

KENT COUNTY COUNCIL – PROPOSED RECORD OF DECISION

DECISION TO BE TAKEN BY:

**Cabinet Member for
Adult Social Care and Public Health**

DECISION NO:

24/00006

For publication Yes

Key decision: Yes

Title of Decision: Kent Enablement at Home Service Expansion

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

- a) **APPROVE** the expansion of the Kent Enablement at Home Service and support activity transfers to enable the safe decommissioning the Discharge to Assess Service; and
- b) **DELEGATE** authority to the Corporate Director Adult Social Care and Health to take other relevant actions, including but not limited to finalising the terms of and entering into required contracts or other legal agreements, as necessary to implement the decision.

a

Reason(s) for decision: It is the ambition of Kent County Council (KCC) for the people in Kent to have home-based care and support services, in line with Home First principles and KCC's Making a Difference Every Day Adult Social Care Strategy.

Discharge to Assess Services enable the council to deliver towards this ambition. The pathway relates to people being discharged from hospital with home-based support; all people needing such support should be offered reablement and rehabilitation and, where necessary, time for assessment and future care planning. This includes people whose package of care is being restarted after lapsing during their hospital stay.

The Discharge to Assess service supports people who need ongoing care and support. It is essential in ensuring people recover at home following discharge from hospital and are supported until further assessment can be undertaken if required. It alleviates blockages in patient flow through the system and prevents unnecessary delayed discharges; as such, it is essential that any new model of service delivery adequately supports both the process and the person.

The Discharge to Assess service contract was commissioned by KCC and forms part of Discharge Services, for people discharged from hospital who need support to recover at home. Across Kent, there are a few services that align with the pathway, commissioned by NHS Kent and Medway and other health partners.

In December 2023, the Discharge to Assess service was overspent against the KCC budget. A decision was made to extend the current contract by nine months, to 30 September 2024, to allow time for an alternative model to be agreed and mobilised.

A new model has now been agreed between KCC and the Integrated Care Board (ICB). Time is needed to implement this. The new model will provide an integrated enablement and rehabilitation offer. The new proposed model will build capacity to create one simpler pathway and will help people in hospital return home faster whilst supporting recovery and retaining independence. The service will deliver reablement, personal care and support nutrition, while also monitoring the person's condition. They will also contribute to an overall plan of care in their own home. The new team will work in a therapeutic way with oversight from therapists the aim being to assess the long-

term care needs at home.

The new model will differ from the current offer of a 7-14 day support period, to an offer of up to six weeks. This will lead to an improvement in outcomes anticipated by moving this service in house, as there will be more continuity of provision for people on their discharge from hospital.

It is proposed that the activity from the Discharge to Assess Service will transfer over to Kent Enablement at Home (KEaH) in a phased way to allow recruitment of additional staff. Recruitment will commence in February 2024.

The recruitment schedule for the KEaH Service assumes no staff will transfer over from the current Discharge to Assess provider.

Financial Implications: The annual budget for the Discharge to Assess is £2,953,400 with additional budget of £732,600 for bridging.

Anticipated costs, in the first year, to extend the KEaH service to take on additional activity and facilitate decommissioning of the Discharge to Assess Service will be achieved within the existing budget and opportunities for savings will be identified through the implementation and delivery of the new model.

Early financial modelling has indicated greater cost savings and efficiency potential by expanding the in-house service (KEaH) and taking on additional staff rather than commissioning with market providers.

Legal implications: The KEaH service already exists and the proposal is to expand this service to accommodate activity transfers from an existing service that will be decommissioned by 30 September 2024.

Equalities Implications: An Equalities Impact Assessment was completed in December 2023 and this found no implications to protected groups.

Data Protection Implications: As an existing provider, KEaH has completed security questions in the 'risk assessment' and these questions consider the provider's information security management policies and processes and the technical security and design of their systems. Responses have been returned and scrutinised by the KCC Compliance and Risk Team.

Cabinet Committee recommendations and other consultation: Public consultation has not been undertaken however, engagement with stakeholders will commence in January 2024 (including people with lived experience) and feedback from this will be incorporated into the new service model.

The proposed decision will be discussed at the Adult Social Care Cabinet Committee on 18 January 2024 and the outcome included in the paperwork which the Cabinet Member will be asked to sign.

Any alternatives considered and rejected:

Undertake a Competitive Tender – Co-design a completely new service with experts by experience.

This will take time, circa 12 to 18 months. The current service is over-spent against the budget and is likely to continue to be so for the duration of any service re-design. This will impact on the council's financial deficit. KEaH already contribute to the Discharge to Assess model. Across Kent, there are a few services that align with the Discharge to Assess pathway. This option will not address the disparate approach to the Discharge to Assess pathway. Commissioners are looking for a fully integrated enablement and rehabilitation offer and a simpler pathway that is easier for prescribers and people who use it.

Current Provider - Direct Award a new contract to the incumbent provider.

The incumbent service is over-spent against the budget and costs are likely to continue to increase. This service is financially unsustainable for the future.

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

.....
signed

.....
date