Report for: Health and Wellbeing Board: 19 May 2016

Title: Intermediate Care: A Case Study of Integrated Care in

Haringey

Report

authorised by: Dr Jeanelle De Gruchy, Director of Public Health

Lead Officers: Dr Will Maimaris, Consultant in Public Health, Haringey

Council Tim Deeprose, Joint Integration Programme Manager,

Haringey Council and and Haringey CCG

Rachel Lissauer, Assistant Director of Commissioning

**Haringey CCG** 

Ward(s) affected: All

Report for Key/

Non Key Decision: Not applicable- report for discussion

## 1. Describe the issue under consideration

1.1 This report outlines the importance of intermediate care in achieving Haringey's vision for integrated person-centred services set out in Haringey's Better Care Fund plans. The report describes the findings of a local review of intermediate care provision in Haringey, looking at progress in this area as a case study of local efforts to provide person-centred integrated care and improve value for money of service provision.

## 2. Cabinet Member Introduction

- 2.1 Improving access to integrated health and social care services that support independence and prevent admissions to hospital in people with long-term conditions is an important aim of Haringey's Health and Wellbeing Strategy.
- 2.2 Developing an integrated intermediate care pathway, which builds on existing good quality service provision, provides us with an opportunity to keep people healthy in the community for longer and prevent hospital and care home admissions.

#### 3. Recommendations

3.1 The Board is asked to support the approach being taken by Haringey Council and Haringey CCG to develop and scale up an integrated intermediate care pathway in Haringey.



- 3.2 Board members are asked to consider how their organisations can contribute to the development of an integrated intermediate care pathway in Haringey.
  - 4. Reasons for decision

Not applicable.

5. Alternative options considered

Not applicable.

- 6. Background information
- 6.1 Like many other localities, Haringey is faced with an ageing population, most of whom have one or more long-term conditions. This is placing an increased demand on emergency hospital care and on care home placements.
- 6.2 Integrated, person-centred care is seen as one way of improving the quality of care and reducing demand on acute services in older people with long-term conditions. The Better Care Fund in Haringey has been the vehicle for providing such integrated care in Haringey. Haringey's Better Care Fund plans outline how person-centred care will be achieved by a reorientation of health and social care provision from reactive and fragmented care (mainly provided in acute and institutional settings) to proactive and integrated care (mainly provided in people's homes and by primary, community and social care).
- 6.3 Intermediate care provision is an important area of focus for Haringey's Better Care Fund plans. Intermediate care services are provided to people (usually older people), after leaving hospital or when they are at risk of being sent to hospital or having an escalation of care need. Intermediate care is always focused on rehabilitation and re-ablement and getting people as independent as possible. Intermediate care includes rapid response services, step-down and step up rehabilitation beds and re-ablement.
- 6.3 There is good evidence that intermediate care services can improve service user experience and independence as well as saving money by preventing emergency hospital admissions and care home admissions and reducing delayed discharges from hospital.
- 6.4 A review of local intermediate care services found that Haringey has some good local intermediate care services in place, including Rapid Response, Home from Hospital and Re-ablement. However, these services are all currently delivered at small scale, are often not provided as part of an integrated pathway and are usually only accessed once someone has already attended hospital.



- 6.5. Looking at best practice in other parts of London and beyond, there are significant opportunities to expand and improve our intermediate care services in Haringey.
- 6.6 As a result of the review of local intermediate care provision a number of recommendations are being taken forward to improve the local intermediate care offer. These include:
  - Increasing the capacity and scope of our Rapid Response service
  - Commissioning dedicated rehabilitation and re-ablement beds for stepdown from hospital and step-up from the community
  - Increasing re-ablement capacity
  - Bringing together existing services into an integrated intermediate care pathway with clear links to the hospital discharge process
- 6.7 This remains an incremental rather than transformational approach to service improvement, particularly when compared to other examples across the country.
  - 7. Contribution to strategic outcomes

Priority 2 of the Corporate Plan and Ambition 5 and 6 of the Health and Wellbeing Strategy. Better Care Fund outcomes (reducing non-elective hospital admissions, reducing permanent residential home admissions, reducing delayed transfers of care)

8. Statutory Officers comments (Chief Finance Officer (including procurement), Assistant Director of Corporate Governance, Equalities)

### **Finance and Procurement**

8.1 As set out above the development of an integrated intermediate care service is expected to produce improved outcomes and reductions in expenditure for both the NHS and the social care system; this will support the delivery of the Council's MTFS savings.

Much of the funding for an improved service can be found by using existing budgets such as the residential and nursing care budgets more effectively. A small amount of additional investment may be required in the short term and some provision has been made for this in the Adult's budget.

The outcomes of the service improvements and the new pathway will need to be carefully monitored as it is very important to ensure that the expected savings are delivered.

Legal



8.2 Section 2 of the Care Act 2014 ('preventing needs for care and support') requires the local authority to "provide or arrange for the provision of services," facilities or resources, or take other steps, which it considers will" contribute towards preventing, delaying or reducing individuals' needs for care and support, or the needs for support for carers. In performing this duty, the authority must have regard to, amongst others, the importance of identifying services, facilities and resources already available in its area and the extent to which the authority could involve or make use of them in performing that duty. The Care and Support Statutory Guidance at paragraph 2.1 provides that "It is critical to the vision in the Care Act that the care and support system works to actively promote wellbeing and independence, and does not just wait to respond when people reach a crisis point. To meet the challenges of the future. it will be vital that the care and support system intervenes early to support individuals, helps people retain or regain their skills and confidence, and prevents need or delays deterioration wherever possible." The Guidance emphasise the importance of preventative services such as re-ablement and intermediate care across health and social care - "To prevent needs emerging across health and care, integrated services should draw on a mixture of qualified health, care and support staff, working collaboratively to deliver prevention. This could involve, for instance, reaching beyond traditional health or care interventions to help people develop or regain the skills of independent living and active involvement in their local community" (paragraphs 2.12-2.15).

# **Equality**

- 8.3 The Council has a public sector equality duty under the Equalities Act (2010) to have due regard to:
  - Tackle discrimination and victimisation of persons that share the characteristics protected under S4 of the Act. These include the characteristics of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (formerly gender) and sexual orientation;
  - advance equality of opportunity between people who share those protected characteristics and people who do not;
  - Foster good relations between people who share those characteristics and people who do not.
  - In the design of new service pathways we will involve service users and explore and take into account any equalities issues that are raised
  - Whenever significant service changes are made, specific equalities impact analyses (EQIA) will be carried out.
  - We intend that plans to improve intermediate care will benefit all our communities, especially older people who are most likely to use intermediate care services.
  - 9. Use of Appendices



Appendix I: Intermediate Care a case study of integrated care in Haringey

10.Local Government (Access to Information) Act 1985

Not applicable



