

Making Safe Guarding Personal for People with a Learning Disability

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Introduction of Named Worker Role In Portsmouth Integrated LD Team

What is it? What does it do?

What does it look like in action?



Honesty



Everyone counts



Accountable



Respectful



Teamwork

Named Worker in the Portsmouth Integrated Learning Disability Team.

The ambition is that every service user is offered a named worker and that all service users who want a named worker can have one.

Named workers will complete the service users annual review and support plans.

Named workers will have regular contact with the service user.

Named workers will have an overview of all services being provided to people.

Named worker are able to respond quickly to changing needs.

Named workers are regularly asked to undertake Sec 42 enquires.



Named Workers have been defined as:

- A dedicated caseworker – Care Manager
 - OT
 - Learning Disability Nurse
- A main point of contact for people and their families.
- A professional voice of challenge across the system.



Honesty



Everyone counts



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Teamwork

Triumphs and Challenges

Triumphs

- Service users having contact with their Social Worker and CNLD and OT when things are going well, not just at times of crisis.
- Less need for contact with the duty team.
- Service users involved in decision making.
- Carers and staff teams feel the benefit as well.

Challenges

- Learning about each others job roles.
- Resources.
- Catching up.
- **The IT!!**



Examples of Good Practice To Share With Others Addressing Care Concerns and Implementing Recommendations / Actions From A Sec 42 Enquiry



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50 year old lady with a Learning Disability who has complex health needs, morbidity, obesity and at times elected mute. Lives in assisted living flat with a range of funded care to meet her Health and Social Care need.



Concerns over the level of care being provided for a service user with more than one care provider involved. Safe-Guarding alert owing to pressure sores and DN concern about personal care. Investigation completed needed a new approach to raise the concerns of non-compliance responsibilities of carers and families and priorities of care.



A meeting was arranged to address concerns with care providers.

- Ascertain what outcomes the lady wanted
 - AI
 - Communication
 - Photo's
 - Symbols
- The meeting was scheduled at a time best suited her and the care providers for maximum number of staff involved with the service user to attend.
- The meeting was well attended.
- The service user was sat in the middle of the group, to be included in the discussions at all times. Her involvement ensured the focus was on her.



**Everyone attending opinions mattered.
Everyone completed a feedback sheet.**

I designed a feedback sheet to understand personal perceptions of the level of care being given.

We decided to make it easy to complete so that everyone could do it including the service user.

The questions centred on the assessment of needs. (Care Act 2005)



How I am getting on /feedback on my care & support.



All good /no problems



some concerns



not going well/worried

Outcome Area	Eligible Need	What you think?
My relationships	Keeping in touch with people important to me	
	Seeing friends/socialising	
My Home	Keeping my flat clean	
	Laundry	
	Managing money	
	Being safe at home	
Looking after myself	Healthy eating and weight loss	
	Planning meals	
	shopping	
	Preparing meals	
	Attending health appointments	
	My medication	
	Continence	
	Maintaining personal hygiene	
My Community	Attending social activities	
	Being safe	
What I do	Activities/leisure	



