Improving Our Services for Older People in Cardiff and the Vale of Glamorgan

The Development of Clinical Gerontology Services

What’s this document about?

Cardiff and Vale University Health Board (UHB) plans and delivers health services for people living in Cardiff and the Vale of Glamorgan and, for some very specialist care, for people who live in other parts of Wales as well.

The health board regularly reviews its services to ensure they are continuing to keep pace with the needs of local people. This also means making sure that services are delivered in the best way possible, within the resources that the UHB has available.

Recently, the health board has been looking at its services for older people, as part of its longer term plans to make sure that more of the care people receive is based as close to home as possible where appropriate, rather than in hospitals. This is all part of the health board’s ambition, along with Cardiff Council and the Vale of Glamorgan Council, to provide services for older people that are more integrated, less disjointed, more convenient and, ultimately, better for older people.

This document sets out the ideas that the health board has for changing the way it delivers some types of care for older people. These ideas have been worked up by doctors and other healthcare specialists because they believe that changing the way some services are provided will improve the way older people receive some types of healthcare.

This document explains what these ideas are, what they could mean for older people’s care and why clinicians think they will mean better services.

We want to hear what you think about these ideas, and you will find more details about how to share your views with us at the end of this document.

Why are older people’s services one of our key priorities?

People in Cardiff and Vale of Glamorgan, like the rest of the UK, are living longer and the balance of life is changing. There are more people aged more than 60 than children aged under 16. Older people can now look forward to many more years of healthy life after retirement than ever before, but the health needs of an ageing population put different demands on health services in terms of care and support.

For example, in Cardiff and Vale, we know that the average age of our patients who come into hospital is now mid-80s, and people often have multiple healthcare and social care
needs, which need to be looked at together to ensure we are treating the whole person, and not just a set of symptoms.

Similarly, we know that, at the moment, far too many older patients spend too long in hospital, away from friends, family and their communities, which often results in them losing their independence and being unable to return to their normal place of residence.

These are outcomes that nobody wants to see, which is why the health board, Cardiff Council, the Vale of Glamorgan Council and a number of third (voluntary) sector partners have come together to develop a draft framework for older people - “Meaningful and Purposeful Lives” – as part of their Integrated Health and Social Care Programme.

The key aims of this programme are to promote high quality and joined up care, with timely assessment and the availability of services that place older people at the centre of our services. Our overall goal is to support people in the community to live independently at home for as long as possible, with clear and coordinated community-based care that is joined up. Importantly, when older people do need hospital-based care, we must ensure it is equally as coordinated and continuous, focusing not only on meeting people’s medical needs, but also on ensuring we support people so that they can return to independent living.

How do we care for older people in hospital at the moment?

In August 2013, Cardiff and Vale UHB created the Directorate of Clinical Gerontology, in recognition of the specialist expertise in the care of older people we have in Cardiff and Vale, and the central and pivotal role of older people’s medicine in the services provided by the health board.

There is much to do in terms of adapting our services for the long term to ensure they are able to meet the needs of a rapidly ageing population, and the ideas in this document represent the first steps in developing a real strategy for older people’s care in Cardiff and the Vale of Glamorgan. Our aim is to put the expertise we have available around the patient so that, when an older person needs hospital care, it is the right type of care, provided in the right place, when it is needed and organised so that it can deliver optimum benefit.

A service fit for the future is not simply a process of moving the patient through our current services. We need to put our expertise around individuals if we are to ensure they receive the best possible care and are able to return to their home environment as quickly as possible after receiving the medical care for which they were originally admitted to hospital.

The clinical team leading our Gerontology services has, therefore, developed a set of ideas for service change that are focused on ensuring the following:

- That we recognise and have expert care of the older person throughout a patient’s journey, community to hospital based, whether they need acute medical care or support and rehabilitation
- That we develop and deliver more integrated and continuous care of older people across the community and in hospitals
- That we reflect the real opportunity we have to put older people’s care at the centre of medicine in Cardiff and the Vale of Glamorgan
- That we address the pressing need to improve how, and from where, some of our services are currently delivered.

Why do we need to change?

We know that our current inpatient hospital services are not always organised in the right way, and some of the poor environments in which we are providing our care are not what our patients need or deserve. We know that the longer older people stay in hospital, the more they lose their independence. There are a number of significant challenges for the services that form the core of specialist older people’s inpatient care within our hospitals.

These include:

- Services are currently based on separate and sometimes isolated sites across Cardiff and the Vale, which despite the best efforts of staff, make it harder to provide comprehensive, joined-up, effective and efficient care.
- Services are still, in part, based on old long-stay hospital models of care, which don’t reflect the changing needs of our patients, or our ambition to support older people who don’t need to be in hospital with care in their own homes and the community.
- Many services are operating from poor quality and isolated buildings which are becoming increasingly difficult to maintain, and are not of a standard we want to continue to deliver care in.
- Because our services for older people are spread too thinly, we sometimes find it difficult to provide the right medical care for older people who become more unwell whilst receiving rehabilitation support in some of our current rehabilitation facilities, particularly at West Wing. This can mean patients have to be admitted back into our major hospitals, which can delay their rehabilitation and continuity of care.
- Our hospital-based services are not set up in the right way at the moment. This means older people sometimes don’t get the right care as soon as possible when they are admitted to hospital. This can lead to patients staying hospital for longer than necessary, which isn’t ideal for anyone. We need to ensure that, as soon as an older person arrives at the Emergency Unit and is acutely unwell, they get the right specialist input. We also need to ensure we are providing specialist medical rehabilitation, and longer stay, hospital-based care and assessment where it is appropriate.

What do we think we need to do to make our older people’s services better?

