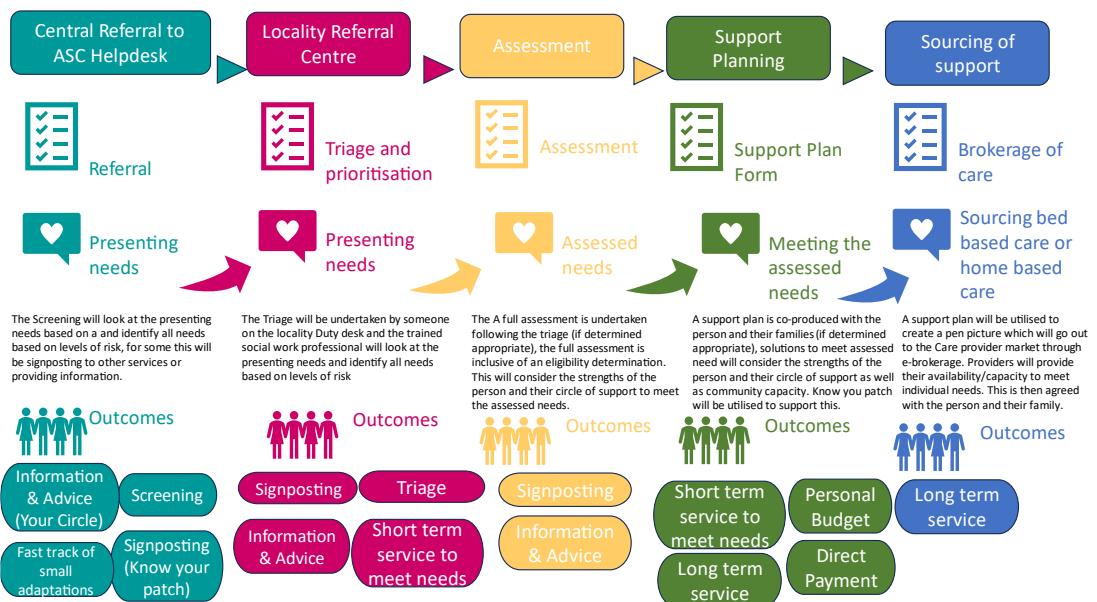


Appendix 7 Our Strengths based assessment “Make the Difference” model

We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them. A simplified version of our pathway for assessment is shown in Figure 1 utilising a strengths-based approach which we have called our Make the Difference Model¹ (Figure 2). Our Operational staff will work using a strengths-based approach² to help people remain as independent as possible e.g. provision of minor adaptations or community equipment or connecting people with social groups to avoid loneliness. Not all referrals would result in a full Care Act Assessment. If we can reduce, delay or minimise the level of need we will do so by helping individuals with a range of supportive options. We have begun mapping out our early intervention and prevention initiatives that are funded wholly or jointly by the local authority, so that we can take a more strategic view of our early intervention and prevention approach and align with our ICB, JSNA and Health and Well Being board priorities and the ICP Strategy.

