

AGENDA ITEM NO: 10

Report To: Inverclyde Council Date: 4th October 2012

Report By: Brian Moore Report No:

Corporate Director CHCP/47/2012/BM

Inverclyde Community Health

& Care Partnership

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Subject: Inverclyde Council Commissioned Services for Specialist

Nursing Care for Older Persons with Dementia and Adult

Mental Health Intensive Supported Living Services

1.0 PURPOSE

1.1 To update Inverclyde Council on the current position on the commissioning of Specialist Nursing Care for Older Persons with Dementia and Adult Mental Health Intensive Supported Living Services in Inverclyde.

1.2 To request the Council to note the position and endorse the way forward.

2.0 SUMMARY

- 2.1 It is proposed that Inverclyde Council and NHS Greater Glasgow & Clyde separately commission the elements of service to meet their individual requirements. This decision is informed by the two unsuccessful attempts to jointly procure from the market place a viable 74 bed contract. It is the case also that new opportunities now exist that provide alternative options for both Inverclyde Council and NHS GG&C which provide more choice, flexibility and are cost effective.
- 2.2 NHS GG&C intends to procure 42 NHS mental health continuing care beds, (30 for older persons and 12 for adults) as outlined in the procurement specification. Before a final decision is taken a review of options is being undertaken.
- 2.3 The Inverclyde Council service elements of the original tender have been reviewed. There is capacity and willingness locally in the independent sector to provide specialist dementia and functional mental health services for older people in nursing care settings and intensive supported living for adults with mental health conditions and associated behaviours. Informal discussions with some independent providers have indicated this service development would be well received.

There is also a need to strengthen the community infrastructure for older people's mental health services to prevent admission into residential care.

The following areas are key areas for investment in which a detailed commissioning plan will be produced linked to the ongoing commitment of the Change Plan:

 Home Assessment of people with Mental Health/Dementia with comorbidities.

- 2. Post diagnosis support for people with Mental Health/Dementia.
- 3. Extension of Primary Care psychological therapies to older people with Mental Health/Dementia.
- 2.4 This report outlines the proposed options for the provision of care services that will be discussed at the CHCP Sub-Committee following the Council meeting on 4th October 2012.

3.0 RECOMMENDATIONS

- 3.1 To note the present position and endorse the proposed way forward.
- 3.2 To note the intention to commission locally 12 specialist older persons' nursing care dementia places for clients with highly complex needs from a suitably qualified independent sector provider/s.
- 3.3 To note the intention to commission locally 8 adults with specialist mental health conditions and associated behaviours, intensive supported living places from a suitably qualified independent sector provider/s.
- 3.4 To note the ongoing development of community based provision in addition to the proposed commissioned services.

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4.0 NHS GG&C OPTIONS

- 4.1 For the NHS the 42 continuing care beds are still required. These will be delivered within the existing cost envelope and timetable.
- 4.2 The options being worked up and compared are:
 - The Scottish Futures Trust West Hub Co. This has recently been established in the NHS GG&C Board area. A business case to build a NHS facility on the IRH site will be drawn up.
 - NHS Health Board capital investment of a new facility on a NHS site.
 - NHS Health Board capital investment to refurbish an existing NHS facility.
 - The NHS GG&C Health Board timetable for decision is October/November 2012.

5.0 INVERCLYDE COUNCIL OPTIONS

- 5.1 The Local Authority element of the scheme has also been re-evaluated. The market place in Inverciyde has changed in the last 3 years with new care providers operating in the area.
- 5.2 Inverclyde have reassessed the need for specialist dementia services and the capacity and capability of local providers to reshape current services to meet both the environmental and staffing skill levels required and are confident that at least one provider at this time is committed to reshaping their services to meet this need.
- 5.3 We believe it is a good commissioning approach to commission for 12 older adult dementia places rather than the original 24. The 12 places will be funded from resource transfer (£378,000), supplemented by client contribution (£64,000).
- 5.4 This reduction in specialist dementia places is to reflect the national policy drivers through the introduction of the Change Plan to shift the balance of care to community support from nursing care. It is predicted that this will increase local nursing/residential care home capacity in the future should future specialist care places be required
- 5.5 The revised arrangements will require Inverclyde Council to go to the market place through the Council's commissioning arrangements for independent sector provider/s to provide a specialist nursing care service for older people specifically who will have Dementia and Chronic Functional Mental Illness such as Schizophrenia or treatment resistant depression.
- 5.6 For adults with mental health needs, a reassessment of current clients has confirmed the need for a specialised mental health intensive supported living service for 8 people as part of the original tender proposal. This is currently not available in Inverclyde.
- 5.7 The service will promote capacity of movement between NHS and LA provided services reflecting the changing needs of these individuals who can benefit from long term rehabilitation.
- 5.8 The revised arrangements will require Inverclyde Council to go to the market place through the Council's commissioning arrangements for independent sector provider/s to provide a specialised and intensive supported living service for 8 adults based on assessment of individual need with complex mental health and associated behavioural management requirements.

- 5.9 The resource transfer funding for 8 adult places is £272,000, supplemented by client contributions of £27,000 with any additional resource required to be supported from the community element of resource transfer as outlined below.
- 5.10 In addition to the 20 commissioned places as discussed above, the CHCP are also developing community based provision to support the remainder of places that will transfer to Social Work, via the resource transfer mechanism, on closure of the hospital. The current planning assumptions are estimated at 21 beds with a resource transfer allocation of £666,000 and an estimated client contribution of £107,000.

6.0 IMPLICATIONS

6.1 Finance:

The funding of the 20 commissioned places and potential 21 community places will be met from resource transfer, supplemented by client contribution.

The ongoing financial impacts are.

Cost Centre	Budget Heading	Budget Year	Proposed Spend this Report	Virement From	Other Comments
Residential	Older People	**	£442,000	N/A	12 Specialist Dementia
	Adults		£299,000	N/A	8 Supported Living
Community	Various		£773,000	N/A	21 Community Supported
Resource Transfer	Income		(£1,315,000)		
Client Contribution	Income		(£199,000)		
Net Cost Impact		£0			

The recurring cost shown in the table above represents the costs and income for a full financial year. The timing will be determined by the closure timetable for Ravenscraig.

- 6.3 Any transitional investment required to bring services into management prior to closure of the hospital will be refined as the closure timetable progresses and discussed with NHS GG&C. The associated funding will be contained within the CHCP.
- 6.4 The timetable for the Resource Transfer from the NHS GGC Health Board to Inverclyde Council is on the closure of Ravenscraig Hospital which is scheduled for July 2014 but this is under review dependent on the confirmation of the hospital closure options.

6.5 Legal:

Legal have been consulted.