



## **SCRUTINY REVIEW OF DISTRICT NURSE PROVISION**

To - Health and Social Care Scrutiny Panel  
Date of meeting – 17<sup>th</sup> November, 2015  
Notes of - Committee Administrator

### **UPDATE REPORT ON THE IMPLEMENTATION OF INTEGRATED CARE**

#### **Background**

1. In March, 2015, the Health and Social Care Scrutiny Panel completed its review of local District Nurse Provision.
2. The final report with recommendations was submitted to the Clinical Commissioning Group (CCG) and East Lancashire Hospitals Trust (ELHT) for appropriate action.
3. The CCG and ELHT agreed to submit regular updates on the transformation proposals to the Health & Social Care Scrutiny Panel.
4. This has taken place in the form of an update report to the June, 2015 meeting of the Panel and attendance at our September meeting. Here the Panel received information on the Integrated Neighbourhood Teams (INTs) and the Intensive Home Support Service (IHSS) and heard of their initial success.
5. At the September meeting Members put a number of questions to the representative from ELHT, which she answered where possible. Information on the following was also requested –
  - Case studies re the Intensive Home Support Service
  - The view of telemedicine by stakeholders and pharmacies
  - The admission and re-admission rates after the intervention of the Integrated Neighbourhood Teams
  - The anticipated savings resulting from hospital avoidance

This information was not readily available at the meeting, but has subsequently been provided as follows -

## **Case studies re the Intensive Home Support Service**

6. The first case study, provided at **Appendix A**, shows details of an Intermediate Care Allocation Team (ICAT)/Intensive Home Support Service (IHSS)/Therapy Service User demonstrating good use of the integrated community services to avoid an admission to hospital.
7. The second, provided at **Appendix B**, shows a patient's positive experience of the Rapid Response Service: Intensive Home Support.

## **The view of telemedicine by stakeholders and pharmacies**

### **8. GP Colleagues**

*.... " the telemedicine triage service has made a real difference and saved in time in primary care – before we had examples of large homes weekends logging lots of concerns then calling the practice on Monday requesting numerous visits. Now staff call straight through to the Hub 24/7 whenever they need. Calls are triaged by the acute care nurses and problems are often solved immediately – only those that really need a GP visit are arranged".*

*"Of all the changes in the 15 years I have been working, this is the greatest change which has reduced workload I can remember. I don't mind the extra 'late' duty doctor visit as this is more than made up in the drop in other visit. A big thank you to all involved".*

#### **Quote from Tina – Manager Marsden Heights (Nelson)**

*"we love the 4G laptop we can use it everywhere in the home now, it's really positive news after the problems we have had with our internet in the past"*

#### **Quote from Julie- Manager Cravenside Residential Home (Barnoldswick)**

*"Since we have been using the new GP triage service we are able to get medical advice straight away.*

*We no longer have a long list for the GPs on a Monday morning.*

*It has been a major improvement to the well-being of my service users"*

#### **Quote from Nadine - manager Spring Cottages Care Home (Burnley)**

*"Telemedicine is the best thing ever, it has transformed the backup service for the staff and the treatment of the client. I think it's that great I give your number out to everyone for them to try and get it"*

9. Information on the admission and re-admission rates after the intervention of the Integrated Neighbourhood Teams and the anticipated savings resulting from hospital avoidance is not yet available as more time is required to monitor the impact following the go-live date.
10. It is hoped that this information can be presented to the Panel at its February, 2016 meeting.

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