

Promoting independence, choice and dignity: a new model of care in Northern Staffordshire

NHS England published the first phase review into Urgent and Emergency care services in November 2013. This report recognises the growing pressure placed on emergency care services and the need to address this urgently.

The demand on urgent care services will continue to grow as people live longer with increasingly complex, often multiple long term conditions. With this growing demand there is an opportunity to shift treatment and advice from hospital based services to home or close to home.

Vision for Stoke-on-Trent and North Staffordshire

The aim is to integrate care services to connect people with the care they need, when they need it. The vision is to develop a 'step down' model of care, which sees the patient's journey from the point of admission to discharge, supporting less transfers of care between multiple organisations which will result in a reduction in delays. Also as part of the wider system reconfiguration, we will develop a 'step up' model, which will see a diagnostic and assessment centre within the community and a continued increase in easily accessible home based services within the community, improving the quality of care for all patients.

Background

NHS Stoke on Trent CCG and North Staffordshire CCG are seeking the views of the public, patients and others about a proposed new model of care.

NHS Stoke-on-Trent and North Staffordshire CCGs are considering how they commission (buy) community based services for patients who are currently admitted to a hospital bed. This is in line with clinical best practice and a growing research base on clinical effectiveness that in essence represents a shift from a focus on beds to a focus on services, tailored to the individual circumstances of each patient, improving choice and control over their daily lives, their personal care and dignity.

Northern Staffordshire's use of community bed based services is very different from similar areas within the country, with many having no or few commissioned community beds. A number of external expert reports have recognised that in North Staffordshire, we have an over-reliance upon beds with a system which regards hospital as the safest place for individuals to recover from an acute event. Clinical evidence does not support this view and suggests that there is a significant relationship between the amount of time spent in hospital and a deterioration in the ability of patients to carry out normal daily activities. One compelling statistic that has informed our thinking is that 10 days in hospital (acute or community) leads to the equivalent of 10 years ageing in the muscles of people over the age of 80 (Gill et al 2008).

The CCGs have been investing in and will continue to invest in community based, patient centred services such as district nurses, intermediate care teams and specialist nursing teams. These services can offer care closer to home and avoiding admission to hospital where it is safe to do so. However, in order to better meet the

needs of patients the CCGs are working collaboratively with Primary Care, the University Hospitals of North Midlands NHS Trust (UHNM) and Staffordshire and Stoke on Trent Partnership NHS Trust (SSOTP) to develop non bed based community services. Following a period of consultation it is anticipated that the CCGs and provider trusts will consider a range of options for the community hospital sites, as it is recognised that community services and facilities are an important part of the health system.

Over the next three months we will be asking for people's views about our proposals and their experiences of hospital discharge and rehabilitation. The attached briefing explains in more detail our proposals and also provides information about how patients and the public can contribute their views on our proposal.

Step Down Pathway

Clinical teams and commissioners undertook a point prevalence study within our community hospitals earlier this year and identified that 47% of the people at that time could have been cared for within their own homes as opposed to a hospital bed. We have also heard from patients and carers that the process of care could be improved. Examples are given where people feel they are not involved in their discharge arrangements and that they stay in beds for a protracted amount of time whilst clinical teams make decisions about them and their future care. As such, CCG commissioners believe that the process should be simplified, ensuring that the patient and carers' experience is improved and individualised care arrangements for the patient results in better clinical outcomes. These are the principles used in developing the step down model, ensuring patients access the care they need first time.

The step down model that the CCGs will commission is also known as Discharge to Assess. From April 2015, Royal Stoke University Hospital (RSUH) will be responsible for the entire patient's journey from the point of acute (hospital) admission to assessment and discharge. This will include supporting recovery at home or if necessary in a bed within the community until the patient has reached their optimum level of recovery. Intensive rehabilitation and reablement will be provided soon after an acute episode, which will reduce recovery time and the support needs of the patient post discharge. Furthermore, It is expected that by remaining with the team who have cared for the patient from the beginning that there will be a reduction in assessments and handovers to other teams, resulting in a seamless journey for the patient and their carers. Commissioners and providers have worked together and identified that Bradwell Hospital is potentially the optimum site to support the discharge to assess pathways for patients requiring bed based intermediate care and assessment.

Step Up Pathway

The Step Up pathway model has been developed in line with Sir Bruce Keogh's vision for transformed urgent and emergency care services, providing highly responsive, effective and personalised services outside of hospital. The model's foundations are deeply rooted within general practice who will be key coordinators of care, identifying the services required to support their patients at home wherever possible. Associated with the Step Up model will be the development of an Urgent

Care Assessment Service, which will offer access to diagnostics and multi-disciplinary assessments, reducing the need for patients to attend the acute hospital.

District nursing teams will work closely with GP practices to provide a proactive package of care for those identified as being frail, complex or vulnerable, liaising with specialist teams to gain the highest level of expertise and support for patients.

Intermediate Care Services will be focused upon providing “intensive support” and rehabilitation, reducing the requirement for an acute admission. The service will be reactive, working closely with reablement teams providing the right level of care the patient requires at the right time.

Bed provision within community hospitals is seen as a necessary part of the model, but not the only or main way that patients will be cared for in the community in the future. As such, commissioners will commission fewer bed based services in 2015/16.

Let us know what you think of this new model of care

NHS Stoke on Trent CCG and North Staffordshire CCG are seeking the views of the public, patients and others about this new model of care. Over the next three months we will be asking for your views and your experiences of hospital discharge and rehabilitation.

We will be organising drop in sessions in February in Stoke, Newcastle under Lyme and Leek where you can learn more about the proposals, and let us know what you think. We will also be holding sessions at each of the community hospitals in the area.

You can find out more about these events by going to www.northstaffscgg.nhs.uk or www.stokeccg.nhs.uk. We will also be announcing the details of the drop in sessions in January via local media.

You can let us know what your experiences and your views are by completing our online survey here: <https://www.surveymonkey.com/s/QTG7Q95>

You can contact us on telephone number: 01782 298192 to request a paper copy of the questionnaire, and post it back to us free of charge, or you can tell us your views over the phone.

You can also email us your views by emailing: anewmodelofcare@nhs.net

If you have any questions you can contact us via anewmodelofcare@nhs.net and by phoning us on 01782 298192 .