

Welcome to the 2<sup>nd</sup> edition of



# SAT NEWS

June 2006  
Edition Two

## *SAT takes to the road!*

During the last week of February, the SAT project team took to the road and visited each HPSS Trust in Northern Ireland to present the project framework, seek feedback from stakeholders and receive copies of locally developed assessment tools. Staff from the four Health and Social Services Boards also attended these sessions. These two hour sessions resulted in much debate and discussion. A range of issues were discussed with the project team. As a result of these road-shows, changes have been made to the project focus and structures, including:

- How would the SAT link with 'Person-Centred Information Systems' [PCIS]. It became clear that stronger links were needed between the SAT Project and the PCIS Project.  
**ACTION TAKEN:** PCIS representatives have now joined the Stakeholder Group and Steering Group.
- Many people suggested that "housing" should be integrated into the SAT process.  
**ACTION TAKEN:** A housing representative has joined the Stakeholder Group.
- There was much discussion about the boundaries of the SAT particularly around what would be included in the "core" assessment tool and what would constitute a specialist assessment. There was also much discussion over the week about developing "triggers" for specialist assessment.  
**ACTION TAKEN:** The project team has taken on board all the boundary issues and has redefined the scope of the project as reported elsewhere in the newsletter.

- Everyone agreed that dementia should be included in the scope of the project but some expressed concern that other areas were being excluded at this stage, for example, mental health for older people.  
**ACTION TAKEN:** The project team recognizes that 'false boundaries' need to be placed around the scope of the project in order to deliver the project in the agreed timeframes. However, the transferability of the SAT to other client groups will be considered during the piloting of the instrument.

### THANKS!

The project team would like to thank everyone who attended a road-show event and for playing an important role in shaping the project.



The SAT Project Team (left to right - Mr Paul Slater, Mrs Bridget Murray, Mrs Joanne McConville, Prof Brendan McCormack & Dr Brian Taylor)

## *Be prepared.....please!*

All Trusts and Boards are asked to consider setting up an Implementation Reference Group. Such a group could fulfill a range of purposes including

- being a channel of communication for the Trust or Board member of the Stakeholder Group;
- considering the implications of proposals for structures, systems, procedures and practice in various service areas;
- alerting the Project Team to key issues.

As well as including the more obvious range of professionals, consideration might also be given to including the range of service areas and settings such as hospital discharge, home care services, 'risk assessment', supported housing, information systems, health promotion, financial assessment, training and the local Health and Social Care Group. In the light of the Review of Public Administration, some Trusts and Boards may wish to consider a combined Implementation Reference Group. It is proposed that the structure of these groups be reconsidered as decisions are made as part of the RPA process.

## *Worth the wait!*

Those of you who attended the SAT Project Team "roadshows" in February will remember the team's pitch inviting (and on occasion pleading for!) applications for the post of Project Officer which had remained unfilled for some time. We would like to thank all of those brave individuals who applied for the post and are happy to be able to introduce Joanne McConville as the SAT Project Officer. This is what Joanne has to say about herself:

"My background in Healthcare stems from experience as a General Nurse and Service Manager. I began my career in Residential and Nursing Homes providing care for older people. I then moved to the acute sector, concentrating on surgical placements. From 1999 to 2004 I worked in the Northern

Ireland Prison Service both as a Nurse Officer and Senior Nurse Officer.

In 2004 I returned to the Health and Social Services as a Manager within the Community Rehabilitation Service. This is a multi-disciplinary team providing intermediate care for clients with numerous and varying conditions who require rehabilitation in a community setting. As the manager I had experience of care co-ordination and an insight into issues and practices relating to all professions within the service.

Recently I was seconded to implement the Integrated Care of the Elderly Project for The Community Rehabilitation Service within Homefirst Trust. I have been working full-time on the Single Assessment Tool Project from the 1<sup>st</sup> May and am really looking forward to the challenges this project will bring."

Joanne is based at the University of Ulster at Jordanstown and be contacted at [je.mcconville@ulster.ac.uk](mailto:je.mcconville@ulster.ac.uk)



**Mrs Joanne McConville - SAT Project Officer**

## *Users have their say*

The first meeting of the User Group took place 3<sup>rd</sup> April 2006. Membership of the group consists of individuals representing a range of organisations including:

Katie Campbell (NI Dementia Forum), Grace Henry (Help the Aged), Claire Keatinge (Alzheimer's Society), Philomena McCrory (Centre for Independent Living), Linda Robinson (Age Concern NI), Ricky Devlin (Belfast Carers Centre) and Helen Ferguson (Carers Northern Ireland).

The User Group sees its role as providing an independent mechanism to obtain, and feed back, the views of older service users and carers on the single assessment tool. As the tool is developed, the group will establish a representative panel of older people, including older people with disability or health problems. The Group will provide an important focus for ensuring that an independent voice for older people be provided.

## *The Stakeholder Group gets down to business*

The Stakeholder Group met for the first time in April and agreed their vision for the SAT and ways of working. A programme of meetings has been established. The Stakeholder Group will act as the key group in informing the shape of the SAT and in advising the project team on implementation issues. A stakeholder methodology is being adopted to shape the work with the group and it is hoped that this will ensure participative and collaborative ways of working to address issues as they arise during the lifetime of the project. Members of the Stakeholder Group have a key role in informing staff in Trusts and Boards about the progress of the project and in receiving feedback for the Project Team.

