



<b>Strategic Commissioning Board</b>			
<b>Meeting Date</b>	06 September 2021	<b>Action</b>	Approve
<b>Item No.</b>	10	<b>Confidential</b>	No
<b>Title</b>	Designated Beds – Shared Provision with Rochdale Council		
<b>Presented By</b>	Adrian Crook –Director Adult Social Care		
<b>Author</b>	Matthew Logan – Strategic Lead Integrated Commissioning		
<b>Clinical Lead</b>			

<b>Executive Summary</b>
<p>The paper details the updated arrangement to maintain sufficient designated COVID beds in the Bury system and is an update to the papers presented by Adrian Crook in October 2020 and February 2021. These papers received approval for retrospective commissioning of additional capacity in the community to release hospital capacity.</p>
<b>Recommendations</b>
<p>Bury's Finance, Contracting and Procurement Committee and Strategic Commissioning Board are asked to approve retrospectively the commissioning of designated units for COVID +ve patients at Millfield House in line with the request from the DHSC, with awareness of the financial risk resulting from the misaligned national funding guidance.</p> <p>Bury's Finance, Contracting and Procurement Committee and Strategic Commissioning Board are asked to continue to support the responsive rapid commissioning of additional capacity in forthcoming months should it be required. This will take the form of additional designated care home beds and home care, accepting a paper will be presented for retrospective approval and members of Bury Council and Bury Clinical Commissioning Group briefed beforehand.</p> <p>Rochdale Council currently contract with Millfield Nursing Home (Qualia Care) to provide a discharge to assess service for patients who are Covid positive and require a residential placement for a period of time following their hospital stay. Situated at Bury Road, Heywood, Millfield Nursing Home, part of Qualia Care, has operated their Covid positive D2A facility since September 2020, offering a 9 bed independent nursing service exclusively for positive patients.</p> <p>The current contract concluded on the 30<sup>th</sup> June and a new arrangement for this service is now required. Bury Local Authority is looking for approval to take a joint approach to commission the 9 beds and share the costs on a 50/50 basis.</p> <p>Subject to approval the new contract will run from the 1<sup>st</sup> July to the 31<sup>st</sup> March 2022 and will cost £1,550 per bed, per night, £13,950 per week. With Bury funding half the cost will be £775 per bed / £6,975 per week. Note: Qualia Care are not willing to enter into an agreement for a shorter time</p>

period, however, Bury will agree to joint contract until 30<sup>th</sup> September 2021 with extension to 31<sup>st</sup> March 2022 permitted subject to extension of funding arrangements.

The cost is based on agency staff covering most of the shifts and there is a clause built in to review the cost and the arrangements at the end of September with a view to reduce the costs subject to Millfield being able to contract with sufficient numbers of staff to fulfil the remaining 6 months of the contract.

Bury's Finance, Contracting and Procurement Committee and Strategic Commissioning Board are asked to approve retrospectively the commissioning of the following in line with the request from the DHSC to maintain sufficient designated COVID beds, with awareness of the financial risk.

	Weekly cost
9 beds at Millfield Care Home – 50/50 split cost with Rochdale Council	£6,975
<b>Total</b>	<b>£6,975</b>

We will adopt a common sense approach when splitting the use of beds, with allocation being based on need. The designated setting must be a separate unit from the main residential site in order to comply with the necessary infection control guidelines. The Unit has 9 beds so there is no option available to negotiate a lower number of beds between the two local authorities.

Rochdale have utilised the designated beds already with 2 admissions in July and 3 in August with currently 2 residents still there.

Bury's Finance, Contracting and Procurement Committee and Strategic Commissioning Board are also asked to approve retrospectively the GP Cover costs for the designated beds. 24/7 medical cover for 6 months. Providing clinical triage and GP visiting and provision of FP10 prescribing. Also the provision of issuing death certification if required. Quote from BARDOC is as follows:

	Weekly cost
GP Cover for Millfield	£2,918.45
<b>Total</b>	<b>£2,918.45</b>

Bury's Finance, Contracting and Procurement Committee and Strategic Commissioning have previously given support to the responsive rapid commissioning of additional capacity where required and accepted that papers be presented for retrospective approval and members of Bury Council and Bury Clinical Commissioning Group briefed beforehand. This paper asks for this support to be maintained.

**Links to CCG Strategic Objectives**

**SO1 People and Place**

To enable the people of Bury to live in a place where they can co-create their own good health and well-being and to provide good quality care when it is needed to help people return to the best possible quality of life



**SO2 Inclusive Growth**

To increase the productivity of Bury's economy by enabling all Bury people to contribute to and benefit from growth by accessing good jobs with good career prospects and through commissioning for social value



<b>SO3 Budget</b> To deliver a balanced budget	<input type="checkbox"/>
<b>SO4 Staff Wellbeing</b> To increase the involvement and wellbeing of all staff in scope of the OCO.	<input type="checkbox"/>
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	
GBAF [ <i>Insert Risk Number and Detail Here</i> ]	

<b>Implications</b>						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
<i>If you have ticked yes provide details here. Delete this text if you have ticked No or N/A</i>						
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
<i>If you have ticked yes provide details here. Delete this text if you have ticked No or N/A</i>						
Have any departments/organisations who will be affected been consulted ?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
< <i>If you have ticked yes, Insert details of the people you have worked with or consulted during the process :</i>						
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
<i>If you have ticked yes provide details here.</i>						
<i>Delete this text if you have ticked No or N/A</i>						
Are there any financial Implications?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
<i>If you have ticked yes provide details here.</i>						
Additional expenditure as detailed below will be required from NHSE funding available to support the COVID-19 Hospital Discharge Guidance						
Has a Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Is a Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

*If you have ticked yes provide details here. If you are unsure seek advice from Lisa Featherstone, Email - [lisafeatherstone@nhs.net](mailto:lisafeatherstone@nhs.net) about the risk register.*

Governance and Reporting		
Meeting	Date	Outcome
CCMT	20/07/2021	Agreed by CCMT
		If the report has not been discussed at any other meeting, these boxes can remain empty.

