

## **Title of report: Briefing paper on out of hospital care**

**Meeting: Adults and wellbeing scrutiny committee**

**Meeting date: Monday 6 September 2021**

**Report by: Acting Director for adults and wellbeing & Chief Nursing Officer, & NHS Herefordshire and Worcestershire CCG**

### **Classification**

Open

### **Decision type**

This is not an executive decision

### **Wards affected**

(All Wards);

### **Purpose**

To consider the attached paper on out of hospital care, including Continuing Healthcare, discharge pathway and self-funders, and to determine any recommendations the committee wishes to make.

### **Recommendation(s)**

#### **That the committee:**

- a) considers the paper on out of hospital care (Appendix A) ;and
- b) determines any recommendations it wishes to make to a responsible NHS body and/or to the executive.

### **Alternative options**

1. It is a function of the committee to review and scrutinise any matter relating to the planning, provision and operation of the health service within its area. The committee also has the function to make recommendations to a responsible NHS body on any NHS matter it has reviewed or scrutinised, and to make reports or recommendations to the executive with respect to the discharge of any functions which are the responsibility of the executive. As such, there are no alternative options.

## Key considerations

2. The adults and wellbeing scrutiny committee has statutory health scrutiny powers including the review and scrutiny of any matter relating to the planning provision and operation of health services (not reserved to the children and young people scrutiny committee) affecting the area and to make reports and recommendations on these matters.
3. NHS Continuing Healthcare (NHS CHC) means a package of ongoing care that is arranged and funded solely by the NHS where the individual has been assessed and found to have a 'primary health need'. Such care is provided to an individual aged 18 or over, to meet health and associated social care needs that have arisen as a result of disability, accident or illness.
4. The adults and wellbeing scrutiny committee considered an item on 'NHS Continuing Healthcare Framework applicable to Herefordshire' at the meeting on 20 September 2018. Details of this item, including the report, appendices and minutes of the debate can be viewed here: [Issue - items at meetings - NHS Continuing Healthcare Framework applicable to Herefordshire - Herefordshire Council](#)
5. The recommendations of the committee and the responses received from the CCG were as follows:

### Recommendations

### Response

a) a small number of senior social workers be upskilled to ensure that there is a common understanding of the medical terminology when dealing with disputes;

b) the CCG be requested to commit to seeking to lift Herefordshire out of its current position of 6th from the bottom in the national CHC eligibility by 50k population and to report its progress against this commitment at a future adults scrutiny committee;

CCG response: NHS Herefordshire CCG is committed to ensuring its practice in relation to CCG eligibility continues to be in line with the revised CCG national framework and subject to quality assurance. This has been tested by NHS England and assurance received that the CCG is applying the framework appropriately so will continue with current practice and governance. The CCG will be happy to share the outcomes from the NHS England review with the local authority and the committee once it has been received and reviewed by the CCG internal governance processes.

c) the CCG be called back to the committee to report on progress made against their action plan recommendations in six months' time

specifically –

- to update the committee on progress against the recommendations that have not been completed to date, and
- to report on the progress made as a result of the recommendations completed and implemented;

CCG response: The CCG is more than content to return to the scrutiny committee in relation to the recommendations of the external review completed by Ms A Parry. The CCG would request that this attendance and the update on progress relating to the recommendations is done in partnership with Herefordshire Council colleagues.

d) the CCG be requested to influence the report of the NHS England to be a system review and to include the local authority within that review

CCG response: CCG will raise the issue of LA engagement in NHS England review.

6. The CCG provided a further briefing paper which was considered by the committee at the meeting on 2 March 2020. Details of this item, including the report, appendices and minutes of the debate can be viewed here: [Issue - items at meetings - Briefing paper on NHS Continuing Healthcare \(NHS CHC\) - Herefordshire Council](#)

7. The recommendations of the committee and the response received from the CCG was as follows:

Recommendations

Response

In collaboration with Herefordshire Council, where appropriate, it be recommended to the clinical commissioning group:

a) To provide a rationale, with data (in numbers), as to why Herefordshire is not achieving the expected levels of NHS Continuing Healthcare when compared with other clinical commissioning group and local authority comparator areas.

NHS Herefordshire and Worcestershire Clinical Commissioning Group CHC teams have been deployed to support the level 4 national response. The CHC process has also been suspended during the response phase with

b) To follow up the request from the adults and wellbeing scrutiny committee on the commitment to provide responses to the recommendations set out in the jointly commissioned Parry report.

restart date / process yet to be defined.

c) To provide details on the numbers of NHS Continuing Healthcare appeals and the number of successful appeals before and since 2016.

