Appendix 1

Intermediate Care in Tameside & Glossop

The CCG are leading a review of Intermediate Care services in Tameside & Glossop and are seeking advice from patient and public representatives.

The work done so far has been informed to a significant degree by the engagement activities led by our 3rd sector through Action Together and Glossop Volunteer Centre. Comments made through the engagement work to support Care Together have been used to develop the current Strategy which informs the model we commission from Tameside & Glossop Integrated Care Foundation Trust, and the developments which have taken place over the past 18 months. The reports from the sessions have been analysed and any information which relates to intermediate care has been taken and used in the development of the full strategy presented to the CCG/Single Commission committees.

We are seeking further comments on our plans for Intermediate Care.

What is Intermediate Care?

The definition of Intermediate Care included in the National Audit of Intermediate Care 2017 (developed with the assistance of the Plain English Campaign) is as follows.

What is intermediate care?

Intermediate care services are provided to patients, usually older people, after leaving hospital or when they are at risk of being sent to hospital. The services offer a link between hospitals and where people normally live, and between different areas of the health and social care system –community services, hospitals, GPs and social care.

What are the aims of intermediate care?

There are three main aims of intermediate care and they are to:

- Help people avoid going into hospital unnecessarily;
- Help people be as independent as possible after a stay in hospital; and
- Prevent people from having to move into a residential home until they really need to.

Where is intermediate care delivered?

Intermediate care services can be provided to people in different places, for example, in a community hospital, residential home or in people's own homes.

How is intermediate care delivered?

A variety of different professionals can deliver this type of specialised care, from nurses and therapists to social workers. The person or team providing the care plan will depend on the individual's needs at that time.

Intermediate care services are currently delivered to the population of Tameside & Glossop CCG by the Integrated Care Foundation Trust as community, hospital and bed-based intermediate care services (the latter at Darnton House and Shire Hill), and by Tameside Metropolitan Borough and Derbyshire County Councils.

Question:

The section below is a summary of the model we intend to commission / deliver in Tameside and Glossop. We would appreciate your comments on whether this is the right model, and any additional suggestions you may have.

Model of Intermediate Care

Intermediate care services provide a crucial role in helping people to avoid going into hospital unnecessarily, helping people to be as independent as possible after a stay in hospital, and preventing people from having to move into a residential or care home until they really need to.

The overall aim of the intermediate care services is to support the rehabilitation and recuperation of patients maximising the patients' ability to function, to enable them to continue living at home in all but most challenging cases.

This should include home-based intermediate tier services, offering intensive packages of care to people in their own homes (including residential and nursing homes) provided by an integrated team providing both health and social care input based on individual need. The model should also include community intermediate care beds where it is deemed that service users, although medically fit, have a higher level of need and require a period of 24-hour care whilst undergoing intensive short term rehabilitation packages.

The delivery model for intermediate care, including the assessment processes, must have the ability to care for clients with all levels of dementia, in an appropriate setting.

The further development of a model for Tameside & Glossop will take account of the outputs from previous audits and reviews, and the learning from the developments which have taken place during 2016-17.

Question:

The section below is a summary of the outcomes we want to achieve from our Intermediate Care model. We would appreciate your comments on whether these are the right outcomes, and any additional suggestions you may have.

Proposed Outcomes

The further development of this Intermediate Care strategy will include the proposal and agreement of a set of system-wide outcome measures to assess the impact on:

- Maximising independence
- Preventing unnecessary hospital admissions
- Preventing unnecessary admissions to long term residential care
- Following hospital admissions, optimising discharges to usual place of residence