

REPORT TO:	East Lothian Integration Joint Board
MEETING DATE:	22 September 2016
BY:	Chief Officer
SUBJECT:	Delayed Discharges

#### 1 PURPOSE

1.1 This report updates the Integration Joint Board (IJB) on performance on delayed discharges in East Lothian and asks the IJB to agree further actions.

#### 2 **RECOMMENDATIONS**

- 2.1 That the IJB notes the recent worsening trend on performance.
- 2.2 That the IJB agrees that the resources identified by the Chief Officer to improve performance should be deployed in procuring additional capacity in home care.

# 3 BACKGROUND

- 3.1 The IJB has a key strategic objective to minimise the total number of delays, meet the current two week target and work towards the 72 hour indicator. No date has been set for achievement of the 72 hour indicator. The indicator comes from the Health and Social Care Integration Public Bodies (Joint Working) (Scotland) Act 2014—Core Suite of Integration Indicators March 2015. This was informed by the Delayed Discharge Task Force report October 2011 Annex A Recommendations 'A perception should be promoted that 2-3 days be considered a reasonable period for someone to return home'.
- 3.2 From July 2016, the NHS National Services Scotland introduced revised Delayed Discharge National Data Requirements. The main change, as it affects Partnerships is an increase in the number of clients/patients captured at census. The rules now allow for all non-complex, clients/patients as at 00.01 on the day of census (last Thursday of the month) to be included in the snapshot. Previously clients/patients, who had a planned discharge up to 3 working days post census, were excluded from the count. This rule change adds between 15-25% to the reported figure, from the previous reporting rules.

Increasingly, the level of Occupied Bed Days (OBD) has taken as much significance as the individuals counted in a monthly snap shot. This gives a better indicator of capacity and system usage over the whole month, as opposed to those captured on one day in any given month. Since May 2014 this has been recorded and from July 2016, is part of the IDS preset Monthly Data Delayed Discharge algorithm.

The OBD data for July 2016 onwards is yet to be released. However the table below does show an improvement in both standard and complex (code 9) total OBD's for the East Lothian Partnership across the last two years.



3.3 Performance in July and August 2016 census is reported below. These figures continue to show a very challenging situation, even allowing for the additional numbers capture by the new census rules.

ISD Reportable delays on census day	Jul-16	Aug-16
standard and complex	40	61
those standard, in breach of		
the 2 week standard	22	29

All Delays on Census day	Jul-16	Aug-16
unwell	3	1
reprovisioning	2	5
complex	3	3
standard- undergoing social		
needs assessment	4	4
standard- care home	15	19
standard- care at home	18	35
standard- carer family		
disputes	0	0
Total	45	67

3.4 Performance on total number of validated census counting delays for East Lothian for the last four years across July and August is below. Even allowing for the census rule change capturing between 15 and 25% more, the jump in 2016 is significant.

Year	July	August
2013	30	21
2014	25	30
2015	14	20
2016	37	58

- 3.5 This is not restricted to East lothian, all Lothian and indeed most of Scotland is experiencing heavy increases in hospital delayed discharges waiting for Care at Home.
- 3.6 In addition, East Lothian Council has been required to suspend admissions to Tranent Care Home and there are currently 11 vacancies in that home.
- 3.7 Significant efforts have been made to support care homes in East Lothian through Adult Wellbeing, General Practices and the NHS Care Home Liaison Service.
- 3.8 Delayed discharges are part of a picture of the health of the whole system. Account also needs to be taken of hospital admissions and length of stay in hospital. East Lothian's performance in relation to emergency admissions has been improving as shown in the chart below (East Lothian is the line with triangles). However, our residents in hospital have more occupied bed days than our peer partnerships which is partly a reflection of our historically poorer performance on delayed discharges. Thus improving delayed discharge performance will reduce our utilisation of acute hospital beds.



- 3.9 Previous reports to the IJB included a summary of actions taken through the allocation of the delayed discharge fund. Improvement in assessment processes, establishment of Hospital to Home service and expansion of the NHS Care Home Support Team. These actions are still all in place but have not been able to offset the decline in capacity in home care and the restriction in access to Tranent Care Home.
- 3.10 The current Help to Live at Home framework is currently unable to provide around 1,786 hours of care each week (as of 8th September 2016). Not all of this represents people without care, since some relates to people waiting to change provider or for a change in an existing package.
- 3.11 The IJB previously asked the Chief Officer to lead work to implement the Living Wage by October 2016 and to develop costed proposals to increase total capacity in care at home.
- 3.12 The Living Wage in home care has been actioned and all providers have been offered a rate from October 2016 which East Lothian Council believes will enable them to pay the Living Wage. Providers are in the process of responding to the Council's proposal. The national care home contract uplift (which includes funding for the living wage) has been actioned in two steps. The first step has been paid from April 2016 and the second will paid from October 2016.
- 3.13 Following the IJB discussion on financial assurance and on the assumption that the IJB has agreed with the proposals on that issue, it is proposed that the balance of the social care fund be allocated to the commissioning budgets for home care.
- 3.14 On this assumption, preparatory work has been done to develop a means to attract providers to provide additional blocks of care specifically targeted at delayed discharges. These blocks of care would be delivered between now and the implementation of the new contract for care at home in 2017/18 and the activity level created by the blocks would be included in the volume of activity in the new contract.

3.15 If the IJB agrees the financial assurance proposals these actions will be pursued.

## 4 POLICY IMPLICATIONS

4.1 There are no policy implications of this paper.

### 5 INTEGRATED IMPACT ASSESSMENT

5.1 The subject of this report does not affect the wellbeing of the community or have a significant impact on equality, the environment or economy.

### 6 **RESOURCE IMPLICATIONS**

6.1 Resource implications are that c £0.7m of additionality in the social care fund will be allocated by East Lothian Council to the commissioning budgets for home care.

## 7 BACKGROUND PAPERS

7.1 None.

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