Stakeholder Group members are:

William Barron, UCHT  
Peter Gibson, EHSSB  
Noelle Barton, Homefirst  
Seamus Logan, NHSSB  
Rosemary Taylor, SHSSB  
Trevor Gillan, Causeway  
Sarah Browne, Down Lisburn  
Una Macauley, N&W Belfast  
Ann Hazlett, Mater Hospital  
Teresa Burns, Sperrin Lakeland  
Margaret Murphy, Foyle  
Ken Gallagher, Greenpark  
Sharon Dunn, Royal Hospitals  
Lynne Armstrong, Belfast City Hospital  
Jackie Campbell, S&E Belfast  
Stanley Kingsmill, Armagh & Dungannon  
Imelda Cullen, Craigavon Area Hospital  
Patricia Trainor, Newry & Mourne  
Noel Quigley, WHSSB  
Geraldine Caldwell, Craigavon & Banbridge  
Margaret Armstrong, Altnagelvin  
Philip Bartley, United Hospitals  
Prof Frank Dobbs, Royal College of General Practitioners  
Janice Smyth, Royal College of Nursing  
Nicola Smyth, PCIS Project  
Chair of the User Group

The British Geriatric Society NI and the Housing Executive have both indicated that they will be nominating representatives to the group. We also hope that the British Association of Social Workers and the Advisory Committee for Allied Health Professionals will accept our invitation to join the Stakeholder Group.

**Please liaise with your Stakeholder Group representative for further information and to give feedback to the Project Team**

## Pilot sites selected

Thank you to those Trusts which applied to become pilot sites for the SAT Project. The level of enthusiasm demonstrated by Trusts in their applications, and also during the Project Team visits, was very encouraging.

The Project Steering Group met on Wednesday 16<sup>th</sup> March to consider the applications and select the Trusts most suitable to pilot the new assessment tool when developed. The Steering Group also agreed at that meeting that the number of pilot sites should be increased from 4 to 5 to reflect the new Trust structure as described under the Review of Public Administration. The decision to have 5 pilot sites was taken to ensure that each Trust under the new structure will be involved in the piloting of this project.

The 5 pilot site locations are:

- Homefirst HSST
- Down Lisburn HSST
- WHSSB (will be operating 1 pilot involving all the Trusts in their area)
- South and East Belfast HSST
- Craigavon and Banbridge HSST

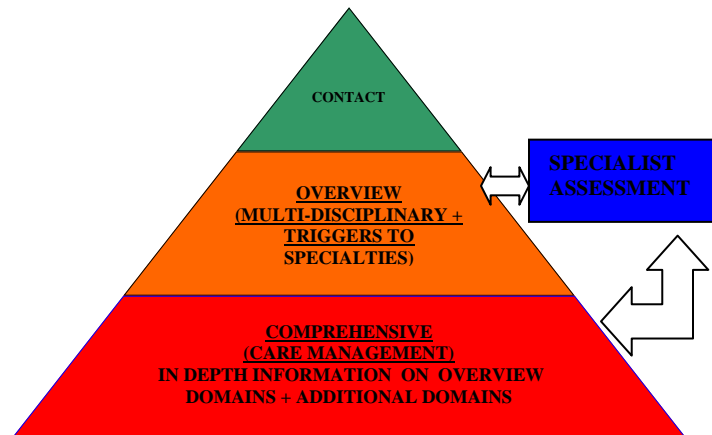


### Consensus Conference!

Please put a note in your diaries for the Consensus Conference which will be held on 11<sup>th</sup> October in the Ross Park Hotel, Kells. Further details will follow in subsequent newsletters.

## Proposed structure of the single assessment tool

This is the structure we are currently considering for the single assessment tool. It is based on three levels of assessment: contact, overview and comprehensive.



### FIRST CONTACT ASSESSMENT

- Could identify referral necessary to specific team / professional
- Made up of basic, generic information
- Originated by any first contact professional
- Should be compatible with on-going work by PCIS
- Will lead to overview assessment
- No more than 1-2 sheets

### OVERVIEW ASSESSMENT

- Amalgamation with contact assessment
- Multi-disciplinary assessment
- Sections based on Domains of Need
- Consent should be gained re; sharing of information
- Will contain trigger points to specialist assessment
- Will trigger the care management process
- Named worker will be identified if appropriate
- If care management is not appropriate, care planning, goal setting and review should be built in
- Could be used in all settings and should be appropriate to the needs of the client
- Should include intermediate care needs and potential to rehabilitate
- If care management not appropriate, multi-disciplinary care plan and summary should be shared with relevant team and client

## SPECIALIST ASSESSMENTS (not included in the tool)

- Initiated either by overview or comprehensive assessments
- Copies sent to relevant care co-ordinator or care manager
- Information could be sent in form of a care plan with timescales

## COMPREHENSIVE ASSESSMENT

- Includes contact + overview + appropriate specialist assessments
- Includes information for care management. If any piece is not completed care manager ensures it is carried out at this stage
- May be structured as overview with additional questions or domains relevant to care management
- Will include checks to ensure necessary specialist assessments have been carried out initially and on review
- Will culminate in a care plan including goals and triggers for review
- Will have a summary of needs to share with staff, clients and carers

We would really like to hear your thoughts and comments on this proposed structure and, of course, any comments or questions you may have about the project in general!



Please e-mail the Project Team at [SAT@dhsspsni.gov.uk](mailto:SAT@dhsspsni.gov.uk)

## Departmental website

The Department's website [www.dhsspsni.gov.uk](http://www.dhsspsni.gov.uk) now has a new "Community Care" section which you can access to find general information and publications in relation to various aspects of community care including the Single Assessment Tool.

A copy of the presentation which the SAT Project Team delivered at road-show events is available in this section of the Department's website. The presentation clearly sets out the purpose, aims and scope of the project. It also provides information on the structures that are in place, the timetable for the development of the tool and an outline of the piloting process. So if you weren't able to attend the road-show events you may find it helpful to take a look at the presentation.



Mrs Mandy Jones and Mrs Sandra O'Hare, DHSSPS, who provide the link between the Project Team and the Steering Group and Department.

