

Integrated Community Equipment Service (ICES)

Ward(s): All

Portfolios: Cllr B McCracken – Social Care and Inclusion

Executive Summary:

This report provides an overview of the Integrated Community Equipment Service (ICES) and a summary of the key financial and performance issues. Future service developments are also outlined for Members.

The Integrated Community Equipment Service pooled budget is forecast to fully utilise the resources available in 2011/12.

There has been improved performance in all areas of the service despite an increase in demand for equipment and minor adaptations.

Demand on the service is as a result of factors including demographic changes, people remaining living in the community, a service focus on reablement, a requirement to more effectively manage pressure sores, and the need to facilitate timely discharge from hospital.

The future service developments outlined will result in an improved service for customers, service efficiencies and improved working between Council and NHS partners.

Reason for scrutiny:

An update report was requested by the Chair of the Social Care and Inclusion Performance and Scrutiny Panel.

Recommendations:

That Members of the Panel:

1. Note the performance and financial information presented
2. Note and comment on the future service improvements
3. Agree when a further report on ICES is to be provided to the Panel

Background papers:

None

Citizen impact:

This service is provided to many vulnerable adults and children in Walsall. Any change to the service will impact on these individuals and will be managed so that the result is no loss in service and will result in service improvement.

Environmental impact:

Services within the remit of this panel have a direct influence and impact on the environment. If a decision is reached to move the location of ICES this will have an environmental impact.

Performance management:

Financial performance is considered alongside service performance targets. Managers are required to deliver their service targets within budget. The financial and service targets are monitored through the Assistive Equipment and Telehealthcare Board and the Vulnerable Adult Executive Board.

Equality Implications:

ICES considers equality issues in setting budgets and delivering services. Irrespective of budgetary pressures the Council and NHS partners must fulfil equal opportunities obligations.

An Equality Impact Assessment (EIA) will be completed once a decision has been reached about the service developments outlined in section 5 of this report.

Consultation:

Senior managers within Social Care and Inclusion and Walsall Healthcare NHS Trust the services have been consulted about the ICES service and have signed off the performance and finance information in this report as accurate.

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1. Brief Description of ICES

- 1.1. ICES is a joint service delivered in partnership by Walsall Healthcare Trust and Social Care and Inclusion. The service is delivered and managed by staff from Walsall Healthcare NHS Trust. There are close management and operational links with Social Care and Inclusion.
- 1.2. The role of ICES is to undertake minor adaptations and to deliver standard and specialist equipment to individuals who have undergone an assessment of need.
- 1.3 The purpose of the service is to:
 - maintain people's ability to live independently in their own homes
 - promote and facilitate reablement
 - prevent hospital admission
 - manage long-term health conditions and associated problems such as tissue viability and pressure sores
 - facilitate timely discharge from hospital
 - prevent admission to residential or nursing care
 - support informal / family carers
- 1.4 ICES is based at Bentley Lane Industrial Estate in three leased units. The units are not ideal for service delivery due to their size and the physical condition of the units. Bentley Lane also accommodates the wheelchair service.
- 1.5 Governance of the service is through the Assistive Equipment and Telehealthcare Board which meets bi-monthly. It is Chaired by the GP lead for long-term conditions from the Clinical Commissioning Group (CCG); other members include senior managers from Social Care and Inclusion, Walsall Healthcare Trust, GPs, Third Sector representation and Therapy Managers.

