

Recommendations for the Leicester Community

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2. Ensure that older people experience effective admission and discharge planning from acute, rehabilitation and mental health services for older people without delay	Transfer of Care Group to <ul style="list-style-type: none"> - Recommendations of delayed discharge census actions are completed - Review actions from last 12 months reporting and determine progress to date and approach to implementation of actions - Identify key themes arising from analysis for group to focus on. - to review the appropriateness and compliance with hospital discharge and transfer of care policies. 	Ruth Johnson	Sept 2005		Extension of reimbursement to include Rehab and Mental Health in April 2006 Reduction in delayed discharges of care by 20% User satisfaction through National patient Survey results
	Review UHL policies and standards for the outlying of patients to limit the number of ward moves during a patient stay	Pauline Tagg	March 2006		Outlying audit March 2006
	Development of Crisis Intervention Team for Care Homes with UHL and LCW (on behalf of the city)	Manjit Darby	Sept 2005		Reduction in Number of admissions from Care Homes to UHL by 90 admissions by March 2005
	Community Matron development to prevent admission of and support the effective discharge of high intensity users	Manjit Darby/ Annette Hogarth	Sept 2005		Audit of PCT targets for admission avoidance
	Map discharge groups across the city to review: <ul style="list-style-type: none"> - Membership - Remit 	Pauline Tagg	Sept 2005		

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	<ul style="list-style-type: none"> - Accountability - Fitness for purpose - Define quality standards for discharge process - Remit of UHL 7 day working group to be reviewed to ensure social care and primary care input - Ensure there is a process in place for lessons from the Medical Directorate improvement programme at UHL to be rolled out as appropriate - Review Information requirements for black and ethnic minorities for both pre admission/discharge (combined health and social care) - Introduce screening process to ensure that city patients referred to Community hospital are not suitable for any local city based intermediate care service. - Introduce effective review process to ensure that patients discharge is not delayed - Develop service specification to commission community hospital services locally 	<p>Pauline Tagg</p> <p>Pauline Tagg</p> <p>Meena Ackbarally</p> <p>Manjit Darby</p> <p>Ruth Lake</p> <p>Rachel Holynska/ Manjit Darby</p>	<p>Aug 2005</p> <p>Sept 2005</p> <p>Aug 2005</p> <p>July 2005</p> <p>Sept 2005</p> <p>March 2006</p>		<p>Reduction in number of patients outlied</p> <p>Reduction in number of patients referred to community hospitals by March 2005</p> <p>Reduction in length of stay</p>
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<p>3. Improve the reporting, analysis and response times to complaints in the local primary care trusts and share learning between general practices</p>	<p>For PCTS</p> <ul style="list-style-type: none"> - Review current obligations, structures and processes for GP Complaints reporting to PCT - Complaints response times reported to PEC/ Board as part of performance report - Review complaints management to improve response times if necessary - Review sharing of learning lessons learnt through complaints profiling through CG structures. <p>LPT</p> <ul style="list-style-type: none"> - Review complaints management to improve response times if necessary - Review sharing of learning lessons learnt through complaints profiling through CG structures. 	<p>Annette Hogarth/ Manjit Darby</p>	<p>Aug 2005</p>		<p>Complaints response time target</p> <p>Mechanism for learning from complaints and incidents agreed in each organisation</p>
<p>4. Ensure that the medicines milestones for 2004 are achieved</p>	<ul style="list-style-type: none"> - Evaluation of work undertaken to date and establish current position in each PCT - Review position in Medicines Management Committee - Develop a roll out plan to meet the milestones - Include technician time to undertake medication reviews as part of Crisis Team work for Care Homes. - Increase uptake of Medication Self Management in UHL - Development of Home Care Guidance for medication handling 	<p>Manjit Darby/ Meena Ackberally</p> <p>Manjit Darby</p> <p>Pauline Tagg</p> <p>Meena Ackberally</p>	<p>Aug 2005</p> <p>Sept 2005</p> <p>Mar 2006</p> <p>Oct 2005</p>	<p>If this work is to be prioritised Advisor Time will need to be costed</p>	<p>60% of over 75 checks completed by March 2006 and 100% by Oct 2006</p> <p>Baseline Audit repeated 6 months</p>

