

**CHANGE AGENT TEAM  
RECORD OF PRACTICE IDEAS AND INNOVATIONS**

*Please record any new ideas in service provision, (service re-design, successful partnerships etc) or big or **small** innovative practices/processes that appear to have a significant impact on service delivery (e.g. flagging specific patient notes to identify a risk factor). Please check that the 'contact' is happy to be contacted to explain their practice*

***These are practices and ideas heard about or seen on visits by the changes agents. We think they could be applied in other situations and should be shared more widely. They have not necessarily been evaluated, nor are they endorsed by the Change Agent Team.***

<b>Name of Organisation:</b> Durham and Chester-le-Street PCT	
<b>Service:</b> Intermediate Care	
<b>Contact:</b> Denise Elliott, Specialist Nurse- Older People	<b>Tel No:</b> 0191-333-3991
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**Key Words** (3-4 words which sum up the service, for cataloguing purposes)

**Intermediate care sheltered housing**

*Brief description of the 'new practice/bright idea*

**Background**

NSF older people (standard 3)  
Sigma report  
Peter Fletcher Associates - Housing Strategy (2002)

**Introduction**

In an effort to diversify the options available for intermediate care within the locality the PCT in partnership with other agencies has developed a housing based project within Graham Court sheltered housing complex in Sacriston.

A one bed roomed flat has been made available by Chester-le-Street district council to develop an intermediate care facility. This is a demonstration initiative exploring the feasibility of this model in the Durham and Chester-le-street locality.

Funding for this project was raised from a successful Public Service Agreement (PSA) bid. The main fund holder therefore being Durham County Council Social Services working in partnership with other key stakeholders. This has been facilitated by the use of a Service Level Agreement (SLA) (*see appendix1*).

Costing for the project has been calculated. However this was carried out for two flats in the hope that a second unit would be come available. These costings also indicate the 'in-kind' costs for each partner (*see appendix2*).

**Steering group**

Chaired by Durham and Chester-le-Street PCT with representation from:

- Durham County Council Social Services
- Chester-le-Street District Council, Housing Department
- Care-line
- North Durham Health care trust
- Rapid response services
- Community rehabilitation team

*Impact of the introduction of the change/development*

**Patient referral criteria**

This will follow the same format as the established RIACT services which requires the client to be:

- Medically stable, able to have their medical and nursing needs met through GPs and District nurses
- Have no functional mental health problems
- Willing to participate in a therapeutic programme
- Have a reasonable expectation of being stabilised within 14 days
- Competent to consent to use of the service

This can be used as a Step-up or Step-down facility.

The client will have a holistic assessment carried out and an individual care plan developed. This will stipulate the level of therapy and intervention needed. Reassessment will take place during the clients stay and care packages altered accordingly.

A basic package of assisstive devices will be in place at the flat but any further equipment needed will be ordered through the established home loans service.

Medical cover will be provided by the local GP practice on a temporary resident basis. The District nursing team for this practice will also provide any interventions as required.

Home care packages will be funded via the PSA monies

Domestic services are provided by the in-house cleaner

Although there are no 24hr staff in attendance Care-line alarms and warden services are in place. This will include the recently established overnight toileting service if required.

The only cost to the client will be for food and personal items.

*Why did this change/development 'work'? Could it be replicated?*

### **Conclusion**

This project seeks to establish another option in the provision of intermediate care services. Consultation with local older people and expert advice has highlighted the need for a range of services that will, under the umbrella of intermediate care, defer hospital admission or expedite hospital discharge.

It is hoped that this sheltered housing model will prove to be an invaluable facet of the intermediate care provision in the Durham and Chester-le-street locality, leading to it's expansion across the locality.

*Has the practice been formally evaluated? Please describe briefly.*

### **Evaluation**

This project is a demonstration model and evaluation strategies have been a priority in the planning stage. The steering group felt that due to the short timescale and therefore, anticipated low throughput, both qualitative and quantitative data was necessary to give true evaluation of the project. In view of this the following information will be collected.

- A Barthel evaluation will be carried out pre and post habitation
- User and carer satisfaction survey
- Comparative evaluation as to alternative intervention
- Number of clients using the scheme
- Length of stay

A mid point evaluation will be completed with a full report produced at the end of the pilot.

Submitted by: Denise Elliott

Date: January 2003

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