

Rotherham Intermediate Care and Reablement Project

September 2019



Why Change?

- * **People have told us**
 - * They would like to be at home wherever possible
 - * They would like to regain their independence
 - * Current services are disjointed and can be hard to navigate
- * **Care Quality**
 - * Evidence shows people do better at home
 - * We know that a large number of people receive care in a community bed when they could have gone home with the right support
 - * Rotherham has significantly more community beds than other similar areas
 - * Current services are focused on older people and their physical needs
 - * Through changing the way we work, more people are going home and our community beds are not fully utilised

Current Services

Community based services

Integrated Rapid Response (TRFT)

Community Locality Therapy (TRFT)

Independent and Active at Home Team (TRFT and RMBC)

Reablement (RMBC)

Bed based services

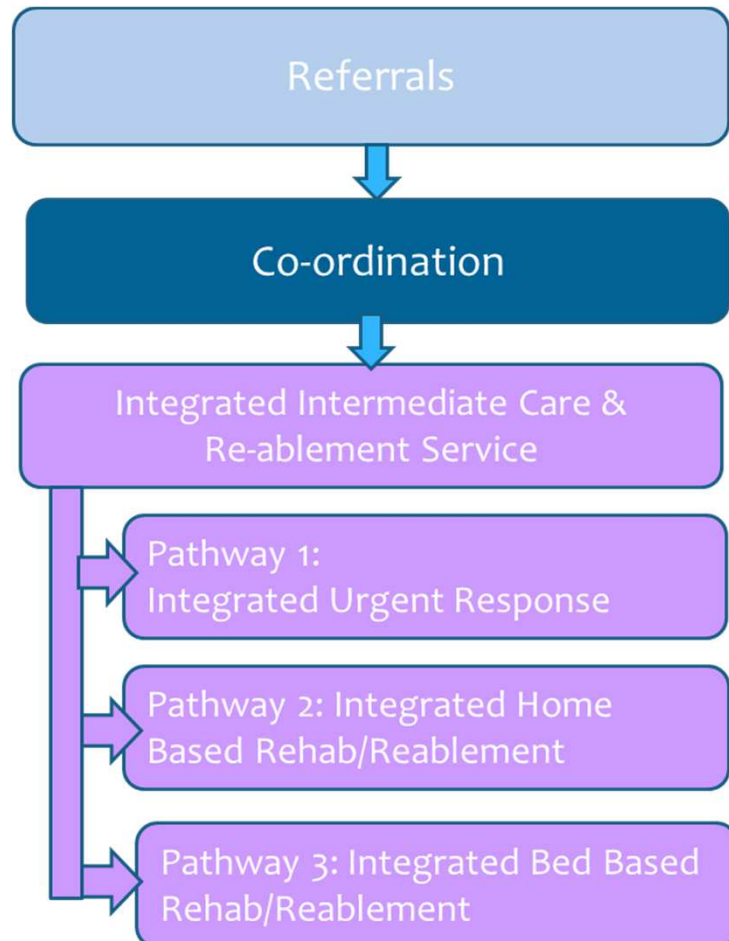
Intermediate care at Davies Court and Lord Hardy Court (RMBC and TRFT)

Oakwood Community Unit (TRFT)

Waterside Grange (Independent Sector)

- Services currently provided by a range of teams and bed-based sites
- In addition, several teams of social workers and therapists working into the bed-based provision
- People move through multiple services rather than an integrated pathway
- Significant duplication and some capacity issues in a number of services

Project Aim



- * To simplify current provision to provide an integrated, multi-disciplinary approach to support individual needs across health and social care
- * To re-align resource to increase support at home, reducing reliance on bed based care

Future Services

Community based pathways

1. Urgent response
(integrated team)

2. Home-based reablement and rehabilitation
(integrated team)

Bed based pathway

3. Community bed-base – rehabilitation and reablement without nursing
(integrated team)

3. Community bed-base – rehabilitation and reablement with nursing
(integrated team)

- Three core integrated pathways
- Services align to work as a single team to provide the three pathways
- Increase in community capacity to meet the demand to support people at home (urgent response or rehabilitation / reablement)
- Reduction in community bed-base (phased and double-running for a period with increased community capacity)
- Integrating processes for triage and coordination to ensure people get the right support
- Reduction in duplication

Benefits

Patients and carers

- Improved experience of services
- Telling story once
- Reduced duplication and hand-offs
- Improved outcomes
- More people able to be supported at home

Commissioners (CCG and RMBC)

- Supports Rotherham Plan for 'Home First' and integration of service delivery
- Reduces over-reliance on bed base where Rotherham is an outlier
- More cost effective model

RMBC (service delivery)

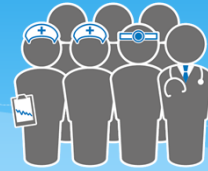
- Supports delivery of the Council's target operating model and future sustainability
- Improving flow through the social care system

TRFT

- Supports the Trust's wider plans for bed configuration / estate moves
- Improving flow through the hospital and community services

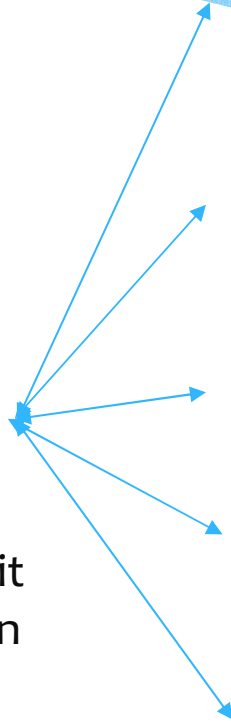
Taking the work forward

Workforce: HR & OD



Pathway
Redesign &
Implementation

Off-site
Community Unit
Implementation



IT , IG and analytics



Accommodation



Communications
and Engagement



Finance,
contracting and
commissioning

DRAFT

Proposed Timeline / Phasing

	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20
Community IC and reablement																			
Approvals																			
Recruitment																			
Staff in post (inc. capacity)																			
Training / development of Generic Support Workers (core competencies)																			
Double-running of increased community capacity and full community bed-base																			
Clinical pathway engagement and redesign (staff, patients, carers)																			
New reablement model in place																			
Staff consultation																			
Staff enabled into new structure																			
Implement new pathways, ways of working and new model of care																			
New model of care fully operational																			

Pathway / Phase	Date
Integrated Model Home Based Pathways 1&2 Reduced Intermediate Care Bed Base	from 1 April 2020 from June 2020
Therapy Led Community Unit with Nursing (Phase 1: off site) Open off site unit	November 2019
Therapy Led Community Unit with Nursing (Phase 2: on- site)	November 2020