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	- Consider evaluation of pilots to date to learn from best practice	Meena Ackberally	Nov 2005		
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Area of Inspection: Vision					
	Actions Agreed	Lead	Timescale	Resource implication	Performance indicator
5. Develop a shared strategy for older people which covers both promoting wellbeing and care services, based on the priorities and views of older people, and deliver the NSF targets	<p>Establish single city planning forum to set vision and Strategy. This will replace or combine</p> <ul style="list-style-type: none"> - Older Persons Direction of Travel - City Council Group <p>To establish single Leicester City forum with:</p> <ul style="list-style-type: none"> - Clear accountabilities - Links to Local Strategic Partnership - Reduced role of C&NWL Programme Board for Older People 	Chief Officers/ non-executive champions for older people	March 2006		Forum established by March 2006
6. Ensure that all strategies have effective implementation plans with measurable outcomes, and that progress is jointly monitored	<p>Develop joint format for Strategy across PCTs/Leicester City Council – with engagement of NHS Trusts & Partners (eg. Voluntary Sector) building on:</p> <ul style="list-style-type: none"> - Leicester Community plan 	R Holynska to coordinate with strategy leads for each agency	Oct 2005		

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	<ul style="list-style-type: none"> - Leicester PCTs SDDP/Leicester City Council Directorate plan <p>Strategy to include:-</p> <ul style="list-style-type: none"> - 5 year targets - joint action plans - resource implications <p>Strategy and Commissioning Director/ Assistant Director level discussion across Leicester PCTs/ Leicester Social Care and Health to agree format</p>				<p>Vision and Strategy developed by April 2006</p>
<p>7. Build on the work of the Older Peoples Forum to develop a systematic way of involving older people in decisions about services and other issues that affect their lives</p>	<ul style="list-style-type: none"> - Develop a baseline assessment of current mechanisms to involve older people - Utilise findings of baseline to develop an older peoples involvement plan which links all organisations patient and Public involvement strategies - Systematic engagement strategy- agree principles for application across all agencies <p>Establish Clear Approach to Older Persons Engagement</p> <ul style="list-style-type: none"> - links to City Older People's forum - work with NHS patient forum - map other agency engagement 	<p>Rob McMahon/ Ruth Lake/Meena Ackberally/ Graham McKay/Pauline Tagg</p>	<p>Dec 2005</p> <p>Dec 2005</p>		<p>User involvement principles agreed by Dec 2005</p>

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	LPT to review approach and capacity of its PALS service	Graham McKay	Nov2005	TBC	Increase in No. of PALS workers in LPT Model for PALs in LPT reviewed by Dec 2005
8. Work together to develop a shared approach to monitoring the impact of partnership working on older people, which demonstrates that services for older people are effective and represent good value	<p>A Capacity Planning Task and Finish group already established, role to be formalised. The group is undertaking work across PCTs, Social Care and Health, Mental Health Services for Older People to:</p> <ul style="list-style-type: none"> - unify targets/performance monitoring - develop capacity plans - assess best value across service 	Rachel Holynska/ Capacity Planning Group	Dec 2005	Staff time	Performance targets unified by Dec 2005

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<p>Area of Inspection:</p> <p>Commissioning</p>					
	<p>Actions Agreed</p>	<p>Lead</p>	<p>Timescale</p>	<p>Resource implication</p>	<p>Performance Indicator</p>
<p>9. Commission jointly and develop an integrated falls service this year which includes health, social care, city council, community and voluntary organizations and the private sector, and refers to the Department of Health guidance on commissioning falls services</p>	<p>Commission Integrated Falls Service</p> <ul style="list-style-type: none"> - Model outputs - Feed into SDDP 	<p>S Mart Falls Group</p>	<p>Oct 2005</p>	<p>Tbc</p>	<p>Agreed Integrated Falls service Model by March 2006</p> <p>Action Plan for integrated falls service in place by June 2006</p>
<p>10. Ensure that commissioning arrangements secure the development of integrated mental health services for older people</p>	<p><u>Completed Actions</u></p> <ul style="list-style-type: none"> - Co location of staff from LPT and Leicester Social Care and Health into Community Mental Health Teams for older people - Leicestershire-wide strategy for older person's mental health completed - Leicester City Mental Health Action Plan developed - Joint specification (Leicester PCTs & Leicester Social Care and Health) for mental health included in the long Term Conditions Service Specification 		<p>2005/06</p>	<p>Staff time</p>	

