

PROGRESS REPORT TO THE HEALTH SCRUTINY COMMITTEE

9 OCTOBER 2007

Improving health services for older people in Greater Nottingham

1. Introduction

This report presents a summary of progress since the Committee last considered the two projects earlier this year, in February. The accompanying report prepared by the Committee's officers outlines the background. In particular, this summary responds to the points raised in Councillor Liversidge's letter of 24 July to Wendy Saviour.

2. Inpatient rehabilitation services for older people

Bed reductions

The last two inpatient rehabilitation beds at Highbury Hospital have now closed – Linby Ward closed on 10 August, and Willoughby Ward closed on 24 August. The ward at Lings Bar Hospital, the new Forest Ward, has been refurbished and became available for use from 1 September.

Improved inpatient care

The PCT staff that worked at Highbury Hospital have all accepted posts at Lings Bar Hospital. This has increased the nursing and therapy staffing ratios on the wards, as planned, so that, for example, rehabilitation can be improved through a higher ratio of qualified staff.

As outlined in the original proposal, now that the service is located onto a single site, the aim is to reduce the average length of stay and increase the quality of patient outcome, for example through increased levels of independence.

The service has put in place systematic and robust processes to monitor and evaluate the effectiveness of the re-designed inpatient service, to ensure that patient outcomes and experience are indeed improved.

Transitional funding

The PCT has authorised the early release of funding to both Adult Social Services Departments, in line with the Price Waterhouse Cooper (PWC) report. Members may recall that PWC recommended that 50% of the funding be released, followed by the remaining 50% later in the year. The PCT will authorise the second release in October.

Community-based care

Both PCTs have begun to increase the capacity of the intermediate care service to support older people in their own homes. The anticipated increase will ultimately see an additional 200 older people per year supported in the City and about 100 in the Southern Boroughs' area. The reinvestment has been weighted in favour of the City population, recognising the greater health needs and acknowledging the transfer of beds from Highbury Hospital, which is in the City's Bulwell area.

3. Mental Health Services for Older People

Transfers of care

Patients on the former Granby Ward at Lings Bar Hospital have been helped to transfer to alternative care settings, either:

- to local care homes, for those who did not meet the continuing care criteria, where it was safe to do so, or
- to Peasehill Residential Unit or Silver Birch (at Highbury Hospital) for those who continued to meet the criteria.

'Protected rights' status

All appropriate patients have been afforded 'protected rights' status – which means the NHS will continue to pay for their care irrespective of the care setting.

Inpatient bed reductions

Granby Ward closed at the end of January, leaving Silver Birch Ward and Peasehill Residential Unit provided by Nottinghamshire Healthcare Trust.

Work to refurbish the new ward (Copper Beech) at Highbury Hospital is underway, with completion expected in 2008, at which time Peasehill Residential Unit will close.

Community-based care

Joint commissioning specifications for intermediate care services for older people with mental health problems have been agreed and the services are now being commissioned. In the Boroughs, this service is firstly being developed in the Rushcliffe area to mitigate the local impact of the Granby Ward closure. In the City the development of an integrated JackDawe Intermediate Care service is underway comprising new resources in both health and social care and linking to existing teams / resources.

The Committee will recall that the projected level of resource released for reinvestment into older people's services was anticipated at about £2.8 million recurrently by 2009/10. Recently updated projections suggest this is still on track.

4. General update

Joint monitoring – impact on adult social care

A joint monitoring group has been established to monitor the actual, rather than projected, impact on social care, as recommended by PWC. The group has agreed the monitoring methodologies, which include retrospective case studies as well as analysis of key performance management information from the Adult Social Services Departments (ASSDs).

The group will meet again in November to review the first 6-month monitoring data (from April to September).

However, it is recognised that it is still early days in terms of assessing impact as, in the case of rehabilitation services, the inpatient changes have only recently been fully implemented, and for mental health services the inpatient service changes are not yet complete.

Joint working

The ASSDs and the PCTs continue to work closely together, with the other Trusts, to improve the patient pathway for older people. The ASSDs and PCTs have jointly commissioned further work by PWC to support the development of a joint framework to identify and describe the shared strategic intentions for older people across the local health and social care system and outline the mechanisms by which the partner organisations can work together to achieve these.

The PCTs and ASSD in Nottinghamshire are establishing a Joint Commissioning Board, which will be launched on 25 October 2007 and will be the mechanism for developing joint strategic approaches to key priority areas across all care groups.

Joint workforce planning

The ASSDs and PCTs recognise the significant benefits of working together and, for example, have developed joint commissioning specifications for the expansion of community services which take account of and promote joint workforce planning eg the development of 'generic' worker roles.

In the County, a Joint Health and Social Care Workforce Group has been established.

Travel plans

Travel plans are being reviewed. As yet no requests from carers have been received for assistance with travel to Lings Bar Hospital.