## 1. Background

- 1.1. On 12<sup>th</sup> October the Department of Health and Social Care (DHSC) issued all Clinical Commissioning Groups (CCG) and Local Authorities (LA) a letter mandating the delivery of designated schemes for people who are leaving hospital or are transferring to a care home who have tested positive. This was updated on 10 November and in further guidance issued on 17 May. The current requirement is to ensure 'sufficient' designated beds available to the local system.
- 1.2. A designated scheme must meet standards set out by the Care Quality Commission which include a completely separate unit or area, separate staffing teams and adherence to a range of infection prevention control standards.
- 1.3. At the beginning of the pandemic Bury showed foresight and delivered a number of settings able to support people with the virus. These were
  - 27 beds at Spurr House
  - 7 beds at Killelea Intermediate Care Home
  - 11 beds at Gorseley Clough Nursing Home
- 1.4. All of these were set up to the standards now mandated by the DHSC and CQC and this approach proved successful in reducing the impact of the virus on our existing care homes and their residents.
- 1.5. As the number of people with the virus subsided these beds were turned into discharge to asses units to support the ongoing flow out of hospital.

## Proposals

- 1.6. Gorseley Clough was the only remaining designated setting in Bury. It is a Nursing Dementia Care Home and the repurposing of 11 beds to COVID only has resulted in the decrease in nursing Dementia provision in the borough.
- 1.7. Despite the numbers with the virus needing this type of care the government has mandated that sufficient capacity is maintained and the hospital discharge fund is to be used to pay for them. This will ensure that the wider needs of patients in hospital and in the community can be met by community provision.
- 1.8. Following discussions with colleagues from Rochdale Council there is currently an over-provision of designated beds in Rochdale and a joint solution has been sought:

For the period from June to September 2021 it is recommended that the 11 beds at Gorseley Clough return to Nursing Dementia and Bury jointly purchase the 9 designated beds with Rochdale that are currently have available at Millfield Care Homes. This care home is on the border with Bury and so is ideally situated.

If additional COVID beds are needed in the future the Intermediate Care services will lead a review and rapid discharge programme to convert 1 corridor at Killelea back to a COVID unit.

- 1.9. This unit came into place on 30<sup>th</sup> June.

- 1.10. During May we have seen the numbers of people with the virus in our hospitals fall and today it is approximately 5 in Fairfield General.

## 2. Financial Requirements

- 2.1. The 4 weekly costs of these units are

	4 weekly cost
9 beds at Millfield Care Home – 50/50 split cost with Rochdale Council	£27,900
<b>Total</b>	<b>£27,900</b>

The GP Cover costs for the designated beds. Quote from BARDOC is as follows:

	4 Weekly cost
GP Cover for Millfield	£11,673.80
<b>Total</b>	<b>£11,673.80</b>

If these beds are required until the end of September **£76,725** will be required, while **£258,075** will be required up to end of March 2022 for just the beds.

- 2.2. All costs incurred in discharging patients from hospital under the updated hospital discharge guidance <sup>1</sup> in place during the pandemic is being reimbursed by £588m of hospital discharge funding made available by central government.
- 2.3. This guidance was issued on 21<sup>st</sup> September.

## 3. Sufficiency

- 3.1. The request from the DHSC asks we ensure we have sufficient designated COVID + ve capacity
- 3.2. This predication is difficult as it depends on the rate of spread of the virus, the age of the people it affects, the success of lock down measures and impact of the lifting of these measures
- 3.3. We will keep our capacity under review and if we need to commission further capacity we will present further papers to SCB, however due to our need to be rapid and responsive this may be retrospective

## 4. Timeliness

- 4.1.1 The requirement to deliver designated unit was originally reviewed by Bury's Silver command on 28<sup>th</sup> October and given the rapid nature of the need to commission these

<sup>1</sup> <https://www.gov.uk/government/publications/hospital-discharge-service-policy-and-operating-model/hospital-discharge-service-policy-and-operating-model>

beds it has not been possible to present this request to Bury's Strategic Commissioning Board in advance of the need to commission the service. This paper asks for retrospective permission to commission this service.

- 4.1.2 Conversations are ongoing with Primary care services that currently support the unit to determine whether mutual support can be provided to Bury customers as well.

### **5 Recommendation**

- 5.1.1 Bury's Finance, Contracting and Procurement Committee and Strategic Commissioning Board are asked to approve retrospectively the commissioning of designated units for COVID +ve patients at Millfield House in line with the request from the DHSC, with awareness of the financial risk resulting from the misaligned national funding guidance.
- 5.1.2 Bury's Finance, Contracting and Procurement Committee and Strategic Commissioning Board are asked to continue to support the responsive rapid commissioning of additional capacity in forthcoming months should it be required. This will take the form of additional designated care home beds and home care, accepting a paper will be presented for retrospective approval and members of Bury Council and Bury Clinical Commissioning Group briefed beforehand.