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	<p><u>Actions required</u></p> <ul style="list-style-type: none"> - Service model work underway for key gaps; crisis response service for older people with mental health problems - Complete action plan included in Long Term Conditions Specification ie - Capacity planning - Development of CMHPS for over 65s - Development of Crisis Response - Integration of Crisis services across generic and Older Peoples mental health services - Leadership across city to be confirmed - Develop integrated management structures across CMHTs <p>Cross ref action 18</p>	Bhupen/ Graham/ Rachel	March 2006	Resource requirement needs to be scoped	<p>Service model agreed for Crisis response and CMHPS by March 2006</p> <p>Implementation plan and roll out of service by Oct 2006</p> <p>Service model for CMHTs agreed by Dec 2005</p>
11. Develop monitoring systems which enable demonstration that all services for older people are accessible to the diverse communities of Leicester	<p>Capacity Planning Group for older people to include work on monitoring systems</p> <p>Ensure effective linking to delivering the best work on equality of patient experience and access for all the population</p>	R Holynska Meena Ackberally	Dec 2005 Nov 2005	Staff time	<p>Monitoring systems in place by Dec 2005</p> <p>Take up rates for Minority Ethnic Group increased by 20%</p>
12. Consider increasing the use of Health Act	See below				

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<p>Flexibilities such as pooled budgets</p>	<p>Explore Pooling for :</p> <ul style="list-style-type: none"> - Intermediate Care - HIV 	<p>M Darby/ Hugh Evans</p> <p>R Moore</p>	<p>March 2006</p> <p>Dec 2005</p>		<p>Strategy complete by March 2006</p>
<p>13. Consider the development of joint commissioning posts</p>	<p>Chief Officer discussion needed about future shape of services</p> <ul style="list-style-type: none"> - Lead or joint arrangements - Scope of joint planning/strategic commissioning function <p>Key issue, for formal commissioning arrangements:</p> <ul style="list-style-type: none"> - Are governance arrangements needed across Leicester City Council and PCTs, should this be services for older people or across adult services as a whole. - What specific governance arrangements are needed for older persons services commissioning 	<p>Chief Officers/ non-executive champions for older people</p>	<p>September 2005</p>	<p>Resource requirement needs to be scoped</p> <p>This action is urgent and needs to be completed in order for progression in other areas of action plan</p>	<p>Chief officers discussions concluded by Sept 2005</p>

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Area of Inspection:					
Range of Services					
	Actions Agreed	Lead	Timescale	Resource implication	Performance indicator
14. Integrate the range of intermediate care services in the city of Leicester and publicise these services to service users, especially those from black and minority ethnic groups	<ul style="list-style-type: none"> - Re-establish intermediate Care Group - Use outputs of capacity planning work and LLR Intermediate care strategy to inform production of City Intermediate Care Strategy - Publicise Intermediate Care schemes - Undertake review and usage of services by Minority Ethnic Groups and develop action plan to address findings - Single point of access for both Health and social care and health - Explore options for use of EMAS emergency practitioners for admission avoidance transfers into intermediate care schemes - Establish system for information of current services to be circulated on regular basis and be updated - Review of Bed Bureau role and function 	Manjit Darby/ Hugh Evans Pauline Tagg	March 2006 March 2006	Resource requirement needs to scoped	Intermediate Care Group established by Nov 2005 IC Schemes published quarterly to all GP practices Take up rates for Minority Ethnic Group increased by 20% Single point of Access for health to be established by July 2005 and for all services established by Oct 2006

