

Health and Wellbeing Board

5 March 2014



Update: Implementation of the Integrated Short-term Intervention Service (ISIS)

Nicola Bailey, Chief Operating Officer, North Durham Clinical Commissioning Group

Purpose of the Report

1. To provide the Health and Wellbeing Board with an update on progress relating to the implementation of the transformation of current Intermediate Care Services taking place within County Durham.

Background

2. Following agreement of the Detailed Business Case by Durham County Council, North Durham Clinical Commissioning Group, Durham Dales, Easington and Sedgfield Clinical Commissioning Group and County Durham and Darlington Foundation Trust (CDDFT), implementation of the transformation of current intermediate care services within Durham County proceeded at the end of October 2013.
3. The integrated short term intervention service is identified as part of the Better Care Fund plan, and arrangements are in place that funding is agreed through a Section 75 pooled budget agreement.
4. Transformation funding approved through the Detailed Business Case incorporated an 18 month pilot centred on the delivery of 'short term intervention' services, with the aim of the achieving the following objectives:
 - Reduced inappropriate admissions to permanent residential care and the acute setting
 - Reduced readmissions
 - Timely hospital discharge
5. This 18 month pilot is also considered a period of robust evaluation applying to all services and pilots incorporated into the model. It is envisaged this will contribute to the development of an 'invest to save' business case for a permanent service moving forward.
6. Given the scale of change, a phased approach to implementation has been taken with the main areas of transformation and development being:

- The development of a 24/7 Single Point of Access
- Expansion of the 3 Multidisciplinary Teams to allow them to operate 8am-8pm, 7 days per week and incorporate additional skills
- Development of a standardised, integrated commissioning strategy covering a range of services including intermediate care beds
- Development of a robust, integrated performance framework

7. Progress on implementation is being reported according to the following governance structure:

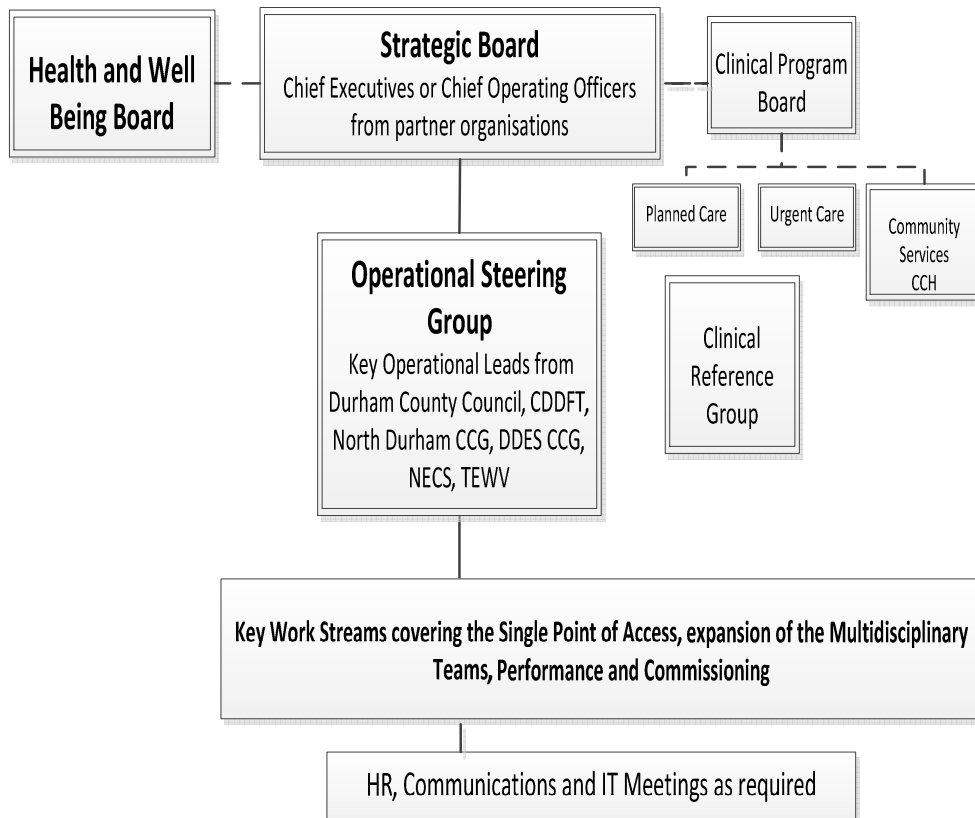


Figure 1 - Implementation governance structure

Overview of the service structure

- The current Responsive Integrated Assessment Care Team (RIACT) service will be renamed **ISIS (Integrated Short-term Intervention Service)** following the official launch due to take place in March 2014. This service will incorporate the ISIS Single Point of Access and three ISIS Multidisciplinary Teams. The ISIS Multidisciplinary Teams will have access to a wide range of services incorporated into the wider ISIS model to facilitate maximum independence and sustainable recovery.

