

# Commissioning respite locally, to prevent family / carer breakdown.

## Introduction

This Quality improvement project is sought to improve more local bed base respite for individuals with complex health needs. Whilst working as a Case manager for Doncaster CCG I discovered there is a cohort of individuals that are unable to access local respite to meet their complex needs. On review of all care packages on my allocated caseload I identified a cohort of individuals with no respite provision and a number of individuals where we had previously secured provision out of area due to no local provision as families were in crisis at the time. Its clear this would be beneficial due a number of points: To prevent family breakdown or crisis, Individuals can enjoy new experiences, Reducing stress for the carer and family often leading to greater levels of patience, relieves feelings of frustrations and exhaustion increasing wellbeing, improved relationship between carer and cared for, allows individual receiving care valuable interaction with others, promotes social inclusion and wellbeing.

## The impact

- The findings highlighted individuals in-receipt of NHS continuing healthcare accessing local provision within the borough and individuals accessing services outside of borough, as well as a total of 6 individuals who had no respite provision. This number was initially higher however due to crisis respite provision out of borough was sought this was previously 9 however x2 individuals placed out of area due to crisis situation
- The findings also highlighted the percentage of individual's accessing out of area increased figures as some providers de commissioned respite beds or moved beds to full time residential beds, this increasing the number of individual's with no means of respite from initial data gathering.
- Information gathered from online systems were not always reflective of accurate costings or respite services accessed. This resulted in exploring records individually to gather more accurate information and data.
- Prevented complaints increasing
- The findings highlighted there was bed capacity within a local authority respite provision for the CCG to block purchase a bed following communication within task and finish groups attended by writer.

## The Approach

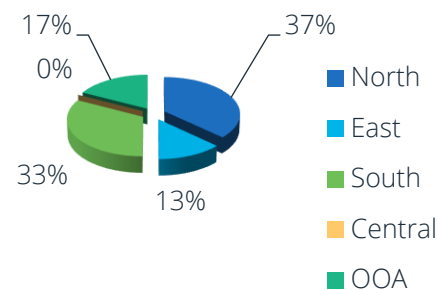
The aim is to look at securing more local respite for individuals with complex health needs as oppose to individual's travelling outside the borough or families / carer's having no means of respite as services are not available locally to access.

Data was initially gathered around individuals with no respite, this data was gathered from caseloads, colleague's and reviews then populated into an excel spreadsheet. Data was then gathered to establish how many individuals accessed out of area provision and the costs of such liaising with the finance and contracts team within the CCG and DMBC. Task and finish groups were also set up with DMBC.

**PDSA cycles:**  
**Cycle 1:** Accessing caseloads to establish individuals who did not have access to respite, those accessing respite locally and out of area to gather a baseline  
**Cycle:2:** Established specific needs of individuals and the health interventions required to promote their wellbeing and where the gap was locally in providing this level of care  
**Cycle:3:** Liaised with families and carer's around the need and demand for respite locally for individuals with complex health needs. Questionnaire's were circulated for individuals and families / carer's to complete via survey monkey  
**Cycle 4:** Gathering financial data around the costs of respite packages locally and out of area to complete cost comparison  
**Cycle 5:** Attended task and finish groups with DMBC to express the gap in respite locally for individuals with complex health needs and discuss commissioning plan with partners

"We may have to consider full time care for our daughter without any respite"

Services accessed by Locality



North	17
East	6
South	15
Central	0
OOA	8

"I would prefer my son to access local respite I would not worry as much"

## Leadership learning

Development of critical thinking skills  
 Effective communication and collaboration with families and commissioners demonstrating active listening and empathy  
 Driving effective change and demonstrating cost savings  
 Partnership working between the CCG and local authority  
 The ability to inspire and convince others to progress with the idea of change

## Next steps

The next steps are to progress with completion of a quality paper utilising the Quality impact assessment to demonstrate to Senior management the need to commission local respite provision for the cohort of individuals with complex needs.



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