Ashton, Leigh and Wigan Primary Care
Trust & Wigan Council

Review of Intermediate Care

Phase 1: Diagnostic

17th July 2006
1 Background

This proposal emerges from discussions between Geoff Lake (Whole Systems Partnership), Sally Forshaw (ALW PCT) and Louise Sutton (Wigan Council). It outlines a ‘Stage 1: Diagnostic’ approach to a review of Intermediate Care to ensure opportunity for:

- Inclusive engagement of a wide range of stakeholders in the expression of views;
- Taking into account recent work undertaken by the PCT on unscheduled care and continuing NHS healthcare and by Wigan Council on FACS as well as by the developments of a long-term conditions model of active case management. All of these and other policy influences will impact on the diagnostic;
- A ‘local’ analysis of strengths, weaknesses and opportunities in respect of intermediate care using a ‘diagonal slice’ approach (across organisations and levels of responsibility) to both evaluation and prioritisation;
- Analysis of data and information at all points of the intermediate care system including key interfaces with other services and within the service itself;
- Appraisal of the development of intermediate care nationally with emergent best practice and current best ‘futures’ thinking.

This diagnostic stage is to be undertaken against a background of commissioning (PCT/LA) concerns, particularly about:

- The positioning and configuration of the intermediate care service in its wider role of secondary prevention and reduction in long term care demands;
- Performance of some functions of the service and the need to review what have potentially been long standing agreements, and patterns in the level of inter-action and cohesion of the system;
- The need for a multi-functional and managed network of ‘intermediate’ responses to enable active and appropriate prevention of hospital admission and facilitated early discharge together with step-up preventative models of intervention;
- The accessibility of the service for those with organic conditions ad the need to address this issue;
- The need for an active and integrated rehabilitation strategy to support current policy development of promoting independence and supported housing options.

2 Suggested process

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### Process & content | Outputs
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Structured interviews with key stakeholders and significant others including professionals, managers, independent sector, clinicians, consumers, Local Authority & PCT staff, housing providers and WWL Acute Trust. | To “triangulate” an analysis of responses informing an action plan.

Data and information analysis including reviews of local reporting mechanisms and content, discussion with key operational and performance managers and collection of additional information where appropriate and helpful at this stage of the review. | To further validate or challenge perceptions of the intermediate care system’s ‘performance’ and indicate where systems or data gaps need to be filled.

Focus group discussions (2) with ‘diagonal slice’ of professionals, management and clinical components of the service. | Analysis that reflects multiple perspectives on the whole system and provides opportunities to identify solutions and develop consensus. Will also inform action planning.

Preparation of presentation material and executive summary of findings from the diagnostic. | Presentation material and report.

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### 3 Summary outputs and timescale
At the completion of this initial diagnostic phase of work we would anticipate providing:

- A completed analysis of the current efficiency and effectiveness of the intermediate care service with a developed matrix of the current strengths, weaknesses and opportunities informed by WSP activities outlined in the process;
- An action plan based on the above identifying priorities for action and mapped against ‘best practice/futures thinking’.

It is anticipated that this work would commence in early September and be complete by mid-October 2006.

### 4 Whole Systems Partnership relevant experience and brief ‘CVs’

#### 4.1 The partners

**Geoff Lake** has a health and social care background. He was formerly Deputy Director of Social Services in Humberside, after which he joined the Community Care Support Force at the Department of Health. Subsequently he moved to a Regional Health Authority and later became an Executive Director in the Health Service for a period of seven years, holding the posts of Director of Commissioning and subsequently Director of Performance and Mental Health at Leeds Health Authority. During his period at Leeds Geoff led the team that won the Office of Public Management national award for public management leadership in the work of whole systems configuration of older people services.

He then led the Change Agent team for the Social Services Inspectorate and Regional Office, before taking up independent consultancy. He is a visiting lecturer on social work courses at Hull and Lincoln Universities. He has also:
Facilitated Beacon Council workshops;
Initiated and developed a programme for the Nuffield Institute (Leeds University) entitled Leading Ideas/Leading Change for PCT and Local Authorities;
Lectured on the NHS Leadership Course;
Facilitated the External Expert Reference Group on the NSF for Long Term Conditions (March 2005);
Facilitated a bi-monthly workshop of the PCT Chief Executive/PEC Chairs of the NEYNL SHA area;
Published articles on managed network approaches to intermediate care (Leeds University, Integrated Care Research Paper).

