From: Graham Gibbens, Cabinet Member for Adult Social Care and Public

Health

Andrew Ireland, Corporate Director Social Care Health and

Wellbeing

To: Adult Social Care and Health Cabinet Committee

15 January 2015

Subject: Hospital Discharges and Delayed Transfers of Care

Classification: For information

Electoral Division: All

Summary: Provides the background to delayed transfers of care.

1. Introduction

- 1.1 Members will be aware of the national media reports of seasonal pressure on NHS acute services and in particular the pressure on Hospital Accident & Emergency departments. In some reports, part of the pressure is attributed to delays in transferring people who are medically fit to be discharged from hospitals either to their home or to an alternative care setting. These delayed transfers of care (DTOC) can be caused by delays within the hospital itself, or by delays in arranging suitable care in the community or a combination of both.
- 1.2 The position of hospitals in Kent has been recently raised by members and in particular whether social care delays are contributing to any local issues. In Kent the significant majority of such DTOCs have been attributed to health delays although this is a continuously evolving picture.
- 1.3 The figures on DTOCs are coordinated by the health Clinical Commissioning Groups (CCGs) but then need to be validated by KCC. This is essential both because the figures are retrospectively reported nationally but also because social care arrangements are made by the patient's home authority. For some Kent hospitals a significant number of their patients are from outside Kent, notably from Medway or London boroughs.

2. Current position

- 2.1 There has been very close working between KCC and both the local hospitals and the CCGs in drawing up Winter Pressure plans. There is daily liaison by KCC's Assistant Directors with health colleagues on the local positions and the plans have been in force since before Christmas.
- 2.2 Initial feedback from the CCGs about the festive period is that although there was significant pressure due to increased activity at A&Es and in particular increased admissions of people aged over 75, the Kent hospitals have been coping so far. They have been very pleased with the support that has been provided by KCC, in particular by the Social Care Teams based in the hospitals in facilitating timely and appropriate

discharges. This has included having KCC staff working in the hospitals over Christmas and New Year's Day. There is however an awareness that the winter pressure is likely to continue for several weeks more and the situation will need ongoing monitoring and coordination.

2.3 Given the short notice for the request for this paper and the time lag in getting numerical data from health and then validating it, Andrew Ireland, Corporate Director will give a further verbal update at the meeting.

3. Background Documents

None

4. Report authors:

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