





# Report

Report to:	South Lanarkshire Integration Joint Board
Date of Meeting:	17 August 2021
Report by:	Interim Chief Officer, Health and Social Care
	Partnership

# Subject: Improving Hospital Delayed Discharge Across Lanarkshire

# 1. Purpose of Report

- 1.1. The purpose of the report is to:-
  - update the Integration Joint Board on the progress of the Improving Hospital Delayed Discharge Work stream
  - introduce the Scottish Government Principles Paper on Improving Hospital Discharge

# 2. Recommendation(s)

- 2.1. The Integration Joint Board is asked to approve the following recommendation(s):-
  - (1) that the progress and impact of the work stream is noted; and
  - (2) that they note the content of the Scottish Government Principles Paper on Improving Hospital Discharge.

# 3. Background

- 3.1. Improving Delayed Discharge work stream is a work stream that was commissioned by the Whole System Unscheduled Care Board. Initially the work was directly related to reducing Delayed Discharges. This involved introducing Planned Date of Discharge (PDD). However, this has evolved and now includes, data/information, discharge information, digital discharge and patient/ service user experience work.
- 3.2. At the onset of Covid there was pressure to improve capacity on the acute hospital sites across Lanarkshire. To address this, stringent processes were put in place to plan discharges and monitor referrals for care. This meant that a plan was put in place for every South Lanarkshire Health and Social Care Partnership (HSCP) patient on all hospital sites. This was then discussed through a daily conference call, involving Care at Home, Social Work, AHPs, Discharge Facilitators and Social Work staff. At this point there were 140 South Lanarkshire patients delayed in acute beds.
- 3.3. Early 2020, Delayed Discharges across Lanarkshire were the highest in Scotland, combined with the highest demand for care in Scotland. With the improvements that have been put in place, there has been substantial improvement to reduce delays to 75% less in January 2021 than they were in January 2020, a reduction in the demand for care and improved experience on discharge for patients.

- 3.4. Other areas of improvement has been the patient information work, which includes the development of a discharge policy, discharge passport and animation. These have been successfully implemented across all three acute sites, mental health wards and community hospitals.
- 3.5. There has also been the launch of a communication pack, briefing and training for staff in relation to PDD across all acute wards and community settings.

## 4. Impact of the Discharge Work stream

- 4.1. Early 2020, Delayed Discharges across Lanarkshire were the highest in Scotland, combined with the highest demand for care in Scotland. With the improvements that have been put in place there has been substantial improvement to reduce delays to 75% less in May 2021 than they were in May 2020, a reduction in the demand for care and improved experience on discharge for patients. The impact can be seen in the IJB performance report.
- 4.2. Planned date of discharge has also improved the patient and staff experience in relation to discharge planning. This was evidenced through a patient and staff survey.
- 4.3. Unfortunately, progress in the discharge improvement has been stalled and delays have risen over the last three weeks (50 to 80). This has been due to rising demand for care due consequences on peoples acuity after a long lockdown. This rising demand has been met with staffing challenges due to sickness absence, self-isolation and annual leave. At any given time there has been 110 staff unavailable.
- 4.4. A number of mitigating actions have been put in place to address the delays, including addressing the short fall in care at home staffing, including short term investment for a further recruitment in Care at Home staff, interim beds in care homes and maximising intermediate care.
- 4.5. The principles of 'Planned Date of Discharge' and good discharge planning, has continued to be followed across the whole system during this time. It is clear without this approach and whole system working the number of delays would be higher.
- 4.6. South Lanarkshire HSCP will be working closely with acute colleagues, North Lanarkshire HSCP and Scottish Government to explore short term and long terms solutions to the current demands.

# 5. Optimising Whole System Discharge Planning

- 5.1. The Optimising Whole System Discharge Planning work stream was part of a suite of improvement work streams under the Scottish Government "Building on Firm Foundations Programme". The result has been the development of a range of recommendations for Health and Social Care Partnerships to consider implementing. These recommendations are based on gathered 'best' practice from across Scotland.
- 5.1.1. This work stream also included recommendations for community hospitals and intermediate care. This is has been highlighted in a separate document.
- 5.2. The principles within the recommendations include 'home first', single point of access, PDD, whole system approach, outcomes and data and enablers.

- 5.3. South Lanarkshire HSCP is in a positive place to implement these recommendations as many have already been actioned, such as PDD and whole system approach. Work is still ongoing on ensuing a 'home first' approach, single point of access and a uniform data set.
- 5.4. The next steps are to complete the readiness questionnaire along with acute and North Lanarkshire Health and Social Care Partnership colleagues and work with the Scottish Government to take forward any actions.

## 6. Employee Implications

6.1. There are no employee implications currently associated with this work.

#### 7. Financial Implications

7.1. There are no funding implications associated with this report..

#### 8. Climate Change, Sustainability and Environmental Implications

8.1. There are no Climate change, sustainability or environmental implications associated with this report.

#### 9. Other Implications

9.1. There are no other risks associated with this report.

#### 10. Equality Impact Assessment and Consultation Arrangements

10.1. This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy and therefore no impact assessment is required.

#### 11. Directions

11.1.

Direction to:		
1. No Direction required	$\square$	
2. South Lanarkshire Council		
3. NHS Lanarkshire		
4. South Lanarkshire Council and NHS Lanarkshire		

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Date created: 26 July 2021

#### Link(s) to National Health and Wellbeing Outcomes

People are able to look after and improve their own health and wellbeing and live in good health for longer

 $\boxtimes$ 

People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonable practicable, independently and at home or in a homely setting in their community	
People who use Health and Social Care Services have positive experiences of those services, and have their dignity respected	$\boxtimes$
Health and Social Care Services are centred on helping to maintain or improve the quality of life of people who use those services	$\boxtimes$
Health and Social Care Services contribute to reducing health inequalities	$\boxtimes$
People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing	
People who use Health and Social Care Services are safe from harm	$\square$
People who work in Health and Social Care Services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide	$\boxtimes$
Resources are used effectively and efficiently in the provision of Health and Social Care Services	$\square$

# **Previous References**

♦ none

# List of Background Papers

♦ none

#### **Contact for Further Information**

If you would like to inspect the background papers or want further information, please contact:-

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