Geoff currently acts as the Project Director for the Care Trust Plus application to the Department of Health for the North East Lincolnshire Council and Primary Care Trust. His is also about to commence work supporting change management strategies associated with the provision of services to older people with mental health needs.

**Peter Lacey** has a General Management and health background with commercial and voluntary sector experience before joining the Health Service at a Regional Health Authority in 1990. He has extensive project management experience and provides training in project management, strategic planning and systems modelling to a wide range of clients.

Peter completed an MBA at Durham University in 1998 during which he received a prize for his dissertation work on intermediate care services in the UK and Sweden. Peter is also an associate of the Centre for the Development of Nursing Policy and Practice at the University of Leeds and Chairman of a national charity ‘The Relationships Foundation’, which develops and applies research into the importance of relational values and practices in both public and private sector organisations.

4.2 **Current and recent programme of work**

Work currently being undertaken or completed in the last 12-18 months by the Whole System Partnership has included:

- For Wigan Council a review of FACS in the context of revised local policy and levels of spend covering both local process, relationships to other local processes and a detailed review of financial assumptions.
- For Ashton, Leigh and Wigan PCT a review of continuing NHS healthcare processes and uptake in the light of national best practice and a changing policy context.
- For Liverpool PCT a review of continuing NHS healthcare processes and uptake in the light of national best practice and a changing policy context.
- For the North West Strategic Health Authority a review of continuing NHS healthcare across all PCTs in regard to local take-up and in the context of identifying priorities and systems for commissioning continuing NHS healthcare in the light of new national policy and changing functions of PCTs.
- Supporting a learning network of Directors of Public Health with regard to Partnership Working.
• For Salford PCT and Local Authority the development of proposals for a Section 31 Agreement for Intermediate Care Services.

• For Liverpool PCTs, working in association with a broad range of stakeholders, undertaken a 'systems' review of intermediate care services with an emphasis on future capacity planning and commissioning priorities.

• For North Staffordshire and Stoke PCTs a two phase diagnostic and developmental programme for continuing NHS healthcare responsibilities.

• For North & East Yorkshire and Northern Lincolnshire SHA an initial diagnostics phase of assessing consistency in continuing NHS healthcare policy and the application of criteria across PCTs as well as the levels of uptake and an assessment of current and projected exposure to risk.

• Supporting North & East Yorkshire and Northern Lincolnshire SHA/LA's/PCTs in developing and implementing a programme of staff support for its continuing care policy, revising its policy and supporting panel training, development of an assessment toolkit, benchmarking and putting joint mechanisms in place.

• Involvement in and facilitation of the Expert Reference Group for the National Service Framework for Long Term Conditions.

• Advice to the Department of Health in their development of future continuing care policy and development work.

• Undertaking a whole systems strategic modelling exercise with Shropshire and Staffordshire SHA to develop a high level 'Health System Simulator' tool to inform key capacity decisions including implications for physical build and human resources.

• Having successfully undertaken an option appraisal process across Northern Lincolnshire with regard to the future management arrangements for Mental Health services WSP are now providing a Programme Director role to see these changes implemented.

• Supporting a number of locations (25 PCTs) in addressing the need to develop their intermediate tier of services under the auspices of the Nuffield Institute for Health.

• Undertaking an option appraisal on appropriate models of delivering mental health services for Ashton, Leigh and Wigan PCT.

• Undertaken a range of linked strategic reviews associated with the North Lincolnshire Safer Neighbourhoods Partnership including a DAT ‘health-check’, reviewing arrangements for strategic approaches to violence and undertaking developmental work in information systems to support intelligence gathering and sharing.

• A final report on recommending a new service model for older people with mental health needs in Salford has recently been submitted following similar successful projects in Bolton and Trafford.

