
Meeting: Social Care Health and Housing Overview & Scrutiny Committee

Date: 7 April 2014

Subject: Planned Changes to the Provision of Mental Health and Community Services

Report of: Richard Winter, Executive Director for Integrated Services, SEPT

Summary:

This report provides information on a change SEPT wishes to implement to meet cost improvement targets arising from financial and inflationary pressures facing the local health and social care economies. SEPT's Trust Board has agreed a number of guiding principles to ensure that frontline services are protected where possible and the quality and safety of our services is not compromised. In preparing plans SEPT has also consulted with partner organisations and stakeholders on all savings options. SEPT has met over half of the health cost savings through reorganising support functions, improving procurement and contract management, income generation and estate and management changes. The Trust is continuing to work with health Commissioners over the future changes required over the life of the current SEPT health contracts and will be seeking to secure financial balance in relation to these contracts over the coming months.

The Social Care Health and Housing Overview and Scrutiny Committee (SCHH OSC) will be aware that South Essex Partnership University NHS Foundation NHS Trust (SEPT) provides an integrated mental health service across Bedfordshire and Luton and community services across Bedfordshire. In addition, the Trust has a Section 75 agreement in place for adult social care services with Central Bedfordshire Council.

Advising Officer: Richard Winter, Executive Director Integrated Services, SEPT

Public/Exempt: Public

Wards Affected: All

Function of: Council

CORPORATE IMPLICATIONS

Council Priorities:

The resources available in the form of government funding to both the Health and Social Care sector are decreasing and there is an expectation that services will be provided in the most cost-effective and efficient manner. Through these proposals SEPT is seeking to minimise the impact on local services through integration and avoiding duplication in delivery or financial payments. It is intended that the proposals in this document will provide a balanced plan for existing health contracts.

Financial:

The proposals align with the current health strategies and direction for the CCGs. SEPT must also demonstrate to the independent regulator, Monitor that the Trust is sustainable in the short, medium and long term as part of the Annual Planning process within the NHS and achieving cost improvement targets are a key part of this process. The Trust's Annual plan for 2013/14 included these schemes for Bedfordshire. The plan is available on the Trust's website.

Legal:

The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 require NHS bodies to consult with the relevant Local Authorities where there is a variation or development in health services in the area.

Risk Management:

SEPT and partner agencies have carefully considered the risks relating to the service-changes proposed in this paper and evaluated these to be low. The Trust is continuing discussions with the Clinical Commissioning Group in relation to cost improvement plans and balancing the recurrent financial position for the contract.

Staffing (including Trade Unions):

Not Applicable.

Equalities/Human Rights:

The Trust has also completed Equality Impact Assessment in line with Trust policies and the Equality Delivery System for the NHS. The Trust also undertakes a Quality Impact assessment on all potential savings schemes. These assessments have concluded that the proposal is robust.

All areas will be quality assured whilst any changes are implemented and measured through patient and carer experience feedback, complaints and compliments and audits where appropriate. SEPT is performance managed by commissioners through their contract and via the quality schedule monthly meetings (Equality & Diversity), prior to the publication of the report.

Public Health:

No implications have been identified by the authors of this report.

Community Safety:

Not Applicable.

Sustainability:

Not Applicable.

Procurement:

Not applicable.

RECOMMENDATION(S):

The Committee is asked to:

Note the proposal to adjust the current provision of Continence Services and assure the committee that delivering these services differently will not incur further costs to commissioners or providers.

Proposal

11. To adjust the current provision of Continence Services by changing the supply of products to new patients and removing the provision of pads to Nursing homes (Health funded –value of saving £150k on a current spend of circa £1m).

