
Meeting: Central Bedfordshire Council Overview & Scrutiny Committee
Date: 10 June 2013
Subject: Central Bedfordshire Health & Social Care Review
Report of: Dr Diane Gray, Director of Strategy & System Redesign, Bedfordshire Clinical Commissioning Group
Julie Ogley, Director of Social Care, Health & Housing, Central Bedfordshire Council
Summary: The attached paper summarises the findings of a joint review between Bedfordshire CCG and Central Bedfordshire Council into the provision in the community of healthcare and social care resources

Advising Officer: Dr Diane Gray, Director of Strategy & System Redesign, Bedfordshire Clinical Commissioning Group
Contact Officer: Dr Diane Gray, Director of Strategy & System Redesign, Bedfordshire Clinical Commissioning Group
Public/Exempt: Public
Wards Affected: All
Function of: Council

CORPORATE IMPLICATIONS

Council Priorities:

- Supporting and caring for an ageing population
- Promoting healthier lifestyles

Financial:

1. This report sets out the model for using existing resources and the ambition to investigate joint commissioning between NHS and local authority as a mechanism for improving efficiencies

Legal:

4. Not Applicable
- 5.

Risk Management:

6. Not Applicable
- 7.

Staffing (including Trades Unions):

8. Not Applicable.

9.

Equalities/Human Rights:

10. The implementation of the findings of this review will involve appropriate and due regard for the NHS Equality Delivery System.

11.

Community Safety:

16. Not Applicable.

17.

Sustainability:

18. Not Applicable.

Procurement:

19. Not applicable.

RECOMMENDATION(S):

The Committee is asked to:

1. Endorse the model of care set out within the paper (section 4)
2. Endorse the three priorities for joint (NHS and Central Bedfordshire Council) development (section 5)

Background

20. Prior to the recent reforms in the NHS (and preceding the introduction of Health & Wellbeing Boards), leaders in healthcare and social care organisations from across Central Bedfordshire, Luton and Bedford Borough met regularly at the Health & Social Care Board. One of the priorities in early 2012 for that Board was the review of community beds across the three local authority areas.
21. The “community beds review” was subsequently undertaken by staff from NHS Bedfordshire (now NHS Bedfordshire Clinical Commissioning Group), Central Bedfordshire Council and Bedford Borough Council. (In the end, Luton Borough Council did not participate.) The result of this review was the production of two review reports, each one specific to a local authority area and tailored to the local nuances of each geographic patch.
22. The changes in NHS infrastructure led to the demise of the Health & Wellbeing Board during 2012. Therefore, although the review work was undertaken and draft reports produced by early 2013, the body that had commissioned the work and which would have signed it off had ceased to exist. As a result, there were delays in finalising the reports and understanding the governance routes for the subsequent agreement and dissemination of the reports.

23. The development of CBC's Health & Wellbeing Board and its associated joint commissioning group now provides a structure that can agree and oversee the joint implementation of the "community beds review" recommendations.
24. Whilst undertaking the review, it became clear early on that a narrow focus solely on numbers of community-based beds in institutions would be counter-productive and miss the benefits achieved by other types of local care. Therefore, the scope of the review was expanded to include other health and social care services that provide care for people within the communities in which they live. The resulting report has been renamed the Central Bedfordshire Health and Social Care Review.

Key findings in the review

25. Demographics: Doing nothing is not an option. The rate of increase in numbers of older people in the local population and the concomitant increase in frailty require both the NHS and social care to react now in order to be able to deliver appropriate care to those that need it in the years to come.
26. Drivers: Quality, value for money and choice for people using services are key tenants for both public services. These are therefore at the heart of the proposed service improvements.
27. Underlying themes: Prevention and enablement run through the proposed model, that is, the concept that people should live at home for as long as possible, not in a home.
28. Current provision: There are a range of community-based health and social care services, spanning general practice through to first response social care, rapid intervention teams, and specialist step-up/step-down beds. NHS Bedfordshire CCG routinely commissions 57 community beds across Central Bedfordshire.
29. Future model of care: There is no agreed formula for determining the "correct" number of community beds and, indeed, the national direction is towards fewer beds and more care delivered in people's own homes. Future care must focus on identifying those in need early and make use of local support networks (such as village care schemes), whilst ensuring access to specialist teams as necessary and an urgent care pathway that provides acute treatment when appropriate but without holding people in acute hospitals for longer than necessary.
30. Implementing this future model will require a number of key service improvement areas, including development of more ExtraCare housing, increasing availability of step-up/step-down services, assessment beds in care homes, provision of urgent home care and falls response, and an urgent care pathway that sees more appropriate use of acute hospital facilities.

31. Priorities for joint development between NHS Bedfordshire CCG and Central Bedfordshire Council:
 - (a) Development of community bed-based services in north of Central Bedfordshire, starting by amending the admission criteria for Biggleswade Hospital to reflect the need to cater for people in sub-acute stages of recovery from ill-health and not simply for rehabilitation.
The report concluded that there is no requirement to increase the stock of community bed-based services in the south of Central Bedfordshire.
 - (b) Development of urgent care pathways
 - (c) Single approach to commissioning care home services

32. Further details on all these points are provided in the attached paper.