

**REPORT TO:** East Lothian Integration Joint Board

**MEETING DATE:** 25 February 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 improving trend on performance and recent actions.
- 2.2 That the IJB agrees that the Chief Officer should identify what resources are available to further improve performance.
- 2.3 That the IJB agree that the Chief Officer develop specific actions to improve care at home capacity within the resources available.

## 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 target. No date has been set for achievement of the 72 hour target.
- 3.2 Performance for the validated census in January 2016 is reported below. This improved significantly since the last report to the IJB in November 2015 which showed a total of 37 for October 2015.

	Edinburgh	East Lothian	Midlothian	West Lothian	Non - Lothian
Overall	122	19	3	14	3
Over 4 Weeks	36	5	0	3	3
Over 2 Weeks	61	8	0	4	3

3.3 At the time of writing the February 2016 census result was not known. This will be reported verbally at the meeting.

3.4 Performance on total number of validated delays for East Lothian since April 2013 is shown below.

Apr 13	May 13	Jun 13	July 13	Aug 13	Sep 13	Oct 13	Nov 13	Dec 13	Jan 14	Feb 14	Mar 14
30	28	29	30	21	22	15	24	22	19	16	17

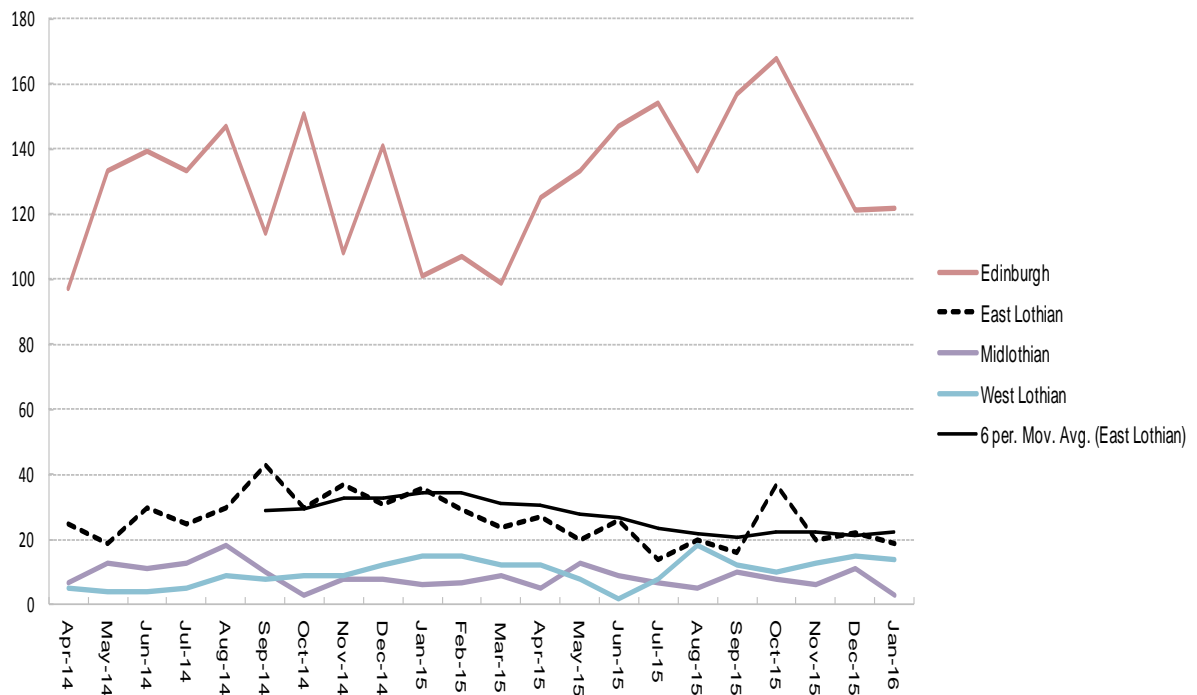
Apr 14	May 14	Jun 14	July 14	Aug 14	Sep 14	Oct 14	Nov 14	Dec 14	Jan 15	Feb 15	Mar 15
25	19	30	25	30	43	30	37	31	36	29	24

Apr 15	May 15	Jun 15	July 15	Aug 15	Sep 15	Oct 15	Nov 15	Dec 15	Jan 16	Feb 16	Mar 16
27	20	26	14	20	16	37	20	22	19		

