

REPORT TO CABINET

14 November 2018

Subject:	Winter Capacity Plan – Award of Contract for Social Care Discharge Beds.
Presenting Cabinet Member:	Councillor Ann Shackleton - Cabinet Member for Social Care
Director:	Executive Director of Adult Social Care, Health and Wellbeing – David Stevens
Contribution towards Vision 2030:	
Key Decision:	Yes
Forward Plan (28 day notice) Reference:	Not included in the Cabinet Forward Plan
Cabinet Member Approval and Date:	Councillor Shackleton
Director Approval:	David Stevens
Reason for Urgency:	<p>An opportunity has arisen in recent days for us to purchase Social Care Discharge beds from Russells Hall hospital. This would support the existing capacity plans to address increased pressure on health and social care services over the winter period. Additional funding was announced by the Department of Health on 17th October 2018 for social care to support NHS winter pressures.</p> <p>This creates the opportunity to fund a bed based service at the largest out of borough hospital we support to enable Sandwell residents to move from an acute hospital bed as soon as they are medically fit, reducing bed blocking and delayed transfers of care.</p>
Exempt Information Ref:	Exemption provisions do not apply
Ward Councillor (s) Consulted (if applicable):	This is a boroughwide initiative

Scrutiny Consultation Considered?	Scrutiny have not been consulted
Contact Officer(s):	Chris Guest, Service Manager

DECISION RECOMMENDATIONS

That Cabinet:

1. Authorise the Executive Director of Adult Social Care, Health and Wellbeing to award of a contract to Dudley Group NHS Foundation Trust for the provision of 12 Social Care discharge beds at Russells Hall Hospital from 3 December 2018 to 31 March 2019 in the sum of up to £325,000, with an option to extend by a further 8 weeks.
2. Authorise the Director – Monitoring Officer to enter into a contract with Dudley Group NHS Foundation Trust on terms to be agreed by the Director Adult Social Care, Health and Wellbeing.
3. That any necessary exemptions be made to the Council’s Procurement and Contract Procedure Rules to enable the course of action referred to in 1 above to proceed.

1 PURPOSE OF THE REPORT

- 1.1 This report requests approval to establish a contract with Dudley Group NHS Foundation Trust for the provision of 12 Social Care discharge beds at Russells Hall Hospital to provide necessary resource to support individuals who have been declared medically fit and who require care and support in their own homes or within a nursing home setting. These individuals will be transferred from an acute bed to a Social Care Discharge bed on Russells Hall Hospital site until such time that their social care support becomes available, thereby ensuring that delays in acute beds are mitigated.
- 1.2 Funding for this contract has been approved and will be provided through the Social Care investment to ease NHS Winter pressure grant monies allocated by central government.

- 1.3 Approval of this contract will ensure that Adult Social Care (ASC) can assist people to be discharged from an acute bed in Russells Hall Hospital as soon as they are medically fit thereby assisting the Council to fulfil its requirements under the Care Act 2014 in relation to hospital discharges.
- 1.4 The Care Act 2014 updated and re-enacted the provisions of the Community Care (Delayed Discharges) Act 2003, which set out how the NHS and local authorities should work together to minimise delayed discharges of NHS hospital patients from acute care. The NHS are required to notify relevant local authorities of a patient's likely need for care and support where the patient is unlikely to be safely discharged from hospital without arrangements, and to give at least 24 hours' notice of when it intends to discharge the patient. From 1 April 2015, if a local authority has not carried out an assessment or put in place care and support, and that is the sole reason for a patient not being safely discharged, the NHS body has a discretion as to whether to seek reimbursement from the relevant local authority for each day an acute patient's discharge is delayed. This situation is frequently referred to in the media as 'bed-blocking'.

2 IMPLICATIONS FOR SANDWELL'S VISION

- 2.1 The proposals contained within this report support the Sandwell Council vision 2030 as stated in 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".
- 2.2 Sandwell Council, together with its partners is committed to supporting individuals' timely discharge from hospital and enabling them to live independent lives within their own communities. This provision is designed to mitigate against delays in acute beds when individuals are medically fit and ensures sufficient time is afforded to enable their next destination to become available.

3 BACKGROUND AND MAIN CONSIDERATIONS

- 3.1 On 17th October 2018 the Department of Health announced a £240 million social care investment to ease NHS winter pressures across the country. The allocation to Sandwell has now been confirmed as £1.8 million for the winter period 2018-2019.
- 3.2 The investment in adult social care this winter aims to help local authorities reduce pressures on the NHS by getting patients home quicker and freeing up hospital beds across England.

- 3.3 The extra funding is aimed at reducing delayed transfers of care and is allocated to councils based on the adult social care relative needs formula.
- 3.4 The spending is to be focused on reducing Delayed Transfers of Care, helping to reduce extended length of stay and improving weekend discharge arrangements so that patients are assessed and discharged earlier especially those who need social care support.
- 3.5 The contract proposed within this report supports the Council and the Clinical Commissioning Group in securing optimum use of hospital provision by managing the level of Delayed Transfers of Care (DToC) relating to individuals for whom the Council has a statutory duty.
- 3.6 The Care Act and the Care and Support (Discharge of Hospital Patients) Regulations 2014 require Adult Social Care to arrange for the assessment and discharge of individuals fit for discharge within 24 hours of notification. The NHS body has a discretion as to whether to seek reimbursement from the relevant local authority for each day an acute patient's discharge is delayed.
- 3.7 It is recognised that pressures on the health and social care system are more acute in the winter months due to the interplay between seasonal increases in morbidity and structural problems within the healthcare system. The cold weather mainly affects the health of older people, the very young and chronically ill. This, combined with the dangers associated with snow and ice leads to increased pressures on the health service during the winter season. The exact pattern of winter pressures is largely unpredictable, mostly because it is impossible to predict the severity of winter weather or of any flu outbreak. Because of this, the health and social care system must have adequate capacity and plan appropriately to be sufficiently robust to react to these necessarily variable demands.
- 3.8 However, the NHS is already stretched to its limits and increasingly unable to respond to additional pressures. These public health pressures impact significantly on emergency departments, generating severe challenges in bed access throughout hospitals particularly during the winter period. It is therefore critical that social care supports its health partners in effectively managing individuals for whom they have a statutory duty and ensuring delays are mitigated.
- 3.9 The proposed block contract would provide immediate access to a Social Care discharge bed thereby minimising delays through days lost trying to secure social care. Russells Hall Hospital is the largest out of borough hospital used by Sandwell residents and registers the highest number of Delayed Transfers of Care.