• WSP have undertaken a range of focussed strategic systems modelling projects with Cheshire social services across all clients groups including mental health services.
4.3 Earlier commissions

Over the course of the last three years the following projects reflect the breadth of work completed by the Whole Systems Partnership.

**Morecambe Bay PCT**

Undertaking a capacity review for continuing NHS healthcare provision across the PCT including advice on service models and the implications of national and local policy developments.

**North and East Yorkshire and Northern Lincolnshire SHA**

Workshop facilitation and the development of proposals in respect of children’s continuing care policy and assessment processes across the SHA.

**South Yorkshire SHA**

Running two ‘diagnostic’ workshops in relation to the development of Continuing NHS Healthcare policy.

**West Yorkshire Strategic Health Authority, PCTs & Local Authorities – Continuing NHS Health Care Policy**

Stage 1 - undertaking the alignment of continuing NHS healthcare criteria across the West Yorkshire Health Authorities and PCTs as required by the Department of Health. This included a process for understanding both the financial and infrastructure risks associated with changes in eligibility, together with proposals for the future monitoring and audit of practice.

Stage 2 focussed on ensuring the appropriate supportive infrastructure was in place, implementation of the agreements from Stage I, completion of a medium/long-term financial risk analysis including the modelling of demand and uptake for continuing care, ensuring a common understanding across the PCTs and within the SHA, and establishing a methodology for collecting PCT based information on expenditure, numbers and unit costs so that future trends can be accurately and comparatively measured.

**(Former) Northern & Yorkshire Modernisation Board for Older People – Development of Modernisation Programme**

Work to develop the regional modernisation programme for older people in conjunction with Health Authorities and Local Authorities for the years 2002-04 taking account of the NSF (older people) and local needs.

**Lancashire Social Services**

Undertaking a review and acting as a ‘critical friend’ to comment on Lancashire Social Services approach to commissioning and making recommendations for future developments across the Department and with their key partners.

**North East Lincolnshire Borough Council & PCT – Review of the Drug Action Team**

In Stage 1 WSP undertook a detailed review of the current working of the Drug Action Team, including a review of the effectiveness of the sub-groups providing a detailed report on the future role and purpose of the DAT, including a draft action plan that addresses future organisational development, role and purpose. Stage 2 involved setting up the new model of working for the DAT Board, and drafting through a workshop/discussion approach the next three-year strategy including performance measures.

**Langbaurgh PCT and Redcar & Cleveland Borough Council – ‘Getting it Right, Intermediate and Continuing Care for Older People’**

Stage 1 of this project involved examining and scoping the potential options for partnership working between the PCT and the Local Authority in respect of elderly persons homes and community hospitals with particular reference to continuing and
intermediate care. Detailed mapping and modelling of capacity requirements were central. Stage 2 followed the acceptance of recommendations and the preparation of a programme and project plan, together with management agreements for submission to the Joint Partnership Board.

**Hartlepool Borough Council & Hartlepool PCT – Improving Partnership Working**

Stage 1 consisted of examining potential options for appropriate functional integration and partnership working between the Local Authority and the PCT and examining the content, partnerships and focus of current service level agreements with a view to recommendations as to their appropriateness and the potential for partnership between Hartlepool Borough Council and Hartlepool PCT. Stage 2 has involved working with the management teams of the Social Services Department and PCT to identify the pathway of change against the integration proposals set in Phase 1.

**Local Authorities and PCTs in St Helens and Knowsley – Assessment of need and development of commissioning strategies for older people**

Working with the Local Authorities and PCTs in St Helens and Knowsley to plan a new three year Commissioning Strategy for older people, based on a review of the current pattern and balance of services and an assessment of the future needs of older people in those communities.

**Bolton PCT, Borough Council and Acute Trust - Redesigning services for older people**

The project involved undertaking a comprehensive review to support the PCT, Local Authority and Acute Trust in redesigning services for older people across Bolton. The work was designed to make the links between a wide range of initiatives including a number of more focussed reviews. It provided local partners with a comprehensive strategic framework for developing a new balance in the model of care for older people.

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