

# ADULTS AND PUBLIC HEALTH BOARD 15<sup>th</sup> September 2014

ITEM 8

Report of the Strategic Director of Adults, Health and Housing

#### **SUMMARY**

- 1.1 In December 2013 Sir Bruce Keogh, Medical Director of the NHS, delivered a review entitled "NHS Services, Seven Days a Week". This was in response to research that clearly showed the service provided by the NHS was not of the same standard at weekends and overnight, leading directly to poorer outcomes, including increased mortality rates, for people who needed healthcare support at those times.
- 1.2 The title and much of the focus of the Keogh report concentrates on NHS services like hospitals, GP practices and community health providers. However there is also a strong onus on Local Authorities, as key partners in the delivery of care and support to people of all ages, to also be able to respond appropriately on a seven day per week basis.
- 1.3 This report sets out the progress that the Council is making in partnership with local NHS organisations to improve access to health and social care on a seven days per week basis. The report focuses on the current position and future plans of the Council in response to the ninth of Keogh's ten standards for the NHS, *Transfer to community, primary and social care*.
- 1.4 The report does not cover seven day working with respect to children and young people aged under 18, as this is not within scope for the Adults and Public Health Board.

## **RECOMMENDATIONS**

- 2.1 To note and support the Council's joint work with local NHS organisations in relation to seven day working.
- 2.2 To agree any further reporting in relation to this partnership work.

#### **REASONS FOR RECOMMENDATIONS**

3.1 The appropriate extension of seven day working will result in larger numbers of Derby citizens being able to live safely for longer in their own homes and will have a considerable impact on health and social care delivery in Derby. However, seven day working is not a panacea for either the NHS or the Council and needs to be seen in the context of wider improvements that can be delivered in partnership, to enable

better outcomes for Derby's citizens within available resources.

#### SUPPORTING INFORMATION

## 4.0 The Keogh Review

- 4.1 The Keogh Review noted significant variation in outcomes for patients admitted to hospitals at the weekend across the NHS in England. This is seen in mortality rates, patient experience, the length of hospital stays and readmission rates. For example, the increased risk of mortality at the weekend could be as high as eleven per cent on a Saturday and sixteen per cent on a Sunday, according to an analysis of over fourteen million hospital admissions in 2009/10.
- 4.2 Causes identified included variable staffing levels in hospitals at the weekend; fewer decisions makers of consultant level and experience; a lack of consistent support services such as diagnostics and a lack of community and primary care services that could prevent some unnecessary admissions and support timely discharge.
- 4.3 The Review sets out ten new clinical standards (see <a href="here">here</a>) that describe the standard of urgent and emergency care all patients should expect seven days a week, each supported by clinical evidence and developed in partnership with the Academy of Medical Royal Colleges. They describe, for example, how quickly people admitted to hospital should be assessed by a consultant, the diagnostic and scientific services that should always be available, and the process for handovers between teams, including between health staff and social care staff.
- 4.4 The Review focuses on implementation by 2016-17. Amongst its recommendations are for NHS and Local Authority organisations to:
  - Publish information on how the clinical standards are being met over seven days in a format that is accessible and comparable. This will enable the public to see what their local healthcare providers are doing and to hold them to account.
  - Use the Better Care Fund, pooled with local government, to drive change.
    Applying to the fund, clinical commissioning groups and local authorities should show they are addressing the need for services at weekends that support patients being discharged from hospital and prevent unnecessary admissions.
- 4.5 Keogh emphasised the partnership aspect when launching this endeavour. "This is not just about hospitals but the whole NHS system. One part cannot function efficiently at the weekend if other parts don't. If people are to experience genuine seven-day treatment and care, we must look beyond emergency services and beyond the services offered to hospital inpatients. We need to make similar improvements across primary, community health and social services, removing barriers between organisations."

- 4.6 The "transfer to community, primary and social care" standard states that "support services, both in the hospital and in primary, community and mental health settings must be available seven days a week to ensure that the next steps in the patient's care pathway can be taken", and lists the following recommendations:
  - Primary and community care services should have access to appropriate senior clinical expertise (e.g. via phone call), and where available, an integrated care record, to mitigate the risk of emergency readmission.
  - Services include pharmacy, physiotherapy, occupational therapy, social services, equipment provision, district nursing and timely and effective communication of on-going care plan from hospital to primary, community and social care.
  - Transport services must be available to transfer, seven days a week.
  - There should be effective relationships between medical and other health and social care teams.

