

**The Executive on 13<sup>th</sup> June 2006**

**Report Title:** Executive Response to the report of the Scrutiny Review of Intermediate Care Services.

**Report of:** Director of Social Services

**Wards(s) affected:** All

**Report for:** Key decision

**1. Purpose**

1.1 To propose the Executive's response to the report of the Scrutiny Review of Intermediate Care Services (attached as Appendix 2).

**2. Introduction by Executive Member**

2.1 Scrutiny has produced a report with helpful recommendations and the Executive Member is pleased to accept many of these.

**3. Recommendations**

3.1 That the Executive agree the proposed response.

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#### **4. Executive Summary**

4.1 The Scrutiny Review of Intermediate care is overall a positive response to the scrutiny of the many services which comprise intermediate care. The full report is attached as Appendix 2. The review makes twelve recommendations which are summarised in Appendix 1.

#### **5 Reasons for any change in policy or for new policy development (if applicable)**

#### **6 Local Government (Access to Information) Act 1985**

#### **7. Background**

- 7.1 Intermediate Care is a key feature of national and local planning to help people to live independently at home. It aims to provide time limited intensive interventions such as home care or physiotherapy to maximise independence, avoid admission to hospital or enable early discharge, or to prevent inappropriate admission into long term care.
- 7.2 Haringey Council along with Haringey TPCT provides a range of services within the borough working alongside colleagues from local general hospitals and, to a lesser extent, Barnet Enfield and Haringey Mental Health Trust as well as a range of initiatives within the community and independent sector.
- 7.3 The range of services available in the borough has developed over a number of years within respective organisations. At present staff and services are only accountable to their employing organisation.
- 7.4 Within Haringey, staff from all agencies have worked closely to ensure that the levels of delayed transfers of care from acute hospitals have been low. Investment in services via two pooled budgets under s31 of the Health Act (1999) has helped maintain good performance in this area.
- 7.5 Although historically good at minimising delayed discharges, services in Haringey have not been very good at admission avoidance. Investment via the pooled budgets in the last year has gone into seeking to realign services to support this, but there is work to be done in this area.

## **8. Description**

8.1 In total the Scrutiny Panel made twelve recommendations (see Appendix 1).

## **9. Consultation**

9.1 The Scrutiny Panel sought the views of a range of stakeholders from within the council, the NHS locally and community groups and service users.

Many of the recommendations made have already been discussed with stakeholders and this consultation will continue as any changes to policy and service delivery are made.

## **10. Summary and Conclusions**

10.1 The Overview and Scrutiny Review involved the examination of the Intermediate Care services provided across Haringey by the council and NHS in collaboration with partners. As can be seen in Appendix 1, many recommendations are straightforward and some already in hand. However, Members will wish to take a view on other recommendations which have resource implications

## **11. Recommendations**

11.1 The Executive is asked to consider and endorse the response to the Overview and Scrutiny Review.

## **12. Comments of the Head of Legal Services**

12.1 This report has no specific legal implications.

## **13. Comments of the Director of Finance**

13.1 The financial implications are as set out in the appendix and whilst some recommendations can be taken forward within existing resources, others have been agreed in principle and are subject to the required resources being made available through respective business planning processes.

## **14. Equality Implications**

14.1 By the nature of the need for intermediate care, most of the users of this service are some of the most vulnerable and excluded residents of the borough. Improving this service will help ensure that people are enabled to have more control over their care and reduce the risks to their loss of independence.

