

7. Re-designing Services

7.1 Community Services

The re-modelling of community services is one of the main priorities of the Health, Social Care & Well-Being Strategy

In the first instance the focus will be on the development of services for people with chronic conditions. A Chronic Conditions Management Local Action Plan is under development, and the Action Plan will be jointly implemented by Health, Social Care and Well-Being partners.

The aim of the Local Action Plan will be the development of services integrated around the needs of the individual. The Plan will also reflect the impact these changes have on our workforce, and the workforce development section of the plan will identify ways in which staff can build upon their skills and knowledge to support the delivery of changing models of care.

The Chronic Conditions Local Action Plan will ensure services which:

- Anticipate needs of individuals and carers
- Involve individuals and carers in decisions about care
- Be responsive to changing needs and circumstances
- Be flexible enough to support the needs of individuals to their own requirements
- Prevent unnecessary admissions and readmissions to hospital
- Support planned discharges

Ref: ***Designed to Improve Health and the Management of Chronic Conditions in Wales. Service Improvement Plan*** WAG January 2008

The remodelling of community health and care services has also been identified as one of two priority projects of Gwynedd Local Service Board (LSB) and the implementation of the Local Action Plan will be key to meeting the requirements of the Local Delivery Agreement between the Welsh Assembly Government and the LSB.

The Chronic Conditions Management Local Action Plan will focus on the pathways people follow through primary and secondary care, and long-term in their community, ensuring increasing integration with social care. It is suggested that community services be developed and managed across the existing district profiles of Arfon, Dwyfor and Meirionnydd with a clinical lead focusing on the development of health services in each of these areas, whilst ensuring

co-ordination and greater integration with social care. Co-location may assist and facilitate better integration of health and social care services.

The development of shared facilities across localities will also enable services currently focused in acute healthcare settings to be delivered closer to home for many of Gwynedd's residents.

What we aim to do

To develop and strengthen Community Services, which, in the first place, will prioritise the re-modelling of services for patients with chronic conditions through the implementation of a Chronic Conditions Management Local Action Plan.

7.2 Delivering high quality social services in Gwynedd

The Wales Audit Office and the Care and Social Services Inspectorate in Wales carried out a Joint Review of social services in Gwynedd during the summer of 2007. The final report is not expected until the summer of 2008 but a detailed improvement plan is currently being prepared in response to the draft recommendations.

A joint review aims to answer 2 key questions:

- How good are the services?
- How well placed is the Council to sustain and improve services?

The draft improvement plan has identified five overarching key themes:

- Vision, Leadership and Culture
- Strategy, Commissioning & Service Development
- Practice
- Resources including staffing
- Performance Management

What we aim to do

In three years time, Gwynedd Council and the Gwynedd Social Services Department aim to deliver excellent services and to be strongly placed to sustain improvement.

7.3 Residential Services for Older People

Established in 2007, the Building For The Future – Residential Services for Older People in Gwynedd Project aims to develop residential choices for older people.

- Phase 1 work initially focuses on four areas namely Bala, Bangor, Ffestiniog and Porthmadog and is based on a local housing, health and social care needs assessment. Extra Care Housing Units will be developed in the 4 areas together with extensions to two existing residential care homes and day care facilities as a response to the needs assessment. Two of the Council's existing residential care homes in Dolgellau and Caernarfon will become registered to offer residential care for people with dementia.
- The Extra Care Housing will facilitate the delivery of integrated health and social care across the four localities. Current discussions with partners include offering a base for other services such as intermediate care, respite care, palliative care and care for people with dementia. It will offer a 'hub and spoke' model and in conjunction with making the best use of telecare and telehealth will offer an integrated health and social care service to meet older people's needs both within the new developments and in the surrounding communities.
- Phase 2 will commence shortly and will identify the remaining areas of the county's future residential needs of older people, with the aim of meeting the needs and aspirations of the older people and their carers.
- Expected outcomes include:
 - Reduction / delays in admissions into residential and / or nursing care
 - Increase in the number of people remaining and being supported in their own homes
 - Enhancing independence and choice of older people by enabling them to develop the skills needed to live independently
 - Making the most efficient use of available resources
 - Increasing economies of scale and supporting a wide range of services and activities together under one roof.

