

Decision Maker: HEALTH SCRUTINY SUB-COMMITTEE

Date: 16th March 2017

Decision Type: Non-Urgent Non-Executive Non-Key

Title: WINTER SCHEME 2016/17 – INTERIM UPDATE

Contact Officer: Tricia Wennell, Head of Assessment and Care Management
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Chief Officer: Stephen John, Director: Adult Social Care (ECHS)

Ward: Borough-wide

1. Reason for report

- 1.1 This report provides the Health Scrutiny Sub-Committee with an interim update on the LBB winter resilience schemes for 2016/17 and how effective these schemes have been in supporting hospital discharges and preventing readmissions.
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2. **RECOMMENDATION**

- 2.1 The Health Scrutiny Sub-Committee is asked to note the interim update on the LBB winter resilience schemes for 2016/17.

Impact on Vulnerable Adults and Children

1. Summary of Impact: These schemes provide support to adults with a range of health and care needs.
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Corporate Policy

1. Policy Status: Existing Policy
 2. BBB Priority: Supporting Independence
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Financial

1. Cost of proposal: Estimated Cost: The NHS Winter Resilience Grant totals £1,009,000 for 2016/2017.
 2. Ongoing costs: Non-Recurring Cost
 3. Budget head/performance centre: Adult Care Services
 4. Total current budget for this head: N/A
 5. Source of funding: Winter Resilience Grant from NHS England
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Personnel

1. Number of staff (current and additional): Scheme 1 aimed to increase care management staffing capacity by 30% within King's College Hospital (PRUH) and to provide additional social care staff by 10% in the community teams which has resulted in an additional 20.6 FTE with a projected spend of £643,881.
 2. If from existing staff resources, number of staff hours: N/A
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Legal

1. Legal Requirement: Section 74 and Schedule 3 to the Care Act 2014 and the Care and Support (Discharge of Hospital Patients) Regulations 2014
 2. Call-in: Not applicable – No Executive decision.
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Procurement

1. Summary of Procurement Implications: N/A
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected):

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| Current: | 165 |
| Projected: | 288 |
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? No
2. Summary of Ward Councillors comments: None.

3. COMMENTARY

3.1 In September 2016, Bromley ECHS received an NHS Winter Resilience Grant of **£1,009,000** for 2016/2017 to increase capacity to support hospital discharge and prevent patients' readmission.

3.2 The winter resilience grant was used to fund the following schemes:

- Scheme 1: Additional Capacity and Staffing
- Scheme 2: Fast Response Personal Care Service Provision
- Scheme 3: Intensive Personal Care Service Provision
- Scheme 4: Step-down Facilities / Extra Care Housing

3.3 The LBB Winter Resilience Schemes aim to support discharge and assist in achieving the following:

- a) Integrated and joint working between local health and social care services, i.e. Bromley Health Care, Bromley CCG, Bromley Adult Care (ECHS) and NHS service to facilitate transfer of care and support admission Avoidance.
- b) Increased capacity and staffing in Bromley Adult Social Care Services to achieve timely assessments of patients in hospital and avoid delay in arranging care on discharge.
- c) Provision of quality and patient-centred services on discharge 7 days a week
- d) Provision of community-based support services to ensure continuity of patient care in the community following discharge and prevent hospital readmissions
- e) Provision of step-down facilities to reduce patients' length of stay in hospital, deliver better discharge planning to support patients returning home and reduce admissions of older people and adults with complex needs to long term residential and nursing care
- f) Better co-ordination of ongoing care and support service to identify people with long-term medical conditions, frailty or disabilities, help people live well with them in the community, to retain their independence and keep out of hospital

3.3 Description of the Winter Resilience Schemes and what has been achieved:

Scheme 1: Additional Capacity and Staffing

The aim of this scheme was to increase care management staffing capacity by 30% within Kings College Hospital (PRUH) to undertake timely assessments of patients and provide a 7-day working arrangement. It was also to provide additional social care staff by 10% in the community teams to identify people with urgent care needs, undertake timely interventions to prevent admissions and support continuity of care following discharge. The aim was also to ensure systems are in place to monitor and track all WR work and ensure reporting is up to date and accurate.

Planned target: additional 17.7 FTEs staff – allocation: £558,900

Update:

Staffing has successfully been increased in all areas of care management including occupational therapists for the Community Teams and Moving and Handling Risk

Assessor hours for the PRUH enabling appropriate assessments and timely discharges and helping to prevent admissions in to hospital. This has resulted in additional staff to the original 17.7.

