

What does living independently mean to you?

- To be able to shut the door with no one asking how you are?!
- Self care
- Looking after myself and being able to do daily living activities
- Not relying on other people
- Knowing who to contact and where to go for suitable assistance
- To look after my wife who has Alzheimers and to look after myself as well
- Have the chance to do what I want to do which includes what other people don't think is wise!
- Personal choice not patient choice

What would you like to get out of today?

- Where is Warrington up to?
- What is the full range of services I can refer to?
- Where can I get independent financial advice?
- Having access to services at the point of need

What services do you use?

- My Life Warrington
- Adult Social Care occupational care and assessment team
- Vulnerable Tenants Support Scheme
- Wellbeing Service – (by accident no referral)
- Catalyst
- CAB
- Age UK
- Warrington Disability Partnership – aids, equipment and smart flat
- Warrington have more access and have more on offer from experience in other parts of the country

What would you stop, change, strengthen or start?

- Buildings need to be built to be more accessible and more bungalows built. This should also include more social housing.
- Befriending service is a gap
- Can there be a consensus that organisations are named the same in the different parts of the country this would make it easier for other organisations working regional to refer.

Overview

- Warrington Borough Council and Warrington Clinical Commissioning Group (CCG), supported by the Warrington Better Care Fund (BCF).
- Ensuring that people spend more of their lives living well and independently, with a lower requirement for personal care.
- We want to ensure that frail people particularly receive more early intervention at home to improve outcomes and reduce the need for hospital and/or respite care.
- Co-production, at least 60 people (patients, staff, managers) involved to date
- Thinking and findings so far, much more still do to
- Surveys, data analysis, best practice
- Deadline June 2020

What are intermediate care services?

- Intermediate Care Services both prevent admissions into hospital by delivering rapid response and reablement services in a person's own home as well as delivering reablement services on discharge from hospital that maximise people's independence to reduce or delay the need for care and support.
- We currently have a range of intermediate care services provided by different organisations working across Warrington.
- Intermediate care beds at Padgate House and Brampton Lodge
- Intermediate care services based at Irwell Road
- Working closely with other services linked to intermediate care including Rapid Community Response, First Response (day), Out of Hours (night), Care Call, Rapid Response Hospital Service, Rapid Intervention Service Frailty Hub, Night Sitting.

Why redesign?

Why do we need to redesign services?

- We want to make sure that we have the correct ratio and type of bed-based and community-based services for the future and that our buildings are fit for purpose. We aim to deliver services that will keep people independent and living well at home for as long as possible and to ensure the model of delivery is appropriate for the future needs of the population in Warrington

What do we want to improve?

- We want to redesign intermediate care services that deliver on the Warrington Together and NHS Long Term Plan ambitions about providing better community-based services that can prevent people needing to go to hospital. We aim to ensure we have:
 - Staffing models that are integrated (nurses, social workers, therapists etc. working closely together with primary care, community and hospital services and offering a seamless customer journey)
 - Processes (triage tools and assessment procedures) and pathways (steps taken with individuals by services) that are effective and efficient
 - Bed-based care provided in a building(s) that is/are fit to deal with future demands
 - A system that can support more people per day than currently
 - IT systems that can support integrated working

Our approach

What approach are we taking?

- Surveyed patients
- Focus Groups with staff
- Surveying referrers, professionals, carers and colleagues
- Engaging with stakeholders, using your feedback to co-design and produce safe and affordable solutions that will address our known challenges
- Today is part of the process for getting as many views as is practicable

What do you think people need to avoid going into hospital?

- Promote physical activity to maintain good health
- Support at home. Access to wellbeing.
- Surrogate carers
- Stay out of hospital – communications campaign on UTI – wee chart
- Education self-care re: hydration/ nutrition/ exercise
- Ensure people with poor literacy can understand
- Befriending service for older people to reduce isolation and re-enforce education
- Ensure social prescribing is fit for purpose

- GPs need to do more re: exercise and healthy lifestyles from middle aged onwards
- Educating carers with top caring tips for caring e.g. how to keep your loved one hydrated and how to avoid falls/ trips.
- Carers being trained and informed about UTI's – how to avoid them and how to spot the signs
- Equip staff to be extra vigilant – give them the correct tools to pick up any issues.
- Third Sector support from volunteers, befriending services. Much more than a safeguarding issue. Referral into appropriate services.
- More education around referrals, GPs and district nurses

What do you think people need to get home from hospital quicker?

- Discharge care should start on admission.
- Look at personal situation at A&E – do you care for any vulnerable people/ person?
- Single point of contact – which has been on the table for over 10 years.
- Family knows about parents better than consultants. Listen to and consult them at decision making appointments.
- Plan for discharge from admission – ask about home circumstances, care already available. Family support so that if rehousing is an issue the work starts immediately.
- Single point of contact and a common language that public and family understand
- Consult individuals on their own care.
- Discharge package- with information of services
- Families may be able and willing to do something – e.g. fitting grab rails which can speed things up
- District nurses need to be informed when patients are discharged so they know to visit
- Ensure that people are supported – that there is communication between services.
- Information sharing between services
- Make sure that the carers are physically able to help the person
- Befrienders – going to home to help with light care not personal care
- Make sure that they have a voice – make sure the right questions are being asked
- Make sure the relevant assessments are completed
- Communication – have they had their medication if so when? Community nurses
- Make sure they have the correct benefits in place so they have money for food and fuel.

