

Agenda item 10

DERBYSHIRE HEALTH AND WELLBEING BOARD

12 July 2018

**Report of Chief Accountable Officer
Derbyshire Clinical Commissioning Groups**

UPDATE ON BETTER CARE CLOSER TO HOME IMPLEMENTATION

1. Purpose of the report

To provide the Health and Wellbeing Board with an update on implementation of the transformation change programme 'Better Care Closer to Home'.

2. Information and analysis

Following a prolonged planning and consultation period the two Clinical Commissioning Groups (CCGs) responsible for commissioning health care for the population of north Derbyshire accepted a set of proposed changes to the configuration of services in July 2017. This paper updates the Board on progress to date.

Community Rehabilitation

These services provide care for people just out of acute hospital care or to prevent admission. The aim of the proposals was to ensure care is in the most appropriate setting. The following has been achieved:

- More beds in care settings with in-reach rehabilitation and health support. The plan is to move from 25 to 44 beds and with a distribution of beds better linked to population. So far an additional 12 beds have been commissioned, all in DCC homes and feedback is positive. Joint planning has been undertaken regarding the location of the remaining beds and also the actions needed to improve the effectiveness and consistent ways of working through all of the beds.
- In line with the expansion of the community bed provision two wards have closed; at Bolsover and Newholme (Bakewell) Hospitals with the transition of all clinical staff into other wards or new roles.
- There has been some expansion of the integrated community teams to support people who are able to be discharged home straight from hospital: further increases are planned when the remaining bed reductions occur.
- No significant changes are scheduled for the next 6 months

Older People's Mental Health

These service changes affect older people with dementia who were receiving care in a community hospital or day hospital in the absence of alternative services able to meet their needs. The following changes have been undertaken:

- Two Dementia Rapid Response Teams have been put in place servicing the whole of north Derbyshire (one based High Peak and Dales and one for Chesterfield and NE Derbyshire). The teams are not fully established but have already had very positive feedback from patients, carers and the professionals they work closely with, including care homes.
- There was a small cohort of patients who had been receiving respite care on one of the wards (which was not in line with usual NHS funded provision). This was raised during consultation and alternative provision has been put in place for all of the patients following joint work between commissioners, DCC and the ward.
- Two wards (one Newholme, one Cavendish, Buxton) have closed reducing the number of beds to the planned level and there are no further bed reductions scheduled under implementation of this programme.
- Since the consultation there has been an expansion of the outreach day services with sessions now run in 12 locations. Plans for changes in the service model have been agreed and implementation begun.

Sites

The approved business case resulted in the ultimate closure of both Bolsover and Newholme hospitals. As stated above the wards on these sites are now closed. At Bolsover there were a small number of services delivered on the site but where there were no model changes under the consultation. They are being relocated locally with the planned closure of the site during the summer.

There are significant activity levels on Newholme site and so replacement locations for the services (not covered by the consultation) will take more significant planning and potential capital development. Services are planned to remain on the site until an alternative provision is in place.

Summary

The programme began rapidly, driven in large part by the operational pressures that had built up during the period of consultation. This was challenging but soon stabilised into a co-ordinated implementation which has seen the majority of the service changes now in place to be further built upon and consolidated.

3. Links to the Health and Wellbeing Strategy

The programme of changes described above shift care and resources to support care and rehabilitation in the most appropriate setting and prioritise

early intervention and reablement for older people with physical or mental health needs.

RECOMMENDATIONS

The Health and Wellbeing Board is asked to:

1. Note the update.

Dr Chris Clayton
Chief Accountable Officer
Derbyshire Clinical Commissioning Groups