Actual Staffing: 20.6 – projected spend £643,881

Scheme 2: Fast Response Personal Care Service Provision

This scheme was intended to facilitate discharge of patients within 4 hours upon receipt of their Discharge Notification. This service was also intended to be offered to users with 'urgent needs' arising from a long-term medical condition in the community, to avoid or prevent hospital admission. Its aim was to facilitate an approximate of 2-4 discharges a week (up to 25 a month) with this provision. Each user would be provided with up to 4 visits (4 hours) per day package of care for no more than 14 days. The cost of a fast response care package is up to £672 per week. Personal care agencies in the community are often unable to respond, thus an enhanced reablement service was also to be used to achieve this.

Planned target: 150 users in 6 months – allocation: £190,150

Update:

There have been significant difficulties in persuading agencies to provide this service even with the financial incentives offered because of the shortage of care staff and the additional burden to them of taking short term packages of care. The plan to address this by enhancing reablement has also been affected by the limited availability of care staff. Funds have also been used to facilitate deep cleans so that service users can return to their own homes preventing discharge to a stepdown flat or a care home.

There have so far been:

14 users with Fast Response 4 hour service - £5,836

8 users with the enhanced reablement Bridging service - £3,600

7 users provided with a deep clean – projected spend - £4,900

Actual to date: 29 users – spend to date £14,336

Scheme 3 - Intensive Personal Care Services

'Intensive' denotes very thorough, in-depth, rigorous and concentrated care and support service. This was a short-term intervention service for users in the community to help them recover from their illness /or injury (e.g. following a fall or health event) sooner, keep them safe at home to avoid and prevent admission. This was successful last year

This scheme aimed to provide an intensive personal care service for patients with higher care and support needs, who would otherwise need to go into a care home or have recurrent admissions to hospital. These users may require up to 8 visits per day or 24 hour support for a maximum of two weeks. The cost of an intensive package of care may be up to £800 per week. Length of service may be extended beyond 2/52 in exceptional circumstances only.

This service also aimed to provide a service to support family Carers who are unwell and the person they care for requires a service at short notice to prevent them from being admitted in to hospital or to a care home during this short term period.

Planned target: 100 users in 6 months – allocation: £165,700

Update:

This service has been fully utilised within the constraints of available care agency hours and has again proven to provide a positive outcome for the users and carers supported by it. This included night sits to assist family carers in managing the high night time care needs of their relatives post discharge and during a settling in period.

With the limited availability of care agency hours, the funds have been redirected in 19 cases to temporarily place service users in emergency placements. Reviews have been carried out on those within 4 weeks of being placed to ensure appropriate levels of ongoing care were commissioned.

Actual to Date: = 108 users – spend to date £158,793

Scheme 4: Extra Care Housing Step-down Flats

This scheme aimed to offer step-down facilities to medically stable patients who require short period of 24-hour support and supervision in a safe environment on discharge whilst they undergo ongoing support and assessment to determine appropriate longer term options. The aim was to facilitate discharge, prevent readmission to hospital or care home placement. This scheme provides funding of extra care housing accommodation at £395 per week up to 6 weeks. Users of this scheme may need to contribute to their care and support package, which is funded separately by the Council.

Planned target: 38 users in 6 months – allocation: £94,250

Update:

The extra care housing stepdown facility has been fully utilised within the constraints of the availability of care hours within the service. An additional care management post was allocated to the Review and Co-ordination Team to manage the throughput in this service. This resulted in users being transferred in to and out of the stepdown flats more efficiently to meet the ongoing demand.

There are a total of 4 steps down flats funded from winter resilience between October and March. LBB fund the flats during the months of April to September

The challenges have been in the recruitment of care staff which has resulted in fewer users being able to benefit from the facility and in moving people on in a timely way. There have also been some issues with the landlords completing repairs allowing for the flats to be safely occupied. There were issues regarding the length of time taken to install assistive technology in 3 cases.

Actual to date: 28 users - £94,250

Summary of Update

A full evaluation of the 'Use of LBB Winter Resilience Fund (Oct 16 – March 17)' will be completed in April 17 when all data is collated and final calculations have been

made.

The initial update indicates that Schemes 1, 3 and 4 provide significant benefit to users and their carers in facilitating hospital discharges and avoiding admissions to care homes. They all require significant input in terms of the national shortage of care staff and changes to contractual arrangements to ensure greater flexibility but are viewed positively.

Scheme 2 is more problematic and a complete rethink is required around what alternative scheme could be developed to provide a more responsive fit for purpose service.

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| Non-Applicable Sections: | Impact on Vulnerable Adults and Children and Policy, Financial, Personnel, Legal and Procurement Implications. |
| Background Documents: (Access via Contact Officer) | <ul style="list-style-type: none">• The Care Act 2014 – Section 74 and schedule 3• The Care and Support (Discharge of Hospital Patients) Regulations 2014• NHS England Monthly Delayed Transfer of Care Situation Reports -Definitions and Guidance• NHS Five Year Forward View• Delivering the Forward View: NHS Shared Planning Guidance 2016/17 – 2020/21 |

Use of LBB Winter Resilience Fund (Oct 16 –Mar 17)

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