Honesty



Everyone counts



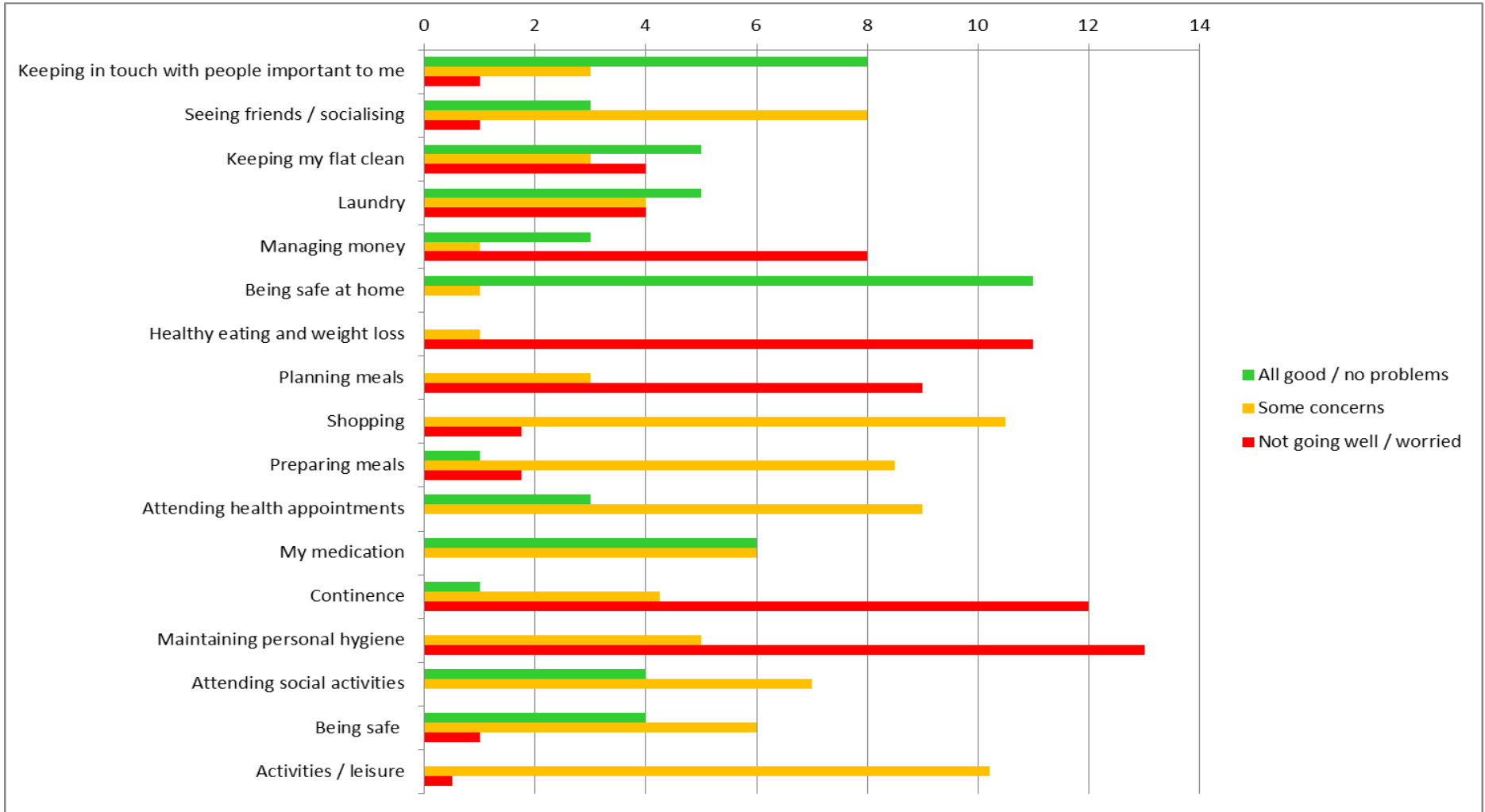
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Principles of Safeguarding

Planning the on-going care and treatment to ensure met complex health and social care needs.

Empowerment – Person Centred outcome focused

Prevention – Need to take action to prevent serious harm

Proportionality – Ensure carers balance between individuals needs and rights and duty of care

Protection – High level of paid support statutory responsibility to ensure safe effective care.

Partnership – Working together, carers, family, volunteers

Accountability – Responsibilities / Roles and expectations – measurable standards.



Empowered

It definitely got everyone involved with this person to agree that there are a lot of areas of concern around her care – Plan to bring about improvement. This was achieved in a non direct, informal way that could be used in other situations.



What Does It Do

- Shifts the balance from process and procedure to what matters most to service users.
- Holistic and person centred approach
- Minimises stress and anxiety at times of crisis.



Day- Week 1	Breakfast	Lunch	Dinner	Snacks
Monday 	2 slices of wholemeal toast 	Gammon and pineapple with peas and tomatoes (extra vegetables) Dessert: fruit or yogurt	Soup 	11am: 1 teacake 3pm- drink
Tuesday 	Baked beans on toast 	Ham salad Dessert: fruit or yogurt	Tuna sandwich 	11am: 1 scone 3pm- drink
Wednesday 	Weetabix 	Chicken curry and rice Dessert: fruit or yogurt	Egg sandwich 	11am: fruit 3pm- drink
Thursday 	Porridge 	Egg salad Dessert: fruit or yogurt	Soup 	11am: 1 slice of malt loaf 3pm- drink
Friday 	Poached/boiled egg on toast 	Turkey slices with stuffing and vegetables (extra vegetables) Dessert: fruit or yogurt	Fruit or yogurt 	11am: 1 teacake 3pm- drink
Saturday 	2 slices of wholemeal toast 	Fish pie with mashed Swede and broccoli Dessert: fruit or yogurt	Ham sandwich 	11am: fruit 3pm- drink
Sunday 	Shredded wheat 	Roast beef dinner with roast potatoes and vegetables Dessert: fruit or yogurt	Fruit or yogurt 	11am: 1 scone 3pm- drink