

ABERDEEN CITY COUNCIL

COMMITTEE	Social Care and Wellbeing
DATE	14 March 2013
DIRECTOR	Fred McBride
TITLE OF REPORT	Change Fund - Update on Implementation
REPORT NUMBER:	SCW/13/003

1. PURPOSE OF REPORT

The purpose of this report is to update Members on the use of the Change Fund for Reshaping Care for Older People in Aberdeen.

2. RECOMMENDATION(S)

Members are asked to note the updated position.

3. FINANCIAL IMPLICATIONS

3.1 The Aberdeen Partnership was successful in obtaining non-recurring funding for 2012/13 of £3.14m from the Scottish Government (following being awarded £2.738m in 2011/12).

3.2 Funding has been committed to support the following strategic outcomes (which were included in the 2012/2013 Change Plan submission to Scottish Government).

- Preventative & Anticipatory Care
- Care & Support at Home
- Care at Times of Transition
- Hospital & Care Homes
- Carer Support
- Enablers

4. ACHIEVEMENT OF CHANGE FUND OUTCOMES

4.1 This section highlights some outcomes already achieved by the Change Fund in Aberdeen.

4.1.1 Active Ageing: Aberdeen City Council is recognized as a national leader in this context. This has largely been made possible by the strategic decision in 2011 to establish an Older People's Wellbeing

Team. Their excellent work has been supported by the Change Fund, for example by funding Technogym Equipment (£75k) and the 2012 Aberdeen Golden Games (£6k).

- 4.1.2 Tackling isolation/loneliness of older people is one of the Change Fund's highest priorities. One way that this is being addressed is by a £200k investment in the establishment of the Older People Befriending Network that will ensure a befriending service is offered across the City.
- 4.1.3 Older People have consistently told us that they want to remain at home, wherever possible and the Change Fund has invested over £135k in equipment and associated infrastructure to support this.
- 4.1.4 The Change Fund has significantly contributed to more integrated working. One excellent example of this has been the joint Aberdeen City Council/Aberdeen CHP appointment of an Out of Hours Co-coordinator for an integrated care at home and community nursing service (£47k), hosted within Aberdeen CHP. Another has been the development of a Single Point Access for specialist community teams and more integrated working at the Rapid Response Team (£160k).
- 4.1.5 A major emphasis in the Change Fund has been to prevent inappropriate hospital admissions and accelerate hospital discharge. Investment in this context has included the further expansion of the Community Geriatrician Service (£200k), See and Treat Scottish Ambulance Service (£107k) and Falls Prevention/Reablement (£239k). Anticipatory Care Plans (£137k) have been funded in primary care and the success in rolling these out means that they will now be supported through the GP Contract. Significant investment has also been made to accelerate hospital discharge in Aberdeen Royal Infirmary, with an increase in services such as Occupational Therapy and Physiotherapy based in the Emergency care Centre to assess and support people to return home (£300k).
- 4.1.6 Significant investment and management effort has been made to increase Carer Support. New services funded include Older People Advocacy (£27k); Rosie's Time for Life Groups (£20k) and various alternative models to support carers by providing more creative short breaks (£250k).
- 4.1.7 The Change Fund is also investing in increasing the long term capacity and redesign of the care sector. Investment has included a Care Sector Recruitment Champion (£45k), a Physical Activity Development Worker (£35k) and an Independent Sector Development Worker (£33k).
- 4.2 Change Fund Contribution to Current Performance of Aberdeen City Health & Social Care Partnership

4.2.1 Shifting the Balance of Care

In Aberdeen we have been shifting the balance of care for several years towards care at home by reducing use of nursing home beds and increasing the number of people in receipt of intensive care at home (over 10 hours a week). From 2011 to 2012, the use of nursing home places reduced by 10%, though the use remained the same for residential care homes, and the number of people receiving care at home increased by 16%. More investment will be needed in telecare (£133k) and respite breaks for carers (£93k), and the Change Fund is making a significant contribution towards this.

