

AGENDA MANAGEMENT SHEET

Name of Committee **Adult and Community Services Overview and Scrutiny Committee**

Date of Committee **14th March 2007**

Report Title **Integrated Community Equipment Service - Update**

Summary This report is to update the Committee on the work of the Warwickshire Community Equipment Service.

For further information please contact: Steve Smith
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Would the recommended decision be contrary to the Budget and Policy Framework? [please identify relevant plan/budget provision] No.

Background papers Report to Social Care and Welfare Overview and Scrutiny Committee – 21 June 2005 - "Integrated Community Equipment Service"

CONSULTATION ALREADY UNDERTAKEN:- Details to be specified

- Other Committees
- Local Member(s)
- Other Elected Members Councillor F McCarney, Councillor M Stanley, Councillor Mrs J Compton, Councillor R Dodd, Councillor R Randev
- Lead Cabinet Member Councillor C Hayfield
- Cabinet Member
- Chief Executive

- | | | |
|--------------------------|-------------------------------------|--|
| Legal | <input checked="" type="checkbox"/> | Jane Pollard, Alison Hallworth |
| Finance | <input checked="" type="checkbox"/> | Philip Lumley-Holmes, Financial Services Manager |
| Other Chief Officers | <input type="checkbox"/> | |
| District Councils | <input type="checkbox"/> | |
| Health Authority | <input type="checkbox"/> | |
| Police | <input type="checkbox"/> | |
| Other Bodies/Individuals | <input type="checkbox"/> | |

FINAL DECISION YES

SUGGESTED NEXT STEPS:

Details to be specified

- | | |
|---|--------------------------|
| Further consideration by this Committee | <input type="checkbox"/> |
| To Council | <input type="checkbox"/> |
| To Cabinet | <input type="checkbox"/> |
| To an O & S Committee | <input type="checkbox"/> |
| To an Area Committee | <input type="checkbox"/> |
| Further Consultation | <input type="checkbox"/> |

**Adult and Community Services Overview and Scrutiny
Committee – 14th March 2007**

**Update on Performance of Warwickshire Integrated
Community Equipment Service**

**Report of the Strategic Director of Adult, Health &
Community Services**

Recommendation

That the Committee considers the work of the Integrated Community Equipment Service and comments accordingly.

1. Introduction

- 1.1 The Integrated Community Equipment Service (ICES) has now been operational for two years. This report is to apprise Members of its performance and progress.

2. Background

- 2.1 In February 2005, Nottingham Rehabilitation Supplies (NRS) began delivering items of equipment on behalf of Warwickshire County Council and the three PCT's, having been awarded the tender for the service. It was jointly commissioned by the Council and NHS in partnership, with the budgets for the service being pooled. Warwickshire County Council manages the pooled budget, reporting to the ICES Management Board. This comprises service representatives of each partner organisation and is chaired by a PCT representative.
- 2.2 Prior to the partnership arrangement, equipment had been held in ten stores across the County, mainly operated separately by Council and NHS staff. This was very inefficient, as there were no arrangements for bulk purchase of stock, for co-ordinated stock management or for proper recycling. As a result, one store could have been waiting for items which were available elsewhere in the County. Separate orders had to be placed by Health and Social Care staff, and the delivery arrangements were piecemeal, often requiring therapists to transport equipment themselves. There was no consistent system to recover items no longer needed and when they were returned they could not be properly maintained or cleaned. This resulted in items being unnecessarily scrapped or health and safety rules being breached as staff tried to clean items themselves.

- 2.3 The joint commissioning of the service from NRS addressed all of the above difficulties, preventing the need for therapists to undertake deliveries and the need for the significant investment involved in bringing the stores up to the necessary health and safety standards.

3. Delivery of the Service

- 3.1 Preparation for the new partnership arrangement was crucial. A catalogue of items of equipment available from the service was compiled jointly between Health and Social Care, with criteria for prescribing each item being included. (This innovative work attracted interest from some other authorities who used the Warwickshire approach as the basis for their own catalogues.) Over 1,200 staff from Health and Social Care were trained and issued with unique personal identification numbers which they use to order items. These unique authorisation numbers are used to track all activity to the prescriber and their organisation, facilitating detailed analysis of spend and activity.
- 3.2 The time between winning the contract and going live was very short and NRS did exceptionally well to find premises and get the store and the call centre operational for February 2005. Unfortunately, at this time NRS as a company were expanding rapidly, winning several other ICES contracts and acquiring part of Huntleigh Healthcare. NRS found themselves short of experienced staff especially contract managers and were slow to react to this key factor.
- 3.3 Although the launch of the service went extremely well in the first few months, the quality of the service provided by NRS deteriorated from mid-2005 to early 2006. Management information became unreliable, communication between NRS and providers was poor and complaints increased. The increasing lack of confidence in NRS by the ICES Management Board resulted in a number of actions being taken to address the problems:-
- Audits were carried out by NHS and Council auditors to identify management and process deficiencies.
 - Meetings were held with senior NRS managers to require them to improve their performance.
 - A contract remedy notice was issued to ensure that remedial actions were taken by NRS to deliver according to the contract.
- 3.4 As a result of the above, the following actions were taken by NRS:-
- The under-resourcing of the contract was acknowledged by NRS.
 - A dedicated full-time contract manager and a new regional manager were appointed, taking up their posts in March 2006.
 - The contact centre which had been based in Nottingham and serviced a number of contracts was disaggregated, with a dedicated centre

based in Leamington Spa being established. This improved communications with prescribers.