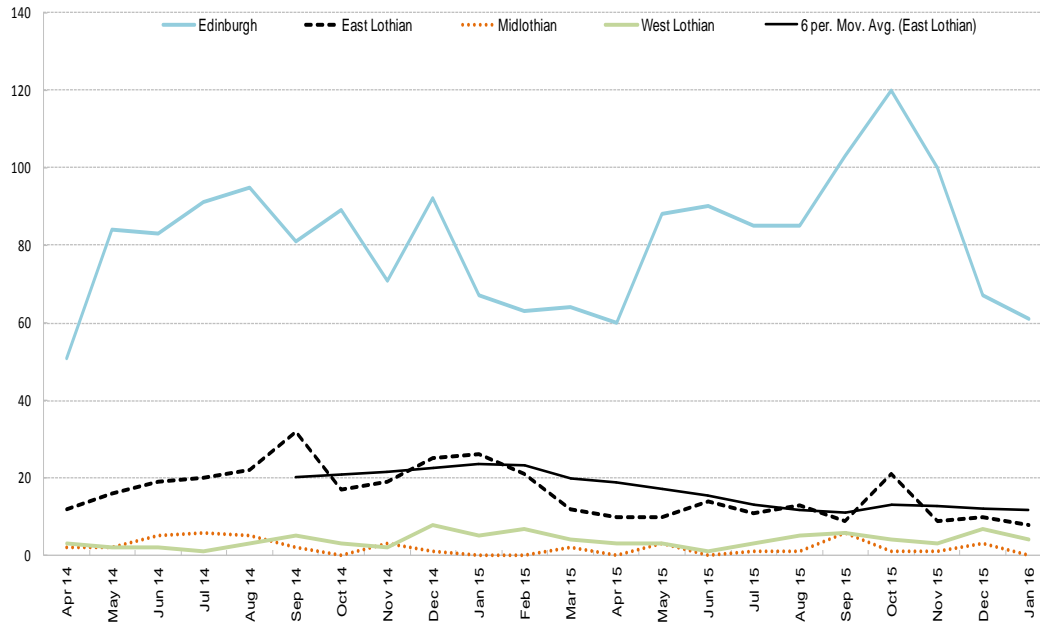
3.5 This illustrates that the October 2015 total number of 37 was clearly against the trend.

3.6 The charts below show the total numbers and performance against national standards with a six month trend line shown for East Lothian.

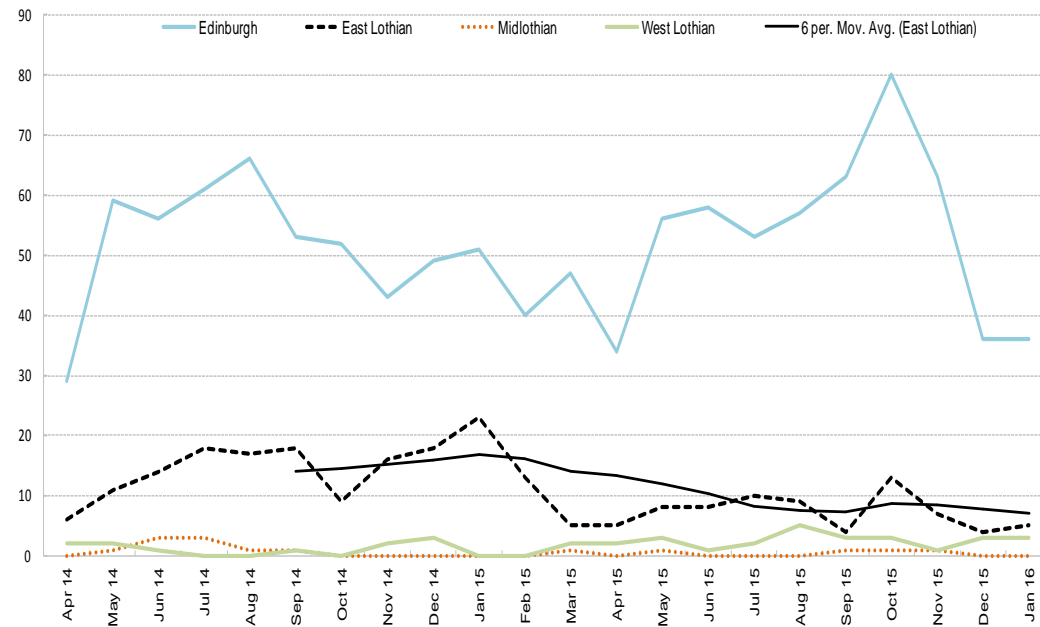
**Overall Number of Patients Delayed by LA**