Figure 1 - Adult Social Care Pathway for people and their carers

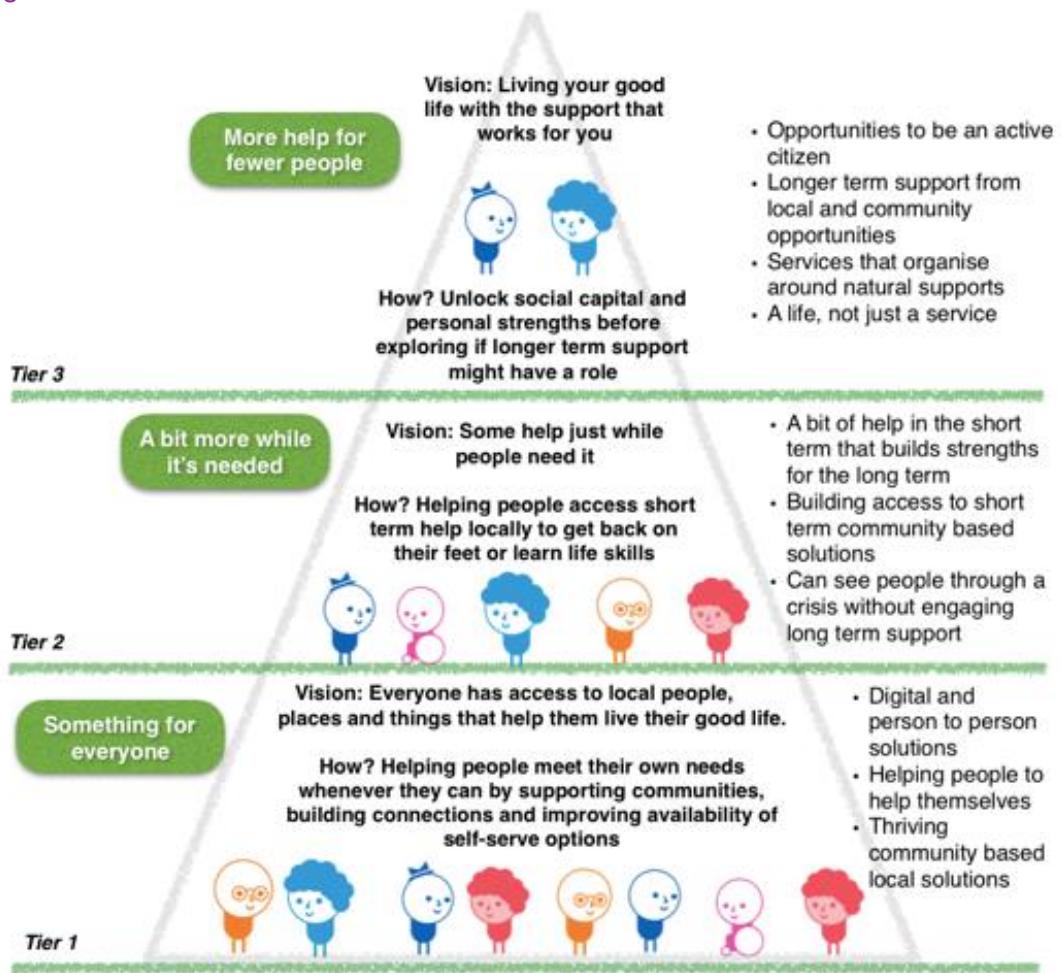


In 2019 we commenced a pilot of our “Make the Difference” assessment framework (Figure 2), based on the “Three Conversations” model across all of our locality and specialist teams, full roll out of this new model concluded in June 2021. This focuses on ‘what a good life looks like’ for people and ways to promote and enable this³, including through community connections and promoting citizenship and community participation.

We invited the Local Government Association in to undertake a peer challenge in September 2023. They said about our operational teams “... **many dedicated and skilled staff committed to delivering good outcomes to the people of Gloucestershire.... The peer team read, heard and saw examples of some really good services delivered by staff who are passionate, and values driven.**

Our “Make the Difference” model (Figure 2) includes our review process, which has improved since the recruitment of additional staffing since 2022. We have a dedicated recruitment team focused on adult social care which is having a positive impact on the recruitment of specialist social care staff, and a dedicated practice development team whose remit includes ASYE support, developing and delivering a range of programmes that attract, develop and retain a skilled workforce also championing workforce wellbeing, equality, diversity and inclusion in practice.

Figure 2 - Make the Difference Framework



We ensure compliance with this model through huddles and 1:1 supervision, our practice audit programme and our training and development offer, including the suite of ‘Make the Difference’ training and ongoing support from the Principal Social Worker (PSW) and practice development team. In our Mental Health services (commissioned and delivered by Gloucestershire Health & Care NHS Foundation Trust) we use an “Integrated Narrative Assessment” model. The two models are reflective of each other and both use a strengths-based approach. In terms of thematic (more deep dive type) audits, there has been a programme of audits which the PSW has undertaken in with our Operational teams; over the last 4 years these have included Mental Capacity Act Practice, Supervision Practice x 2, Best Interests Decision-making practice, and the latest one was an audit of Safeguarding Practice (November 2023).

CHC checklists are completed and sent to CHC and should be screened within 28 days (NHSE). In order to assess eligibility for CHC, a positive checklist should then result in a DST (Decision Support Tool) meeting. This is effectively an MDT that can include professionals, informal support and the individual themselves. The outcome of this will be the identification that the individual has a primary health need or they do not. Additional training has been provided for key staff within each Locality Team so that our staff understand the legal limits of local authority responsibilities. The process itself has been subject to change this year and there are ongoing contacts with CHC to further agree processes. To support our Brokerage colleagues ASC Operational staff prioritise using a risk stratification approach to assist them in sourcing care for individuals.

