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Date of Meeting	9 July 2024
Report Title	Discharge Without Delay (DWD)
Report Number	HSCP.24.053
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Consultation Checklist Completed	No
Directions Required	No
Exempt	No
Appendices	<ul><li>a. Letter from Cabinet Secretary, Scottish Government,</li><li>4 July 2024.</li></ul>
Terms of Reference	<ol> <li>Any functions or remit which is, in terms of statute or legal requirement, bound to be undertaken by the IJB itself</li> <li>The decision to co-operate or combine with other Integration Joint Boards in the provision of services other than by way of collaborative agreement;</li> <li>The approval or amendment of the Strategic Plan and on going monitoring of its delivery through the Annual Performance Report</li> </ol>

# 1. Purpose of the Report

**1.1.** The purpose of this report is to inform the JB of our response to the national oversight of Discharge Without Delay.







#### 2. Recommendations

- **2.1.** It is recommended that the Integration Joint Board:
  - a) Note the content of the report;
  - b) Instruct the Chief Officer to bring an update of our intended improvement activity in order to achieve the target set to the IJB in September; and
  - c) Note that thereafter progress will be reported to each meeting of the Clinical and Care Governance Committee.

## 3. Strategic Plan Context

3.1. This is linked to Aberdeen City's Health & Social Care Partnership's 3 year Delivery Plan. The project description is 'develop and deliver local and sustainable system flow and return to home pathways with partners, supporting reduced hospital admissions, delays in hospital discharge and out of area placements.' This project is key to delivering on discharge without delay, a strategic priority for the Partnership.

#### 4. Summary of Key Information

- **4.1.** In a letter received on 14 May 2024 from CoSLA and Scottish Government sent to each NHS Board, HSCP and Local Authority Chief Executive, the intention to make a renewed national focus on DWD across local systems was outlined.
- **4.2.** The national priority is on the basis that the First Minister and the President of CoSLA have agreed the importance of a focused and intensive approach to reduce delayed discharge and the subsequent issues of significant variance across the Country. The First Minister has raised concerns in relation to discharge figures increasing and the need to make sustained improvements prior to winter when demand will likely increase.
- **4.3.** In the letter, CoSLA and Scottish Government advised of a national approach to interventions such as Planned Date of Discharge (PDD), weekend discharge, discharge before noon and referrals to social work and requesting collective support and leadership in ensuring these practices are embedded in service delivery.







- **4.4.** The national focus will be captured as part of the new Delayed Discharge and Hospital Occupancy Action Plan for 2024/25 and delivered through the national DWD working group, building on the actions and outcomes of the previous action plan.
- **4.5.** NHS Grampian reached out to Scottish Government to gain support around delayed discharges across the Grampian system. A meeting was held with Chief Executives and Chief Officers along with Scottish Government representatives on 18 June 2024. Following this, a letter was submitted outlining the areas that Grampian required support with.
- **4.6.** It has been agreed that senior leaders from across Grampian will come together to work on a shared improvement programme to make sustained improvements and address the ongoing challenges with delayed discharge.
- 4.7. The national work is overseen by the Collaborative Response and Assurance Group (CRAG) which meets weekly to enable a laser focus around this work. The CRAG has also placed a target on each partnership to reduce the number of delayed discharges by. The initial ask was 27.4 delays per 100,000 which meant our target in Aberdeen was no more than 59 people delayed. This has since reduced to the aim of reducing delayed discharge numbers to pre-pandemic levels. For Aberdeen this relates to 20.8 per 100,00 which means our figure needs to be 45 people or below. At the time of writing this report, a reduction of 1 person will be required to achieve this target.
- 4.8. In relation to our targeted work on delayed discharge and response to the national focus, a weekly group has been established to drive improvements in Aberdeen and build on the work that has already been undertaken. A Grampian wide group has also been established for a system wide improvement focus. A shared improvement plan is being written and will be presented to the September Board and thereafter progress reported to the Clinical and Care Governance Committee.

#### 5. Implications for IJB

## 5.1. Equalities, Fairer Scotland and Health Inequality

There are no direct implications arising from the recommendations of this report.

#### 5.2. Financial







It is noted that due to current financial pressures, the Partnership is not, at this stage, in a position to invest additional monies beyond the budget set for 24/25 to create additional capacity to contribute towards meeting the discharge demand. Improvement will focus on streamlining and improving processes and collaborative working cross system to achieve the intended results.

#### 5.3. Workforce

There are no direct workforce implications arising from the recommendations of this report.

### 5.4. Legal

There are no direct legal implications arising from the recommendations of this report.

## 5.5. Unpaid Carers

There are no direct implications relating to unpaid carers arising from the recommendations of this report.

#### 5.6. Information Governance

There are no direct information governance implications arising from the recommendations of this report.

#### 5.7. Environmental Impacts

There are no direct environmental implications arising from the recommendations of this report.

#### 5.8. Sustainability

There are no impacts on sustainable development arising from this report.

### 5.9. Other

There are no other direct implications arising from the recommendations of this report.







### 6. Management of Risk

#### 6.1. Identified risks

Failure to implement the Strategy and Action Plan.

This risk is minimal due to the ongoing engagement with partners. Failure to implement the Strategy and Action Plan could lead to reputational damage, to mitigate this the is an established oversight and working group structure which will report to the Clinical and Care Governance Committee.

Increase in delays due to closure of interim care home placements

There is a risk that due to the reduction in our interim bed base, our delays increase. To mitigate this risk we continue to work closely with our providers to ensure people are discharged home in a timely manner and progress our home to assess work to reduce the need for reliance on interim beds.

Increase in delays over the requested target

The reason for delayed discharge is often challenging especially for those with complex needs or who fall under Adults with Incapacity where moving someone out of hospital without legal status in place cannot be done. We have like other partnerships raised the issues around this and a national campaign on Power of Attorney and national communication around hospital delays have been agreed. The need for placements for those with most complex needs is also a national issue which CoSLA have also agreed to address in the longer term.

The hospital social work team continue to have a laser focus on delays and are collaborating with secondary care colleagues in terms of discharge planning from the point of admission. There is risk of our local figures increasing as demand continues. A daily focus on discharges is ongoing with the weekly group driving forward the required improvements.

### 6.1. Link to risks on strategic or operational risk register:

There is a requirement to add this to the strategic and operational risk register.







Approvals

Fiona Mitchelhill

**Chief Officer** 

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