

THE EXECUTIVE

13 SEPTEMBER 2005

REPORT OF THE DIRECTOR OF SOCIAL SERVICES

BEST VALUE REVIEW SIGN OFF REPORT – HOSPITAL DISCHARGE		FOR DECISION
Summary: This paper sets out the background of the Best Value Review that was undertaken for Hospital Discharge in year 1 (2001/02) of the Council's best Value Review Programme. It also demonstrates how this review has contributed to continuous improvements in service delivery and how it has shaped the future service delivery model for this area. Wards Affected: None		
Implications: Financial: There are no financial implications. Legal: None Risk Management: As this report only requires a decision of completion on the previously agreed action plan, there was not a requirement to look at risk management issues Social Inclusion and Diversity: As this report does not concern a new or revised policy there are no specific adverse impacts insofar as this report is concerned. Crime and Disorder: There are no specific implications insofar as this report is concerned.		
Recommendation(s) The Executive is asked to agree: That the Best Value review and associated action plan now formally be signed off as complete.		
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1. Introduction and Background

- 1.1 The provision of hospital discharge, was subject to a Best Value Review in year 1 of the Council's Best Value Review programme (BVR).in 2001-02.
- 1.2 At the time that the review of hospital discharge took place there was a concern amongst all parties concerned at the very high levels of delayed discharges. The reviews emphasis was that of a whole systems approach and included 4 local

authorities, 2 previous health authorities, 2 acute hospital trusts and one primary care trust. This therefore was a very complex review and encompassed all the agencies included within the whole process of both hospital admissions and discharges from hospital. The care management of the process was also looked at the time that the review took place.

- 1.3 It is to be borne in mind that the structure of the hospital trusts is now different to that present at the time of this review.
- 1.4 The key outcomes expected from the review were that of a more holistic joined up approach to hospital discharges with a reduction in the very high number of delays that were apparent at the time.
- 1.5 Market testing of this review was not an option as the services covered were of a statutory nature to be administered by the Health Authority and the Council.
- 1.6 The Hospital Discharge process was subject to a Best Value Review in year 1 of the Council's Best Value Review programme (BVR).in 2001-02. The review encompassed two of the council seven community priorities, these were:

- Improving Health and Social Care
- Making Barking & Dagenham Cleaner & Greener.

2. Current Position

- 2.1 The number of delayed discharges has reduced considerably due to a number of service developments:
- 2.2 Case finders' now proactively identify clients suitable for discharge on the wards and work closely with the Intermediate Care and Assessment Team (ICAT), to ensure this is achieved in a safe and timely manner. The business process manager manages and monitors workflow through the ICAT team to ensure that timeframes and targets are met.
- 2.3 The care plan co-ordinators commission services in a timely way on behalf of the assessing staff. This frees the qualified social workers up to assess clients and ensures that packages of care are available in a timely way.
- 2.4 Assessors make full use of intermediate care services which enable patients to leave hospital and re-establish their independence at home. This includes 2 transitional care units providing intermediate care to prevent hospital admission and facilitate timely discharge as well as an intermediate care home support team and a palliative care home support team.
- 2.5 The planned move to Gray's Court is anticipated to be October 2005, subject to the installation of the British Telecom lines. for the intermediate and palliative care teams. This will enable them to work more closely with the collaborative care team to support hospital leavers.

3. Report Detail

- 3.1. Throughout the review period there were delays in hospital discharges of between 150 and 200 across the Barking & Havering Health Authority. Figures were however very high nationally and It is felt that this is what prompted the Government to introduce reimbursement fines at a slightly later date.
- 3.2. By all parties working affectively together and devising joint processes and looking at the way that both admissions are assessed and the capacity to effectively cope with the discharges by realigning the way that resources were distributed by all parties has led to a substantial decline in the number of delayed discharges that are now the sole responsibility of the social services department. Things that have assisted in the achievement of this are intermediate care developments such as intensive homecare and the availability of both nursing and residential home beds being available as required.
- 3.3. The review of hospital discharge was a very ambitious one, but one which has led to very good results in terms of both joint working and sustainable performance. Reportable delayed discharges for BHRT averaged 7 weekly throughout July and have dropped further since. The latest figure showed 4 delayed discharges for week ending 4.08.05 in BHRT of which 2 were the sole responsibility of social services. This is well below our agreed target of 9 weekly.
- 3.4. Although it is proposed that the review is now signed off as all the actions have been completed and practices are now reviewed as a matter of course. It can be noted that delayed discharge information is monitored on a weekly basis.

4. Implications

- 4.1 None

5. Consultees

- 5.1 As this report is for sign off only, no further consultation has been undertaken.

Background Papers Used in the Preparation of the Report:

- Best Value Review of Hospital Discharge