



**Bwrdd Iechyd Lleol  
Local Health Board**

Tor-faen  
Torfaen

## **Health and Social Care Service Reconfiguration and Improvement in North Torfaen Update February 2009**

### **1 Introduction**

This briefing note follows on from formal consultation on the proposed new model for health and social care in North Torfaen, taken forward between December 2007 and March 2008. Responses were collated by the Gwent Community Health Council (CHC) and a report was submitted to Torfaen Local Health Board in June 2008. The report concluded that there had been a fair and reasonable opportunity for the public to give views on the service model, and that there was a strong and good case to take forward a new Primary Care Resource Centre (PCRC) for local services in Blaenavon.

### **2 Shifting the balance of care**

The whole emphasis of the Gwent Clinical Futures service model has been to shift health care, to ensure that people have their health needs met, either at home or as close to home as possible. The emphasis is on reducing hospital admissions unless these are really necessary, putting more resources into community based services, so that patients can stay in a familiar environment whenever it is clinically safe.

In Torfaen we have already seen an impact from our investment in community based services, which are reducing demand on secondary care beds – both in terms of actual admissions and in lengths of stay.

For long term conditions, where there are specialist lead nurses in place as a resource to support GP's and community nurses, there is a marked impact. Not all admissions have gone down,- but this is against a backdrop of increasing numbers of older people with long term conditions, in an area with a legacy of poor health.

#### **Unplanned Hospital Admissions in Torfaen**

Admissions	2003/04	2004/05	2005/06	2006/07
Heart Failure	138	128	124	95
Diabetes		95	78	75
Stroke	158	128	126	115
Chronic Obstructive Pulmonary Disease	300	235	240	260

A range of Intermediate Care services have been developed, since the Local Health Board was established in 2003. These include the Advanced Clinical Assessment

Team (ACAT), established in January 2007. The team have had 1208 patients referred (across Torfaen). 99% of these were referred from GP's. Including preliminary clinical assessment, diagnostic visits, hot clinics and follow ups there have been 2729 visits to patients' own homes.

The average monthly referral rate is 75.5 patients and clinical assessment of hospital admissions avoided was 975. The team has received a national award for clinical excellence in 2008.

Short-stay Intermediate Care units in sheltered housing were developed in 2008 and are being used as 'step down' from hospital. There were initial anxieties from residents in schemes at Baker street and Kennard Court, but at a launch event hosted by Baker Street on 9th October there was very positive feedback from local people. The first lady to go through Baker Street was happy to speak of her experience: – *"it's beautiful here and the staff are delightful, what more could you want? My stay here has shown me how the powers that be are trying to help people who have had a setback"*.

### **3 Gwent CHC Recommendations**

Following the public consultation phase, Gwent CHC made three main recommendations made. These are highlighted below, with the LHB response:

- **That Torfaen LHB liaise with the Borough Council's Transportation Group to develop proposals to enhance the accessibility to the site, in particular in terms of public transport links**

*A traffic impact assessment for the site has been completed, and discussions are in hand to ensure ambulances and buses are able to pick up and drop off at the campus site itself. The Council are also considering community transport options for people who do not live near Bus routes 13 and 14.*

- **Torfaen LHB needs to be quite clear and specific with local people regarding what, if anything, will be available within the local community in terms of a minor injuries service**

*The LHB will ensure that Emergency First Aid is still provided by local GPs and Practice Nurses, under the terms of their GMS contract. This will ensure cuts, sprains and lacerations are dealt with during the surgery opening hours. All out of hours primary care services will be dealt with by the Gwent OOH service, managed by Gwent Healthcare NHS Trust.*

*The Trust reduced the existing post-op wound dressing service at Blaenavon Healthcare Unit to be a daytime- only service over 12 months ago, on grounds of clinical safety and staff security. No issues have been raised since that time and it is anticipated that this service will transfer to the new Primary Care Resource Centre (PCRC) and will be delivered by the District Nursing Service.*

*A community based 'Leg Club' has been established in Blaenavon using NHS nursing staff skills and this focuses on conditions such as leg ulcers, which forms a significant element of local demand for wound dressing.*

*For more serious Accidents and Emergencies, patients would either travel to the Royal Gwent Hospital or Nevill Hall Hospital and this will be determined by doctors, considering the clinical needs of the patient.*

**That Torfaen LHB and County Borough Council ensure a seamless transition to the new pattern of services and organise a further public meeting in Blaenavon to update local people on the timetable**

*This is recognised as important, and there is a good track record of engagement and continuous service development. The NHS Trust have confirmed that existing clinics and non-bed services will remain in the current Blaenavon Health Care Unit building whilst the PCRC is being built, with services transferring on a phased basis.*

*Once a date for planning application for the PCRC is known (probably March 2009) the developers will have information stands in a number of venues in Blaenavon so that local people can make observations and pass comments to the planners and developers.*

#### **4 Community Based Care**

There will be integration of the GP practice, dentistry, the community nursing team, health clinics, and local authority services (customer care, social care, etc) into a new **Primary Care Resource Centre (PCRC)**, that has been designed by a third party developer (Assura) and developed by working closely with the different users. There will be a full range of accommodation – some of which is shared space, and has the capacity to be sub-divided. This will allow for rooms to be available in the evenings when needed – for example, a patient support group, or voluntary sector user group.

#### **5 Bed Based Care**

This takes forward the decommissioning of the BHCU beds and development of alternatives, including :

- Short stay units in sheltered housing, 3 in North Torfaen, developed in partnership with Bron Afon, already in place.
- New wing at Arthur Jenkins Care Home, planned for 16 nursing beds and 8 complex care beds in 2009.
- Further development of Intermediate Care Services – Advanced Clinical Assessment Team (ACAT), Falls service, etc.
- Development of 'virtual ward' service for Long Term Conditions, as that more people can be treated at home.
- Continuing expansion of Telecare services in people's own homes, so they remain independent for as long as possible.

## **6 Anticipated Timescales**

Some components of the new service model are already in place, as described above:

Looking forward, some expected milestones are:

- Start of new wing build at Arthur Jenkins care home in Spring 2009
- Submission of both business case application and planning permission for PCRC in Spring 2009.
- Closure of BHCU beds once new wing at Arthur Jenkins is developed
- Start of PCRC building in late 2009
- Completion of Arthur Jenkins new wing in late 2009
- Completion of PCRC in 2010/11

## **7 Summary**

There has been steady progress towards developing services and engagement with local people following formal consultation and the comments from this process have been valuable. The detailed design for new Primary Care Resource Centre has had full input from the various stakeholders who will use the building, as well as independent evaluation through Welsh Health Estates. The timetable for taking forward development is becoming clearer, and there remains a strong commitment to delivering high quality services for North Torfaen residents.

## **8 Next Steps**

**We are holding a “Drop-In” event for the public on Tuesday 24<sup>th</sup> February 2009, from 3pm – 8pm at Blaenavon Workman’s Hall.**

Staff from different organisations will be available to explain their services and how these will integrate in the future. There is also a website covering developments in Blaenavon at:

[www.torfaen.gov.uk/CommunityAndLiving/BlaenavonCommCampus](http://www.torfaen.gov.uk/CommunityAndLiving/BlaenavonCommCampus)

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