

**KENT AND MEDWAY
JOINT HEALTH AND WELLBEING BOARD**

14 DECEMBER 2018

DESIGN AND LEARNING CENTRE UPDATE

Report from: Penny Southern, Corporate Director Adult Social Care and Health

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Summary

This report contains an update on the work of the Design and Learning Centre and how it is leading and supporting clinical and social innovation and providing support to the Sustainability and Transformation Partnership and the Joint Health and Wellbeing Board. Progress against the range of projects and programmes is detailed in the report including recent high-profile exposure on a national level.

1. Budget and Policy Framework

1.1 This update is within the council's policy and budget framework including the Council Plan.

2. Background

2.1 This report forms part of a series of progress updates to the Board, as the Design and Learning Centre (DLC) establishes itself as a support mechanism and enabler to the Sustainability and Transformation Partnership (STP).

2.2 The purpose of the DLC is to provide a dynamic organisation with a local, national and global reputation for designing better, safer, cheaper, different care. The DLC aims to take risks in order to succeed, with a methodology that is embedded within the health and care system.

2.3 The objective is to have a track record of co-implementation for a significant number of innovations at individual, community and system level. The aim of the DLC is to be a sustainable and highly effective entrepreneurial organisation, with a skilled team delivering an established methodology with a clear theoretical basis and share learning to act as a catalyst to develop the workforce of the future.

3. Key priorities :

The DLC has 4 key priority areas of work:

1) Innovation: to provide an innovation facility to health and care and provide information on developments that may be of interest and support the priorities of the STP including social care.

2) Learning and Development:

- Leading the work with the wider care sector and Workforce Boards in health and social care to support recruitment, retention and career opportunities for the care sector.
- Working with the Kent and Medway Medical School (KMMS) to develop their wider and person centred curriculum.

3) **External and International funding:** the DLC is supporting innovation initiatives by applying for external funding in order to pilot and evaluate the new initiatives.

4) Engagement, Research, Analytics and Co-implementation:

- the DLC is running Innovation forums with stakeholder for some of the key STP priorities such as: Local Care, End of Life care, Carers App, Being Digital Strategy and many others.
- Organising the wider Innovation, Research and Analytical network for the Clinical and Professional Board and other stakeholders.

4. Progress Update

4.1 **Kent and Medway Medical School** – the DLC is working with the new Kent and Medway Medical School to support the development of their wider access and person centred curriculum. As the DLC is the STP hub for training, research and development which includes Medway and Swale Centre for Organisational Excellence, University of Kent, and Canterbury Christchurch University it is ideally placed to link with and support the Medical School as it establishes itself

4.2 **Collaboration** - In order to progress and streamline the support and enabling offer to the STP the DLC has developed a collaborative approach with the Academic Health Science Network (AHSN). Recognising that having a range of support organisations offering similar but slightly different facilities is confusing, inefficient and potentially divisive. This partnership work known as 'the Collaborative' has an agreed Memorandum of Understanding, Terms of Reference and has now received its first challenge from the STP Clinical and Professional Board to innovate and use technology to transform Local Care in:

- Diabetes
- Asthma
- Chronic Obstructive Pulmonary Disease

4.3 The Collaborative operates with a core group of DLC and AHSN Directors and subject experts and a wider network of allied organisations and stakeholders including within Medway health and social care.

4.4 **Public Health initiatives:** The DLC is working with Public Health on the following initiatives:

- Antibiotic Reduction Challenge with aim to safely reduce antibiotic prescribing by up to 50% (CRP testing sites in Swale, West Kent and SKC CCGs).
- Increasing bystander response through the Push Project - Giving 10 minutes of life (Cardiac compression project in schools in Medway).

Other areas of progress of the DLC include:

- 4.5 **ESTHER Care Philosophy** – Roll out of ESTHER training continues at introductory, Ambassador and Coach levels, with an ESTHER training the trainer programme being planned for 2019, to significantly increase the numbers of staff trained in the care philosophy.
- 4.6 In conjunction with the Dartford, Gravesham and Swale (DGS) Multi-Disciplinary Team (MDT) Working Group, the DLC is supporting DGS Local MDT co-implementation of the ESTHER care philosophy. The next ESTHER Inspiration day on 21 March 2019 will take place in Dartford, in conjunction with the progress in DGS, as well as update on developments across Kent.
- 4.7 The work of the DLC on the ESTHER care philosophy was presented at the National Children and Adult Services Conference on 15 November 2018 under the title of 'What matters to me', alongside the Hilton 'Home to Decide' Model, further details are available via the link <http://ncasc.info/presentations2018/>
- 4.8 The ESTHER care philosophy will be presented at The Kings Fund Outstanding Care conference on 4 December 2018 featuring how this genuinely innovative project from Sweden was the catalyst for continuous quality improvement in Kent, by focusing on what matters to citizens and by redirecting communal resources. The presentation is one of the workshops addressing a conference theme of 'deal with demand and change the system'. Further details are available via the link <https://www.kingsfund.org.uk/events/outstanding-social-care>
- 4.9 On 14 November 2018 the ESTHER care philosophy was featured in The Guardian Social Care supplement. In the article the ESTHER care philosophy was promoted as 'a singular care model for multiple needs' and featured the work of the DLC team and coaches within the wider ESTHER network. The article is attached as Appendix 1.
- 4.10 The Care Quality Commission has acknowledged the ESTHER care philosophy and the work taking place in Kent as making a significant difference where staff are trained as Ambassadors and Coaches. Work is also underway for ESTHER training programmes to be endorsed by Skills for Care.
- 4.11 **Buurtzorg** – The Neighbourhood Care model originally designed in the Netherlands is being piloted in Kent and Medway funded by the Interreg 2 seas programme Transforming Care in the Community. The first pilots are now live in Edenbridge and Medway with further pilots planned in 2019, providing high-quality care delivered by integrated, self-managed teams featuring:
 - teams made up of nurses, health and social care workers, homecare organisations, mental health practitioners and others
 - targets for increased staff productivity, recruitment, retention and staff and patient satisfaction, decreased costs, emergency admissions and staff sickness
 - delayed need for residential or end-of-life care.