Once the CHC team are released from the level 4 response responsibilities, an updated position report covering all the CHC recommendations will be developed with presentation at the July meeting of the Adults and Wellbeing Scrutiny Committee. This response will be completed in full collaboration with the relevant teams in Herefordshire council.

d) To explain how the various discharge pathways are able to pick up the patients where NHS Continuing Healthcare is deemed, or not deemed, to apply and how further assessments of NHS Continuing Healthcare are triggered.

e) Where there are changes to services that are likely to impact on the wider system, that partners are engaged in conversations at the earliest opportunity.

8. Due to covid-19, there were no further meetings of the scrutiny committee until September 2020 and the subsequent work programme was revised.

9. A briefing note was circulated to members of the committee in May 2021. This included a further response to the recommendations of 2 March 2020 and made the following proposal for scrutiny to consider as a way forward:

- An agreed joint working plan will be developed, which takes in to account the “Parry” recommendations, as well as any other development opportunities not included within the “Parry” report.
- Progress against the development plan be reported, in person, by senior managers from both organisations to Scrutiny. The frequency of reporting would be agreed with Scrutiny.
- Front-line practitioners from both organisations will attend Scrutiny updates to provide feedback on working practices.
- Updates will, where relevant, include activity levels and national benchmarking data.

10. The briefing note also highlighted that Health and Social Care partners were undertaking a review of discharge processes, includes the checklist process for CHC at the point of discharge by trusted professionals. The long-term discharge to assess model was proposed to be reported to Adult Wellbeing and Scrutiny Committee well before the current funding arrangements of discharge to assess finishes on 30 September 2021.
11. The latest update from the CCG is attached at appendix A.

## **Community impact**

12. In accordance with the adopted code of corporate governance, Herefordshire Council achieves its intended outcomes by providing a mixture of legal, regulatory and practical interventions. Determining the right mix of these is an important strategic choice to make sure outcomes are achieved. The council needs robust decision-making mechanisms to ensure its outcomes can be achieved in a way that provides the best use of resources whilst still enabling efficient and effective operations and recognises that a culture and structure for scrutiny are key elements for accountable decision making, policy development and review.
13. This scrutiny activity contributes to the corporate plan – county plan 2020-24 ambition ‘strengthen communities to ensure everyone lives well and safely together’.
14. Within the NHS, there has been increasing emphasis on the need to understand and respond to the views of patients and the public about health and health services. Responding positively to health scrutiny is one way for the NHS to be accountable to local communities.

## **Environmental Impact**

15. The work of the scrutiny committee will have minimal environmental impacts, although consideration has been made to minimise waste and resource use in line with the council’s Environmental Policy.
16. The committee should be mindful of the potential environmental impacts of any recommendations it may put forward, and responses to such recommendations and any decisions arising from these should also consider the environmental impact.

## **Equality duty**

17. Under section 149 of the Equality Act 2010, the ‘general duty’ on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to

–

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
  - b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
  - c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
18. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services. All Herefordshire Council members are trained and aware of their Public Sector Equality Duty and Equality considerations are taken into account when serving on committees.

## **Resource implications**

19. There are no resource implications associated with the recommendation. The resource implications of any recommendations made by the committee will need to be considered by the responsible NHS body or the executive in response to those recommendations or subsequent decisions.

## **Legal implications**

20. Section 9FA of and Schedule A1 to the Local Government Act 2000, Regulations 5 and 11 of the Local Authorities (committee system) (England) Regulations 2012 and Regulation 30 of the Local Authority (Public Health, Health and wellbeing boards and Health Scrutiny) Regulations 2013 make provision for local scrutiny functions to review and scrutinise matters relating to the planning, provision and operation of the health service in the area.
21. The remit of the scrutiny committee is set out in part 3, section 4.5 of the constitution and the role of the scrutiny committee is set out in part 2, section 2.6.5 of the constitution. The council is required to deliver a scrutiny function.

## **Risk management**

22. None in relation to this report; scrutiny is a key element of accountable decision making and may make recommendations to certain NHS bodies with a view to strengthening mitigation of any risks associated with the proposed decisions. The committee may make reports and recommendations to certain NHS bodies and expect a response within 28 days.

## **Consultees**

23. The committee requested further consideration of this topic following the agenda items set out in the key considerations above.

24. Councillors and members of the public are able to influence the scrutiny work programme by suggesting a topic for scrutiny or by asking a question at a public meeting. For further details please see the 'get involved' section of the council's website:

[www.herefordshire.gov.uk/getinvolved](http://www.herefordshire.gov.uk/getinvolved)

## Appendices

Appendix A – Briefing paper from CCG

### Background papers

None identified.

### Glossary

CCG	NHS Herefordshire and Worcestershire Clinical Commissioning Group	Clinical Commissioning Groups are clinically-led statutory NHS bodies responsible for planning, buying (commissioning) and monitoring health care services in their local area.  Herefordshire and Worcestershire CCG was formed through a merger in April 2020.
NHS CHC	NHS Continuing Healthcare	A package of ongoing care that is arranged and funded solely by the NHS.