

People and Communities Oversight and Scrutiny Committee

Dorset County Council



Date of Meeting	21 st March 2018
Officer	The Transformation Programme Lead for Adult and Community Forward Together Programme
Subject of Report	Delayed Discharges Performance
Executive Summary	<p>This report and attached appendix have been coordinated to provide committee members with an update of delayed discharge performance within the Dorset Health and Wellbeing Board area.</p> <p>As a high priority nationally, much work has been afforded within the adult social care directorate to reducing delays from hospital, which often occur as a patient is awaiting onward transfer to home or community 'step down' services'.</p> <p>A delayed transfer of care (DToC) occurs when a patient is medically fit to leave hospital but is still occupying a bed. Within the report, what is meant by 'delayed transfers' is further explained. The current performance within Dorset is explained. Additionally, a summary of the work to improve performance has been included, along with local challenges and action plans.</p> <p>The Dorset area will continue to monitor and work to improve performance, whilst keeping the patient at the heart of our care.</p>
Impact Assessment	<p>Equalities Impact Assessment:</p> <p>Not required in this instance.</p>

Delayed Discharges Performance Update

	<p>Evidence for the report has been compiled from a number of sources, summarised below;</p> <ul style="list-style-type: none"> • Local Business intelligence – metrics (local and approved data) • DTOC performance dashboard (NHSE data) • National Guidance (published) • Input from operational colleagues, collected weekly • Key leads action/performance plans
	<p>Budget:</p> <p>The iBCF allocations for DCC are £7.432m in 2018/18, £9.768m in 2018/19 and £11.750m in 2019/20.</p> <p>The Better Care Fund Guidance introduced the expectation of each council to reduce social care attributable delayed transfers of care (DTOC) in 2017-18, with draft targets to be submitted by 21 July. The target was linked to the possibility of review of improved Better Care Fund (iBCF) funding in 2018/19 for areas that are performing poorly against the DTOC target.</p> <p>See risk assessment below.</p>
	<p>Risk Assessment:</p> <p>There has been one high risk identified for delayed discharges, outlined below:</p> <p>There is a significant risk that the agreed plans do not achieve the savings in line with local government funding reductions. Performance on admissions and delayed transfer of care continues to be challenging, which will impact on performance related funding. Performance indicators are largely based on health performance and therefore whilst the local authority can influence this risk, it cannot control it. The new BCF plan will ramp up performance expectations for both health and social car. High impact changes are being implemented and linked to winter planning.</p>
	<p>Other Implications:</p> <p>Delayed transfers are also a high priority for health and feed into the aims of the Sustainability and Transformation Plan.</p> <p>There are overlaps with the Property and Assets Programme as this links directly to accommodation capacity within the county.</p>
<p>Recommendation</p>	<p>It is requested that the Committee scrutinise the performance reported and advise of any further actions that should be taken.</p>
<p>Reason for Recommendation</p>	<p>To provide the Committee with an update addressing current delayed transfers performance and actions</p>

Delayed Discharges Performance Update

Appendices	None
Background Papers	Monthly Delayed Transfers of Care Situation Reports, definition and guidance – NHS England
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1. Background

1.1 Reducing hospital delayed discharges is a high priority nationally due to the impact on NHS care as they reduce the numbers of beds for other patients. Additionally, they cause unnecessarily long stays in hospital which can lead to distress, detrimental effects on health and which puts patients at unnecessary risk, e.g. of infection.

1.2 A 'delayed transfer of care' (DToC) occurs when a patient is medically fit to leave hospital but is still occupying a bed.

1.3 NHS England are responsible for monitoring delayed transfers of care and define a patient as being ready for transfer when;

- A clinical decision has been made to confirm the patient is ready, and
- A multidisciplinary team has decided the patient is ready, and
- The patient is safe to discharge/transfer

Once a patient has met the criteria above, yet still occupies a bed – they are classed as a delayed transfer. As shown in Table 1 (below), delays can be attributed to health, social care or both and a patient should only be counted in one category of delay for each day.

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	Attributable to NHS	Attributable to Local Authority (Care)	Attributable to both
A. Awaiting completion of assessment	✓	✓	✓
B. Awaiting public funding	✓	✓	✓
C. Awaiting further non-acute (including community and mental health) NHS care (including intermediate care, rehabilitation services etc)	✓	✗	✗
D i). Awaiting residential home placement or availability	✓	✓	✗
D ii). Awaiting nursing home placement or availability	✓	✓	✓
E. Awaiting care package in own home	✓	✓	✓
F. Awaiting community equipment and adaptations	✓	✓	✓
G. Patient or Family choice	✓	✓	✗
H. Disputes	✓	✓	✗
I. Housing – patients not covered by Care Act	✓	✗	✗

Table 1: Reasons for delay and responsibility

1.4 Patients can often be delayed waiting for onwards care. For example, intermediate care services occupy an important middle ground between primary and hospital care for patients leaving hospital. These services include bed-based care, rehabilitation and reablement services, which often provide a much-needed ‘step-down’ service for people moving between more intensive hospital care and independent living or social care.