- The management information provided by NRS was scrutinised and corrected, with a revised reporting system being developed and put in place.
- NRS instigated a more robust staff training programme.
- Complaint resolution and analysis was made a priority.
- NRS achieved ISO accreditation to ensure that a recognised quality assurance system is in place.

It has taken some time to turn the performance around, but we are now seeing positive outcomes to this work.

4. Performance

- 4.1 When the tender for the service was prepared in 2004, anticipated volumes for activity were included in the contract. The service is performing well above those figures. The number of deliveries for 2005/06 in the contract was 9,271. The actual number of deliveries was 15,431, 66% above the contracted figure. The number of items of equipment in the contract was 30,793. The actual number of items delivered was 47,240, an increase of 53%. In the first seven months of this financial year, 10,371 deliveries have been made, which is 92% more than the contracted figure. Additionally, nearly 4,000 collections of equipment have been made, so 65% of stock by value is being recycled.
- 4.2 In view of the dissatisfaction with the service last year, it was to be expected that there would be a high number of complaints about NRS. In fact, during the past 18 months, 107 complaints were received, which equates to 0.76% of the number of deliveries and collections being made during that period. All complaints are now analysed and reported to the Board, and a significant reduction has been achieved. From a high point of 32 complaints being made in March 2006, the figure has steadily fallen, with 14 being made in December 2006. The overwhelming majority of these were from staff rather than service users and related to communication issues with NRS when prescribing equipment. Separate satisfaction surveys are shortly to be carried out with service users and staff to identify what action can be taken to further reduce the incidence of complaints.
- 4.3 One of the indicators in our Performance Assessment Framework is the number of items delivered within seven days of the decision being taken to supply (D54). Our target is to exceed 85%, which will give us the highest possible rating. Our analysis of the data supplied by NRS has given rise to concerns that we will fall short of this figure, but detailed work has now enabled us to reconcile their figures with our's and the performance is currently around the 85% figure. The Adult Health & Community Services Social Care Improvement Board has taken the following decisions to ensure that the performance improves further:-

- Staff instructed to ensure that the order for equipment is placed with NRS on the same day that the decision to supply the item is made, so no days are "lost".
- Implemented on-line ordering to ensure that faxed copies cannot go astray, causing delays.
- Temporarily employ two Occupational Therapists to increase the level of activity until the end of this financial year. (This initiative will deliver the added benefits of further reducing waiting times for assessments, and will make referrals to the PHILLIS project, potentially increasing the number of people helped to live at home).

5. Current and Future Developments

5.1 Having now established the service on a more secure footing, we are in a position to progress a number of developments:-

- A value for money review is being undertaken to ensure that the arrangements are delivering the anticipated financial and service benefits.
- The partnership arrangement with the NHS is being re-negotiated to reflect the changed structure of the PCT. This work will also enable the governance arrangements for the service to be reviewed and strengthened.
- Consideration is being given to bringing other partners in to the service, e.g. Children's Services, so that they can also benefit.
- On-line ordering which has now been established for Council staff will be rolled out to NHS staff.
- The multi-disciplinary training programme which currently focuses on basic prescribing skills is being extended to cover more specialist subjects.
- NRS is implementing a comprehensive electronic monitoring system which tracks every single item of equipment and uses in-cab technology to track and control all deliveries and collections.

6. Conclusion

6.1 There have been significant difficulties in the provision of this service which NRS acknowledges were due to them under-resourcing the contract. However, the close working with them over the past year has improved their performance and is restoring confidence in them as providers.

6.2 One of the key features of this service is that it is jointly commissioned with the NHS. This has facilitated credible collaborative working and has resulted in

a service which is now achieving the objectives set for it.

- 6.3 Although there had been concerns that the performance target D54 would not be achieved, we are now forecasting that we will do so.
- 6.4 With the main difficulties described above having been overcome, we are now able to progress the development of the service and build on the benefits of partnership working with the PCT.

7. Recommendation

- 7.1 The Committee is recommended to consider the progress made in establishing the ICES and the actions taken to ensure that it performs to requirements. Committee is also recommended to note the benefits to the citizens of Warwickshire by partnership working with NHS colleagues.

GRAEME BETTS
Strategic Director of Adult, Health &
Community Services

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February 2007