



# **HEALTH AND ADULT SOCIAL CARE SCRUTINY BOARD**

#### **20 November 2017**

Subject:	Update on Delayed Transfers of Care			
Cabinet Portfolio:	Councillor Ann Shackleton - Cabinet Member			
	for Social Care			
Director:	Executive Director of Adult Social Care,			
	Health and Wellbeing – David Stevens			
Contribution towards Vision 2030:				
Contact Officer(s):	Christine Anne Guest			
	Divisional Manager			
	Chris_Anne_Guest@sandwell.gov.uk			

## **DECISION RECOMMENDATIONS**

### That:

- 1. This report is an update to Scrutiny on the delayed transfer of care within Sandwell.
- 2. There are no recommendations as part of this report.

#### 1 PURPOSE OF THE REPORT

1.1 The purpose of the report is to provide an update on the delayed transfer of care position that has been previously presented at the Health and Wellbeing Board in September.

#### 2 IMPLICATIONS FOR SANDWELL'S VISION

2.1 Ambition 2: "Sandwell is a place where we live healthy lives and live them for longer and where those of us who are vulnerable feel respected and cared for." The implications for Sandwell's Vision is that it will help improve Sandwell as a place where individuals who are vulnerable feel respected and cared for.

#### 3 BACKGROUND AND MAIN CONSIDERATIONS

- 3.1 The Government has made a range of commitments to integration, most notably through the creation of the Better Care Fund (BCF) in 2015-16 that required local authorities and local health bodies to pool existing funding, produce collaborative plans for integrating services and reducing pressure on hospitals to ensure those services are commissioned effectively.
- 3.2 The government committed £2bn new money for social care as part of the 2017 budget announced in March, it is to be spent through the iBCF over the next two years. The BCF guidance sets out expectations for integration of social care and health by 2020.
- 3.3 This is in line with the Five Year Forward View (FYFV) published by NHS England which sets out how the NHS should aim to achieve a financially sustainable health and care system by 2020.
- 3.4 Sandwell Health and Wellbeing Board (SHWBB) recognises that integrating health and social care services is vitally important for improving the efficiency of public services and removing traditional organisational boundaries that make it difficult for people to access public services.
- 3.5 Sandwell and West Birmingham CCG (SWB CCG) and Sandwell Metropolitan Borough Council (SMBC) as members of the Board are committed to building on the progress made in year one and two of the BCF and have agreed to align their respective commissioning duties to deliver improved health and wellbeing for the people of Sandwell.
- 3.6 Both agree that the best solution is to develop a placed based integrated care system that delivers better integration of General Practice, community health, mental health and hospital services.
- 3.7 The vision is to integrate out of hospital services; social care, primary, community services and specialist out of hospital care (physical and mental health services). This type of change is complex and the transition requires careful management, including the development of a financial framework which creates opportunities whilst reducing instability and managing risk.
- 3.8 As part of the Better Care Fund Programme a project has been established with the aim of the programme is to ensure "if you are fit for discharge then we will either get you home the same day or to the right care service"

- 3.9 The over-arching problem that the project is trying to solve is the elimination of the delayed transfer of care within:-
  - The Acute and Non-Acute settings
  - Within the Sandwell Borough and outside the Borough
  - Health, Social Care and Joint
  - For Sandwell residents and the GP registered population within Sandwell

#### 4 THE CURRENT POSITION.

- 4.1 The tables below illustrate the current delayed transfer of care position for Sandwell.
- 4.2 Table 1 shows a comparison between Sandwell Metropolitan Borough Council and the other Councils within the West Midlands. This demonstrates that Sandwell has the lowest delayed transfer of care within the Region and following downward trajectory.

Table 1: Total Number of Days DTOC across Region

	Total Number of Days (Acute & Non Acute)					
Council	April	May	June	July	August	
SMBC	502	515	378	421	367	
Birmingham	4882	5068	5710	5283	4949	
Coventry	1755	1911	1811	1323	1334	
Dudley	901	790	925	1118	1252	
Hereford	622	496	598	701	736	
Shropshire	886	805	734	676	706	
Solihull	963	999	910	730	711	

- 4.3 The main reasons for the delayed transfer of care within Sandwell within the month of August were:-
  - Assessment delays this is a delay in completing the assessment
  - Residential Home placement this is awaiting a suitable residential care home placement for the individual
  - Nursing Home Placement this is awaiting a suitable nursing home placement for the individual
  - Patient and Family Choice- this is where the individual or family are not happy with the placement that has been provided and are awaiting alternative placements to be provided.
- 4.4 The project is currently reviewing the main reasons for the delays and developing plan on how to reduce the delays.

- 4.5 An additional hybrid of seven resources have been recruited within the hospital team to help reduce the assessment delays.
- 4.6 Additional plans are being developed to help ensure that the delays are eliminated.

## 5 CONSULTATION (CUSTOMERS AND OTHER STAKEHOLDERS)

5.1 There is no consultation required to reduce and remove the delayed transfer of care within Sandwell.

#### 6 **ALTERNATIVE OPTIONS**

6.1 There are no alternative options that need to be considered as part of this report.

#### 7 STRATEGIC RESOURCE IMPLICATIONS

7.1 The strategic resource implications are part of the wider Better Care Fund Programme. The Programme identifies and addresses the resource requirements and implications. This update does not have any specific strategic resource implications.

#### 8 LEGAL AND GOVERNANCE CONSIDERATIONS.

8.1 There are no legal and governance considerations for this report.

#### 9 EQUALITY IMPACT ASSESSMENT.

8.2 No equality impact assessment is required for this update. An equality impact assessment have been completed for the Better Care Fund Programme.

#### 10. DATA PROTECTION IMPACT ASSESSMENT

10.1 There are no data protection impact assessments required.

#### 11. CRIME AND DISORDER AND RISK ASSESSMENT

11.1 There is no crime and disorder and risk assessment required.

#### 12 SUSTAINABILITY OF PROPOSALS.

12.1 The proposals that have been put forward to reduce the delayed transfers of care will be part of the Better Care Fund Programme. No specific proposal of sustainability is required for this update.

# 13 HEALTH AND WELLBEING IMPLICATIONS (INCLUDING SOCIAL VALUE).

13.1 The focus is part pf the Better Care Fund investment. The BCF Programme is focussed on helping individuals maintain their independence at home, providing choice and control to individuals and ensuring people in hospital return to the right bed when they are medically fit.

#### 14 IMPACT ON ANY COUNCIL MANAGED PROPERTY OR LAND

14.1 There is no impact on annual council managed property or land.

# 15 CONCLUSIONS AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS.

15.1 This report is an update to Scrutiny following the update to the Health & Wellbeing Board in September. No decision is required as part of this report.

#### 16 BACKGROUND PAPERS

- 16.1 There are no background papers to this update. The following documents can be reviewed for information:
- 16.2 Better Care Fund Submission <a href="https://www.england.nhs.uk/ourwork/part-rel/transformation-fund/bcf-plan/">https://www.england.nhs.uk/ourwork/part-rel/transformation-fund/bcf-plan/</a>
- 16.3 NHS Delayed Transfer of Care Statistics
  <a href="https://www.england.nhs.uk/statistics/statistical-work-areas/delayed-transfers-of-care-data-2017-18/">https://www.england.nhs.uk/statistics/statistical-work-areas/delayed-transfers-of-care-data-2017-18/</a>
- 16.4 NHS Five Year Plan https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf

#### 17 APPENDICES:

17.1 There are no appendices.

# David Stevens Executive Director of Adult Social Care, Health and Wellbeing