

HAMPSHIRE COUNTY COUNCIL

Decision Report

Decision Maker:	Cabinet
Date:	8 April 2019
Title:	Systems Resilience and Delayed Discharges
Report From:	Director of Adults' Health and Care

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Purpose of the report

1. The purpose of this paper is to update Cabinet on the key issues and activities related to system resilience.

Recommendation

2. For Cabinet to note this progress update in respect of system resilience and delayed discharges and for the actions being taken in relation to this work to be noted.

Executive Summary

3. System resilience in this context refers to the ability of the health and social care system to respond to changes and surges in demand related to care both in hospital and community settings.
4. This area of work is addressed through focused attention from Chief Officers, senior officers and managers across all health and social care services in Hampshire including Adults' Health and Care and remains a key system priority.
5. The focus being maintained on this challenging area has resulted in steady performance improvement since summer 2018, represented by Hampshire's improved position nationally. Hampshire as a local authority area has risen by over 35 places during this time.
6. However, it is a particularly critical time due to winter pressures and capacity challenges in all acute systems. The Christmas and New Year period was notable due to a significantly improved position on recent years, but since mid January the position has been challenging for all of the acute hospital systems.
7. At a system level the Director of Adults' Health and Care and his lead officers work closely with system leaders and key managers to address this challenging area. In addition, to oversee operational demand, performance improvement and increased market capacity required an internal Adults' Health and Care Delayed Transfers of Care (DToC) Improvement Board meets regularly to monitor the set of actions required internally.

8. The NHS operates within NHS England Operational Pressure Escalation Levels (OPEL) Framework which is used in the event of compromises to patient safety and/or capacity. This results in system partners participating in daily system calls to review capacity and flow through the hospitals. Due to the size of Hampshire and the number of hospitals there is currently considerable demand being placed on senior management time to service a high volume of escalation calls which relate to overall patient flow.
9. DToC can be attributable to operational processes, the availability and flow of onward care for people requiring a period of short term or longer term clinical or social care support following a hospital admission. There are significant system wide workforce issues that impact upon both the provision of in-hospital care and the availability of onward care delivered by a suitably trained and supported workforce.
10. The Care Quality Commission (CQC) undertook a Local System Review in 2018. The review took place in March 2018 and concluded with the publication of the report in July 2018. The Hampshire Health and Care System was required to produce an action plan to address the findings of the review in July 2018. This process was led by the Director of Adults' Health and Care, liaising with system leaders in the NHS to ensure that all actions were jointly agreed, with leads assigned and clear arrangements in place to monitor progress. It is worth noting that the CQC review team identified Hampshire as being the largest and most complex 'whole' system they have reviewed. This complexity given the multiple acute hospitals supporting the population, the ageing demographic, the number and scale of independent sector providers and the challenges of a large and mainly rural geography underline the challenges of supporting residents that had brought the CQC to review services across Hampshire for our over 65 population.
11. The action plan developed as a result of the CQC Local System Review was signed off by the Chair of the Hampshire Health and Wellbeing Board and progress on implementing the action plan is being overseen by the Health and Wellbeing Board and regularly reviewed by the Health and Adult Social Care Select Committee.
12. The action plan has been developed and recently updated with engagement from system leaders and key groups to address several work streams and programmes including patient flow and onward care.

Update on System Delayed Transfer of Care performance

13. The latest nationally reported delayed transfers of care performance for December published by NHS England shows Hampshire County Council's performance is continuing to show positive improvement.
14. Delays are reported following the national guidance set out by the Department of Health and Social Care and NHS England, following the introduction of the Care Act 2014. This legal framework replaced the Delayed Discharges Act 2003.
15. Delays are recorded as being attributable to social care reasons, NHS reasons or due to reasons recorded as a joint responsibility between the NHS and social care.

16 The following (Figures 1 and 2) represent the breakdown of whole system Acute delays per 100,000 population per month for Hampshire, Figure 1, and also by social care delays, Figure 2..