2. DTOC Targets & performance

2.1. Reducing delays is a key focus for the Better Care Fund (BCF); the Department of Health set a target for delayed transfers to be reduced to no more than 3.5% of all hospital bed days by September 2017. Table 2 (below) shows the target number of adult social care attributable days in our BCF Plan and our actual performance. Once this data is accumulated (Table 3), this shows that year to date, Adult Social Care (ASC) attributed delays are 302 days over target.

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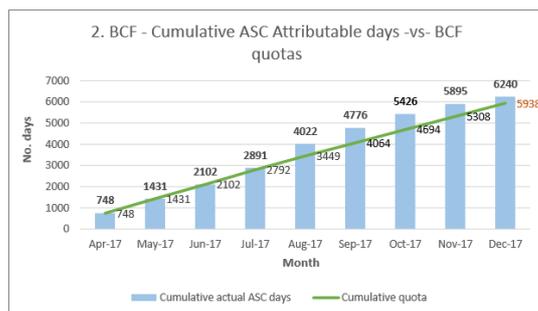


Table 2: Cumulative ASC Attributable days vs BCF quotas

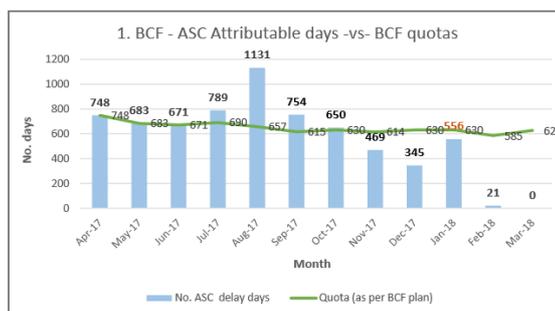


Table 3: ASC Attributable days vs BCF quotas

2.2. As a local authority, there has been much improvement witnessed. Performance data for December 2017 displayed the most improvement with a reduction of 334 delays on the previous year's data. Despite this, there is a call for more work to be done as nationally, the Dorset area's ranking for adult social care delays is 126th out of 151; the bottom quartile.

2.3. Additional DTOC metrics include:

- **Permanent Admissions** - Long-Term Support needs of older people (aged 65 and over) met by admission to residential and nursing homes per 100,000 population. Often a correlation between good DTOC/poor permanent admissions and vice versa.
 - Target 2017-18: 524
 - On track to meet target
- **Reablement Effectiveness (91day indicator)** - Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services.
 - Target: 80%
 - Not on track to meet target (data quality is still being undertaken, an increase in performance is being witnessed retrospectively)

3. Work to date

3.1 There has been much work afforded to reducing delayed transfers of care, including;

- Engagement of a consultant to support DToC work
- Initiating weekly calls between partners to discuss performance and individual delays for patients with longer delays
 - Working together to find solutions
- High Impact Change action plans agreed with acute trusts and Dorset Healthcare – monitored and updated monthly
- Supported discharge by DToC workers based in hospitals – work is ongoing
- Data cleansing/reliable reporting to understand the true position - ongoing
- New data management system in place
- Project implementation group set up to address DToC
- Improved relationship building across partners
- Dorset Care Framework roll out to improve market capacity
- Winter pressure funds used to commission an additional 10 beds to support discharges
- Better Care Fund monitoring

3.2 Although not exhaustive, the above highlights the focus within Dorset to improving the numbers of delayed transfers, with the aim to further reduce and ultimately eliminate the number of wasted days because of delays.

3.3 The presentation accompanying the report will outline the current challenges to improving delays which have been attributed to adult and older persons' mental health and awaiting long term packages of care.

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3.4 Relationship building, effective partnership communications and more detailed and accessible data have enabled teams to gain more clarity regarding current blockages in the system and the creation of action plans to mitigate the issues.

4. Forward Plan

4.1 The actions to address these challenges have been detailed within Appendix A, and are summarised below:

a) Adult and Older Persons' Mental Health (Appendix A, slide 4)

- Coordinate provider forums to discuss capacity building within existing business with a view to including new providers to increase business, build capacity and skills and support future tenders
- Initiate a Joint Commissioning Group with Dorset CCG to link with the Clinical Services Review Mental Health Acute Care Pathway work
- Work with the assets strategy to explore short and longer term accommodation options across the county

b) Awaiting Long Term Packages of Care (Appendix A, slide 5)

- Ongoing market management with regular contract management
- Improved use of demand information
- Ongoing review of legacy packages for improved planning
- Performance management of contact including new metrics on individual wait times
- Improve and simplify pathway management
- Joint Continuing Healthcare and Brokerage and pooled budget

4.2 Work will continue to develop with a heightened focus to significantly reduce the number of delayed discharges in the area. The approach will continue to put patients at the heart of the plans to ensure that improvements in one area do not lead to blockages in another area of the system.

4.3 Work will be aligned to, and focussed on the creation of a seamless and delay free patient journey, regardless of whether they are moving between health or social care.

5 Conclusion

This report had been coordinated for members of the committee to note the actions taken and future plan for the area of delayed transfers.

Helen Coombes
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March 2018