focus
independent adult social work

The End of 2's & 5's

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Social Enterprise UK
Certified Member

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Local Context

- Independent social work practice providing all statutory SW duties and functions
- ASC is delegated to CCG under a S75 agreement
- Focus “contract” is with the CCG
- Boundaries between social care and health care permeable
- Integrated client/patient database using S1
- ASC strategic advisor to the CCG
- Member of the CCG Governing Body, Partnership Board & COM

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Origins

- CEO meetings – complaints about DToCs (Exaggerated, poor understanding)
- Health orientated/led team based at the hospital ineffective
- Admission & Discharge notices useless
- New SW team:
- Not in-hospital
- See patient with 24 hours and talk to family
- Agree resources required well in advance of discharge

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Development of the Team

- Going Solo
- Bringing 2 Teams Together – Practice & Culture
- Supporting A&E – Responding to Crisis & Opportunity

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We Love Our Paper

- *Care Act 2014*
- *Mental Capacity Act 2005*
- *Statutory Instrument*
- *CHC guidance 2012*
- *DETOC guidance*
- *NICE guidance*

What sometimes gets missed is the **Individual,** so that is always our starting point.

The Individual

We focus on:

- What can they do rather than what they can't.
- What are their normal support structures?
- Do they want support?
- Do they have capacity?
- What third sector support is available to them?
- What statutory support do they have?

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Information Flows

Hospitals are awash with information and differing information streams. Computer programs, departmental spread sheets and a plethora of others. They are impossible to work with across specialisms so we funnel the flow.

- WebV
- Board rounds funnel to a single virtual troubleshooting board round.
- A single list of perspective service users.

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Our Work

- Electives
- A+E
- Acute Mental Health
- OOA repatriations (re-enablement and social)
- OOA EOL
- Stroke Pathway
- CHC and fast track (medical and social staff)
- Early stage intermediate tier specialist
- Building bridges between specialisms
- Being the bridge between acute and community services
- Challenging stupidity

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Future Plans

- Trusted assessor
- Discharge to assess
- Reviewing funding streams
- Establishing a model for the team

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