Any other comments you want to give us?

- Are you linking in with organisations that are working face to face with vulnerable people i.e. care providers such as Home Instead? What issues are they seeing? Do they link in with other organisations? What suggestions do they have?
- A lot of what is/ has been discussed has been suggested over the years and implemented i.e. discharge service from hospital. What worked, why is it still not happening, is it still happening?
- Befriending mentioned as a gap – Why not commission this service? Is it really a gap or just not promoted enough?
- Come home – Befriending service to make GP appointments, do shopping, ensure the right HCPs are visiting when they should.
- Up skill domiciliary care, longer appointments
- More support from Third Sector Organisations
- Quarterly meetings review at Hollins Park includes Nurse Practitioner, wellbeing and social services. This works well but we hear it is stopping? It doesn't happen if they go to a consultant led clinic. It needs to happen for everyone
- More home visits from GP or health professionals. Consistency of people who know you
- Most services are in the day there needs to be more in the evening or weekends. This needs safe, secure access to buildings
- Transport is an issue – particularly in the evenings. Could services like the Lymm minibus be more accessible? Some people need extra help so ordinary buses will not do
- Communications with community care services
- Support from carers and families
- Better access to GP services
- More support for carers to make appointments
- Equipment -professionals to the people's home making private carers more affordable
- Change in language around palliative care, hospice care

Evaluation

15 evaluations were completed, the summary is below:

Has the event been of value to you?

73.3% stated yes and 26.7% stated yes somewhat

How would you rate the event overall?

86.7% stated very good and 13.3% stated excellent.

Is there anything about this meeting that you would change? How and why?

- Agenda in advance for all participants
- Correct start time being sent in the email
- Timings, ensure time is correct
- Really good, informative and not too long. People only stay interested for so long. Very good
- Good discussions but a lot of what we are discussing has already been set in place 10-15 years ago
- I would have liked to know who was here e.g. organisations
- Nothing. Well organised and opportunities for discussion on the topics
- Better slides with larger and easier to read text
- More information beforehand e.g. open from 12:30 to look around the marketplace event starts at 1:15pm. Food and drink available from the café in the Gateway

Would you recommend the next event to friends, colleagues etc

100% stated yes

Suggestions for future topics:

- More up to date medical conditions
- Dentist – finding an NHS dentist can be problematic
- Mental health
- Healthy lifestyles for all ages
- Transport for disabled
- Social prescribing

Due to Purdah the event was rearranged from October. This had an impact on the number of people who were able to attend, due to the new date being close to Christmas. This was unfortunately not in our control but for future events we will not hold them too close to Christmas or other holiday periods.

The informal structure worked well with different opportunities for people to be involved.

A loose agenda with the structure and topics was sent out beforehand, however participants would have preferred a more detailed agenda, including what other facilities are in the Gateway. This will be actioned for all future events.

A list of organisations attending will be sent out with the slides and notes from the event. For future events we will consider how we can incorporate this in on the day, depending on numbers.

We will ensure that all slides for future events are more accessible.

The suggested topics will be discussed with the CCG Health Forum. The Forum will be involved in planning the future events and topics whilst also ensuring they are coordinated with the CCG's commissioning priorities.

From the suggested list information will be sent out relating to the below:

- Dentist – finding an NHS dentist can be problematic. Information on where people can find out which dentist is accepting NHS patients and the emergency dentist service will be sent out. The CCG do not commission dentists this is NHS England.

https://www.warringtonccg.nhs.uk/Images/Page%20Images/local-services/warrington_dentists.htm. Local dentist can be found on the left side of this page

- Healthy lifestyles for all ages – information on national campaigns and local LiveWire services will be sent out

<https://www.activecheshire.org/>

<https://livewirewarrington.co.uk/>

<https://www.nhs.uk/oneyou/>

- Transport for disabled – Information will be sent out

<https://www.mylifewarrington.co.uk/kb5/warrington/directory/service.page?id=sbd3zZPthyY>

<https://www.disabilitypartnership.org.uk/>

Appendix 1 - List of Organisations in attendance

- WIRED Carers
- LiveWire
- Care Call
- Warrington Disability Partnership
- St Roccas
- Bridgewater Community Healthcare NHS Foundation Trust
- Bridgewater Home Care
- Reed Wellbeing
- MacMillan Benefits Advisor – Citizen’s Advice Bureau
- Active Cheshire
- Causeway and St Sankey Medical Centre PPG
- Fearnhead Medical Centre PPG
- Public Governor Warrington and Halton Hospitals NHS Teaching Trust
- Re-engage
- Healthwatch Warrington