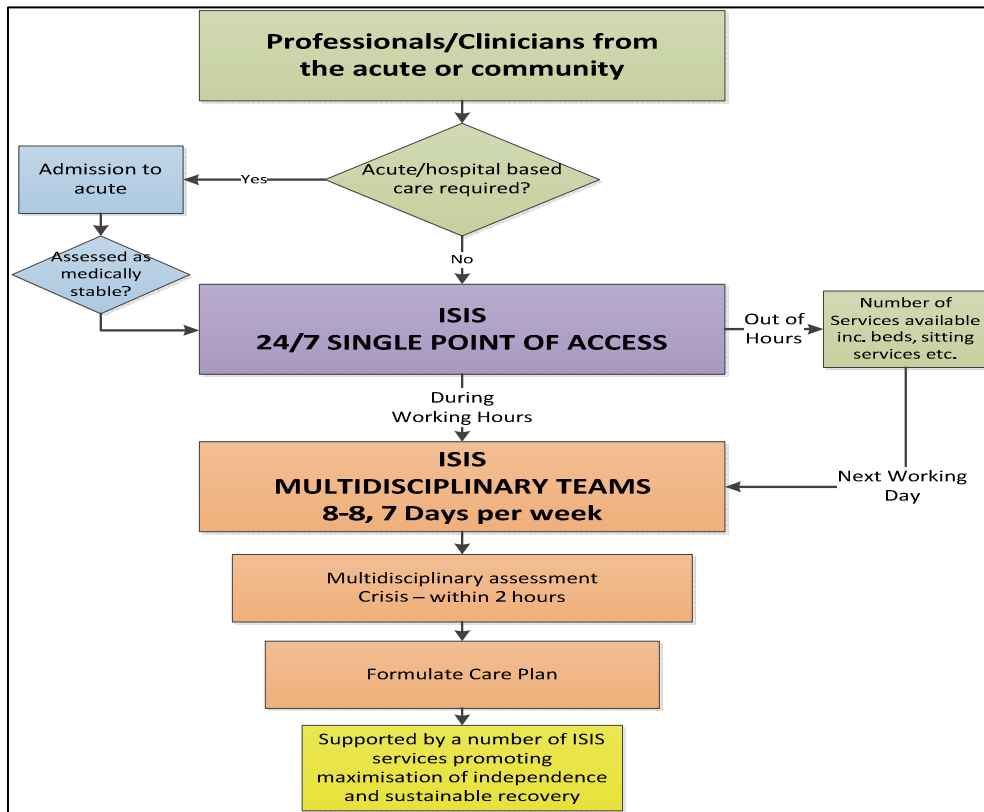


Figure 2 - ISIS Model

The ISIS Model (Figure 2) is not only the subject of joint agreement relating to both investment and impact, but promotes the use of seven day working practices; an integrated approach to assessment and care planning as well as effective sharing of information. The model is also fully aligned with the Better Care Fund plan.

Update on progress

- There has been significant progress delivering change within following key transformational areas since October 2013:

The ISIS 24/7 Single Point of Access

- The Single Point of Access (SPA) was launched on the 16th December 2013 to University Hospital North Durham (UHND) hospital discharge

referrals, with a roll out plan to expand access to the following areas between December and March:

Week Commencing:	Organisation(s)
20 th January 2014	Darlington Memorial Hospital and Bishop Auckland General Hospital
27 th January 2014	Sunderland Royal Hospital and North Tees and Hartlepool Hospitals
From 3 rd February 2014	All community hospitals and outlying hospitals
From 3 rd March 2014	GPs and District Nursing Teams within the North Durham CCG area
From 10 th March 2014	GPs and District Nursing Teams within the DDES CCG Easington area
From 17 th March 2014	GPs and District Nursing Teams within the DDES CCG Sedgefield and Durham Dales area
From 17 th March 2014	Out of hours SPA Access launched

Table 1 - SPA Roll-Out Plan

*Grey colouring denotes completion

11. At present all hospital discharge referrals requiring a short term intervention should contact a new dedicated number: **0191 333 2 666** from 8am-8pm, seven days including bank holidays.
12. Over the past two months, referrals to the SPA have gradually increased and positive feedback has been received in relation to the accessibility and effectiveness of the service provided.