## Scrutiny Review of Intermediate Care Services – Appendix 1

RECOMMENDATION	PROPOSED RESPONSE	Financial Implications	COMMENTARY
1. That a 5 year Strategic Plan be developed for Intermediate Care.	Agreed	None	Work on this has begun with input from all stakeholders. A first draft to be completed by August 2006.
2. That a single point of access to Intermediate Care be developed.	Agreed in principle	None	Current access arrangements for most community based services are via the Intermediate Care Team at Stuart Crescent.
3. That provision be made for an Intermediate Care Co-ordinator, jointly funded and accountable across health and social care for the delivery of an integrated service, ideally with a pooled budget for the whole service.	Agreed	None in 06/07 or 07/08. Following this investment would need to be sought via the LBH & HTPCT business planning processes or realigning of existing budgets. Cost approx. £45k	Funding has been identified for the post from the s31 Pooled Budget funded by Delayed Discharge grant & HTPCT.  Joint accountability and pooling budgets for delivery of IC services across the borough is being explored with HTPCT.
4. That a whole systems approach to joint workforce planning be adopted. Teams should work towards being multi-disciplinary to include therapy, nursing	Agreed	None	This is agreed in principle but can only be fully realised once the strategy for Intermediate Care has been fully developed and agreed. A review of the

and social services staff working within a rehabilitation focus. The management structures should be reviewed to ensure that the service is able to work in more integrated ways.			management structures has been initiated already but was delayed pending this review.  Only once the strategy has been agreed the detailed structures and skill mix needed will be identified and then developed. There may be some delays in implementing the appropriate skill mix if additional resources are needed.
5. That partners work together to ensure the complete implementation of the single assessment process.	Agreed	None	Training to better embed the Single Assessment Process is scheduled. Common tools are in use across disciplines though there are still some “cultural changes” that need to happen for best utilisation of SAP for service user benefit.
6. That the eligibility criteria be reviewed to enable Intermediate Care to become more person centred rather than service driven. In particular consideration should be given to the requirement of people with the more complex needs profiles and also those under 50 years of age who currently are not included within service criteria at all.	Agreed	None	The new strategy will aim to provide Intermediate Care for people including a needs analysis of the younger age group.
7. That consideration be given as to how the Intermediate Care Service can be supported in a more formal way by specialist mental health expertise. This would enable appropriate care packages to be developed for older	Partially Agreed	None for LBH	Planning is under way within the Intermediate Care Steering Group to help ensure that staff working in Intermediate Care have the skills to recognise mental health needs and to work with this user group. This has

<p>people with physical needs who additionally have mental health needs. Further consideration should be given to the plans for developing Broadwater Lodge for people with dementia.</p>			<p>already been highlighted as a training need and a programme to meet this need is being developed.</p> <p>Cost pressures preclude formal specialist mental health input into existing services. Equally HTPCT priorities do not extend to the provision of additional services to Broadwater Lodge for people with dementia.</p>
<p>8. That the possibility of Greentrees being used for the provision of step-down facilities be revisited.</p>	<p>Not agreed</p>	<p>None</p>	<p>The use of and the future of this unit are currently being reviewed by HTPCT. LBH have made clear the view of the council about the options available. None of the options suggest use as a step-down facility. It is recommended that the Executive advises the Overview and Scrutiny Committee of this significant change which will have practice implications for Social Services.</p>
<p>9. That the current charging policy be reviewed to ensure fairness of provision across the service.</p>	<p>Agreed in principle</p>	<p>The financial implications of this are as yet unquantified. This recommendation will not be implemented until agreement to meet any financial shortfall is identified via</p>	<p>Discussions are under way to identify the cost pressures that this will have on LBH. The implementation of this may not be complete until such a time as resources to meet the shortfall are made available.</p>

		LBH or HTPCT business planning processes.	
10. That the strategic partner services undertake a process mapping exercise to identify how Service Users currently access Intermediate Care and then redesign the process to ensure a clear pathway approach.	Agreed	None	This work has already begun within the Intermediate Care Steering Group
11. That the service be rebadged as a generic Intermediate Care Service.	Agreed	None	Once the new strategy has been agreed the rebadging of services will take place.
12. That Intermediate Care Services work towards the provision of a 24 hour, 7 day a week access to Intermediate Care and identify a timescale for achieving this goal.	Agreed in principle	The resources needed for this have not been quantified or identified. This recommendation will not be implemented until LBH and HTPCT have secured resources to provide this service.	The need for this is accepted in principle though the resource implications for LBH and HTPCT will be significant. Once the single point of access has been identified resources to enable services to function 24/7 will be calculated and then appropriate bids for these resources made