North Somerset Council

REPORT TO THE ADULT SERVICES AND HOUSING POLICY & SCRUTINY PANEL

DATE OF MEETING: 19 SEPTEMBER 2014

SUBJECT OF REPORT: CARE HOME ENABLEMENT UPDATE

TOWN OR PARISH: ALL

OFFICER PRESENTING: DONNA MILES, SERVICE MANAGER

KEY DECISION: NO

RECOMMENDATION

Members are asked to note the current position within the Enablement Pathway service and comment on the proposed priorities of the service into 2014/15 in preparation for implementation of the Care Act 2014 duties.

1. PURPOSE OF THE REPORT

The purpose of this report is to provide an update on the Care Home Enablement Pathway and highlight some of the current priority work areas.

2. BACKGROUND

North Somerset has a high proportion of elderly residents and this population is expected to increase further over the next twenty years. The area also has a disproportionately high number of nursing and residential homes for the population size. This has resulted in a very high number of nursing and residential home placements (one of the highest in the country). In response to this, the Care Home Enablement Pathway was initiated in early 2012; its aim being to reduce the number of permanent placements into residential care, particularly the number of patients going direct from hospital into residential care, in line with national government policy.

The focus of the pathway since its inception has been on changing pathways, processes, values, cultures and ways of working in North Somerset. Now that the pathway is established this focus is shifting towards service improvement and development.

3. ACTIVITY & OUTCOMES

A summary of the activity and outcomes data from the year to date (April – July 2014) is as follows:

Activity

- The number of people accessing enablement so far this year has increased substantially since the same period in 2013 (up by 25%). 119 individuals have accessed the enablement pathway between April and July 2014, an average of 30 a month.

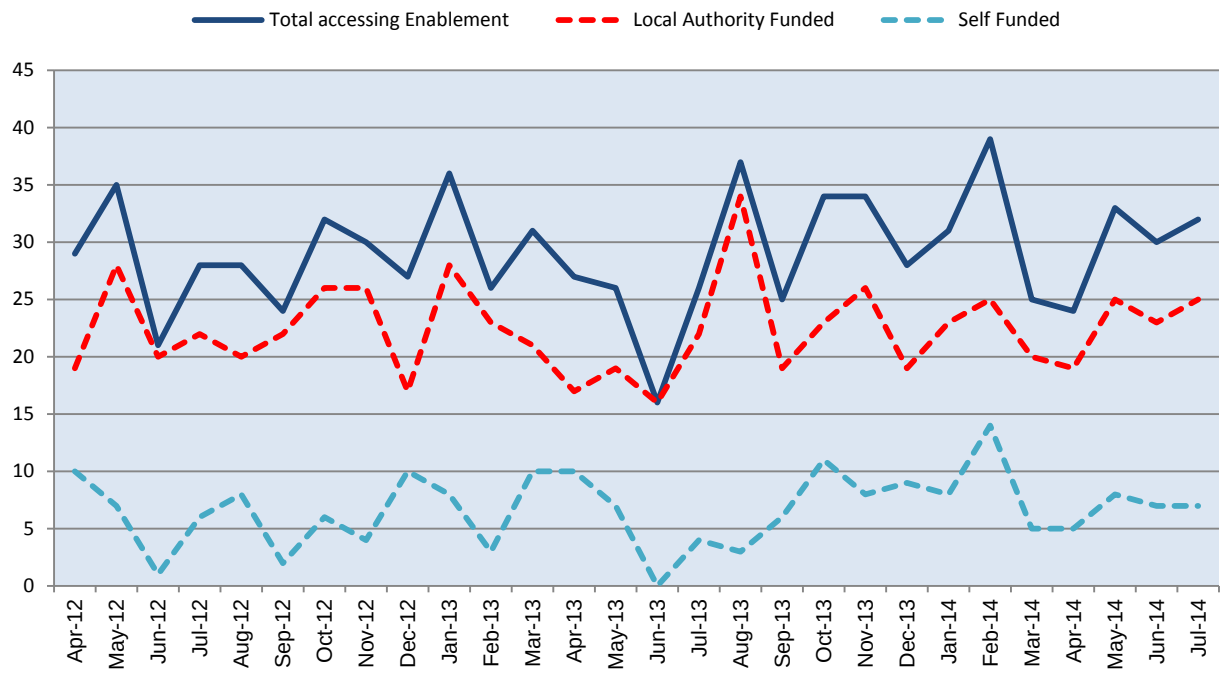
- Over three quarters (77%) of those accessing the pathway so far this year were local authority funded, 23% funded their own care.

- Almost two thirds (63%) have received their enablement in a residential home, 37% in a nursing home. This is a very slight increase in the proportion of people accessing nursing homes than the same period last year (34% in April – July 2013).