We have developed a suite of promotional videos about some of our ASC Teams which can be [viewed here⁴](#).

We are making improvements to how we collect and use feedback on people's experience and how they access services and facilities for help. We use a Make the Difference Questionnaire, are introducing an online feedback mechanism post assessment, and generate themes from our audit cycles to inform improvement. The numbers are still too small to demonstrate statistical trends to inform our quality assurance board.

In response to an Ombudsman decision to uphold a serious complaint against us regarding our work with an individual and their carer (pre-2020) we commissioned an Independent Critical Friend report which was conducted by South Gloucestershire's Principal Social Worker and concluded in October 2021. This report found good practice in relation to our strengths-based approach (Make the Difference Model), the support for operational staff in relation to case huddles, wellbeing huddles, themed practice huddles (e.g. mental capacity act, CHC, Carers etc), the know your patch networks were actively being utilised by locality ASC operational teams, the enablement service, opportunities for staff across localities to come together e.g. Champion system (MCA, dementia, carers, autism etc), our employee voice groups. However, the report provided us with some areas for improvement which we have almost implemented including descriptions on our care plans being plainer English and co-produced with the person/their carer, in the remaining recommendation we are working on amendments to our data system to improve how we provide information about the person's Personal Budget.

The ASC Helpdesk also manage simple requests for minor adaptations e.g. grab rails with a total value less than £250. Without a face-to-face assessment, help desk consider need, property ownership and specific placement of the adaptation/equipment. The Fast Track offer is provided based on information given by the referrer and provides an accessible and efficient offer for residents in Gloucestershire. All complex Fast Tracks are discussed with an Occupational Therapist and this advice is recorded on the referral. In addition, helpdesk also manage the "front door" for occupational therapy services¹ (roughly 800 contacts per

¹ Occupational Therapy services in Gloucestershire are a delegated function and delivered by Gloucestershire Health and Care NHS Foundation Trust.

months in 2023).

Short term services

Our Locality Operational Teams may offer some short-term help and support which can happen without a full Care Act assessment e.g. helping people get over a crisis, respite support. We can also offer this short-term help whilst we continue to complete the Care Needs Assessment. Some examples of our short-term offer include;

In House (IH) respite services offer unpaid carers and family the opportunity to obtain some short-term rest, essential to maintaining their own mental health and well-being. There are lots of respite care options in Gloucestershire, however our IH services provide service the following support:

- Three learning disability respite service bedded units (Cathedral View, The Vicarage and Longhouse)
- Multiple IH learning disability, physical disability and older people [day services](#)⁵.

'I loved the family sort of environment and atmosphere at GWC. Nice to be able to sit down at a table for meals together. Enjoyed the activities'. Feedback from someone who utilised Great Western Court for reablement.

Across IH day services, over 100 people benefit from this service provision. You can find out more about one of our most popular day services (The Beeches) →:

[Video 1: Video about one of our Day Services, The Beeches.](#)



Within our day services, the Woodlands supports adults with a learning disability who may present with behaviours that would normally challenging services. This service is a purpose-built day service for adults who may not integrate as well in your traditional social day service environments.

We also offer Great Western Court (GWC) as part of our IH offer, this is a residential bed based reablement unit, registered with the Care Quality Commission. The reablement service offers people intensive support in a bedded setting, for when they have no acute medical needs to remain in Gloucestershire Royal Hospital or Cheltenham General Hospital but do have specific person-centred physiotherapy and occupational therapy led goals to assist in recovery before they can go home. Staff work with individuals to promote independence and a safe return home, e.g., improvement in walking, ability to care for themselves or increase confidence. Equipment, aids, and assistance from GWC are provided with these aims in mind. There is no charge for this service, it is available for up to a maximum of six weeks, usually sooner, in consultation with the multidisciplinary team. GWC works well in partnership with other professionals including GP's and District Nurses.

Once we have agreed eligible needs with individuals, we will work with people to ascertain how those needs could be met, this could be via a range of informal and formal support.

GCC delegate a number of adult social care functions (through our Section 75 arrangement) to Gloucestershire Health and Care NHS Foundation Trust (GHC) to deliver on GCC's behalf. This is managed and assurance provided by the Integrated Care Board through joint commissioning arrangements. As well as providing Mental Health Social Work, GHC also have integrated community teams (Gloucestershire Health and Care NHS Foundation Trust, 2022) run a number of integrated services including Complex Care at Home, Telecare, reablement and Occupational Therapy.

