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.

## Key findings for this quality statement

The frontline social work teams are set up based on 3 identified primary support needs: learning disability, mental health and adult frailty and long-term conditions. There are plans to create a social work team specifically for people with a physical disability. Most people gave us positive feedback about their experiences of contact with the local authority teams and the support arranged for them. This was consistent with the feedback the local authority had gathered from people using its service.

The staff teams were committed to partnership working, both with colleagues internally and with partner organisations. This approach was clear within the integrated teams as well as those teams that were not formally integrated.

Where complaints had been received about the provision of support, action had been taken to address these. For example, a review of complaints in 2022/2023 identified some concerns about communication and the length of time between initial contact and further contact. The local authority reviewed this issue with the teams involved and made changes so that the contact service was supported to be able to answer more generic queries directly. This meant that the social work teams were able to focus on other work. Staff involved told us that this had been a positive change.

However, we received some less positive feedback about the pathway for autistic people who did not also have a learning disability. There was no team specifically to support autistic people and therefore they could be supported by any of the teams, depending on the person's specific needs. The local authority is a key partner in the Integrated Care Partnership development of the Autism Partnership Board, which oversees the Lincolnshire All Age Autism Strategy.

There were effective systems in place to ensure that the local authority gathered feedback from people who used services, staff, and partner organisations so that is was able to identify where there were gaps in the provision of services. There was a real focus on partnership working to address issues. The relationship with the registered providers of homecare, residential and nursing homes was very positive and there was joint working with them with regards to shaping the market to ensure that appropriate services are developed to meet people's needs.

There were times currently when local people with complex needs may have to access more specialist services in a neighbouring county due to the lack of local available services. Joint working was taking place with health partners regarding developing services for people with a learning disability and for those with mental health needs, to prevent admission to hospital and to be able to discharge people when they were ready for discharge from long-stay hospital admissions.

Some of the geographical challenges relate to the rurality of the area and the difficulties this can bring regarding workforce, transport and lack of local services. This had led to long delays in obtaining homecare in some areas and homecare providers handing back packages of care as they were not able to fulfil them. The revised commissioning for homecare had addressed many of those previous issues. In addition, it reduced the number of packages of care that were handed back and missed visits.

The new commissioning process has identified a small number of providers that cover specific geographical areas. They are able to subcontract with another provider that does provide a limited choice if the person does not want to use the preferred provider identified for the area in which they live. There is also the opportunity for the local authority to spot purchase a different provider or for the person to have direct payments, which enables them to have more control over who provides their homecare.

The local authority is currently working with people who use services and staff to agree actions following a recent survey of people using day services. One of these issues was the inflexibility of times when people could attend as they relied on transport, which was not always available at the times that they wished to use it.

We received mixed views about the transitions service for young people transitioning to adult services. Young people were allocated to an adult's team in the year before they become 18 and the involvement of adult social work teams with the children's team before this was variable. Currently, the only dedicated transitions social workers are within the learning disability team.

There were plans to appoint a transitions worker within the adult frailty and long-term conditions team who will work specifically with young people with a physical disability before the planned development of a social work team specifically for people with a physical disability. This means that there were other young people with differing needs who will be allocated to a generic social worker rather than a social worker with additional skills and knowledge with regards to transition.

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