

# LONDON BOROUGH OF BRENT

**Executive - 23 May 2005**

## Report from the Director of Policy and Regeneration

For action

Wards affected:  
All

### Report Title: Intermediate Care in Brent

Forward Plan Ref: PRU - 04/05 17

#### 1.0 Summary

- 1.1 This report provides officer comments and information on the legal, financial and diversity implications of the Scrutiny Task Group's report entitled 'Intermediate Care in Brent'.
- 1.2 The service area accept the task group's recommendations and are engaged in implementation.

#### 2.0 Recommendation to the Executive

- 2.1 Note the recommendations made in this review, thank the task group for their work, and the service area for implementing the recommendations.

#### 3.0 Key Points from the Task Group

- 3.1 Population predictions suggest that in the next 20 years Brent will see a significant increase in the 45 – 64 age group combined with an increase of all age groups over 65 years old. It is predicted that the ethnic composition of the older people population will change and this will have a significant impact on the services required.
- 3.2 It is widely agreed that people should not remain in hospital for longer than is necessary due to the risk of infections, a high demand for beds,

and the hospital environment not being an ideal place to deliver rehabilitation and independent living. Intermediate care is one component of a range of services designed to address these problems by facilitating early discharge from and preventing admission to hospital.

- 3.3 Services have made a significant contribution to improving the discharge experiences of older people and simultaneously to the effective use of inpatient resources. However, these services operate separately from each other and it is felt that this lack of coordination limits their effectiveness and the potential positive impact they might have on the well-being of older people.
- 3.4 The service components making up intermediate care in Brent include:
- Care Co-ordination Service – to provide the delivery of person-centred, co-ordinated community based services
  - Collaborative Care Team - to deal with ‘revolving door patients’ promoting discharge from hospital as soon as the patient is medically stable but ensuring they receive appropriate support at home
  - Intermediate Care Team – to provide older people with a range of personal care services at home
  - Housing Services – to provide various programs offering assistance on issues pertaining to housing and living arrangements
  - Other professionals – GPs and other service providers play an instrumental part in helping patients while providers of domiciliary care allow patients to lead a more independent lifestyle
  - Day Care – two council run day care centres provide a reduction in isolation and general support for older people’s well being [a highly valued service]
  - Carers – a critical component in the provision of prevention, rehabilitation, and intermediate care services. Providing adequate support to carers is a priority for the council and a number of arrangements have been activated to do so.
- 3.5 It is apparent that more generic services such as GP practises will provide a more effective contribution to the provision of intermediate care services. There also appears to be opportunities to make more services available via day centres.

#### **4.0 Recommendations from the Task Group**

- 4.1 The potential for greater co-ordination of the delivery of domiciliary services to older people should be investigated, including their delivery from day centres and similar council, health or voluntary sector premises.
- 4.2 Consultation and communication on the development of the BECAD should continue to ensure that this unique and innovative model is able to deliver excellent services for Brent’s older population.

- 4.3 Within the context of the development of BECAD the allocation of sufficient resources to enable effective domiciliary support for older people must be guaranteed.
- 4.4 In light of the changing profile of Brent's older population, demographic information should be monitored continuously by those responsible for service planning for older people to ensure that services are able to accommodate the range of needs of an increasingly diverse population.
- 4.5 The high profile afforded to carers' representatives should be maintained via their involvement in such bodies as the Older People's Local Improvement Team. The Local Improvement Team should receive and respond to monitoring information gathered by carers' representatives to ensure that, as far as possible, new needs are identified and services are designed to support these needs.
- 4.6 Whilst the publication of the 'signpost booklet' for older peoples services is welcomed, it is recommended that the provision of information from a single source continues, and that funding is identified to ensure that this booklet and any other medium for providing information is regularly updated.

## **5.0 Service Department's Response**

### **5.1 Service response:**

Social Services welcomes the report of the task group and the contribution this will make to the improvement of Older people's services within Brent. Indeed this work was recognised by the Joint Inspection of Older People's services as evidence of effective scrutiny arrangements within Brent.

### **5.2 What has already been actioned:**

Social Services and partners within health have continued to implement some areas within the report including:

- Continuing Consultation and communication on the development of BECAD
- Continuing the high profile afforded to carers' by including them within the Older People's Local Improvement Team
- Supporting the annual publication of the 'signpost booklet' for older people's services subject to the resources identified at section 6.

- 5.3 The potential for greater co-ordination of the delivery of domiciliary services to older people will be explored as part of the implementation of the Joint Commissioning Strategy and Intermediate care strategy
- 5.4 The Joint Commissioning Strategy and Intermediate Care Strategy were recently finalised and these take into account demographic information to ensure services accommodate the range of needs within our diverse community. Social Services regularly and consistently monitor the take up of services by black and minority ethnic groups. The Joint Inspection of Older People's services found not all health agencies monitor the take up of acute and community health services by older people and carers from black and minority ethnic communities. The social service's department's new client database, Framework-i, will enable even better use to be made of monitoring information in planning and delivering services.

## **6.0 Financial Implications**

- 6.1 *Finance Response:* Recommendation 4.1 is that greater coordination of the delivery of domiciliary care services should be investigated including delivery from day centres and similar council, health or voluntary sector premises. It is not clear from the report precisely what greater coordination would involve. Should it require one staffed point per building it would cost approximately £60,000 per annum including staffing cost, building services, rent, holiday cover and so on. If more than one staff member or more complex services were to be delivered it is likely that costs will be higher.

*Service Response:* It is not clear whether this additional cost can be justified in terms of the level of service improvement achieved but this will be considered as part of the Social Services Service Planning process.

- 6.2 *Finance Response:* Recommendation 4.3 does not identify what level of activity would enable the effective development of BECAD and hence it is not possible to identify likely costs. From the recommendation it is not clear whether this cost would fall on the health service or Brent Council or be shared.

*Service Response:* These issues have been the subject of joint commissioning activity with Social Services and the PCT and where necessary will be the subject of further reports to the executive.

- 6.3 *Finance Response:* Recommendation 4.6; the costs of the annual production and distribution of a booklet aimed at all people over 60 is estimated to cost £60,000 pa.

*Service Response:* This proposal will be considered as part of the budget and service planning process.

## **7.0 Legal Implications**

7.1 There are no specific legal comments at this stage.

## **8.0 Diversity Implications**

8.1 Recommendations from task groups are incorporated within service department's delivery or development plans and as such will be subject to the equalities impact assessments carried out by services as part of their work program. In addition, the annual review of Overview & Scrutiny activities includes an equalities impact assessment.

8.2 This report hopes to address equalities issues to help make services fairer and more easily accessible to all.

## **9.0 Staffing/Accommodation Implications**

9.1 There are no specific staffing or accommodation issues to be considered in this report.

## **Background Papers**

Report of the Scrutiny Task Group on 'Intermediate Care in Brent'

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