

THE WORK OF THE MOVING & HANDLING WORKING GROUP AND THE MOVE IMPLEMENTATION GROUP - UPDATE

by Jane Baines

Summary

This report sets out the progress made in promoting integrated practices around children and young people with moving and handling needs. It highlights the issues which still need to be addressed and seeks committee approval of the groups on-going action plan.

In addition the report presents for approval by the committee the integrated policy and guidance on the implementation of the MOVE (Movement Opportunities Via Education) approach across the Highland area.

1. Background

1.1 The multi-agency working group formed several years ago to progress integrated approaches and practices around children and young people with moving and handling needs. The group has progressed a range of actions to meet its original development aims and to achieve development areas highlighted in *For Highland's Children 2*. Membership of the group includes:

- NHS Highland Allied Health Professionals
- NHS Highland Safe Handling Team
- NHS Highland General Manager Woman and Child Directorate
- NHS MOVE Consultants
- ECS Development Officer
- ECS Moving and Handling Trainer
- ECS MOVE Consultants
- SWS Training Manager
- SWS/ECS Moving and Handling Coordinator
- SWS/ECS Development Officer Disability
- Manager – The Orchard
- Highland Children's Forum Representative
- Parent Representative
- HC Legal Services
- HC Health and Safety

1.2 The aims of the group are to:

- increase the efficiency, effectiveness and consistency of moving and handling approaches
- develop a training strategy for all adults (including parents, carers and extended family) working with a child or young person
- ensure safe working practices
- demonstrate the effectiveness of the GIRFEC approach by full collaborative multi service working

- 1.3 Numbers of children requiring moving and handling processes have increased over the last few years due to the survival rate of very premature babies. These children have complex and challenging medical and handling needs. They require high levels of support and equipment to allow them to live in the community and be supported in their own homes. The number of pupils with congenital or deteriorating conditions requiring moving and handling have remained stable.
- 1.4 Currently 110 pupils have moving and handling needs. Each has a significant group of adults around them who require to receive moving and handling and intimate care training.
- 1.5 *For Highland's Children 2* contained development aims to ensure consistency of practice in moving and handling and intimate care processes. Pupil consultation regularly highlights the strong wishes of individuals to always be moved and handled in the same way, no matter who is assisting the process.
- 1.6 The Children's and Young People's Commissioner for Scotland's Report *Handle with Care 2008* promoted the approaches of consistent multi-service working we are already using in Highland and endorsed them as best practice.

2. **Progress to Date**

- 2.1 The group produced multi-service Moving and Handling policy and guidance which was accepted by the JCCYP at the end of 2008. This documentation parallels the guidance and policy for adults ensuring ongoing consistency of practice.
- 2.2 Risk assessment processes and paperwork have been designed by the group to meet the needs of the Highland Council and NHS Highland and the shared paperwork is now used pan Highland.
- 2.3 Highland Council and NHS Highland have agreed that the approach to be used by all agencies for pupils, patients and adults will be the Moves Neuromuscular Approach (NMA). This should ensure common handling approaches and methodology. Children and young people should expect to be handled and moved in the same manner irrespective of situation and adults involved in the process. This meets the aims of the outcomes of *For Highland's Children 2* and the recommendations of the Handle with Care Guidance from the Scottish Parliament's Children's Commissioner.
- 2.4 A joint service strategy has been drafted for discussion to meet the legal health and safety requirements of Moving and Handling. The training practice is currently being piloted by each service.
- 2.5 A paper setting out the roles and responsibilities of staff carrying out moving and handling tasks has been drafted.
- 2.6 A former nursery was identified as temporary premises by the ECS service, once it was agreed there was no room for paediatric equipment in the new Longman

joint equipment facility. This building in Inverness now holds the equipment which was previously stored at Craig Dunain. There is not the capacity in this new store to recall all the education purchased equipment currently being stored in schools all over Highland. This has allowed for some equipment to be stored but has not addressed the issues of holding a single database of equipment and for the cleaning, maintenance and re-issue of all items in a quick and efficient manner.

- 2.7 Initial lists of the most frequently ordered equipment have been drawn up, by NHS staff. NHS and ECS hold a separate database of equipment. Equipment is purchased by ECS and SWS at the recommendation of NHS Highland. The next stage would be to hold guidance and agreed training recommendations for equipment use and maintenance.

3. **MOVE (Movement Opportunities Via Education)**

- 3.1 The Highland Council ECS Service and NHS Highland signed a contract some years ago with the MOVE Europe Organisation to introduce this approach.
- 3.2 This approach involves all adults working with a child or young person. It maximises all opportunities for developing independent movement.
- 3.3 Drummond School has been awarded Centre of Excellence status by the MOVE organisation.
- 3.4 A network of implementation groups has been set up, with a team of trainers from both ECS and NHS Highland
- 3.5 Policy and guidance has been written to ensure consistency of the implementation.
- 3.6 Pupils participating on a MOVE programme show enhanced levels of self-esteem and independence. Their families report:
- Greater involvement with peers and siblings
 - Greater opportunities for participation in activities
 - Health benefits from increased movement and better posture
 - Life long benefits of independent movement

4. **Next Steps**

- 4.1 The following steps all have significant implications for the Council and NHS Highland. Several tasks need to be completed in order to implement safe and efficient moving and handling processes:
- To achieve the development aims that will be included in *For Highland's Children 3*.
 - To set up and deliver the joint training strategy.
 - To establish a funded annual training cycle for all those working with a pupil.
 - To increase the number of moving and handling trainers - this is a two year training course at post graduate level.

- Ensure all adults working with children that require such interventions receive training.
- Consolidate the Moving and Handling Coordinator role.
- Ensure training strategy includes training on intimate care processes.
- To hold a joint database of children and young people with moving and handling needs.
- To formalise roles and responsibilities.
- Implement the transitions strategy for transfer to adult services, based on transitions guidance.
- To build on existing equipment store into a managed service as per recommendations of *Handle with Care*.
- Develop web guidance for equipment use.
- Establish an effective system for equipment purchasing and stock control.
- Link with Argyle & Bute agencies to support consistency of practice.
- On-going implementation of the MOVE approach.

Recommendations

Members are asked to consider this report and agree to:

1. Endorse the significant progress made by the Integrated Services Moving and Handling Working Group.
2. Give a mandate to the group to seek to increase the number of moving and handling trainers to deliver a joint training strategy.
3. Endorse the joint policy and guidance of the MOVE approach across Highland.
4. Support the principles of a paediatric equipment service for the efficient and effective management of equipment

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