

**LOCAL ENHANCED SERVICE FOR
Medical Services for Reablement and Respite Care Beds**

Service Level Agreement

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INTRODUCTION

All practices are expected to provide essential services and those additional services they are contracted to provide to all their patients. They are also encouraged to provide the Directed, National and Local Enhanced services to the populations they serve. The specification for this service is designed to cover the enhanced aspects of clinical care of the patient, which is beyond the scope of essential services.

SERVICE AIMS

This agreement is to cover the period commencing 1st April 2009 to 31st March 2010.

Background

(i) In 2000 the Audit Commission's report "The Way to go Home" focused on rehabilitation and remedial services for older people, which emphasized the importance of enabling older people to return to their own homes as soon as possible following a stay in hospital or any other care institution.

(ii) At the same time the National Beds Inquiry highlighted the problems of inappropriate use of beds in the NHS. It suggested there should be an expansion of intermediate/reablement care – getting older people out of hospital and back into their own homes as quickly as possible, preventing unnecessary hospital stays and avoiding hospital re-admission.

(iii) Across Cannock Chase and other areas of South Staffordshire, the demand for nursing and residential home care was increasing to unsustainable levels, resulting in longer stays in hospital. This was further exacerbated by the paucity of any form of ongoing community or residential rehabilitation services in Cannock Chase.

(iv) Staffordshire Social Services and the Local Community Health Trust worked in partnership to develop an integrated approach to provide an Intermediate Care service. The service was developed to incorporate at least one residential bed in Ashcroft Hollow Nursing Home.

(v) The Reablement Unit was established at Great Wyrley Residential Unit.

(vi) It was quickly recognised that due to the wide catchment area of these beds, there was a requirement for a dedicated GP/practice to ensure the users of the services receive adequate access to medical services for the duration of their stay.

(vii) The same medical services are required for the users of the eight Respite Care beds at Great Wyrley Residential Unit.

Aim

To ensure that the users of the Intermediate Care services at Ashcroft Hollow Nursing Home receive medical services when required.

CRITERIA

This Local Enhanced Service Specification details the following criteria. The following pages contain some further guidance from the PCT on expected processes, outcomes and deliverables based on this process. On aspiring to this service practices are required to submit plans under each of these items to the PCT.

- (i) Direct Service Delivery
- (ii) Data Collection
- (iii) Liaison/Shared Care
- (iv) Education and training
- (v) Review/Audit

Criteria One: Direct Service Delivery

Details

- **practice to provide medical services.** The practice may need to provide a higher level of home visits to the patients
- **flexible registration procedures** to allow for patients to remain on the practice list for periods of one to twelve weeks
- **regular review of clinical management of the patients** including review of repeat medication as per the practice protocol

Criteria Two: Data Collection

Details

- **the development and production of an up-to-date register.** The practice should be able to provide an up-to-date register of patients to whom these services are provided.

Criteria Three: Liaison/Shared Care

Details

- The practice undertaking this local enhanced service will work closely with staff in the Intermediate Care Service and share relevant information where appropriate

Criteria Four: Education and Training

Details

- Professionals undertaking this service should have undertaken **appropriate training**.
- Those doctors who have previously provided services similar to the proposed enhanced service and who satisfy at appraisal and revalidation that they have such continuing medical experience, training and competence as is necessary to enable them to contract for the enhanced service shall be deemed professionally qualified to do so

Criteria Five: Review/Audit

Details

- The services delivered by this LES will be subject to clinical audit and monitoring will be carried out as part of the annual review of the contract and as part of review of this LES
- The Practice will be subject to an annual review which could include an audit of:
 - (i) patient duration of stay
 - (ii) patients remaining on practice list
 - (iii) average number of visits per patient

ONGOING MEASUREMENT & EVALUATION

The ongoing measurement is outlined in the various criteria in the previous section. **The services provided and scope of this LES will be reviewed with the practice as part of the annual contract monitoring process.**

In addition the practice is required to agree with the PCT this service specification/plan at the start of the year.

FINANCE

This agreement is to cover the 12 months commencing 1st April 2009.

The Practice contracted to provide this service will receive an annual payment for 8 Reablement and 8 Respite Care beds (paid quarterly in arrears) of £3,667.20.

**PAYMENT WILL ONLY BE MADE UPON RECEIPT OF THE PRACTICE
SIGNATURE SHEET**

SIGNATURE

The practice will need to sign a combined single signature sheet for all Enhanced Services provided. This will constitute the agreement between the practice and the PCT in respect of all Enhanced Service, as specified within each individual Service Level Agreement.