

Right Care, Right Place: Intermediate Care

AN initial phase of public engagement focused on intermediate care within Dumfries and Galloway has reached its conclusion.

Right Care, Right Place: Intermediate Care set out to build on the work carried out last summer with Time to Talk, which sought to engage people across the region and collect their thoughts on community health and social care.

That summer of engagement sought to find out, from people's own lived experiences, what was working and what wasn't working, what improvements could be made and what people's hopes or concerns were for the future.

Right Care, Right Place followed by looking more specifically at the topic of intermediate care, which was defined very simply as being everything which sits between what people receive in an acute hospital setting and what they are able to manage independently at home.

Materials were developed which explained that this meant the engagement took in everything from care at home to care homes, short breaks, extra care housing and cottage hospitals.

A very comprehensive information pack was developed which helped provide context for the discussions which were set to take place, hosted on a dedicated web-page which also provided a list of all online and in-person engagement opportunities and a link to an online survey – which was also produced in an Easy Read format.

People were advised that they also could submit their responses by sending in a physical copy of the survey, or by recording their comments as video or audio files.

A co-ordinated campaign to promote the engagement period was developed, which included a radio campaign running more than hourly on WestSound Radio over the period of a month.

An animated film for social media was produced in-house which introduced the engagement opportunity and explained its remit and purpose, while a prominent

banner was created for the DGHSCP website, and posters created for both social media and physical production and distribution – including posters for each individual engagement event.

Press releases and briefings to key stakeholders were created, with asks made to groups including elected members, community councillors, faith leaders and minority representation groups to help promote the engagement and encourage participation.

A timetable of engagement events had been prepared, with a total of 14 in-person events arranged at key population centres right across the region, starting on February 2 2023 in Dalbeattie and concluding on 02 March 2023 in Thornhill.

Attendance at the in-person session varied significantly, from single figures in some locations to dozens in others and up to two to three hundred at the busiest events. The bigger turnouts tended to be linked to concerns within communities around the planned use of existing intermediate care facilities, and some people who attended often very clearly voiced a focus around a single issue, principally the reopening of cottage hospitals.

Those attending the in-person events were provided opportunities to either write down responses to questions or have them scribed for them, and were presented with activities such as choosing how to allocate counters across a range of considerations which feature in the design and delivery of intermediate care services.

Approximately 1100 individual engagements took place through the in-person events, which featured people from every postcode prefix in the region.

Meanwhile, a total of 391 electronic surveys were completed.

Having intermediate care delivered close to home was a recurring theme in the responses to the Right Care, Right Place engagement, with 73 per cent of people who completed the online survey citing that as one of the most valued aspects of the current system.

When asked ‘what are the most valued aspects of current intermediate care delivery’ most people said they valued that it was provided locally. Different services working together and accessibility to friends and family were also valued.

While some people expressed appreciation for service delivery in a cottage hospital setting, the provision of intermediate care within a clinical/hospital environment did not emerge as a priority.

Instead, a 'homely' feel to settings providing intermediate care was the biggest request to emerge from the online survey, coming from 71.3 per cent of respondents, with 66.8 per cent mentioning gardens, 49.1 per cent asking for it to be mixed in with the wider community, and 42.6 per cent seeking use to be made of existing buildings.

People voiced that the locations from which intermediate care is provided should offer activities and events, allow service users to meet friends and family, and offer various types of care such as GPs, physiotherapists, and occupational therapists.

Technological improvements were most valued when they enabled safe independent living, allowed people to stay in touch with others, and supported continued activity.

With the engagement period of Right Care, Right Place: Intermediate Care complete, work has taken place to absorb all that has been contributed and consider how that could be applied within the creation of a potential future model for delivery.

Initial modelling has been developed which builds from the responses received, applying it to planning principles, projections for future need and anticipated resources.

A key element within the potential future model for delivery is the role of Home Teams, which is viewed as central to delivery of bed-based intermediate care. A multi-disciplinary team would 'wrap around' bed-based services to provide health and social care and support as needed, with GP surgeries also having a key role.

Another key feature of the potential future model is the proposed flexible use of the bed-base resource to meet the various types of intermediate care needs such as palliative care, step-down for rehabilitation, step-up to avoid acute hospital admission and short breaks for Carers' respite.

The principle being adopted is in line with the very strong recurring theme from the engagement around ensuring local delivery, embedded within communities.

The potential future model sets out various options for achieving these objectives, which would require further engagement with respective local communities and staffing in order to ensure these proved to be effective.

Materials to support consultation will set out specific local options, as set out within the main paper.

At this stage, preparations are being to ready materials in support of period of formal public consultation, which is envisaged to start in mid-April and run through until July.

This would be supported by an extensive promotional campaign, and which sets out a means for anyone wishing to have their views documented and factored into this work to get in contact with the team, and identify the best means of engaging.