

Provisioning strategy

Community capacity options development project

Terms of reference

1. Remit

The *Provisioning Strategy – Community capacity options development project* (Provisioning Strategy Project) will have oversight and accountability for progressing the recommendations contained within the [Final report of the Community Hospitals and Care Homes Provision Change Board 2021/22](#):

- Recommendation 1: the 4 key options for Inpatient Community Hospital Beds require further consideration including the capital and revenue requirements and noting the decisions that the IJB is able to make on its own or where partner input and support (capital and / or revenue) may be required.
- Recommendation 2: the 5 key options for Care Home Beds to be considered across each of the geographical areas. Some areas would see an increase / decrease in their bed rate. This helps to highlight and gain insight to the impact on any decision made to locate and develop new or replacement care home bed capacity.
- Recommendation 3: to focus on extending Intermediate Care resources and develop new and more intermediate care provision. This will be a key priority for further investment.
- Recommendation 4: further develop and model the financial implications of the options identified for both Inpatient Community Hospital Beds, Care Home Beds and Intermediate Care, identifying where partner input is required and revenue and capital pressures.

At their meeting on 23rd February 2023, the East Lothian Integration Joint Board supported the Change Board recommendations and directed the Chief Officer and Senior Management Team to develop the range of capacity options for inpatient community hospital and care home beds and intermediate care, including financial assessment of all options.

The work of this project will contribute towards delivery of IJB Direction 12I: *NHS Lothian and East Lothian Council to transform the service delivery to older people for the provision of Community Hospitals, Care Homes and the development of intermediate care services, involving full engagement and consultation with appropriate parties. This should take into account demographic factors, current use of services, the impacts of COVID-19, funding pressures, service remobilisation and redesign. It must also take note of the emerging outputs from the Independent Review of Adult Social Care and development of a National Care Service* (previously direction 12d).

2. Scope

The co-production of realistic and achievable solutions for the provision of the following services within the next 5-10 years:

- Intermediate care provision including Care at Home
- Care Home provision

- NHS inpatient provision

This work is bounded by the findings and conclusions from the work of the Community Hospitals and Care Homes Provision Change Board:

- Inpatient community hospital beds – beds are being managed effectively and there is currently sufficient capacity in the system for the foreseeable future. There is unlikely to be a requirement for additional hospital beds in the medium to long term.
- Care home beds - Analysis identified that the development of capacity for care home beds in East Lothian is bounded at a maximum of 70 replacement beds and potentially 30 new beds. These figures will be influenced by external provision (private/independent), intermediate care, capital expenditure options (availability) and different models of care.
- Intermediate care – the intermediate care report highlighted the breadth and depth of those services being provided in East Lothian and the benefit they now provide from previous investment. Intermediate care to be a key priority for further investment.

3. Project Objectives

IJB Strategic objectives:

- Develop services that are sustainable and proportionate to need.
- Deliver new models of community provision, working collaboratively with communities.
- Focus on prevention and early intervention.
- Enable people to have more choice and control and provide care closer to home.
- Further develop / embed integrated approaches and devices.
- Keep people safe from harm.
- Address health inequalities.

High-level project objectives:

- Deliver high quality care and support to East Lothian's current and future older population, at the right time and in the right place.
- Ensure services for older people are sustainable and adaptable to the current financial climate, the impact of the COVID-19 pandemic and national policy.
- Engage with communities within East Lothian to ensure co-production of services that will allow for equality of service across our diverse population.

Performance (SMART) objectives:

- Reduce unmet need related to care at home provision:
 - No more than 500 hours of unmet need within care at home provision by March 2024.
 - No more than 20 East Lothian residents within NHS Lothian inpatient beds awaiting a care at home package or care home place by March 2024.
- Reduce number of East Lothian residents presenting at the Royal Infirmary of Edinburgh or in acute settings.

4. Chairperson

Project Team

The Project Team will be co-chaired by Fiona Wilson (Chief Officer and Director of ELHSCP) and Iain Gorman (Head of Operations, ELHSCP).

Short life working groups

Short life working groups may be formed to lead on specific work streams.