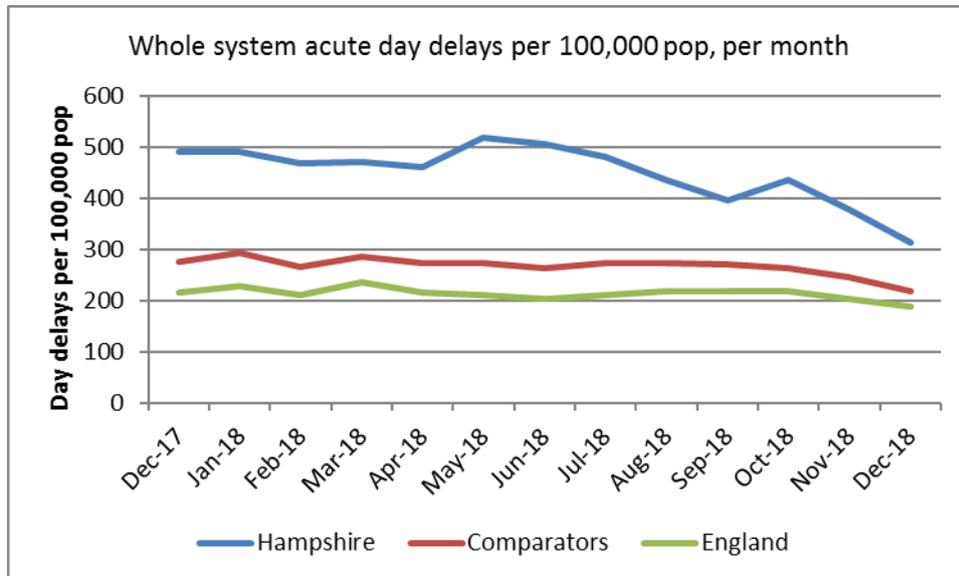


Figure 1: Whole System acute delays per 100,000 population per month

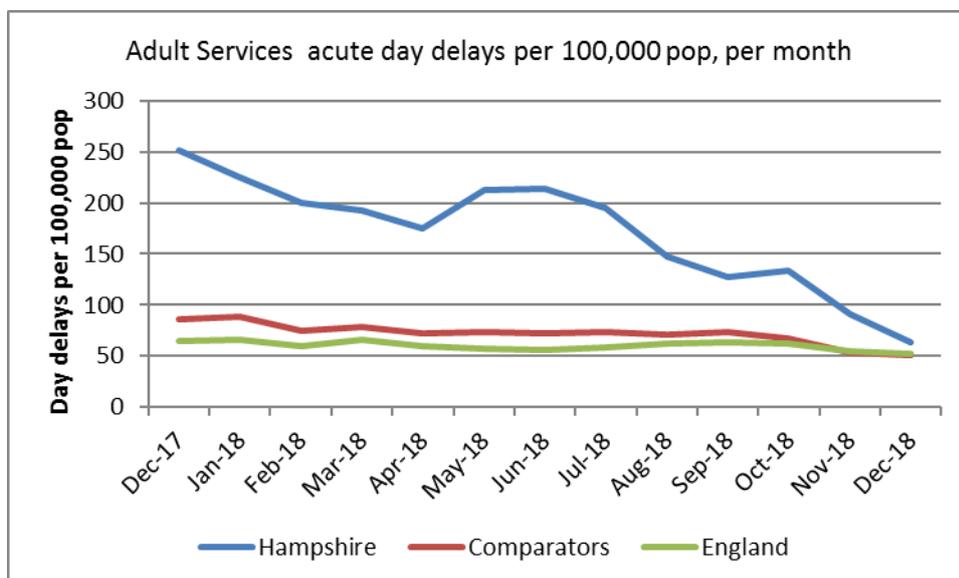


Figure 2: Adult Services acute delays per 100,000 population per month

17. Adult Services acute day delays reduced by 303 days in December 2018, in comparison to November 2018, to 685 days (a 30% reduction). When compared to December 2017 acute hospital delays reduced by some 75%.
- 18 Figure 3 shows the ranking of Hampshire as a local authority area, based on December performance across all upper tier Local Authority's.

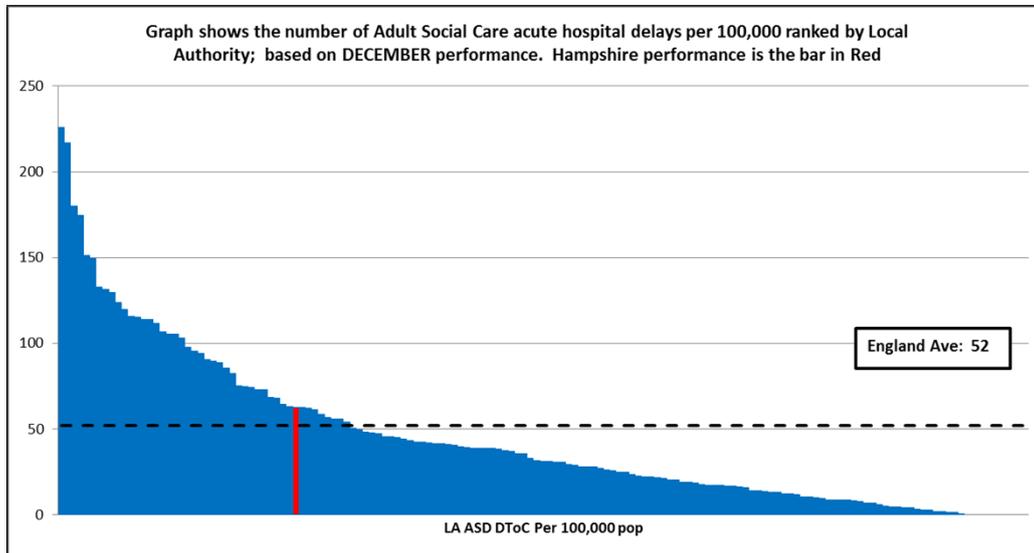


Figure 3: Adult Social Care acute hospital delays per 100,000 population ranked by local authority

19. As already stated above in 3.5 - delays in December 2108 were 75% lower when compared to December 2017, when there were 2,721 AHC day delays reported. It is important to recognise that our performance was far from good during the period 2014 onward and performance in this key arena has been and continues to be subject to much management action. We are now at a point where as a large and complex area, supporting a growing ageing demographic across multiple acute and community hospital systems seeing a level of performance returning to where it needs to be. The majority of those areas to the right of Hampshire in the graph above will be relatively small unitary / metropolitan areas with a different and younger demographic being served by a single acute hospital.