4.2.2 Delayed Discharge

Since the Scottish Government set a discharge standard of 6 weeks in April 2008, Aberdeen City has been meeting this with very few exceptions. The standard will reduce to 4 weeks from April 2013 and whilst we were committed to meeting this in advance of April, our efforts are being challenged by a shortage of care at home provision in the City. The investments we have been making in discharge support, care at home and enablement services along with good integrated working across health and social care will help us towards the 4 week standard. The Change Fund is enabling us to support all of this work.

4.2.3 Emergency bed days for people over 75

Reducing unplanned admissions of older people to hospital is a national performance measure (HEAT 12). The number of bed days resulting from emergency admissions for people over 75 in Aberdeen had been steadily rising to June 2012, when they began to reduce. It is too soon to know whether this downward trajectory will continue but it may be that the introduction of Anticipatory Care Plans, funded by the Change Fund, with over 2000 completed through GP practices from December 2011 to September 2012, is beginning to impact on admissions.

5. FUTURE USE OF THE CHANGE FUND

5.1 In the first two years of the Change Fund proposals were invited from across the Aberdeen Partnership to meet broad outcomes. A new process will be in place for 2013/14 and 14/15 which will be based on commissioning of services for outcomes to meet nationally agreed Change Fund priorities. Some of the proposed projects are described in the table below.

Change Fund Priorities 2013/14 – examples of suggested projects

Preventative and Anticipatory Care	45%
<ul style="list-style-type: none">• Telehealthcare solutions to promote self care, independence and safety• Information and signposting within GP practices and community facilities	

<ul style="list-style-type: none"> • Active ageing initiatives to optimise independence and wellbeing • Prevention of inappropriate admissions to hospital • Individual and community capacity building 	
Proactive Care and Support at Home	30%
<ul style="list-style-type: none"> • Telecare Responder service • Extension of Rapid Response service to 7 day working • Increased access to specialist assessment and equipment and/or adaptations that help people to remain at home/leave hospital • More assessment at home or within an intermediate care setting rather than in hospital 	
Effective Care at Time of Transition	15%
<ul style="list-style-type: none"> • Availability of reablement and rehabilitation for all eligible service users whose independent functioning can be improved. • Rapid access to equipment to support care at home. • End of life care to enable more people to remain at home. 	
Hospital and Care Homes	5%
<ul style="list-style-type: none"> • Earlier and better discharge planning • Facilitated reviews of relevant “care pathways”. • Increased care home input/support from NHSG Training and Development Team e.g. on nutrition • Review of the use of care homes and potential for alternative usage. 	
Enablers	5%
<ul style="list-style-type: none"> • Investment in IT equipment to enable front line staff to increase patient facing time. • Action Learning Sets to resolve joint issues. • Workforce development including joint posts where appropriate, • Joint Planning and Commissioning capacity. • Performance management, evaluation and research. 	

6 IMPACT

- 6.1 The Change Fund supports the Single Outcome Agreement, Local Outcome 6: “Improve the overall health and wellbeing of the people of Aberdeen City in particular by supporting those most vulnerable; this outcome particularly focuses on improving the health and wellbeing of older people.”
- 6.2 The proposal supports the following strategic priorities of the Council’s Five Year Business Plan:
- provide for the needs of the most vulnerable people;
 - ensure efficient and effective delivery of services by the council and with its partners;
 - And the plan for delivery:

- make best use of the financial resources available to us, ensuring best value for the public purse;
- have a flexible, skilled and motivated workforce; and
- listen to, and be responsive to, our customers, shaping our services around their needs and focusing our resources where they are most needed.

7 BACKGROUND PAPERS

The report refers to the submission to the Scottish Government - Aberdeen Partnership Use of Change Fund, the Joint Commissioning Strategy for Older People & Outcomes Anticipated

8 REPORT AUTHOR DETAILS

Sandy Reid
Programme Development Manager
Social Care & Wellbeing
Business Hub 8
First Floor North
Marischal College
Broad Street
Aberdeen
AB10 1AB

Tel: 522245

SandyReid@aberdeencity.gov.uk