- The average age of those accessing enablement is 84.

- The average length of time spent on the enablement pathway so far this year is 29 days (just over four weeks), but this varies considerably depending on the outcome of the service users. For those who return home the average length of time on the pathway was 51 days (over seven weeks). This reflects the additional time and work needed in order to manage the transition from care home to home.

Chart 1: Numbers Accessing Enablement by Month, April 2012 – July 2014



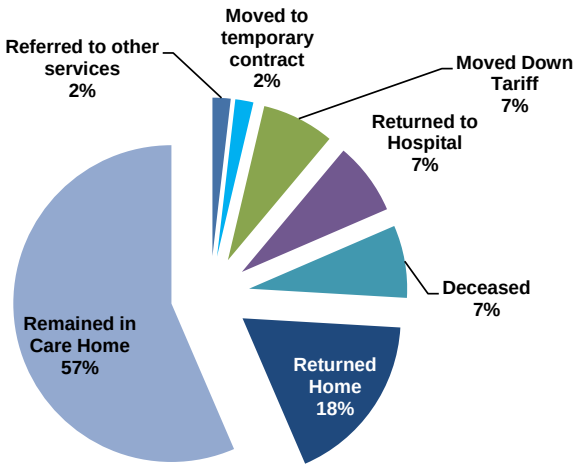
Outcomes

- Of the 108 individuals completing enablement so far this year, one quarter (25%) have had a 'successful' outcome (either moving down the tariff from a nursing to residential home or returning home). This is a lower proportion than the same period last year (28% in April – July 2014). One of the key reasons for this is likely to be the improvements that have been made in ensuring that people are placed correctly from the outset. Work focused on preventing inappropriate admissions to care homes means

that the enablement team are seeing an increasing number of individuals for whom a nursing or residential home is the best option for them, their families and carers.

- Those who fund their own care were more likely to return home or move down the tariff than those who were local authority funded (38% compared to 21%). This could also be as a result of the fact that processes to ensure the correct placement of local authority funded service users are more robust than ever and this cohort are therefore less likely to have the potential to improve any further.

Chart 2: Outcomes from Enablement, April – July 2014



- Just under a fifth (18%) of those completing enablement so far this year were able to return to their own home. (the rate was 17% in 2012/13, 16% in 2013/14). Of those that returned home, 90% went home with a package of care and two individuals went home independent.

- 7% moved down the tariff from a nursing home to a residential home following enablement. The majority of these were local authority funded service users. This is an increase from the same period last year (4.8% in April – July 2013).

- Over half (57%) remained in a Care Home on a steady state contract following the enablement period (see Chart 2 above).

4. CURRENT PRIORITIES

Following the first year review of enablement and the analysis of regular performance data the Enablement Project Group agreed the following key priorities:

- Training and Promotion of the pathway
- Increasing numbers of those who fund their own care accessing the pathway
- Extending the enablement period for those who need it
- Improving successful outcomes
- Developing/ improving the pathway for dementia patients

The focus of development work this year will also be led by the key milestones set out in the local Better Care Fund Delivery Plan which is currently in the process of being agreed.

5. RECENT DEVELOPMENTS

- A new forum for care home workers has been set up which allows staff to share their views on how to develop the pathway and feed into service improvement. Many care

home providers have engaged and it is hoped that more providers will become involved throughout the year.

- The enablement leaflet has been redesigned and updated to reflect adjustments made to the service.

- A Community Psychiatric Nurse (CPN) is now based in the Access and Hospital Support Team, the team who support all service users on the enablement pathway. The CPN supports people with dementia, cognitive problems and mental health issues, who are not known to the Primary Care Liaison Service (PCLS), whether diagnosed or not. This is a group known to fall into a gap between Adult Care and Mental Health services. The role:
  - provides advice and consultation on dementia, cognitive problems and mental health issues for Enablement staff in AHST and for care homes providing Enablement
  - Provides liaison between AHST and PCLS when necessary.

  The intended overall outcome is to ensure a more effective Enablement service for people with dementia, cognitive problems and mental health issues.

- A process is underway to recruit enablement support team members to the Access and Hospital Support Team (AHST) on a permanent basis. This has provided the opportunity to re-focus the job descriptions in order to meet the needs identified throughout the establishment of the enablement pathway.

- In accordance with the new Care Act, a new way of working has been established that links the enablement assessment process more closely with hospital discharge this means that those with complex needs who fund their own care are now benefitting from the same advice, information and opportunities as those who are local authority funded.

AUTHOR

Donna Miles, Finance & Resources Service Manager, People & Communities
Kelly Smith, Joint Service Improvement Manager