- 4.12 **Digital Strategy** – The Adult Social Care and Health Being Digital Strategy 2018-2021 was approved by the Wider Leadership Team on 5 September 2018 and will be presented to Kent County Council’s Adult Social Care Cabinet Committee on 22 January 2019.. The Strategy and Implementation Plan acknowledge that having effective digital capabilities which complement traditional care and support services, is fundamental to delivering the ambitions set out in our Corporate and Adult Social Care and Health strategic plans. The DLC has project managed the strategy and provides Innovation sessions for stakeholders in order to co-design the outcomes.
- 4.13 **Medication Project** – Multi-disciplinary team work is continuing a more joined up approach to medicines management in the community. The project has worked on an overview of all medication issues effecting social care providers and is working to provide effective solutions. A pilot is being planned to standardise Medication Administration Record (MAR) charts, to reduce errors and increase staff confidence when supporting patients with medication. The pilot will utilise the pharmacy network to provide a standard ‘Kent MAR Chart’ to people who have been discharged from hospital and are requiring support from a service after their discharge. The pilot is due to go live during the first quarter of 2019.
- 4.14 **Workforce** – The DLC is providing the STP Workforce Action Board and KCC’s Organisational Development Group with a Learning and Development Hub to improve and support the wider social care workforce. An action plan is in place and progressing, containing a range of measures to improve recruitment , retention and skills development . The DLC hosted two highly successful conferences for care providers during 2018, providing cost effective opportunities for approximately 250 delegates per event to learn, share good practice and network. The conferences are supported by the Care Quality Commission , Kent Integrated Care Alliance and Skills for Care and featured a market place for maximum provision of information and engagement.
- 4.15 A series of workshops, innovation events, engagement and surveys have been provided throughout the year to focus on specific issues such as:
- apprenticeship levy and use of KCC levy to support non-levy payers within the care sector
 - places for social care on the Nursing Associate apprenticeship programme, to upskill within the care sector
 - decrease in college-based provision for health and social care qualification and learning programmes and the barriers creating this
 - lack of work experience placements and solutions to change this.

5. **Advice and analysis**

- 5.1 For the long-term future of the DLC it will be important to develop an enterprising business model, enabling the DLC to be sustainable and independent. The aim is for the DLC to build on its existing reputation and be recognised locally and nationally and to continue to build local, national and international partnerships with a large supporting network.

6. Risk management, financial and legal implications

- 6.1 The current funding for the DLC is from KCC, Kent and Medway STP and successful bids to support project activity e.g. European funding and from the STP Local Workforce Action Board, NHS England and Health Education England. Going forward the aim of the DLC is to be a sustainable and highly effective entrepreneurial organisation, the funding arrangements will develop as part of the financial modelling to support this.
- 6.2 The DLC has a risk register in place and is monitoring and mitigating the risks identified.
- 6.3 There are no legal implications arising from this report.

7. Recommendations

- 7.1 The Kent and Medway Joint Health and Wellbeing Board is asked to:
- i) Note the work of the Design and Learning Centre, how it is leading and supporting clinical and social innovation and providing support to the Sustainability and Transformation Partnership and Adult Social Care and Health.
 - ii) Note the Collaborative arrangements in place with the AHSN to streamline the support and enabling offer to the Sustainability and Transformation Partnership and the work commencing on the first challenge issued by the Clinical and Professional Board to the Collaborative.
 - iii) Note the work the DLC is doing with Public Health on antibiotic reduction and the PUSH project.
 - iv) Support the Design and Learning Centre in working with the Sustainability and Transformation Partnership to develop an offer to the new Kent and Medway Medical School.
 - v) Note the work of the DLC in establishing the Learning and Development Hub for the wider Care workforce aiming to improve recruitment, retention and career progression and supporting new delivery models for care providers
 - vi) Note the Digital developments the DLC is leading for Adult Social Care and Health and the STP and the Innovation methodology used.
 - vii) Note the ability by the DLC to access external and international funding.

Lead officer contact

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Appendices

Appendix 1 - Article in The Guardian Social Care supplement 14 November 2018

Background papers

None