

DELAYED TRANSFERS OF CARE AND REIMBURSEMENTS

Report By: Head of Social Care (adults)

Wards Affected

County-wide

Purpose

1. To inform the Committee of the background and implications of delayed transfers of care (delayed discharges) within Herefordshire.

Financial Implications

2. From January 2004 Social Services Departments will be subject to a fine for every day individuals are delayed in hospital as a direct result of the lack of social care services, relating to both assessment activity and service provision.
3. During October 2003 to January 2004 a shadow period will operate. Data will be collected and used to profile the financial impact.

Background

4. Securing timely and effective hospital discharge is a key concern for health and social care. Hospital beds are expensive and a finite number. Hospital is often an unsuitable environment for people who are fit for discharge. Unnecessarily long delays can subject patients to risk of acquired infections which can lead to depression or a decline in functional independence. The objective is therefore "right care, right place, right time."
5. With the amalgamation of the city hospitals in Hereford into the County Hospital there was a reduction in the number of beds in the acute hospital sector. This was to be of-set by more day cases, more efficient systems, a new Intermediate Care Centre at Hillside, and ensuring timely discharges.
6. Delayed hospital discharge is a complex issue with a range of causes and solutions which generally fall into one of the following three categories:
 - At an individual level - there is a need for action to improve the way that individual practitioners respond to the needs of older people and communicate with service users, carers and fellow professionals.
 - At an organisational level – there is a need for action by health and social care agencies to work in partnership, increase their own internal efficiency and develop shared solutions to local problems.

- At a structural level – there is a need for central government to overcome the financial, legal and administrative obstacles to joint working.

Current Position

7. On a weekly basis there are on average between 16 and 20 people who are delayed in Hereford Hospitals Trust. These figures are reported to the DOH. Between 3 and 5 of those can be directly attributed to social reasons. However, those not reported are those people delayed in non-acute settings i.e. the County's community hospitals and mental health wards. Currently there are on average 14 during any week. These individuals are primarily waiting for funding to be released for residential or nursing placements.
8. A deliberate policy has been adopted of moving patients, who are fit for discharge but who are unable to be appropriately placed, in the community hospitals in order to ensure capacity within the acute trust. However this has resulted in further delays in getting other patients out into the community hospital in a timely manner.
9. A number of initiatives to improve the patients pathway through the system are underway;
 - Hillside Intermediate Care Centre will open on 1st November. This joint initiative with the Primary Care Trust provides for 22 residential rehabilitative beds and a community outreach team. The Council's Reablement Unit (currently at Quarry House) will be integrated into the centre.
 - A number of social care staff are now based in the County Hospital providing assessments and discharge planning on site. A joint funded team of reablement assistants provide intensive, short term, personal care support on discharge.
 - Leominster whole systems pilot - In recognition of the impact of social care related delays, the Council provided a one-off ring-fenced sum of £300,000 as part of the budget process for 2003/2004. Part of this has been used to fund placements for all those delayed in Leominster Community hospital during August. 9 patients were discharged. The pilot will address the question "what services need to be in place to ensure that no older person, admitted from home, is discharged directly to a care home placement."

- Implementation of Home Care Best Value Review. – The pilot area is again Leominster. A number of in-house home care staff are providing reablement for all new service users or those who have had a hospital admission. Learning from the pilot will inform the roll out of the improvement plan.
- Joint Intermediate care co-ordinator – this post holder will lead the locality development and integration of Rapid Response teams and the council's reablement teams.
- Emergency Medicine Task group – admission avoidance, with appropriate community health and social care response is vital to ensure that only those who need the services of acute medicine are admitted to a hospital bed. Social care is represented on this working group.
- A visit by a member of the DOH Change Agent team has provided a report for the Joint Chief Executives/Officers on areas for whole systems development.
- A discharge guide for patients has recently been published.
- Additional assessment staff in mainstream and mental health services.

Reimbursement Scheme

10. The stated intention of The Community Care (Delayed Discharges) Act 2003 is that social services should pay for the care of an individual as soon as they become their responsibility. The fact that social services will have to pay the costs of keeping someone in hospital is intended to act as an incentive to them to provide community services as soon as possible.
11. The shadow period between October 2003 and January 2004 will provide time to prepare for implementation. This period provides the opportunity to review and strengthen discharge planning. An implementation team lead by social care has completed the administration process mapping and systems will be in place by October.'
12. Reimbursement Grant accompanies the Act. Herefordshire's allocation is £172,000 part year funding. Local partners have agreed to the advanced investment of some of the grant to expand services and minimise delays. Department of Health guidance allows for local economies to agree to "call off" any subsequent actual fines against the amount invested. This approach is intended to encourage councils not to hold back part of the grant to pay fines.

13. The biggest cause of lengthy delays in Herefordshire is for people waiting for funding for care home placements, or for a vacancy in their home of choice – Herefordshire will invest in a number of “interim placements” as alternative provision until permanent funding or vacancies are available.
14. An administrator will be required to accept and monitor the notifications.

Summary

15. Delayed discharges are not the responsibility of a single agency and therefore require a joint agency response. The introduction of reimbursements, while it will define and identify delays due to social care functions, will not resolve the issue in isolation. Funding of care home placements continue to cause the greatest number of delays, detailed monitoring will be required to judge whether the investment of the grant will be sufficient not to incur fines. This will form part of the budgetary process.

RECOMMENDATION

THAT the report be noted and further reports on delayed transfers of care, and the implementation of the reimbursement scheme be brought to the Committee.

BACKGROUND PAPERS

- Beds in Herefordshire reports – Social Care’s contribution to the action plan - Social Care and Strategic Housing Committee – 18th April 2002 and 23rd January 2002.