Introduction

To be successful and sustainable, delegated healthcare activities require the right governance, protocols, learning and development, and support, and must always have person-centred

This toolkit is designed to help Integrated Care Systems or place based integrated partners to

toolkit has been developed collaboratively across the Lincolnshire Integrated Care System. It demonstrates the opportunities to delegate clinical observations to support the management of deterioration in response to urgent care needs.

There are sample templates within the toolkit that can be adapted to meet the needs of the people that access care and support, your local system and organisation, including where delegation happens outside of your organisation.

The toolkit

1   **Thinking about delegation – before you start**

2   **Setting up the steering group or other project management support**

3   **Governance – is more than just policies**

4   **Delegation within a person-centred care plan**

5   **Communication and engagement**

6   **Evaluation and assurance**

We are interested in feedback on what works and doesn't work in this toolkit
Please send proposed improvements to:
delegatedhealthcare@yorkconsulting.co.uk

1.

Thinking about delegation – before you start

Person-centred delegation puts the person who accesses care and support at the heart of

person's best interest with the potential to improve the experience and outcomes of care.

centred way of working and to provide:

- delegated healthcare activities for people who access care and support at a time and by an individual(s) that is most appropriate for them enabling greater choice and person-centred decision-making

- recognition of the value of the care workforce to support better experience and outcomes of care

- a way to optimise the knowledge and skills of the health and care workforce.

continuity preparation, rather than business as usual. However, there are potential risks of harm to
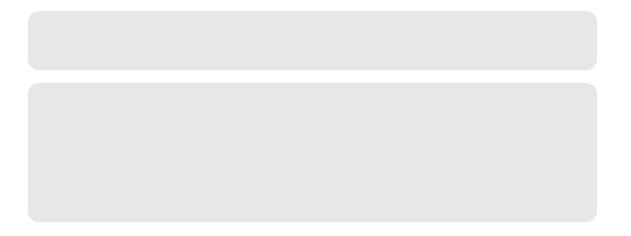
Formal evaluation
Informal feedback

Other questions that need to be considered – these may be delegated to the steering group if you are using one.

Have we considered the potential implications to other

The most important stakeholders who should be involved in the co-production of the delegation process are:

- the person accessing care and support and their family members
- the regulated healthcare professional who will be delegating
- the care worker(s) undertaking the activity.

Other stakeholders to consider during the initial planning process include:

- delegating organisations – there may be a number of viewpoints needed, including:
  - leadership from regulated healthcare professionals
  - those with responsibility for risk
  - union and/or employee forum representatives
- organisations employing those who will undertake the tasks – if there are a number of these, a representative may be appropriate
- primary care representation – they need to be aware of changes in the way that people are supported and can often be very helpful when looking at risk
- commissioners of health and care organisations who will be undertaking the activity – if the delegation is to be sustainable there will need to be a discussion around resources in which they will be key partners
- CQC or other regulators – no individual or organisation should be at risk of non-compliance by taking part in well-governed delegation
- representatives of people with lived experience
- specialist stakeholders depending on the delegation such as
  - digital leaders from appropriate organisation (or the system)
  - other clinical groups (e.g. pharmacy, therapists).

Other stakeholders may become apparent as the programme continues, but it may be

to identify any gaps and agree who needs to attend the steering group and who needs to be included in minutes or regular updates.

Establish the steering group

The process of design and implementation will vary. Even where the delegation appears to be a

Steering group membership

Timescales need to be clear at the outset and need to be realistic:

If the delegation is to residential homes, the project management may sit within the Enhanced

3. Governance – is more than just policies

Governance template

The level of detail in the governance document may vary according to the complexity of the delegation and the number of stakeholders involved.

A sample governance template setting out what areas need to be considered is included in Appendix three.

Standard operating procedures

For many activities, a standard operating procedure (SOP) can be helpful, although it may not be necessary if there is a comprehensive governance document which has been agreed by all stakeholders.

SOPs are more commonly used within health than social care, but they can be an excellent way to ensure that everyone understands the reason for the chosen way of working and their part in the process.

They can incorporate graphics which make procedures easy to follow, as well as technical details where needed.

An example standard operating procedure is available at:
www.skillsforcare.org.uk/DelegatedHealthcareActivity

4. Delegation within a person-centred care plan

Delegation should be incorporated into the single, person-centred care plan, so that all stakeholders are aware of how the person is being supported. This ensures that all people involved in the person's care can access a live plan of care.

Including the delegation details within the person's care plan provides clear clinical direction, oversight and risk management. This can be useful to mitigate a risk of care workers becoming overly comfortable undertaking activities such as clinical observation without appropriate direction and oversight.

Taking remote observations is a process that can support professional clinical decision making when individuals are unwell or may be at risk of deteriorating. This potentially avoids unnecessary admission to secondary care and ensures a proactive approach, meeting better outcomes and experience for the person. However, there is a risk that where monitoring is introduced without a person-centred approach and clinical oversight it can lead to confusion and concern regarding decision-making. This can potentially lead to intrusive monitoring when it is not clinically indicated, and the delegated healthcare activity is simply taking place because it is 'their day to be measured.'

Where the clinical observations are included as part of the care and support plan:

- this demonstrates a person-centred approach enabling communication to all involved in the care planning process
- there is clear clinical ownership and direction of the decision making process and delegated healthcare activity.

When review and monitoring indicate a change to the person's condition, the regulated healthcare professional will amend the care plan to ensure the needs of the person are met keeping them at the centre of the planning process. This may result in a change of frequency of monitoring or stopping the delegated healthcare activity and ceasing observations.

Standard operating procedures (SOPs) and overall governance are important but including delegation in the care and support plan ensures that the person and their needs remain central to any delegation, and it is known to all involved in the person's care.

5. Communication and engagement

relationships and understanding of roles and responsibilities of all involved, especially the person accessing care and support and their family members to ensure the safety and quality of the delegation. Relationships can be built on as the delegation process develops, but for maximum

An example communications and engagement plan can be found at Appendix four.

Record keeping

One of the key elements of communication and engagement is accurate, complete and detailed records. It's the responsibility of all parties involved in line with CQC regulation and good governance. In addition, as part of a regulated healthcare professionals code of practice there is

sharing skills, knowledge and experience where appropriate.

Personal stories

The use of people's personal stories can demonstrate how delegated healthca

5. Evaluation and assurance

In order to understand the impact on the person accessing care and support in

Potential sources of evaluation and assurance to consider

Evaluation should be an integral part of the delegation process and considered from the outset. This may be on a small scale or may involve support from wider partners such as local universities and research organisations. For more analytical evaluation, particularly if health inequalities are to be included in evaluation, local Public Health teams may be able to support.

evaluation funding and an incentive to develop a formal publication of the work undertaken and an opportunity to share learning.