The overall way we deliver services for local people is constantly changing and will continue to change fundamentally over the next 10 years in line with our ambition of providing earlier and more community-based care to prevent reliance on hospital-based services.
We believe that the first steps on the journey to improve older people’s care are to make small changes to our hospital services that will enable us to host more older people’s (Gerontology) services together, on fewer sites, which will give us a better critical mass of specialist support for older people. We also want to provide these services in buildings that are more modern and fit for purpose, delivering them in a way which is more geared up for the demands of today and tomorrow, and where there is improved round-the-clock medical cover, provided by doctors.

We think this can be achieved by creating a hub of expertise at University Hospital Llandough (UHL), supported by a strong acute Gerontology presence at both Llandough and the University Hospital of Wales (the Heath), with rehabilitation and assessment services in Barry Hospital in the Vale of Glamorgan, and at St David’s Hospital in Cardiff.

What would change if these ideas went ahead?

To address the challenges with our current services and to make improvements in the overall patient care pathway the following things would happen:

- There would be increased specialist Gerontology input at the first point of entry into all acute (hospital) services by establishing a Frail Older People's Assessment and Liaison Service (FOPAL) for the Vale of Glamorgan at University Hospital of Llandough (UHL), comprising Consultant, Therapies, Social Work and other specialist experts. These teams are experts in ensuring that, wherever possible, older people who come into hospital as an emergency are appropriately assessed and supported to return home, without the need for hospital admission.

- We would increase specialist Gerontology presence on both major hospital sites (Llandough and the Heath) by providing expertise and rehabilitation whilst patients are medically unwell. We can do this by matching some of our current wards directly with the Clinical Gerontology team.

- We would create a single specialist co-located hub for Medical, Stroke and Orthopaedic Rehabilitation, with improved medical cover and an overall increase in Rehabilitation inpatient beds at the University Hospital of Llandough by transferring Rookwood Ward 6, West Wing Medical Rehabilitation Unit, and West Wing Orthopaedic Rehabilitation Unit to University Hospital Llandough (UHL).

- We would provide complex frail care and comprehensive geriatric assessment services from St David’s and Barry Hospitals only, with a focus on ensuring that patients who no longer require hospital care are assessed, supported and discharged to an appropriate location with the right care. This would mean the closure of Elizabeth Ward in West Wing Hospital and Neale & Kent Ward in Barry Hospital, whilst increasing St David’s Hospital capacity.

- We would rebalance day hospital capacity across three sites, by closing the Rookwood Day Hospital and expanding capacity in Barry and St David’s Hospitals.

- We would explore the potential to co-locate Elderly Care Assessment Services (ECAS) by basing ECAS capacity at UHL, increasing the service to five days per week and doubling new patient capacity.
The clinical teams who have led the development of these ideas believe that they would not only improve the clinical services provided but, importantly, will also enable the move of some services from less modern buildings such as West Wing and Rookwood Hospital. It is believed that this new way of delivering services would provide a more continuous and comprehensive service for our patients.

All of the clinical resources currently spread across these services would be reinvested into the new model of care, enabling us to increase staffing levels, improve medical cover and provide more concentrated therapy input for those patients who need it.

**How will these proposals make services for older people better?**

By making these changes our clinicians believe that the following outcomes can be achieved:

- That older people requiring hospital care will receive the same expert input throughout their pathways, regardless of where they access our hospital care
- That by increasing our rehabilitation focus and capacity, and concentrating resources, we will be supporting older people to return to the community and live as independently as possible
- That by no longer providing our services from poor quality and/or isolated locations, we will be delivering an improved patient experience when in hospital, and by co-locating our services we will have more flexible and robust medical cover, and the ability to avoid transferring patients between sites unnecessarily if they become ill

**How can you help us decide on the next steps?**

The UHB is committed to listening to the views of the people it serves and is working closely with Cardiff and the Vale of Glamorgan Community Health Council to make sure that people have an opportunity to tell us what they think about our ideas. This process is called engagement and we follow guidance laid down by the Welsh Government to make sure that we are doing this properly and fairly.

We think these ideas could really help improve the care we provide for older people, particularly when they do need hospital care, but we want to know what you think of them. Perhaps you are someone either affected directly or indirectly by these ideas and would like to share your thoughts. We are particularly interested in hearing your answers to the following questions:

1) Do you think we have missed anything in our vision for older people’s hospital services?

2) Are there any things that you believe need to be taken into account or that we might have missed when assessing the impact of these ideas?
3) Are there other changes to our specialist Gerontology services you think would further help us to achieve the desired outcomes either immediately or in the longer term?

How can you let us know what you think?

We are talking to our partners, the voluntary sector, the CHC, staff and other interested parties about our ideas. If you want to share your views, please write to us at:

Hannah Mastafa  
Gerontology Directorate Office  
Fourth Floor  
West Wing Hospital  
Glossop Road  
Cardiff  
CF24 0SZ

Or email your thoughts to talk.to.cav@wales.nhs.uk

The closing date for feedback is May 31, 2014.

What happens next?

This engagement exercise will run until May 31, 2014. We will look at the feedback we have received and talk to the CHC about what you, and others, have told us. We will then work with the CHC to make sure that your views are properly reflected in any changes we make as a result of this engagement. If we make changes, we will want to do so as quickly as possible to ensure we make rapid improvement to our older people’s services.

More information

This document is available in Welsh, and a range of alternative formats including Braille, Audio and LARGE PRINT. Please let us know if you require an alternative version of this document by emailing us at talk.to.cav@wales.nhs.uk

This document is also available on our website at www.cardiffandvaleuhb.wales.nhs.uk