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<p>15. Develop a more strategic approach across all partners to enable people over 50 to maintain a full and active lifestyle and promote their independence</p>	<ul style="list-style-type: none"> - Older persons section of Community Plan to reflect recommendation and local area agreements progress this - Community planning to link in with performance indicators <ul style="list-style-type: none"> o Falls prevention o Mental health well being o Safe and secure in own home - Investigate IT to allow people to stay in own homes - Produce report about availability, best practice and what is being used 	<p>Rod Moore/ Hugh Evans</p>	<p>Dec. 2005</p>	<p>Resource requirement needs to be scoped</p>	<p>LPSA Targets related to occupied bed day for over 75s</p> <p>Community plan reflects Inspection report recommendations by Dec 2005</p>
<p>16. Increase the range of community-based falls prevention services and reduce waits for community-based therapy services, bone scanning and specialized care packages</p>	<p>Build on the LLR Falls prevention and management strategic framework to:</p> <ul style="list-style-type: none"> - Clarify terms of reference and scope of City based falls groups - City Fall strategy to be produced - Gap analysis to be completed - Agree City Implementation plan - Explore use of PSA funding to support delivery of this recommendation - . - Action plan to ensure compliance with national waiting times for listed services <ul style="list-style-type: none"> o OT / Physio services o Bone scanning <p>City therapy review</p> <ul style="list-style-type: none"> - Review service delivery and redesign, map resource and capital requirements 	<p>Sharon Mart</p> <p>Hugh Evans</p> <p>S Mart L Tarplee</p> <p>Rachel Holynska/ Annette Hogarth</p>	<p>Sept. 2005</p> <p>Aug. 2005</p> <p>Oct 2005</p> <p>Dec 2005</p>	<p>Resource requirement needs to be scoped</p> <p>Resource requirement needs to be scoped</p>	<p>Completed falls Strategy and action plan by Sept 2005</p> <p>Falls baseline audit completed by Oct 2005</p> <p>Baseline established and review completed by Dec 2005</p>

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	<ul style="list-style-type: none"> – investigate methods to reduce waiting time for very specialist equipment adaptations such as major home adaptations. 	Manjit Darby/ Hugh Evans	Dec 2005	Checked with inspection team- refers to very specialist adaptations and not routine equipment	
17. Continue to develop osteoporosis screening and treatment in primary and secondary care	<ul style="list-style-type: none"> – Ensure Osteoporosis screening addressed in the development of the Falls strategy. – Map current position and requirement re screening 	Sharon Mart/ Louise Tarplee	Sept. 2005	Resource requirement needs to be scoped	Baseline established by Sept 2005. Action plan in place by Dec 2005
18. Ensure that older people with mental health needs have equitable access to local services as those available to people under the age of 65	<p>See commissioning section</p> <ul style="list-style-type: none"> - Review current model for intermediate care services to scope requirements to expand to cover Older people with Mental Health needs <p>Cross reference to action 10</p>	Manjit Darby/ Hugh Evans	March 2006 As part of IC Strategy review	Resource requirement needs to be scoped	Cross reference to action 10

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Area of Inspection:					
Capacity					
	Actions Agreed	Lead	Timescale	Resource implication	Performance indicator
19. Promote access and take up of multi agency training on the single assessment process, falls prevention and continence promotion	<ul style="list-style-type: none"> - Barbara Hamilton to present at Direction of Travel about joint training in stroke - Review current approach to training in identified areas and scope requirements.: <ul style="list-style-type: none"> o SAP (ongoing) o Falls o Continence o recommendations to be presented to DOT Group - Liaise with UHL Older person training team for training across trusts 	Pauline Tagg M Ackberally S Mart A Hogarth Louise Tarplee	December 2005 Dec. 2005 Jan. 2006 Sept. 2005	Resource requirement needs to be scoped	Training roll out programme established
20. Review and audit the use and impact of falls protocols across primary, acute and mental health services	<ul style="list-style-type: none"> - Review and audit use of falls protocol 	S Mart/ L Tarplee/ G McKay	Jan 2006		Strategy and action plan in place by Sept 2005 with roll out programme for 2006

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