



Report of the Director of Adult Social Services

Scrutiny Board:(Health)

Date: 24 March 2009

Subject: Inquiry into Hospital Discharges

Electoral Wards Affected:

Ward Members consulted
(referred to in report)

Specific Implications For:

Equality and Diversity

Community Cohesion

Narrowing the Gap

1 BACKGROUND

1.1 The Scrutiny Board (Health) meeting on the 20 January 2009 amended the terms of reference for this inquiry and resolved for the next meeting on the 24 March 2009 to have reports on the following matters:

1. Clarification of the number of referrals for assessment from out of boundary hospitals.
2. Confirmation of the discharge policy/ protocol review process and timing.
3. Details of the total number of complaints received (across all agencies) relating to hospital discharge and associated support arrangements.
4. Provide more detailed outline of actions to address hospital discharge issues identified in the Independence, Well-being and Choice inspection report.
5. Provide copies of current discharge protocols (i.e. Leeds Hospitals and West Yorkshire hospitals).
6. Provide copies of 'patient information pack' issued to patients on admission.

These issues cover the functions of several statutory agencies and it has been agreed that two separate but complementary reports will be provided by the NHS agencies in Leeds and Leeds Adult Social Care

2 CLARIFICATION OF THE NUMBER OF REFERRALS FOR ASSESSMENT FROM OUT OF BOUNDARY HOSPITALS

- 2.1 Scrutiny Board requested information on the number of out of area hospital referrals received. For the period April - December 2008 there were 110 out of boundary referrals for assessment. Most of these were referred by Harrogate Hospital, with a few from Dewsbury and a handful elsewhere. To put the number of out of area hospital referrals leading to assessment in perspective, for the total number of referrals during the period April - December 2008 there were 7165 assessments – the full breakdown is described below.

Out of Leeds Hospital referrals:

Bradford Hospitals	1
Harrogate Hospital	89
Pinderfields Hospital	1
Dewsbury Hospital	19
Total	110

- 2.2 For in-Leeds secondary health sources there were 2,622 referrals leading to assessment in the same period. Of these 74 of were from hospices and 2,548 were from hospitals. The main sources were:

St James Hospital - Bexley Wing	778
St James Hospital – Other	771
LGI	531
Hospital/Unit - Psychiatric	181
Chapel Allerton Hospital	146
St Mary's Hospital	57
St Gemma's Hospice	44
Wharfedale Hospital	42
Others (all 30 or less referrals)	72
Total	2622

- 2.3 Out of area hospital referrals leading to assessment in this period (110) thus represent around 4% of the total hospital referrals leading to assessment.

3 CONFIRMATION OF THE DISCHARGE POLICY/ PROTOCOL REVIEW PROCESS AND TIMING

- 3.1 The Leeds protocol is being reviewed with the input of managers from Leeds Teaching Hospitals Trust (LTHT), NHS Leeds and Leeds Adult Social Care Services (ASC) with contributions from Leeds Environment and Neighbourhoods and the partnership leads for Continuing Health Care – the first draft is now out for comment and amendment within these various organisations. Editorial responsibility has been accepted by the main commissioner of Hospital care, NHS Leeds who have dedicated a member of their team to the task.
- 3.2 The core group have agreed to look at neighbouring authorities procedures to help the development of this document and benchmark best practice issues. The NHS lead officer will be involving the Older Persons Reference Group to gain input from their perspective to ensure a patients view of how these new procedures support their safeguarding and dignity requirements.

- 3.3 Although the current work is related to the inspection outcome it will be used to inform and "dovetail" with further work commissioned by NHS Leeds regarding hospital discharges generally. A project initiation document (PID), to better describe the scope and detail of this work, is being prepared for consideration by the Planned and Urgent Care workstream of the Joint Strategic Commissioning Board, who have identified hospital discharges as one of their workstream priorities in this coming year. NHS Leeds have also commissioned a piece of work as a study of activity around admissions and patient pathways, to improve the patient experience, reduce delays in discharge and avert hospital admissions. This work is on target to be completed in March 2009.
- 3.4 There is a similar but separate workstream relating to the revision of the protocol as it relates to Leeds residents placed in out of Leeds hospitals and this is due for completion in November 2009.