What we aim to do

To develop residential choices for older people which promotes independence and enable older people to live full and independent lives where this is possible, and according to their wishes.

7.4 Learning Disabilities

Learning disability does not include all those with a learning difficulty, which is more broadly defined in education legislation. The presence of a low intelligence quotient, for example an IQ below 70, is not of itself, a sufficient reason for deciding whether an individual should be provided with additional health or social care support. An assessment of social functioning and communication skills should also be taken into account when determining need. Many people with learning disabilities also have physical and/or sensory impairments.

Why it is a priority

The population with learning disability is growing, both locally and nationally. There are two main reasons for this:

- ❖ Increasing numbers of children with severe and complex needs surviving beyond the neonatal period
- ❖ Decreasing mortality rate in the older people range.

The rate of increase in the population with learning disabilities will present a challenge to services. A longitudinal study by Emerson and Hatton of one authority over the period 1982-2001 showed that the number of children, aged 5-14, with severe and complex needs had more than doubled during the period. Adult services in Gwynedd are beginning to experience an increasing number of young people with complex needs.

Between 1998 and 2006 there was an increase of 21.26% in the number of adults on the learning disability register in Wales. The number of learning disability clients is estimated to rise by 2% each year until 2020.

What we aim to do

In Gwynedd we will seek to ensure that all services are person centred enabling people to realise their full potential as citizens within their local communities.

7.5 Dementia

What is dementia?

Mental health problems are common in older people and can severely affect the independence and quality of life of individuals and their families. The two major

mental health conditions affecting older people are dementias and functional disorders such as depression and anxiety.

Dementia is a serious disabling condition mainly affecting older people causing them to lose their independence and require care by others. It is a clinical condition characterised by the widespread and progressive loss of mental function including memory, language and other skills. The most common cause is Alzheimer's Disease which accounts for approximately 60% of all people with dementia. Dementia affects an estimated:

1 in 1,000 people aged between 40 and 65

1 in 50 people aged between 65 and 70

1 in 20 people aged between 70 and 80,

1 in 5 people aged over 80.

Why it is a priority

The number of people with dementia in Gwynedd is expected to increase considerably as the proportion of older people in the population rises. On the basis of these prevalence rates and 2001 census data, the estimated number of people with a dementia in Gwynedd is 1,843. Population projections suggest that in ten years time (2016), this figure will increase by 18% to 2,166 i.e. an additional 323 people, predominately aged over 80 years.

Dementia care depends heavily on unpaid informal care by family and friends **but** there is an increasing demand in Gwynedd for residential and nursing care for people with dementia.

What we aim to do

To develop an innovative high quality service for those people suffering from dementia and for their families and carers.

7.6 Mental Health

A recent NHS document '**Time and Trouble**' estimates that up to one third (1/3) of all GP consultations and 1 in 10 of the population at any one time will be experiencing a mental health problem. This equates to approximately 17,000 people in Gwynedd. The World Health Organisation has estimated that one person in four will be affected by a mental disorder at some stage of life.

As well as the suffering caused by a mental health problem, mental ill health can have a negative impact on employability, housing and household income, potentially leading to severe economic deprivation and social exclusion. People

with or recovering from mental illness, find it extremely difficult to find employment. There is also a recognition that people experiencing mental illness have the same rights and needs as the rest of society.

The agenda for mental health has moved from an institutional to a community focused model of care and mental health services in Gwynedd are constructed around Community Health Teams. These teams are multi-disciplinary and multi-agency in nature and endeavour to provide a comprehensive, individual and flexible service for people who suffer from mental health problems. The Teams focus on providing services to those who have severe mental illness and they provide a broad range of activities, including both one-to-one and group work. They also manage the primary care counsellors.