5. Project Team Membership

Role	Name
Director of East Lothian Health and Social Care Partnership (Co-Chair)	Fiona Wilson
Head of Operations, ELHSCP (Co-Chair)	David Hood
Strategic Planning & Commissioning Officer, ELHSCP (Project Manager)	Andrew Main
Chief Nurse, ELHSCP	Sarah Grossner
General Manager (Planning and Performance), ELHSCP	Laura Kerr
General Manager (Acute, Ongoing Care and Community Nursing), ELHSCP	Gillian Neil
General Manager (Access and Rehabilitation)	Lesley Berry
Chief Financial Officer, East Lothian IJB	Vacant
Interim Clinical Director, ELHSCP	John Hardman
General Manager (Adult Social Work), ELHSCP	Isobel Nisbet
Chief Social Work Officer / Head of Children's Services, ELC	Lindsey Byrne
Project Support Manager, ELHSCP	Suzanne O'Kane

6. Quorum

Meetings will be quorate when there is 50% attendance. Members should consider identifying a suitable representative with delegated responsibility to attend if they are unable to.

7. Frequency of Meetings

The Project Team will meet fortnightly.

8. Key responsibilities

- Provide a structured and accountable approach to delivery of the project and its work streams.
- Ensure a culture of involvement, engagement and appropriate consultation throughout the project and its work streams, using a range of approaches.
- Ensure a clear line of sight to the priorities as set out in the IJB Directions and delivery through the Strategic Plan.
- Report in line with the agreed governance and reporting arrangements.
- Set the tone and direction for partnership working.
- Support the delivery of all relevant national and local targets and performance requirements in respect of health and social care.

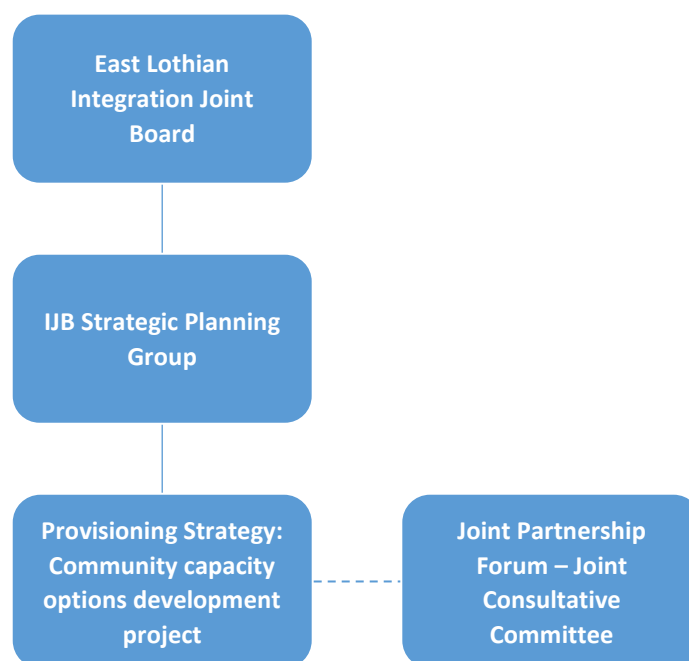
- Maintain effective links with other partnerships and Change Boards in areas of joint concern.

9. Communication and Engagement

Effective stakeholder communication and engagement is recognised as a key component of this project and as such a Communications and Engagement Strategy and consultation plan will be developed at the earliest opportunity.

10. Governance and reporting arrangements

The Provisioning Strategy Project will provide updates and briefings to the IJB Strategic Planning Group and IJB, receiving comments, challenge and support. Thereafter reports and briefings will be presented to the IJB for consideration, decision making and sign off. Short life working groups may be tasked with progressing specific work streams reporting to the project team in the first instance. Regular updates will be provided to the Joint Partnership Forum – Joint Consultative Committee who will also be consulted at key milestones.



Document history

Version	Date of issue	Reason for issue
0.1	10/03/23	Initial draft.
0.2	24/03/23	Updates to Scope, SMART objectives and Governance.
1	28/03/23	Signed off by Project Team and distributed to members.
1.1	16/06/23	Addition of Chief Social Work Officer to membership.
1.2	03/08/23	Addition of David Hood to role of Head of Operations.
1.3	28/09/23	Changes to membership.