### Number of Patients Delayed Over 2 Weeks by LA



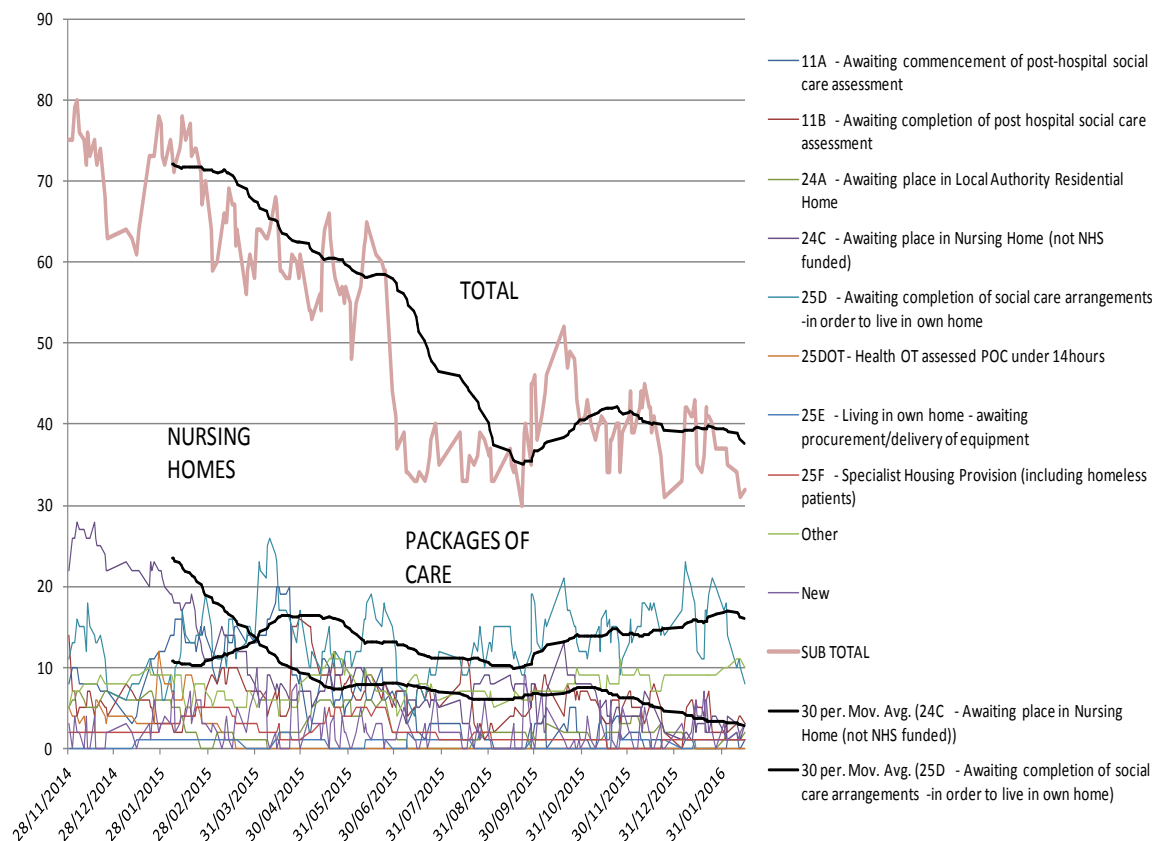
### Number of Patients Delayed Over 4 Weeks by LA



3.7 These charts illustrate continued steady improvement on all measures.

3.8 The chart below shows more detail for East Lothian using the live EDISON database. The numbers on EDISON always exceed the numbers in the validated census since it includes delays for issues such as guardianship that are excluded from the census. However, EDISON does illustrate the reasons for delay in East Lothian.

3.9 To simplify the chart, trend lines in black have been inserted for the three key numbers. Total, nursing homes and packages of care.