## 5.0 Current health and social care partnership

- 5.1 Local conversations between the Council and the Southern Derbyshire Clinical Commissioning Group in relation to the Better Care Fund (as referred to in 4.4 above) are being revisited owing to the recent risk shift from the Department of Health. Conversations to date have described plans for seven day working as set out below.
- 5.2 "We are committed to supporting seven day discharge facilitated through availability of appropriately scaled seven day health and social care services across the city. The thread for weekend work starts with having an efficient system in operation during the week which ensures maximum discharge activity during the week which reduces pressure at weekends. There will be a seven day presence to facilitate the required discharges at weekends. Routine availability of key services shall be made available on a Saturday and Sunday. A joint approach to this between health and social care systems will be needed to create an efficient and effective model".
- 5.3 Initial discussions about use of the Better Care Fund to extend seven day working have focused on:
  - The co-location of primary care services in A&E department at Derby Hospital during the weekend
  - The extension of the available hours for the Single Point of Access in Derby City to cover weekend working.
  - 6 day working in hospital departments to reduce variation in flow through the hospital at weekends
  - Use of Care Home beds to enable discharge to assess throughout the week
  - Use of Derby City intermediate care beds to facilitate hospital discharge
  - Additional funding for social care to provide more cover at weekends

In addition to ongoing conversations between the Council and NHS commissioners about use of the Better Care Fund, the potential to extend seven day working is also being explored through other partnership work between health and social care. For example, the "Transfer to Assess" workstream as recently reviewed by Scrutiny includes consideration of how weekend working can be optimised so that no older person needs to stay in hospital for longer than is necessary.

## 6.0 Adult social care readiness for seven day working

- 6.1 An outline of key service areas is set out below. Some Council services already adopt seven day working, although this is clearly not optimal.
- The Council's Careline out-of-hours social work service is currently being reviewed. The service supports both vulnerable adults and children, and finds it hard to recruit and retain generic social work qualified staff who are able to work in a pressurised setting in unsocial hours with a focus on crisis resolution. Work with vulnerable adults is mainly taken up by emergency assessments under the Mental Health Act which require specialist training. The service also has a role with respect to resolving sudden homelessness crises that have a social care dimension, as well as emergency breakdowns of care arrangements for vulnerable adults. The existing capacity of the service is almost entirely focused on these emergency safeguarding situations both for children and adults and it would be very difficult to identify consistent and reliable capability to (for example) support hospital discharges or prevent avoidable admissions to care homes.
- 6.3 The Council's Carelink service works on a 24/7 basis supporting vulnerable adults via monitoring community alarms installed in their homes along with a range of telecare equipment. This service has real strategic importance in reducing demand both for the NHS and Local Authority by enabling rapid response to presenting risks and also giving peace of mind to vulnerable adults and their families that help will be there quickly if they need it.
  - At this stage, installation of new equipment is only available in office hours between Monday and Friday. Work is currently taking place on the efficiency of installation to see whether there is potential to be more productive. This may support the development of seven day working over time.
  - There is also a long-standing gap in the Council's ability to provide out-of-hours support with personal care in an emergency. The potential to do this needs to be explored in the context of the Careline review mentioned in 6.2. Although there is clearly no additional funding available at present, an "invest to save" proposal may be viable on the basis that, for some older people, the inability to manage overnight case emergencies (for example incontinence) is a key factor in the decision to move into residential care.
- 6.4 The Council's residential homes for older people obviously operate on a seven day per week basis. Each home has senior staffing capacity to support new admissions up to 8pm each evening, but in view of the considerable staffing constraints at each home there are times when new admissions are difficult to manage, for example during medication rounds and mealtimes. Staffing levels are the key issue for the Council's care homes in terms of being able to pick up new demand on a seven day per week basis. The increasing dependency of older people who are eligible for residential care means that care homes are generally working close to full capacity and have to think very carefully about emergency admissions.

