

KENT COUNTY COUNCIL – PROPOSED RECORD OF DECISION

DECISION TO BE TAKEN BY:

Clair Bell, Cabinet Member for Adult Social Care and Public Health

DECISION NO:

22/00028

For publication

Key decision: YES

Expenditure in excess of £1m and affects more than two electoral divisions.

Title of Decision: Re-procurement of Discharge Pathway 1 Services

Decision: As Cabinet Member for Adult Social Care and Public Health, I propose to:

- a) **EXTEND** the current Discharge Pathway 1 Services contracts (Discharge to Assess Service and Assisted Discharge Service) for one year, from 1 October 2022 to 30 September 2023;
- b) **COMMENCE** activity to develop a long term jointly commissioned Discharge Pathway 1 Services model; and
- c) **DELEGATE** authority to the Corporate Director Adult Social Care and Health to take relevant actions, including but not limited to finalising the terms of and entering into legal agreements, as necessary to extend the current Discharge Pathway 1 Services; and to facilitate activity with regard to developing the jointly commissioned Discharge Pathway 1 Services model, with NHS Partners.

Reason(s) for decision: The current hospital discharge service contracts commissioned by Kent County Council encompass Discharge to Assess Service and Assisted Discharge Service, which form part of Discharge Pathway 1 Service, for people discharged from hospital who need support to recover at home. Across Kent, there are a number of other services that also align with the pathway, commissioned by the Kent and Medway Clinical Commissioning Group (KMCCG) and other health partners.

The contracts were originally due to expire on 31 March 2020 but were extended to 30 September 2022, due to the unprecedented demands of the Covid-19 pandemic and the need to ensure that service delivery was not disrupted.

These services are essential in ensuring that people are able to recover at home following discharge from hospital and be supported until further assessment can be undertaken if required, alleviating blockages in patient flow through the system and preventing unnecessary delayed discharges; as such, it is essential that any new model of service delivery adequately supports both the process and the person, with capacity in the right place, at the right time.

To avoid any gap in service delivery, new arrangements must be in place by 1 October 2022.

Financial Implications: The annual budgets for the Discharge Pathway 1 Services are set out in the table below:

Discharge to Assess	Assisted Discharge	Total
£2,953,223	£108,000	£3,061,223

Opportunities to improve the current service model, incorporating the Making a Difference Everyday (MADE) design principles of ensuring people have the right support, in the right place, at the right time as well as generating efficiencies which will be explored as part of the jointly commissioned long-term approach. Historically, the Kent and Medway Clinical Commissioning Group has financed additional Discharge to Assess capacities; the ability to incorporate additional funding will still be available within the extension period.

Legal Implications: The provision of services to support people with health and/or social care needs following admission to hospital is detailed within the Care Act 2014. Paragraph 8.14 of the Statutory Care and Support Guidance states that local authorities may not charge for assessments, community equipment and minor adaptations, intermediate care or reablement for up to six weeks. Regulation 72(1)(c) of the Public Contracts Regulations 2015 allows for modification of up to 50% of the original contract value where the need is brought about by circumstances that a reasonable authority could not have foreseen.

Equality Implications: An Equalities Impact Assessment (EQIA) was completed for the commissioning of Care and Support in the Home, including these services. An EQIA for this decision has not been completed, as there is no change. The previous variation agreement and extensions were centred on enabling quick and safe discharge and more generally reducing pressure on acute services, and these recommended extensions continue to support that. An EQIA is being undertaken to support the long-term jointly commissioned option.

Data Protection Implications: There are no anticipated data implications associated with this decision, as there will be no change to current services, or the data collected or shared, and therefore this will be covered under existing contract clauses. A Data Impact Assessment will be undertaken to support the long-term jointly commissioned option.

Cabinet Committee recommendations and other consultation: The proposed decision will be discussed at the Adult Social Care Cabinet Committee on 13 July 2022 and the outcome included in the paperwork which the Cabinet Member will be asked to sign.

Any alternatives considered and rejected:

Any interest declared when the decision was taken and any dispensation granted by the Proper Officer:

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signed

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date