Other assessment teams

We have a dedicated **Countywide Sensory Team** who support adults with sensory loss (focusing on the needs of visually impaired providing practical support such as equipment and cane training) to enable them to live as independently as possible. We have also identified a number of staff across all of our locality team who have undertaken the OCN Level 3 training to support adults with dual sensory loss, the intention was that in doing so we would raise awareness of dual sensory loss in the context of our responsibilities under the Care Act to provide Specialist Assessments - i.e. improving people's access to assessment and relevant support.

Independent Health and Social Care Advocacy is a service delivered by POhWER ([Advocacy Services for Adults in Gloucestershire leaflet](#)) that is designed to deliver a combination of statutory advocacy roles for people who live in Gloucestershire. POhWER offer an information and advice support service if you are unsure if an advocate is needed or what type of advocate you need. POhWER provides an integrated service so individuals can be supported by the same advocate avoiding the need to work with different advocates.

Plans to develop further peer to peer and information drop-in sessions in different communities based on diverse ethnic community needs through the use of volunteers and evaluating this to demonstrate impact will be reviewed.

We support people with disabilities help themselves and to live healthier lives is through our **Disabilities Enablement Team**⁶ (Gloucestershire County Council, 2023). This team works with individuals, families, and providers to maximise independence and reduce reliance on paid support.

Case Study: Enablement

Andrew became disabled after he suffered a stroke. He consequently had to resign from his job, stop driving, his relationship broke down and became homeless having previously lived in partner's home. When Enablement became involved, he was temporarily living in the Reablement flat. Andrew was also semi-illiterate; he previously relied on his former partner with all his correspondence. Enablement supported him with his housing application; with Enablement support he moved into a bungalow and now has his own tenancy. The team supported him to apply for grants to decorate and furnish his new home. They also helped him to open a bank account and set up his direct debits.

Our **hospital discharge assessment team**⁷ are part of the wider multidisciplinary system. Urgent and Emergency Care is currently one of six strands of our Transformation Programme and we are looking at how our processes support good assessment practice.

Following a review into the benefits of a Positive Behaviour Support (PBS) approach across a number of client groups we now have a dedicated [PBS team](#)⁸ since 2022, to support our care provider market to effectively manage behaviours that could be deemed as challenging. This team work closely with the Community Learning Disability Team to also provide training and support to Care Providers.

Case Study: PBS

Angela is a young woman who has acquired a brain injury following contraction of Meningitis in 2018. Her brain injury has caused global cognitive impairment resulting in a lack of impulse control. Angela is reactive to her emotions and is likely to escalate in her behavioural presentation if her needs are not met rapidly. This has led to placement breakdown and hospital admission in the past due to high levels of physical aggression. Angela was referred to the PBS Team following increase in these behaviours. The team helped Angela's support staff to understand Angela's amber behaviour signs and to maintain their firm boundaries; the instances of physical behaviour dramatically decreased: in the past month there have been none. She has been supported to improve her autonomy and quality of life. Angela's Lorazepam is in the process of being removed from her support and once this is removed, her staffing levels will be reduced back to 1:1. This demonstrates a positive outcome in Angela's wellbeing and behavioural presentation and improving her quality of life.

The **DoLS (Deprivation of liberty Safeguards) team** works to the ADASS guidance to prioritise cases according to the individual circumstances of the person. There is practical information about the process and the policy on the [GSAB Website](#)⁹. There are arrangements in place to monitor the situations of the people awaiting DoLS assessment, to ensure that people whose circumstances have changed are re-prioritised accordingly. Our approach to mental capacity assessment, advocacy requirements and carers assessment is embedded within our assessment framework and monitored through [case file audit](#).

Gloucestershire County Council commissions the [Approved Mental Health Professional](#)¹⁰ (AMHP) service from Gloucestershire Health and Care NHS Foundation Trust. This was introduced in 2019 as one of the early authorities to adopt an AMHP Hub model. This has developed into a 24-hour AMHP Hub of dedicated AMHP Specialist Practitioners working alongside a pool of community AMHP's. The AMHP's hub is the referral point for all Mental Health Act (MHA) assessment requests and other AMHP functions; including now the Mental Health (Breathing Space) Crisis Moratorium. This provides the pathway for all patients/service users who require admission to hospital under the MHA. The benefits have been an extremely responsive service. All referrals received in working hours are triaged immediately by an AMHP Specialist Practitioner. All referrals out of hours are responded to by a dedicated AMHP specialist practitioner covering 24 hours 7 days a week. There is no evidence of service delay leading to low, moderate, or serious harm to patients/service users. A commissioned App has also been implemented to improve the availability of S12 (MHA) medics and improve the timeliness of MHA assessments were delayed by medic availability.

