

ROTHERHAM BOROUGH COUNCIL – REPORT TO CABINET MEMBER

1	Meeting:	Cabinet Member for Adult Social Care
2	Date:	18th November, 2013
3	Title:	Response to Scrutiny Review of Hospital Discharges
4	Directorate:	Neighbourhoods and Adult Services

5 **Summary**

Rotherham as a health and social care community admits more patients into hospital with long-term conditions at any one time, above the national average. Patients are admitted into acute hospital beds that do not necessarily require that acute level of care.

The number of emergency admissions continues to rise year on year, and this year there is to date a 7.6% increase in emergency admissions compared to last year. There is a significant increase in the number of frail elderly people being admitted to hospital.

Following concerns based on anecdotal evidence, that there was a problem with out of hours discharges (late at night or weekend) and patients being discharged without adequate support arrangements in place. Elected Members requested a spotlight review to be undertaken to look into these concerns.

A spotlight review took place between May and August 2013 and a report with a number of recommendations was presented to the Health Select Commission. This report provides a response and an action plan in response to those recommendations.

6 **Recommendations**

- **Cabinet Member receives this paper and supports the response to the Scrutiny recommendations, outlined in the attached action plan.**
- **This response is taken, with the outcome of the Business Process re-engineering review to Urgent Care Management Committee of the Clinical Commissioning Group on 13.11.13 for endorsement of those actions relating to NHS Services.**

7 **Proposals and Details**

- 7.1 The recommendations of the Spotlight review have been welcomed, and have been addressed through effective joint work between NHS Rotherham and RMBC. Good progress has been made in addressing the recommendations, as can be seen from the attached plan, which has been agreed by the Clinical Commissioning Group, and the Rotherham Foundation Trust.
- 7.2 The potential for unsafe discharges will continue to be monitored by the recently re-activated multi-agency Operational Discharges Group; a progress report will be presented to Health Select Commission in 6 months, as outlined in the attached plan.
- 7.3 The Spotlight Review was informed of and welcomed the initiation of a Business Process Re-engineering Review which had been commissioned by the Urgent Care Management Committee, a sub-group of the Clinical Commissioning Group which has multi-agency membership, including senior management from Health and Wellbeing. A project was initiated and a steering group set up to analysis the admission-to -discharge process of both the acute and community hospital. Outcomes of the business process re-engineering analysis will be presented to NAS Directorate Leadership Team and thereafter to the Urgent Care Management Committee for agreement and action.

8 **Finance**

The recommendations being forwarded can be implemented without any additional resources being required.

9 **Risks and Uncertainties**

The recommendations in this report have been taken forward by strategic leads within NHS/RMBC to minimise risk and improve outcomes for patients.

Communication – effective communication is the key to ensure proposed recommendations are implemented and to avoid unnecessary misconceptions about discharges.

Monthly meetings are held by the Operational Discharges Group to monitor recurring themes, address day to day issues and identify any training needs. This Operational Group will ensure that standards are set and maintained and that any customer issues are addressed.

10 **Background Papers and Consultation**

- Scrutiny Review of Hospital Discharges (September 2013)
- Community Care Delayed Discharge Act 2003

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