Expansion of the ISIS Multidisciplinary Teams

13. While the existing intermediate care teams will continue to operate from their current localities, they will expand allowing them to operate 8am to 8pm, seven days per week. The teams will also have access to funding allowing them to utilise additional resource through the recruitment of Community Psychiatric Nurses (CPN's) and Pharmacy Technicians. To date, a substantial amount of progress has been made within this area incorporating the following:
 - Staff consultation has been carried out in line with policies outlined by Human Resources within Durham County Council and CDDFT. Comments have also been raised regarding potential implications in relation to a wider restructure which is currently underway within CDDFT. Additional Social Worker resource is in place and recruitment of Nursing and Therapist staff in line with plans outlined within the Detailed Business Case is underway.
 - Work is taking place with Tees, Esk and Wear Valley (TEWV) Foundation Trust to scope out the most effective role of the CPN within ISIS who will be implementing an approach over the coming month.

- A robust training plan is in development and a set of uniform operating procedures have been established which will encourage standardised working practices and ensure a high quality service is delivered across County Durham.

Development and implementation of a uniform commissioning strategy

14. From the outset of implementation, key commissioning representatives from each partner organisation have collaborated to develop an integrated approach to the commissioning of services required to deliver the ISIS model. A range of services and pilots including Telecare, Community Older Persons Excellence Service (COPE) /Older People's Access Service (OPAS), County Durham Rapid Elderly Care Specialist Team (CREST), domiciliary care, home from hospital and reablement are already accessible through this model. However, given the fast pace of implementation and the scale of commissioned services under the model, some interim solutions have been utilised to ensure availability of spot purchase beds, sitting services and community equipment throughout County Durham.
15. The following progress has been made in establishing longer term commissioning strategies:
 - The procurement of all ISIS Intermediate Care beds for the longer term will begin in February 2014 with an anticipated contract start date of 1st June 2014. It is envisaged that these beds will be purchased through 'block' and spot contracts in key localities across the county promoting equitable access to this form of support.
 - The longer term Sitting Service is already out to tender and due to be in place by early April 2014 as part of a combined contract for reablement.
 - The development of the Telehealth service has begun, looking at the learning from existing pilots and the opportunities now available through new technology.
 - CDDFT have committed to holding an event in March 2014 to update partners on learning to date and to give demonstrations of available systems suitable for use under the ISIS model.

Development and use of a robust, integrated performance framework

16. Key performance representatives from across the partner organisations have collaborated to develop an integrated approach to robust performance reporting. This work has culminated in the development of a proposed performance framework which not only aligns to existing statutory requirements but addresses the main aims of the service and partner organisations, and also aligns to requirements specified under the Better Care Fund.

17. Work is ongoing to ensure performance measurements included within existing and future Service Level Agreements are able to effectively evaluate each service considered to be delivering a form of short term intervention.

IT Development

18. A review of the use of System One (NHS Information Database) will be undertaken in relation to recording for the SPA and the interface with multi-disciplinary teams. Social Services Information Database (SSID) is currently being used as an interim solution along with manual systems but this is not appropriate in the longer term, given governance and data protection issues. Furthermore, an IT solution in relation to management of bed availability is a key priority. These issues will be discussed further in order to progress over the coming weeks.

Recommendations

19. The Health and Wellbeing Board is recommended to:
 - Continue to support the implementation of the ISIS model.

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Background papers: None

Appendix 1: Implications

Finance – Funding for the model is outlined within the Detailed Business Case approved by Durham County Council, North Durham CCG, DDES CCG and CDDFT. It is based on a 'Return on Investment' proposition.

Staffing – The ISIS model provides funding to expand capacity within the existing intermediate care teams to increase the number of social workers, nursing and therapy staff allowing them to operate 8am to 8pm, 7 days per week.

The change in working hours has an impact on the current working patterns of existing staff members. Required consultation has therefore been carried out with all existing nursing and therapy staff around extended working hours.

Further consultation on the wider organisational restructure is currently taking place with partner agencies (alongside the implementation of ISIS).

Risk – As shown within this report, implementation of the ISIS model is governed by a robust governance structure. Any significant risks or issues are therefore escalated and resolved in a timely manner.

A phased approach has been taken to implementing the model to allow progress and capacity of services to be evaluated carefully over time reducing risks associated with large scale service transformation of this kind.

Equality and Diversity / Public Sector Equality Duty – None

Accommodation – None

Crime and Disorder - None

Human Rights - None

Consultation – Required consultation has been carried out with both health and social work staff with the involvement of Human Resource representatives from both Durham County Council and CDDFT.

Procurement

Disability Issues - None

Legal Implications - None