3.10 The proposed contract with Russells Hall hospital will provide much needed bed capacity across the winter months. An early review will be undertaken to ascertain the need for a longer-term contract.

3.11 The benefits for Sandwell Council of this proposal are:

- Reduction in Delayed Transfers of Care (DToC)
- A co-ordinated response with health partners in relation to timely and effective hospital discharges.
- Mitigating the potential imposition of fines by Acute Trusts for DToC.

4 CONSULTATION (CUSTOMERS AND OTHER STAKEHOLDERS)

4.1 Commissioners have consulted with stakeholders across Sandwell Better Care Fund, the Acute Hospital Trust and the hospital social work team for their view on the provision.

5 ALTERNATIVE OPTIONS

5.1 Without the provision of this contract, there will be increased DToC from Russells Hall Hospital which will leave the Council in a vulnerable position around its inability to effectively respond to its obligations particularly in winter when pressures are more acute. There are no alternative options to maintain the required patient flow.

5.2 The corporate risk management strategy has been complied with to identify and assess the risks associated with the decisions being sought. The assessment has identified that there are no significant risks associated with the approach. Where risks have been identified, suitable measures are in place to mitigate these risks.

5.3 If the recommendation to approve the direct award of this contract is not approved, risks would include:

- Increased delayed transfers of care from hospital
- Increase on delays regarding family choice
- Undermining delivery of enablement and independence

5.4 The recommendations if approved therefore would contribute significantly to the mitigation of the strategic risk SRR 049 in respect of Delayed Transfers of Care, which is currently assessed as red.

6 STRATEGIC RESOURCE IMPLICATIONS

- 6.1 The projected costs will be funded from the Social Care investment to ease NHS Winter pressure grant monies allocated by Central Government. Outline costs of up to £325,000 have been provided by Dudley Group NHS Foundation Trust.

This would support the provision of 12 beds commencing 3 December 2018 up to the end of March 2019, with an option to extend the contract by up to 8 weeks.

- 6.2 The costs include provision for the following:
- 24/7 RGN input
 - 7 days per week therapy cover
 - All medication/ interventions required.
 - Discharge Coordinator Cover
 - Space for Social Care to be based on the unit
 - Access to any acute services needed i.e. mental health team, speech and language & any other Advanced Health Practitioners
- 6.3 As the award of this contract is to meet partnership priorities around delayed transfer of care arrangements, services will be provided through external organisations resulting in no impact on the Council's workforce.

7 LEGAL AND GOVERNANCE CONSIDERATIONS

- 7.1 The service proposed to be contracted for falls under the light touch regime, Regulations 74-77, of the Public Contract Regulations 2015, which allows for greater flexibility in how a procurement is run. That notwithstanding, contracts subject to light touch regime must be advertised where the value exceeds the relevant threshold regardless of provisions of the council's Procurement and Contract Procedure Rules. Where the value is below this threshold (£615,278), which it is, there is no need (under the public procurement rules) to advertise unless there are indications of cross border interest, which in this case there is not.

8 EQUALITY IMPACT ASSESSMENT

- 8.1 An Equality Impact Assessment has been undertaken, there are no negative or adverse impacts on any protected groups.
- 8.2 There are no significant equality issues arising from this report. The commissioning of medically fit for discharge beds will ensure that vulnerable people in need of care including protected groups will benefit from the provision of support for hospital discharge.

9 DATA PROTECTION IMPACT ASSESSMENT

9.1 Data protection is addressed within the Councils contract for the service.

10 CRIME AND DISORDER AND RISK ASSESSMENT

10.1 There are no implications from this proposal on crime and disorder.

11 SUSTAINABILITY OF PROPOSALS.

11.1 It has been agreed that the funding for these contracts will be through the Government grant to ease NHS Winter Pressures. It is anticipated that any future commissioning would be funded through (i)BCF pending agreement by the Joint Partnership Board and Cabinet.

12 HEALTH AND WELLBEING IMPLICATIONS (INCLUDING SOCIAL VALUE).

12.1 The DToC figures indicate that additional capacity is required to assist people to be discharged from an acute hospital bed within the agreed timescales and the proposals contained within this report will support these needs.

13 IMPACT ON ANY COUNCIL MANAGED PROPERTY OR LAND

13.1 There are no implications from this proposal on the Council's managed property or land.

14 CONCLUSIONS AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS

14.1 Agreement to award the contract aligns with the focus of both the Council and Sandwell and West Birmingham Clinical Commissioning Group to support the reduction of DToC and will support the continued flow of patients from hospital back to their communities.

David Stevens

Executive Director – Adult Social Care, Health and Wellbeing