Why it is a priority

A measure of population perception of mental health is collected in the Welsh Health Survey in which respondents are asked to rate their mental health and the impact it has on their daily lives. A higher score indicates better health and Gwynedd respondents had the highest score in Wales. The Welsh health Survey also asks respondents whether they were currently being treated for certain mental illness. Gwynedd here had the lowest number of people reporting treatment.

But one priority recognised within the Needs Assessment process is the lack of data collected or available to reflect the changes in care services which have been made or which can be used to support any future changes of benefits. Improving the collective knowledge and understanding of the picture in Gwynedd is of crucial importance and it is proposed that the HSCWB Partnership prioritise this for development.

What we aim to do

Establish detailed baseline information on the demand for services and the capacity of existing services and to reconfigure specialist health and social services to better meet demands

7.7 Carers

Who is a carer?

A Carer should not be confused with a paid care worker or a volunteer attached to a voluntary organisation. A Carer is a person who provides regular and substantial amounts of support care to a relative or friend because of age, physical or learning disability or illness, including mental health.

The recently launched **Gwynedd Carers Strategy** defines 4 main types of carer:

A **Carer** is defined as someone who looks after a spouse, partner, parent, child, sibling, other relative or friend who is ill or disabled and would not be able to live in the community without their carer's **substantial** help on a **regular** basis.

A **Parent Carer** is a parent or guardian who has additional duties and responsibilities towards his/her child because his/her child has an illness or disability. Parent Carers will often see themselves as parents rather than Carers, but they may require additional services in order to meet or continue to meet the needs of their child.

A **Young Carer** is a child or young person under the age of eighteen who looks after a family member who has an illness or disability. The role and responsibilities undertaken by the child is greater than usually expected, given the child's age, and is therefore likely to impair the child's health, or their personal, social, educational and development opportunities. Young Carers are likely to be children in need.

A **Former Carer** is a person whose caring responsibilities have come to an end.

Why it is a priority

In 2001, 9.6% of the Gwynedd population – just under 1 in 10 reported that they were providing unpaid care. This means that there were as many as 11,216 Carers providing care to some level in Gwynedd. However more recent estimates increase this number to over 14,000 individuals who provide unpaid care (Carers UK 2006). Carers need support in their caring role. Maintaining their health and well-being and giving them access to support such as respite care is critical to the continuity and sustainability of care.

The **Gwynedd Carers Strategy** aims to increase the support options available to Carers and establish some elements of choice into their decision to care. The Strategy is not merely a reflection of the commitment and aspirations of Gwynedd Council. It includes statutory and voluntary agencies that provide services to ill and/or disabled children and adults and their carers. The Partnership is fortunate to work closely with many voluntary agencies who deliver carer services.

What we aim to do

Increase the support options available to Carers and establish elements of choice into their decision to care

Re-designing service provision within the resources available, to better meet the needs of the population

Key areas for action	What we aim to do
7.1 Community Services	To develop and strengthen Community Services, which, in the first place, will prioritise the re-modelling of services for patients with chronic conditions through the implementation of a Chronic Conditions Management Local Action Plan.
7.2 Delivering high quality social services in Gwynedd	In three years time, Gwynedd Social Services aims to deliver excellent services and to be strongly placed to sustain improvement.
7.3 Residential Services for Older People	To develop residential choices for older people which promotes independence and enable older people to live full and independent lives where this is possible, and according to their wishes.
7.4 Learning Disabilities	In Gwynedd we will seek to ensure that all services are person centred enabling people to realise their full potential as citizens within their local communities.
7.5 Dementia	To develop an innovative high quality service for those people suffering from dementia and for their families and carers.
7.6 Mental Health	Establish detailed baseline information on the demand for services and the capacity of existing services and to reconfigure specialist health and social services to better meet demands
7.7 Carers	Increase the support options available to Carers and establish elements of choice into their decision to care