4 DETAILS OF THE TOTAL NUMBER OF COMPLAINTS RECEIVED BY ADULT SOCIAL CARE RELATING TO HOSPITAL DISCHARGE AND ASSOCIATED SUPPORT ARRANGEMENTS

- 4.1 From 1st April 2008 to 31 December 2008 Adult Social Care have received five complaints relating to hospital discharges.
- 4.2 In summary, one complaint relating to a delay in hospital discharge was upheld. The patient had been in a Community Intermediate Care (CIC) bed for 5 weeks following hospitalisation after a stroke. The patient had been assessed and equipment delivered to his home. Despite wanting to return home, he could not, because the home care package could not be commissioned from one of our regular home care providers. The budget holder as a contingency arrangement agreed to pay for a spot contract from another agency to provide the homecare.
- 4.3 Four complaints related to care plans not started and/or incomplete care plans – three were upheld
- One related to the fact that the Care Plan, at the time the patient was ready for discharge, had not been completed and had insufficient information regarding medication to be provided when they returned home.
 - One related to an incomplete Care Plan – the patient had been living in a nursing home for 7 months. A failure to review the Care Plan following discharge led to their nursing home being unable to clearly identify what was now to be expected or care to be provided.
 - One related to an incomplete Care Plan – the patient argued the inadequacy of the original assessment conducted by hospital staff led to an incomplete Care Plan. The patient was re-assessed and the Care Plan revised accordingly.
 - One complaint related to having no Care Plan - a service user was discharged from hospital following an operation. The Hospital and GP made a referral to Adult Social Care for support but that having returned home no support was offered. This complaint was not upheld as Social Care Services assessment concluded the patients needs were not substantial and therefore, not eligible to receive services from Social Services. The patient was signposted to alternative providers for support.

5 PROVIDE MORE DETAILED OUTLINE OF ACTIONS TO ADDRESS HOSPITAL DISCHARGE ISSUES IDENTIFIED IN THE INDEPENDENCE, WELL-BEING AND CHOICE INSPECTION REPORT

5.1 There is a detailed action plan relating to the outcome of the Independence, Well-being and Choice Inspection and those specifically relating to the hospital discharges are listed below:

- The Council and partners should strengthen hospital discharge procedures by focusing on the quality of peoples experiences.
- The Council and its partners should strengthen its hospital discharge procedures by setting out clear reciprocal responsibilities with procedures in place to ensure compliance.
- The Council and partners should strengthen hospital discharge procedures by agreeing a process for resolving and learning from concerns about the quality of multi-disciplinary work.

5.2 The Council and partners should strengthen hospital discharge procedures by focusing on the quality of people’s experiences.

5.2.1 In addition to the detailed description of this work provided in 3.1, these actions have been split – the first priority is to complete a signed protocol for within Leeds hospitals and that is on target to be completed by March 2009. The second action is to have a protocol signed and agreed for the out of Leeds hospitals listed under 1.1 – that work is to commence in March 2009 for completion in November 2009.

5.2.2 The remit of the existing Planned and Urgent Care Group (which has representatives from NHS Leeds, LTHT and Leeds ASC) has been extended to oversee the revision of the current protocol, procedures and practice relating to hospital discharges. Regular monitoring reports will be prepared for the Planned and Urgent Care Group and submitted to the Joint Strategic Commissioning Board (JSCB). The first of these reports are planned for the May 2009 Board meeting

5.3 The Council and its partners should strengthen its hospital discharge procedures by setting out clear reciprocal responsibilities with procedures in place to ensure compliance

5.3.1 There will be in place signed protocols between ASC and Health partners covering all hospital discharge procedures, continuing care issues and a disputes resolution process for all hospitals in and out of Leeds which have Leeds residents as patients. These protocols will more properly reflect the requirement to have dignity and safeguarding principles and values at the forefront of any arrangements that effect patient care and their hospital discharge arrangements.

5.4.1 The Council and partners should strengthen hospital discharge procedures by agreeing a process for resolving and learning from concerns about the quality of multi-disciplinary work.

5.4.2 Regular monitoring and reports will be prepared by the Planned and Urgent Care Group and submitted to the Joint Strategic Commissioning Board. The first such report will be provided in May. Agreement has been reached with our partners on the need to establish a baseline audit for complaints and capture the patients experience following discharge from hospital discharge. Data and information will be drawn from:

- Adult Social Care reviews of service users following hospital discharge.
- Complaints received from NHS Leeds and Leeds Adult Social Care arising from hospital discharge.
- User experience surveys conducted by NHS Leeds.

5.4.3 This action commenced in January 2009 and is due for completion in April 2009. Some data concerning the patient experience of hospital discharge has already been collected and these will be included in the reports to the Planned and Urgent Care Board in May 2009.

6 PROVIDE COPIES OF CURRENT DISCHARGE PROTOCOLS (I.E. LEEDS HOSPITALS AND WEST YORKSHIRE HOSPITALS)

6.1 A copy of the current Delayed Transfer of Care Protocol is provided as an attachment. Scrutiny are advised that this is the protocol we are seeking to amend with our partners, in the first instance for hospitals in Leeds and subsequently with the out of area hospitals described above -see appendix 1

7 PROVIDE COPIES OF 'PATIENT INFORMATION PACK' ISSUED TO PATIENTS ON ADMISSION

7.1 LTHT will provide any additional patient information provided above and beyond that which is already included in the current Joint Protocol which is attached as appendix 1.