

Fife Council Social Work Service – Social Care and Support for People with Acquired Brain Injury

Introduction

Fife Council supports people with Acquired Brain Injury (ABI) through our assessment and care management teams and our occupational therapy and reablement teams. In addition the social work service provides in-house support at home including home care services for a number of people. The range of services provided are as follows:

- Housing Support and Care at Home
- Respite care
- Direct payment / Self Directed Support
- Home Care
- Community Alarm
- Telecare
- Equipment and adaptations
- Meals on Wheels
- Residential Care

The work with individuals with ABI ensures that their social care and support needs are met and where relevant this links with a joint approach with NHS Fife in meeting individual need.

All our services and supports are provided following a needs assessment and in consultation with the individual and their families. Services are reviewed on an ongoing basis to ensure that they continue to meet need.

Services Provided

Two examples of the services we provide within Fife are detailed below

1 Self Directed Support (SDS)

Fife Council in partnership with NHS Fife has established a Self Directed Support project for individuals with ABI within Fife. This project is supported by a jointly funded project manager. A project Steering Group has been established to oversee the development, co-ordination and implementation of a Project Action Plan. At the present time there are 10 individuals supported through the project, an example of which is that one person uses her self directed support payment towards travel and accommodation costs to allow access to NHS led trial treatment at Kent University Hospital for left sided neglect. Another individual will buy a gym pass to further develop his physical fitness in addition to improving access to social and leisure activities.

Other SDS Plans have been approved for a range of activities and purposes which include employing a personal assistant, funding a post-graduate counselling course, transport costs to a support group, computers and software, gym equipment and art materials.

Joint Funding and Working

Joint working arrangements continue to be developed between key health and social workers to help ensure that SDS support packages are co-ordinated. The aim is to maximise the benefits of the combined support for the participants in meeting their overall personal goals and in extending the longer term benefits of the SDS support.

A presentation on collaborative working approaches developed during the self directed support project between Fife Council and NHS Fife was delivered recently by Senior Officers from the Council and the NHS at a national SDS Conference in Edinburgh on 29 April 2012.

Feedback from those present was that through this project, Fife was at the 'cutting edge' of developing approaches to joint health and social care SDS packages. being delivered through SDS. A number of delegates expressed their interest in the findings of the final monitoring and evaluation report when available.

Monitoring and Evaluation

Blake Stevenson an independent consultancy agency has been employed to evaluate the project and have now conducted final interviews with a range of key workers and stakeholders. Information is now being collated and analysed with a final report due to be published in May/June 2012.

The SDS project in Fife has also included joint liaison and working between NHS Lothian and NHS Fife Council. It is hoped that a joint DVD will be produced to illustrate the experience of individuals participating in both projects, including an input by their carers and key workers. This DVD will then be used as an awareness raising resource for service users, providers and carers in the future development of SDS.

Social Care (Self Directed Support) Scotland Bill

The above Bill was officially launched by the Scottish Parliament's Health and Sport committee on 1/3/12. A call for written views on the general principles of the Bill have been requested from all interested parties by 24 April 2012. The project manager and the NHS Fife's Lead Nurse Consultant (Fife Rehabilitation Service) have contributed comments based on their experience of the project to those co-ordinating comments on behalf of NHS Fife and Fife Council. The Policy memorandum of the draft Bill refers to the NHS Fife and Fife Council test site.

Next Steps

Priorities for the final phase of the project include:

1. Finalising the payment, processing and reviewing of the ten approved SDS plans
2. Developing ideas and projects, such as the proposed DVD outlined in paragraph 2.5, which will build on the learning, gaps identified and experiences gained from the project
3. Reviewing the findings of the final monitoring and evaluation report to be produced by Blake Stevenson.

Feedback from Service Users

The following feedback gives a view from service users about how their involvement in the project has improved their lives,

- *Nine months ago I was in a rut - I now have a focus and function..."*
- *I can relate to what I have been through now. I feel mentally better..."*
- *I have noticed a big difference in his mood "*
- *I now realise I need help but was in denial before..."*
- *I could not have afforded this myself...'*

2 Housing Support Service

The Social Work Service provides an in-house support service to people living with ABI living in their own homes. The support ranges from 1-6 hours per week. A more recent individual's needs has been assessed as requiring 21 hours over the week.

The type of support provided includes

- Assistance with benefits; form filling
- Attending and supporting with medical assessments for benefits;
- Assistance with appeal process
- Assistance with arranging and attending medical/health appointments;
- Assistance with correspondence
- Assistance with shopping
- Assistance with engaging in social activities and accessing community facilities
- Liaising with other health and social work professionals.
- Emotional support; including specialist knowledge and support around acceptance of diagnosis; symptoms; recognition of brain injury and limitations/adjustment.

All service users express to support staff how much they value the service.

May 2012