

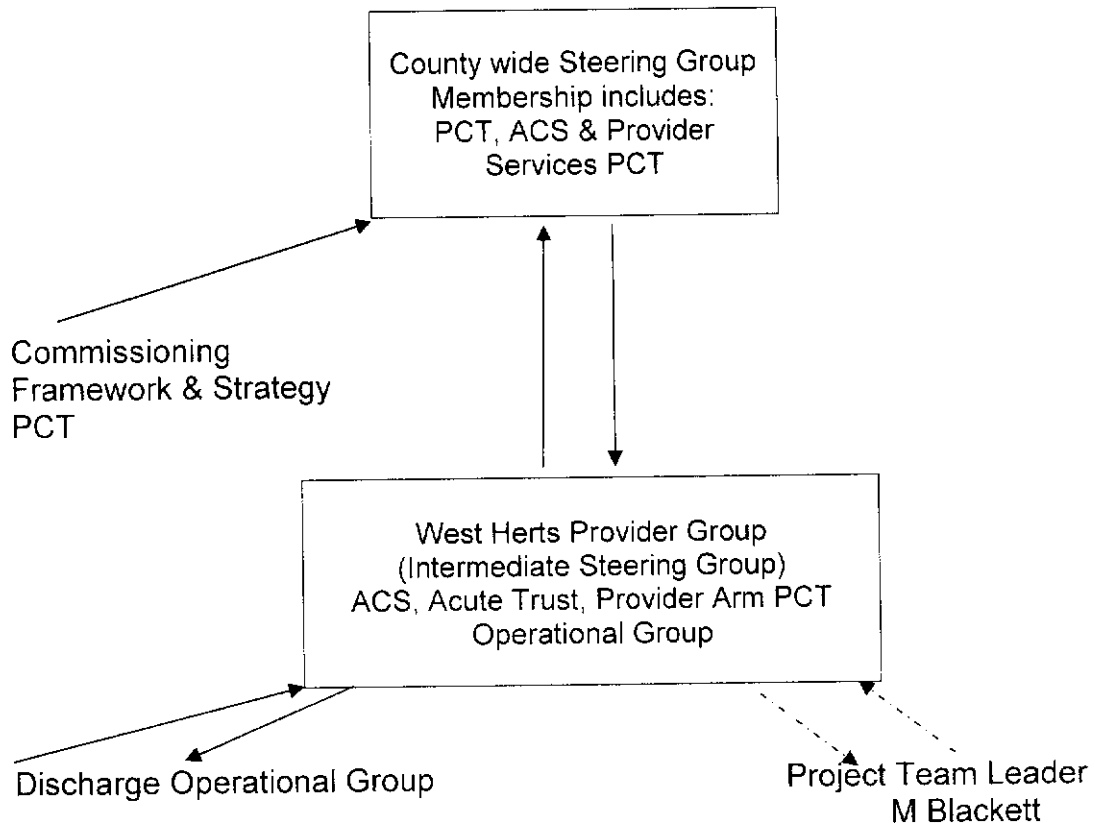
INTERMEDIATE CARE REPORT TO CONCLAVE

Current situation in West Hertfordshire

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In order to deliver the planned acute admission unit at Watford General hospital, and the changes proposed in the Acute Services Review, ongoing development of Intermediate Care will need to continue. Intermediate Care is delivered by health and social care partnership. Main health providers are the Provider arm of the Primary Care Trust and West Herts Hospitals Trust. The service will need to be commissioned by the four Practice Based Commissioning groups in West Hertfordshire, and they will need to agree to use their financial resources to fund the service and be involved in the commissioning.

Current groups involved in Intermediate Care



Current Service – 2 Distinct Service Models

STAH and Hertsmere: More developed, more investment. Perceived as more effective by Clinicians. Able to undertake step up and step down. Non bed, and bed based service, integrated multi-disciplinary teams. Consultant medical input. Access to diagnostics at community hospital sites, SACH, PBCH.

Issues not clarified: is it cost effective, prioritisation between step up and step down cases.

DacCom and WatCom area: Less investment. Bed based services, some non bed based service. Lack of access to diagnostics means use of ICT to deliver step up care is reduced, due to clinical concerns, potentially greater use of secondary care.

Services not well integrated. No medical input to non bed based part of Intermediate Care.

Emergency issues:

1. Currently intermediate care pathways being developed, but is I.C. part of other disease pathways rather than a pathway on its own. Should the model of I.C. across West be the same and if so what model should be developed. This will then create a clear action plan to deliver the model.
2. Lack of engagement by and with PBC groups. No PBC I.C. Leads identified, this needs to be actioned by the PBC groups. PBC Leads to be engaged in developing the commission specification for I.C.
3. Availability of diagnostics to I.C.T.
4. PBC groups interested in 'redesigning' community services. This seems to be mainly district nursing and health visiting services. Across West Herts currently variable 'integration' between D/N and I.C.T. Need to develop the relationships between the PBC groups and Provider Services of PCT.
5. Role of Project Manager in I.C. – will lead Project Steering Group
 - Project description reviewed. Opinion: operationally based
 - How does this Project group differ from current West Herts Operational group?
 - Need to clarify model/s to be used across West Herts
 - Suggest covers all of West Herts Intermediate Care services

Dr Mike Edwards
PEC Chair, West Herts PCT
12.10.07.

INTERMEDIATE CARE COMMISSIONING