Actions being undertaken to improve performance

20. There are several cross cutting workstreams across the system addressing system resilience. Many of these are represented in the CQC Local System Review action plan.
21. Following the CQC Local System Review new governance arrangements were introduced in the form of an Improvement and Transformation Board which is chaired by the Director of Adults' Health and Care. This forum meets bi monthly and brings together all system leaders with a key workstream being Patient Flow and Onward Care.

22. To ensure coordinated attention and alignment across organisations a new role of Director of Transformation, Patient Flow and Onward Care has been introduced with the support of a Clinical Lead role.
23. During the week beginning 3 December 2018 Adults' Health and Care led a 'DToC Challenge Week' across all the hospitals accessed by Hampshire residents. The exercise involved mobilising resources and specialist skills from across the department to focus on hospital discharge pathways and can account for the positive Christmas and New Year position. This initiative was similar to intensive exercises which take place frequently in hospital settings such as 'MADE' events (multi agency discharge exercise).
24. The learning from the Adults' Health and Care week has been incorporated in closer working between the various teams that have a key role in relation to DToC beyond the hospital teams themselves. These include brokerage, commissioning, HCC Care residential and nursing homes, performance, quality and reablement.
25. A key issue for Adults' Health and Care is the availability of onward intermediate support for people who require short term social care input to assist them with maximising independence following a hospital stay. This service is largely provided by our reablement service.
26. A decision has been taken to reposition the management of our reablement services to ensure greater alignment and collaboration. The Head of Reablement is now reporting to the Assistant Director for Older Adults. This Departmental Management Team post is currently being recruited to, confirmation of this permanent appointment is expected to be at the end of March 2019. Interim arrangements have been agreed to allow for the integration of the reablement service into the structure in the meantime. This will assist greatly with the continued development improving patient flow out of acute hospital settings and also in avoiding unnecessary admissions and through continued coordination between teams working directly in hospital settings.
27. As a department we have also seen really positive improvements and performance gains over the last 8 months in the way in which we contract with the independent sector, particularly domiciliary care providers. This has brought about much stronger and positive relationships with providers leading to increased capacity countywide. This means that the time from referral to provision of care packages having reduced considerably and new payment and assurance processes implemented.
28. Winter resilience plans confirmed in each system have contributed to wider system capacity planning. The improved planning for this winter has meant that through additional capacity being generated much earlier in the season the system(s) have been in a safer position through December and the first half of January. Based on work undertaken throughout the year, the strength of relationships across organisations is supporting our collective effort with many of our staff and teams receiving regular plaudits from NHS partners.
29. However, despite the positive improvement of patient flow and onward care and the attendant reduction in delayed transfers of care it is important to note the pressures this improvement is causing. Pressure is manifesting both in an increase in the overall number of care hours being commissioned by Hampshire County Council and in increased staff activity. The additional commissioned

hours of domiciliary care will lead to increased cost pressures within the available budget envelope. A longer term funding solution beyond the short-term injections of winter pressures funding seen in recent years is urgently needed. Staff actively can be witnessed by many staff in Adults' Health and Care routinely going above and beyond to support people and keep the overall system safe. It is important to recognise the efforts of staff in this regard.

Conclusion

30. The demands and pressures in all the acute systems our residents attend continues, with surges in referrals being a feature of this area of work. Despite the current surge the DToC position is largely being maintained on a downward trajectory.
31. With the concerted and accelerated efforts being placed upon this challenging area progress and performance improvements are being seen in terms of social care delays and we were in a far better position entering the Christmas and New Year period. It is important that the progress achieved over the last 6 months is sustained and that the areas requiring continued focused attention are progressed in close collaboration with our partners.
32. Cabinet is asked to note this improvement in our overall performance and to recognise the work undertaken by staff in this achievement.

CORPORATE OR LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic growth and prosperity:	No
People in Hampshire live safe, healthy and independent lives:	Yes
People in Hampshire enjoy a rich and diverse environment:	No
People in Hampshire enjoy being part of strong, inclusive communities:	Yes

Other Significant Links

Links to previous Member decisions:	
<u>Title</u>	<u>Date</u>
Direct links to specific legislation or Government Directives	
<u>Title</u>	<u>Date</u>

Section 100 D - Local Government Act 1972 - background documents	
<p>The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)</p>	
<u>Document</u>	<u>Location</u>
None	

IMPACT ASSESSMENTS:

1. Equality Duty

- The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:
- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.

2. Equalities Impact Assessment:

This report is an update so no Equalities Impact Assessment has been undertaken.