



DISCHARGE TO ASSESS – IJB DIRECTION

Aim

- 1.1 To introduce a new policy of discharging patients from hospital to undertake an assessment of need at home or at least in a homely setting.
- 1.2 To direct the Health and Social Care Partnership, and in particular Scottish Borders Council and NHS Borders to determine an operational model, which will enable a Discharge to Assess policy.
- 1.3 The new policy will aim to reduce the time patients spend waiting for discharge after being declared medically fit to do so.

Recommendation

- 2.1 The Health & Social Care Integration Joint Board (IJB) is asked to **approve** the issuing of a Direction to NHS Borders and Scottish Borders Council to introduce a policy of Discharge to Assess.
- 2.2 Under this new “Direction” the IJB would request the Health and Social Care Partnership to provide a detailed and costed proposal to the IJB for the introduction of such a policy over the Winter period of 17/18.
- 2.3 That a review of the methodology be undertaken in June 2018 and a report brought to the IJB with further recommendations based on the experience of the first six months of “Discharge to Assess” practice.

Background

- 3.1 The number of patients “stranded” in hospital had improved last year. This year however has seen a return to the figures of 2014/15. The number of bed days associated with delayed discharges for residents over 75 years, was 647 in August of this year compared with 522 in August 2016.
- 3.2 In terms of bed days lost, when analysed per head of the population, these figures are amongst the worst in Scotland. This is clearly an avoidable financial pressure. In many areas of Scotland efficiencies have been achieved by adopting a version of discharge to assess, which reduces stays in acute hospital beds as well as ensuring that people arrive back in their own home or their new home sooner.
- 3.3 In addition, we are fully aware that any additional days spent in a hospital setting increase the risk of secondary infections as well as increasing dependency levels. This makes discharge more complex, difficult and costly for health and social care and has a significant impact on the overall capacity of the hospital.

Summary

- 4.1 This paper puts forward an instruction from the IJB to both the Council and NHS Borders, to work together to plan and introduce a new process whereby patients can be safely discharged from hospital to either their home, or a facility which can provide a homely setting. A full assessment of their care needs can then be undertaken, in a more appropriate environment.
- 4.2 The IJB, under the powers of the Public Bodies (Joint Working) Act 2014, can issue “Directions” to either or both, the Local Authority or Health Board, within the delegated functions outlined within the scheme of integration. *See appendix A. “Good Practice Note, Directions from Integration Authorities to Health Boards and Local Authorities.*
- 4.3 This instruction will substantially change current practices of assessment of care needs in an acute hospital setting. Where appropriate and possible, patients will be discharged from an acute hospital bed either to their own home or to an identified discharge to assess facility, where an assessment of strengths and critical needs will be undertaken.

Risk

- 5.1 The success of this policy is reliant on the provision of resources and facilities being able to keep pace with discharge flow both from hospitals and from assessment facilities. Whilst an element of this can be controlled through operational management processes, there will remain potential difficulties with sourcing longer term placements in a care home and packages of support to enable independence at home to be achieved sooner rather than later. Further work is required by the Council and contracted partners to secure increased capacity in care at home provision.

Policy/Strategy Implications	Introduction of a new policy of discharging patients to assess within the community.
Consultation	This proposal is for a trial period over this winter. Depending on the outcome of this test, consultation would be more appropriate in the spring of 2018.
Risk Assessment	A risk assessment will be undertaken through the plans designed to implement the “Discharge to Assess” policy.
Compliance with requirements on Equality and Diversity	This policy will target those patients most likely to benefit from an assessment in a specialist discharge to assess facility. The overall policy direction of discharge to assess will apply equally where possible.
Resource/Staffing Implications	There are no implications within this paper. However further funding bids will need to be considered by the IJB as the Health Board and the Local Authority progress their plans.

Approved by

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