2. Demographics Impacting on Service Delivery

- 2.1 There are some major issues that are impacting on the service, these include:
 - A growing population of frail elderly people
 - An improved survival rate for children born with complex health needs who are living into adulthood
 - More people being supported to live in the community rather than accessing residential or nursing care. This has resulted in increasing demands from both paid and unpaid carers for equipment to support them in their caring role
 - Pressure on services to facilitate early and timely discharge from hospital
 - NHS' increased need to effectively manage pressure sores and improve tissue viability. In February 2012 it was reported that demand for air replacement mattresses continues to average at 14 per week, this is being actively managed through the District Nursing Service who are

reviewing any change in patients' pressure relief needs and whether equipment can be downgraded from air mattress to static. There has been an improvement in the number of recycled mattresses due to returns and downgrades

- Demand for equipment from residential and nursing homes

3. Key Financial Information

- 3.1 ICES is financed through a pooled budget arrangement between Social Care and Inclusion and the NHS in Walsall.
- 3.2 The total ICES budget is £1,392k and currently there is a £3k under spend at month 11 and the forecast for month 12 is breakeven.
- 3.3 The service has been delivered within budget since 2009/10. The budget position is closely monitored and managed by Walsall Healthcare NHS Trust and the Assistive Equipment and Telehealthcare Board. Any financial risks to the service are identified and action is taken to manage the service within the budget available. This includes a panel of OTs and managers to screen request for non-stock items of equipment.
- 3.4 There are contracts in place with specialist providers including Karomed who are responsible for the delivery, installation, collection, decontamination (air mattresses) and breakdown of profiling beds and pressure relieving mattresses. This specialist service has recently been re-tendered to ensure best value and quality. This element of the service costs £81,000 plus VAT per annum. There is also a service commissioned from NOPAC who meet our legal requirement to service and maintain equipment such as hoists and bath lifts at an annual cost of £45,000 plus VAT.

4. Key Performance Information

- 4.1 There are key performance indicators for this service which must be met. These are mainly linked to the timeliness of delivery of equipment and completion of minor adaptations within either 7 or 28 days. The service also has recycling targets to ensure that where possible equipment comes back into the service and is recycled to other people who require it. This saves on the cost of purchasing additional new equipment.
- 4.2 Performance against these indicators has improved since 2010/11 and at Quarter 3 of 2011/12 performance was:
- 96% of items collected this year are being recycled compared to 93.5%

in the previous year. The value of items recycled up to the end of Qtr 3 this year was £1,279.663 which has already exceeded the total value of £1,184.243 for the 2010/11 year. The annualised figure for this year is expected to show a 44% increase over the previous year's figure.

96% of items have been delivered within the 7 day performance target so far this year compared to 91.5% for last year. Where items were delivered outside of target this was investigated and the main reason was a delay in the request being forwarded to the service.

5. Future Service Developments and Improvements

- 5.1 There are a number of service improvements that have been identified and are being actively implemented and overseen by the Vulnerable Adult Executive Board (VAEB) and the Assistive Equipment and Telehealthcare Board (AETB) these are:
- 5.2 Strategic intention to align child and adult equipment assessment and provision. This will improve the service experience for parents and children and will result in a seamless transition for equipment provision between children and adult services. There will also be service efficiencies due to the co-location and management of the service and stores.
- 5.3 There is an in principle agreement to review which organisation is best placed to host the service.
- 5.4 A review of the policy on the supply of equipment to residential and nursing homes. Further clarification needs to be gained and a decision reached about what equipment homes should be required to provide as part of the contractual arrangements. This is in response to the increase in demand for ICES to provide equipment in particular expensive specialist mattresses and chairs.
- 5.5 ICES is one element of the care pathway for people requiring equipment and adaptation. It is intended to review the current processes and operational arrangements to see what improvements and efficiencies can be achieved. These include making more effective links between ICES and the new Independent Living Centre (ILC) the facilities at Electrium Point (Links to Work), Telecare and Telehealth and the Occupational Therapy Service.
- 5.6 The IT system at ICES (msoft) is not fit for purpose and will not support improvements to the service. A new IT system is being sought which will streamline processes, improve customer experience and achieve service efficiencies. Senior Managers from both organisations have agreed to fund this new system and expect service efficiencies as a result of their investment in technology.

- 5.7 In principle agreement has been given by both partners to explore a re-location of the service as the current location is not fit for purpose. Any decision will be monitored by the Vulnerable Adult Executive Board (VAEB) and the Assistive Equipment and Telehealthcare Board (AETB).