Requests for assistance with travel to inpatient continuing care mental health services are dealt with on an individual basis.

Sharon Creber
Head of Provider Business Development



**JOINT CITY AND COUNTY
HEALTH SCRUTINY COMMITTEE**

Extract of M I N U T E S

of meeting held on **9 OCTOBER 2007** at the
Council House from 10.07 am to 11.55 am

Nottingham City Councillors

- ✓ Councillor Liversidge (Chair)
- Councillor Akhtar
- ✓ Councillor Aslam
- ✓ Councillor Dewinton
- ✓ Councillor Heppell
- ✓ Councillor Johnson
- Councillor Newton
- ✓ Councillor Price (substitute for Councillor Spencer)
- Councillor Spencer

Nottinghamshire County Councillors

- Councillor Winterton (Vice-Chair)
- ✓ Councillor Cutts
- ✓ Councillor Dobson
- ✓ Councillor Lally
- ✓ Councillor Lodziak
- ✓ Councillor Sykes
- Councillor Tsimbirdis
- ✓ Councillor Wombwell

- ✓ indicates present at meeting

Also in Attendance

- | | | | |
|------------------|---|---|-----------------------------|
| Mrs N Barnard | - | Overview and Scrutiny Team Leader |) Nottingham |
| Ms C Ziane-Pryor | - | Committee Administrator |) City |
| Mr J Scott | - | Head of Older People Service |) Council |
| Ms A Ward | - | General Manager |) Nottinghamshire |
| Mr J Walker | - | Associate Director,
Planning and Partnership |) Healthcare
) NHS Trust |

Mr M Garrard	-	Scrutiny Officer	-	Nottinghamshire County Council
Ms S Creber	-	Head of Provider Business Development)	Nottinghamshire County Teaching
Mr C Kerrigan	-	Director of Operational Commissioning)	Primary Care Trust
Dr S Roe	-	Elderly Health)	Nottingham
Ms R Larder	-	Deputy Director of Planning)	University Hospital Trust
Ms S Smith	-	Head of Commissioning Operational Services)	Nottingham City Primary
Ms T Shaw	-	Assistant Director, Planning Performance and Contracts)	Care Trust

25 DECLARATIONS OF INTERESTS

Councillor Liversidge declared a personal interest in agenda item 4 (minute 26), as he had a relative who was employed by the Nottinghamshire Healthcare Trust which did not preclude him from speaking or voting on the item.

26 MODERNISING SERVICES FOR OLDER PEOPLE

(a) Report of the Head of Overview and Scrutiny, Nottingham City Council

RESOLVED that the report of the Head of Overview and Scrutiny, Nottingham City Council, copies of which had been circulated, be noted.

(b) Report of the Nottinghamshire County Teaching Primary Care Trust

RESOLVED that, further to minute 14(b)(2) dated 10 July 2007, the report of the Nottinghamshire County Teaching Primary Care Trust, copies of which had been circulated, be noted.

(c) Discussion with Nottinghamshire County Teaching Primary Care Trust

Mr Kerrigan, Director of Commissioning and Performance at Nottinghamshire County Teaching Primary Care Trust, updated members on the progress made to deliver services for older people.

The new arrangements for the single service site at Lings Bar Hospital provided a higher ratio of qualified staff to bed patients, which was expected to result in shorter patient stays, an increase in the quality of patient care and more effective rehabilitation for patients enabling them to leave with increased levels of independence.

Day centre services had been transferred to Lings Bar and even though the needs of individual patients had been carefully considered concern had been expressed during

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the consultation period regarding the impact on patients travelling further for longer. However, neither patients, carers nor families had complained.

A fresh emphasis had been placed on home care by providing the same skill mix within teams as bed care staff. This option was preferred by the majority of patients who often responded better to treatment than if they were receiving the equivalent service in hospital.

The reorganisation of services had resulted in a focus on specialised home care by utilising the service 'Jackdawe' which supported older patients with dementia in the City and linked, with intermediate care providing services for those with physical frailties, where appropriate.

Patients were not discharged from hospital until adequate and safe home support, including the appropriate home adaptations packages were in place.

Members were concerned at reports of discharged patients waiting several months for the installation of basic need home adaptations by the Occupational Health Section and requested that such issues be resolved.

RESOLVED

- (1) that the report of the Nottinghamshire County Teaching Primary Care Trust, be noted;**
- (2) that the Overview and Scrutiny Team Leader arrange for an overview of the service provided by the Jackdawe team to be submitted to members of the Committee;**
- (3) that the Nottinghamshire County Teaching Primary Care Trust and the Local Authorities be requested to submit in 12 months time:-**
 - (i) update reports regarding the progress of the new services;**
 - (ii) direct feedback from service users resulting from a comprehensive survey of the views of patients and their families;**
- (4) that Mr Kerrigan be thanked for his attendance and presentation.**