
Report To:	Community Health & Care Partnership Sub Committee	Date:	24th April 2014
Report By:	Brian Moore Corporate Director Inverclyde Community Health & Care Partnership	Report No:	CHCP/20/2014/SMcC
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Subject:	Review of Out of Hours Service Providers Arrangements		

1.0 PURPOSE

- 1.1 The purpose of this report is to update members as to the undertaking of a review of service inputs across all services in the out of hours period (between 6pm and 8am and over the weekends/public holidays) and to highlight that this work will generate options for collaboration across service areas to increase efficiency and effective of responses. The report further highlights that this work will generation options for how the CHCP uses the West of Scotland Standby Service at the end of the new contract period of 4 years in (2017/18).

2.0 SUMMARY

- 2.1 A wide range of services provide support and care to our patients/ service users and carers outwith normal working hours. Some of these services are run in tandem with inpatient services (such as in mental health), in collaboration with independent and 3rd sector providers or solely in-house. Inverclyde CHCP also contracts with the West of Scotland Standby Service for statutory social work intervention during the out of hours period and has the input of NHS24 and out of hours GPs.
- 2.2 Over the course of 6 months (February 2014 – July 2014) we will undertake a review of out of hours inputs and work though a focus group session across all services to appraise the efficiency and effectiveness of our responses. We will consider the levels of activity, levels of staff cover and management cover required, feedback from service users and their carers, feedback from practitioners as to access to information and advice out of hours, and costs involved. From this analysis a report will be produced to facilitate the consideration, across all service areas, of potential options for improvement and rationalisation. It may be possible, for example, for several groups of patients/clients to be supported out of hours through a single system rather than across multiple service responses.

It is not proposed that the work will generate any options for change to out of hours general practitioner cover as this is in place and agreed on a broader scale via NHS 24 and existing out of hours GP cover arrangements.

- 2.3 We are currently tied into a 4 year contract with the West of Scotland Standby Service which we are not in a position to deviate from due to current service set-ups and the timescales of the new contract sign off. It is anticipated, however, that we will work up the detail of standby cover we will need when the current contract ends in 2017/18 as part of the review process described above to ensure that any new arrangement is as effective for Inverclyde as possible.

3.0 RECOMMENDATIONS

- 3.1 It is recommended that members note the intention to undertake a review of service inputs in the out of hours period, and support the plan to create an options report for consideration across all services.

Brian Moore
Corporate Director
Inverclyde Community Health & Care
Partnership

4.0 BACKGROUND

- 4.1 A wide range of services provide support and care to our patients/ service users and carers outwith normal working hours. Some of these services are run in tandem with inpatient services (such as in mental health), in collaboration with independent and 3rd sector providers or solely in-house. Inverclyde CHCP also contracts with the West of Scotland Standby Service for statutory social work intervention during the out of hours period, and has the input of NHS24 and out of hours GPs.
- 4.2 The contract ICHCP has with the West of Scotland Standby service was due for renewal in 2013/14 and was progressed to new contract in March 2014. This new contract is for 4 years. A detailed paper on the renewal of this contract has been prepared for Sub Committee members. Opportunity to consider different approaches to the input we receive from standby was limited by capacity, current volume of activity being too low to warrant a specific Inverclyde service, and timescales for renewal being tight. We have therefore entered into the new 4 year contract on the basis of using the contract duration as a window to review current arrangements across all services in respect of our of hours input.

5.0 PROPOSALS

- 5.1 A half day session is being held in April 2014 to include all relevant staff to consider our collective needs for, use of and approach to service in the out of hours period.

Analysis is being undertaken prior to this session, to understand demand, current delivery, current gaps, opportunities for improvement/ collaboration, and data will be presented in respect of:

Standby Service
Community Nursing Out of Hours
Mental Health out of hours/ crisis
Mental Health medical input to A&E
Care and support at home out of hours
Alert Alarm response
NHS 24 and GP out of hours

As a result of the session we will:

- Consider current contracted services - costs, activity, outcomes to understand demand, current delivery, current gaps, opportunities for improvement/ collaboration
 - Determine options for change and what support is needed
 - Consider links to ongoing service redesign activity and potential for benefit of greater collaboration and/ or economies of scale in relation to cross-service commissioning and service delivery.
- 5.2 It is intended that this piece of work will pave the way via testing the Core Commissioning model whereby issues that cut across all services are considered in the round to reduce duplication, maximise efficiency and effectiveness and generate whole system opportunities across the CHCP.

6.0 IMPLICATIONS

Finance

- 6.1 There are no financial implications of this report.

Financial Implications:

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (if Applicable)	Other Comments
N/A					

Legal

6.2 There are no legal implications of this report.

Human Resources

6.3 There are no HR implications of this report.

Equalities

6.4 There are no equalities implications of this report.

Repopulation

6.5 There are no repopulation implications of this report.

7.0 CONSULTATIONS

7.1 We will draw on consultations with service users and carers that have already been undertaken, making use of feedback related to Out of Hours provision that has already been gathered.

8.0 LIST OF BACKGROUND PAPERS

8.1 None