Reasons for Proposal

12. The community continence service provides specialist assessment, treatment and provision of products for patients with incontinence. The continence service has a significant recurrent cost pressure as a result of increased demand in their services resulting in a cost that is no longer sustainable. SEPT has introduced a number of controls and is re-tendering the supply of continence products, including pull up's, continence pads with fixation pants and 'all in one' continence pads. However, these steps are insufficient to meet substantial demand and the Trust wishes to adjust the formulary of products for new patients coming into the service and extend the current delivery cycle for direct supplies to patients from 8 to 12 week delivery cycles. In addition SEPT has agreed with commissioners to bring the service into line with other local health providers by ceasing provision to nursing homes as the funding for continence supplies is included within the Nursing Homes contracts. A contract variation has been approved by the Bedfordshire Clinical Commissioning Group. It is worth noting that no other community service provides products to nursing homes this has been benchmarked and can be fully evidenced. (See table in appendix A).
13. The provision to nursing homes will affect 6 nursing homes in Luton (262 patients) and 21 in Bedfordshire (505 patients). There are 11 nursing homes in Central Bedfordshire. This means that nursing homes will no longer receive their products from SEPT but they will purchase their continence products directly from either the current continence products supplier or from another supplier of their choice, purchased directly by the nursing home. The provision of continence products can continue directly from the current continence product supplier (Attends) as SEPT will arrange an opportunity for each home to meet with Attends prior to the cease of the service from SEPT to ensure continuity of product supply for patients, this will also be an opportunity

for staff and public engagement. Both Local Authorities have been informed and there will be a meeting with nursing home managers to discuss the intentions and then a three month notice period will be served. This is not a service stoppage but a change in continence products supplier.

14. There will be no reduction in services for patients; SEPT continence service will continue to provide specialist advice and training for Nursing home staff and patients. Therefore the patients clinical status will not be compromised in fact nursing homes and therefore, patients, will have an increased choice of continence product and supplier. This will allow local continence service costs to come back in line nationally with an efficiency of approximately £150k per annum which can be utilised in another healthcare area. SEPT has undertaken a quality impact assessment for this intention as part of the agreed Cost Improvement Programme required process. Alongside the required process SEPT have also considered the Department of Health's four tests. - "First, there must be clarity about the clinical evidence base underpinning the proposals. Second, they must have the support of the GP commissioners involved. Third, they must genuinely promote choice for their patients. Fourth, the process must have genuinely engaged the public, patients and local authorities if there is significant change"., which are covered above.

15. **Conclusion & Next Steps**

The following have been consulted in preparing this report:

Management Group

Joint Management Group, Bedford Borough, Central Bedfordshire and Luton Borough Councils.

Relevant Managers

Executive Director for Adult and Community Services , Bedford Borough Council
Executive Director of Adult and Community Services, Central Bedfordshire Council
Chief Operating Officer Bedfordshire Clinical Commissioning Group

Organisation(s)

Bedford Clinical Commissioning Group
Luton Clinical Commissioning Group
Central Bedfordshire Borough Council

No adverse comments were received in relation to the proposals in this paper.

Appendix A

Continence Pad Provision in other areas, October 2013

Area	Supply pads to Nursing Homes	Comment
Hertfordshire	No	
Oxfordshire	No	
Hampshire	No	
Berkshire	No	
Essex	No	Separate budget and nursing homes manage their own supply/costs
Surrey	Yes but restricted	Only started in 2011 and the money that the then PCT spent on pads (only to funded nursing care patients), was given to the CHS to manage. Nursing homes are expected to follow stringent process (including regular staff training) to assess for pads, and pad provision is dependent on homes compliance. Very limited formulary, and only for funded nursing home patients.
Enfield	No	
Cambridgeshire	Very limited	Restricted number of homes are provided to but mostly homes do their own assessments and claim directly from CCG Very restricted formulary and provide no pull up pads

Funding for continence products for CHC funded patients is included as part of the funded nursing care payments. The local health service is effectively paying twice for the provision of continence products to patients in nursing homes. Patients, carers and nursing home staff will continue to access the Continence Service for specialist advice, training and support.