Mental Health Social Workers have been integrated with the community health trust for over 20 years and this is now provided by Gloucestershire Health and Care NHS Foundation Trust (GHC). Mental Health Social Workers currently use the integrative narrative

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assessment (INA) which is a joint assessment with health colleagues in the mental health teams.

Mental Health Social Workers also take on the role of Care Co-ordination and actively link with other teams in GHC such as Complex emotional support needs team, Crisis Care Team etc and the Integrated high needs team in the ICB e.g. for those requiring [Dynamic Support¹¹](#). The [Community Learning Disabilities Team¹²](#) within GHC also provides training and support to the care market.

To promote understanding and joint working between Mental Health Social Work (MHSW) Services and the ASC Operational Teams now and into the future, the Practice Development team have extended their support of those on the ASYE programme to those undertaking their ASYE programme in MHSW Teams, also inviting their Practice Supervisors to join relevant support sessions.

We also support people to live happy and healthy lives in the community through our [Shared Lives offer¹³](#)

¹ Care Act Records Guidance April 2021 <https://www.goucestershire.gov.uk/media/jvaowdcu/care-act-records-guidance-final-april-21.docx>

² Writing and communicating to Make the Difference
<https://www.goucestershire.gov.uk/media/jwbdgxm/writing-to-make-the-difference.pdf>

³ Gloucestershire County Council, About Adult Social Care <https://www.goucestershire.gov.uk/health-and-social-care/adults-and-older-people/>

⁴ Gloucestershire County Council, Suite of promotional videos about Adult Social Care
<https://www.goucestershire.gov.uk/health-and-social-care/adult-social-care-asc-recruitment/asc-careers-with-us/social-work-and-social-care/adult-social-care-team-careers/meet-our-teams/>

⁵ Gloucestershire County Council, Inhouse Day Services <https://www.goucestershire.gov.uk/health-and-social-care/adult-social-care-asc-recruitment/asc-careers-with-us/social-work-and-social-care/inhouse-service-careers/day-care-centres/>.

⁶ Gloucestershire County Council, Enablement Service <https://www.goucestershire.gov.uk/health-and-social-care/adult-social-care-asc-recruitment/asc-careers-with-us/social-work-and-social-care/adult-social-care-team-careers/meet-our-teams/enablement-team/>

⁷ Gloucestershire County Council, Hospital Discharge and Assessment Team
<https://www.goucestershire.gov.uk/health-and-social-care/adult-social-care-asc-recruitment/asc-careers-with-us/social-work-and-social-care/adult-social-care-team-careers/meet-our-teams/hospital-discharge-and-assessment-team-hdat/>

⁸ Gloucestershire County Council, Positive Behaviour Support Team,
<https://www.goucestershire.gov.uk/health-and-social-care/adult-social-care-asc-recruitment/asc-careers-with-us/social-work-and-social-care/adult-social-care-team-careers/meet-our-teams/positive-behaviour-support-pbs-team/>

⁹ Gloucestershire Adult Safeguarding Board, DoLS information
<https://www.goucestershire.gov.uk/gsab/i-am-a-professional/deprivation-of-liberty-safeguards-dols/>

¹⁰ Gloucestershire Approved Mental Health Professionals (AMHP)
<https://www.goucestershire.gov.uk/health-and-social-care/adult-social-care-asc-recruitment/asc-careers-with-us/goucestershire-health-and-care-nhs-foundation-trust/where-is-the-team-based/>

¹¹ One Gloucestershire Learning Disabilities and Autistic People Dynamic Support Register
<https://www.nhs.glos.nhs.uk/your-health-services/community-and-hospital-care/learning-disability/dynamic-support-register/>

¹² Gloucestershire Health and Care NHS Foundation Trust, Community Learning Disability Team
<https://www.ghc.nhs.uk/our-teams-and-services/cldt/>

¹³ Gloucestershire County Council, Shared Lives <https://www.goucestershire.gov.uk/shared-lives/>