3.10 This shows that total numbers on EDISON have been decreasing in line with the census numbers.

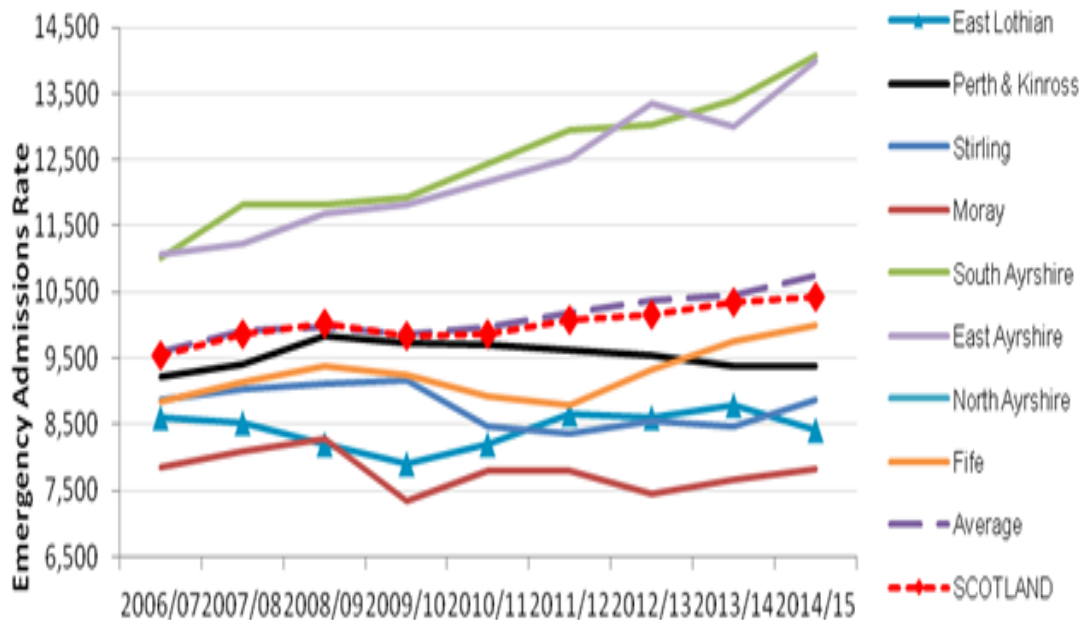
3.11 It also shows that the reasons for delay have changed significantly. In early 2015 the main reason was access to nursing homes. This has changed to access to care at home.

3.12 Significant efforts have been made to support care homes in East Lothian through Adult Wellbeing, General Practices and the NHS Care Home Liaison Service.

3.13 The charts above all illustrate that performance has improved significantly over recent months. However, it could be argued that East Lothian's performance has levelled off at around 20 total delays and 10 over two weeks.

3.14 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.



- 3.15 Having significantly improved the position with care homes and the assessment process through the use of the delayed discharge fund (as previously reported to the IJB), the Partnership now needs to take steps to tackle the root cause of most remaining delays which is access to care at home.
- 3.16 The current Help to Live at Home framework is currently unable to provide around 1,460 hours of care each week (as of 6 February 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. Of these hours, 585 hours related to people in hospital. This represented 39 people (not all of whom are classified as delayed).
- 3.17 In order to address this, the Partnership has taken the following actions so far.
- 3.18 Funded "Hospital to Home" in which NHS clinical support workers provide personal care packages to people coming out of hospital until framework providers can provide the package.
- 3.19 Funded additional staffing in the in house Domiciliary Care Service to recruit 10 additional staff. However, recruitment only filled 2 of the 10 posts.
- 3.20 Supported the development of "At Home In East Lothian" (AHIEL), a social enterprise care provider, in order to grow the market. AHIEL is

now providing care for c 40 clients with a focus on the east of East Lothian which has been the most difficult area to source care.

- 3.21 Introduced a “collaborative allocation” process between providers allowing providers to share packages rather than clients waiting till one provider can provide the whole of a package.
- 3.22 Introduced and expanded East Lothian Service for Integrated Care of the Elderly (ELSIE) to avoid hospital admission and speed discharge home with healthcare support.
- 3.23 However, there remains the core problem of c 300 hours of demand for people delayed in hospital that is not being met by the current framework.
- 3.24 East Lothian Council agreed its three year budget for 2016/17 to 2018/19 on 9 February 2015. This includes a net increase in the Adult Wellbeing budget of £1.995m for 2016/17.
- 3.25 It includes investment in service pressures that will support the care at home sector (such as the living wage and payment of travel time) and in demographic pressures.
- 3.26 NHS Lothian has not yet set its budget. It is not anticipated that there will be increases in NHS funding in this area, however it is likely that the Delayed Discharge fund will become recurrent. This is helpful in planning for the long term.
- 3.27 With the knowledge of East Lothian Council budget now clear, it is proposed that the Chief Officer should lead work to implement the living wage and travel time in care at home which should improve recruitment and retention of staff in the independent sector. The Chief Officer should also lead work to develop and cost detailed proposals to increase the total capacity available in care at home within the budgets that will be available to the IJB.
- 3.28 It should be noted that the Help to Live at Home framework will be retendered over the next 18 months and a new model for the service will be developed as part of that process. Therefore some of the actions required in the short term will be subsumed into the new model for the service.

#### **4 POLICY IMPLICATIONS**

- 4.1 There are no policy implications of this paper.

#### **5 EQUALITIES IMPLICATIONS**

- 5.1 There are no equalities implications of this paper.

## 6 RESOURCE IMPLICATIONS

- 6.1 Resource implications above those already committed through the Delayed Discharge Fund will be analysed in detail and included in a proposal to the IJB. This will be in the context of the financial assurance to be discussed at the Audit and Risk Committee and the final analysis of the resources available to the IJB.

## 7 BACKGROUND PAPERS

- 7.1 East Lothian Council [Budget Papers](#) 9 February 2016

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