- 6.5 The Council's Home First (Community) and assessment services are able to set up care and support arrangements for customers that operate on a seven day per week basis. However, capacity only currently exists to accept new referrals in Monday to Friday conventional office hours.
- As set out above, the Council's current out-of-hours social care services are primarily deployed to provide emergency safeguarding interventions rather than (in the spirit of the Keogh Report) enable a "smoothing out" of demand across the full seven day week. The key current inhibitions in relation to further extending seven day working are:
  - The constraint on resources. For example, the £655,000 reduction that the Council had to make in social care assessment resources in order to balance its budget for 2014-15 has been effectively manage to maintain good performance, but obviously leaves very little capacity to manage further expansion into night time and weekends.
  - The efficiency and focus of existing health and social care arrangements in "usual" working hours. Maximising the effectiveness of existing services will in itself reduce out of hours demand through avoiding repeat presentations and ensuring needs are dealt with promptly. In the current resource climate it is important to have a clear focus on efficiency and avoid throwing good money after bad by extending any inefficient services ahead of improvements being made.
- 6.7 As set out in section 5, the Council is working with health partners to manage these challenges, and ensure that appropriate extension of seven day working is a key part of the improvement of health and social care services available to Derby's population

#### OTHER OPTIONS CONSIDERED

- 7.1 The proposed approach to seven day working in Derby can best be described as opportunistic, extending the scope of existing services where a clear business case exists and where resources are in place to support this.
  - Doing nothing will not improve health and social care outcomes for Derby's citizens
  - Adopting a blanket, ideological approach to seven day working will fail to address underlying inefficiencies that may exist in existing services, and lead to poor value for money without necessarily improving outcomes for Derby's population.

#### This report has been approved by the following officers:

Legal officer	Robin Constable
Financial officer	Toni Nash
Human Resources officer	Liz Moore
Estates/Property officer	Steve Sprason
Service Director(s)	Phil Holmes, Perveez Sadiq
Other(s)	· ·

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Background papers:	None
List of appendices:	Appendix 1 – Implications

#### **IMPLICATIONS**

## **Financial and Value for Money**

1.1 Principles in relation to value for money are set out in the main report. This report does not in itself commit the Council to further spend. Service extensions with respect to seven day working will be considered on a case by case basis.

## Legal

2.1 No legal implications

#### Personnel

3.1 There are no immediate Personnel implications within this report. Revised terms and conditions of employment, implemented earlier in 2014, introduced all inclusive contracts of employment. Hours of work in any service area will reflect the needs and activities of that service. Service Directors may amend working times/arrangements and roster patterns with a minimum of 30 calendar days' notice to meet the requirements of service delivery and following appropriate consultation. For some staff groups, should seven day working be proposed at any future date, there would need to be appropriate engagement and consultation, and this will be managed on a case by case basis for each staff group.

#### IT

4.1 There are no immediate IT implications within this report. The Council's adoption of new ways of working in terms of its use of modern technologies has already created capacity in relation to mobile working. Additional IT requirements for further extension of seven day working will need to be considered particularly in relation to fault resolution. The current arrangements for Council, network, hardware and software fault resolution is only available during office hours Monday to Friday.

# **Equalities Impact**

5.1 Seven day working will be a positive initiative to older and disabled people as it will improve the quality of life for many and will also help carers.

# **Health and Safety**

6.1 Additional Council staff working 7 days per week will require health and safety management procedures to be in place for the additional working time. These arrangements would be an extension of current arrangements and put in place prior to any change.

# **Environmental Sustainability**

7.1 No environmental implications

## **Property and Asset Management**

8.1 There are no immediate property implications within this report. The Council's adoption of new ways of working in terms of its use of buildings (its own and those run by the NHS) has already created capacity in relation to mobile working.

## **Risk Management**

9.1 Risks in relation to seven day working are being managed by the partnership work streams, and arise from the issues set out section six of the main report.

## Corporate objectives and priorities for change

- 10.1 This work stream meetings the following Council Plan objectives:
  - Better outcomes for our communities
  - Improved value for money for our customers
  - More efficient and effective processes
  - A skilled and motivated workforce