



REPORT TO: East Lothian Integration Joint Board

MEETING DATE: 10 December 2020

BY: Chief Officer

SUBJECT: Improving and Maintaining Delayed Discharge Performance Through Winter

1 PURPOSE

- 1.1 To inform the Integration Joint Board of requirements placed on East Lothian Health and Social Care Partnership to further improve on Delayed Discharge Performance and to maintain improved performance over the winter months.

2 RECOMMENDATIONS

The IJB is asked to:

- 2.1 Support co-ordinated work across the HSCP teams to deliver and to maintain, an as yet to be agreed level of Delayed Discharge Performance through winter.

3 BACKGROUND

- 3.1 In the coming months, Health and Social Care Services across Scotland will face increased demands on their services through a combination of COVID-19 related activity and increasing winter bed pressures.
- 3.2 To take pressure off acute services, there is an expectation that HSCPs will also focus on improving delayed discharge performance to achieve again the excellent performance delivered in April 2020 and importantly, to maintain this through winter.
- 3.3 Government policy (such as described in the Adult Social Care Winter Preparedness Plan¹) already sets out a range of actions for partners, including HSCPs, to deliver adult social care through the winter. Many of these actions are already in place in East Lothian HSCP.

¹ [Adult Social Care Winter Preparedness Plan 2020-21](#)

- 3.4 Although East Lothian HSCP has amongst the best delayed discharge performance in the country, at 24th November performance was higher than the low of three, or average of seven in April 2020 (Appendix 1). Services must therefore co-ordinate efforts to bring delayed discharge performance back to April levels, as requested by Scottish Government. East Lothian's delayed discharge target over the winter period has yet to be agreed.
- 3.5 East Lothian Health and Social Care Partnership plays an important role in preventing admissions through delivery of a range of supports and services to patients in their homes and in the community and by facilitating discharge from acute settings to appropriate rehabilitation and follow-on care.
- 3.6 In addition, work to deliver the GP (General Medical Services) contract is supporting East Lothian GP practices and has directed activity away from practices to a range of new services. Some of these services began to deliver as COVID-19 restrictions reduced the capacity of GP Practices to deal with patient demand.
- 3.7 The Care Home Team's role has supported all East Lothian care homes in preventing inappropriate (and in light of COVID, clinically high risk) admission to acute hospitals.
- 3.8 HSCPs across Scotland report to the Scottish Government on a daily basis (Mon-Fri) on their Delayed Discharge performance.
- 3.9 Planning work for winter is already underway in East Lothian to further increase admission prevention and supported discharge work through Hospital at Home, Rehabilitation Services and Hospital to Home expansion, utilising Lothian Winter Plan monies. Any increase to the activity of these already busy teams will require redesign of delivery arrangements and further funding if expansion of staffing is required.
- 3.10 Developments arising from national policy to change unscheduled (unplanned) care to scheduled (planned) care to take pressure off the 'front door' will have a positive influence on the number of people presenting at A&E and ensure the service focusses on those who are clinical priorities. In support of this, East Lothian HSCP is developing a local patient pathway supported by a single point of access (SPOA) to health and social care services.
- 3.11 With appropriate support, local planning and continuation of its innovative approaches, East Lothian HSCP is well placed to further improve and maintain its delayed discharge performance.

4 ENGAGEMENT

- 4.1 No specific engagement activity is planned for service developments designed to secure the required improvements to delayed discharge performance.

5 POLICY IMPLICATIONS

- 5.1 There are no policy implications arising from the plans described in this paper.

6 INTEGRATED IMPACT ASSESSMENT

- 6.1 None of the local plans to improve delayed discharge performance are considered to require an Integrated Impact Assessment.

7 DIRECTIONS

- 7.1 No new Directions are required to deliver the changes and improvements in service delivery required to improve delayed discharge performance.

8 RESOURCE IMPLICATIONS

- 8.1 Financial – Winter Plan and other investment is being utilised as appropriate across services in support of improved Delayed Discharge performance.
- 8.2 Personnel – investment in and changes to staffing is underway to respond to increased winter pressures.
- 8.3 Other – None

9 BACKGROUND PAPERS

- 9.1 Appendix 1 - Delayed Discharge performance through April 2020 and at 24th November 2020

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DATE	26 November 2020

Appendix 1 – Delayed Discharge performance through April 2020 and at 24th November 2020

Date	Standard delays			Code 9 delays (AWI complex case)			Code 9 delays (non-AWI complex case)			All delays			Total
	Acute	Mental Health	Community	Acute	Mental Health	Community	Acute	Mental Health	Community	Acute	Mental Health	Community	
2020													
01/04	3	1	4	0	0	0	0	1	0	3	2	4	9
02/04	3	1	5	0	0	0	0	1	0	3	2	5	10
03/04	4	1	4	0	0	0	0	1	0	4	2	4	10
06/04	0	0	5	0	0	0	0	1	0	0	1	5	6
07/04	0	1	4	0	0	0	0	1	0	0	2	4	6
08/04	1	1	3	0	0	0	0	1	0	1	2	3	6
09/04	1	1	4	0	0	0	0	1	0	1	2	4	7
10/04	1	0	4	0	0	0	0	1	1	1	1	5	7
13/04	0	1	3	0	0	0	0	0	1	0	1	4	5
14/04	1	1	6	0	0	0	0	0	1	1	1	7	9
15/04	0	1	7	0	0	0	0	0	1	0	1	8	9
16/04	0	1	6	0	0	0	0	0	1	0	1	7	8
17/04	0	1	6	0	0	0	0	0	0	0	1	6	7
20/04	3	1	2	0	0	0	0	0	0	3	1	2	6
21/04	1	1	3	0	0	0	0	0	0	1	1	3	5
22/04	1	2	2	0	0	0	0	0	0	1	2	2	5
23/04	0	2	2	0	0	0	0	0	0	0	2	2	4
24/04	1	2	0	0	0	0	0	0	0	1	2	0	3
27/04	1	2	2	0	0	0	0	0	0	1	2	2	5
28/04	3	2	4	0	0	0	0	0	0	3	2	4	9
29/04	2	2	3	0	0	0	0	1	0	2	3	3	8
30/04	2	1	2	0	1	0	0	1	0	2	3	2	7
24/11	6	2	2	0	0	0	1	0	1	7	2	3	12