



THIS ITEM IS FOR INFORMATION ONLY

(Please note that "Information Only" reports do not require Integrated Impact Assessments, Legal or Finance Comments as no decision is being taken)

Title of meeting:	Community Wellbeing, Health & Care
Subject:	Portsmouth Health & Care Discharge to Assess Model
Date of meeting:	10/07/2023
Report by:	Andy Biddle, Director of Adult Care
Written by:	Simon Nightingale Assistant Director, Health & Care Services
Wards affected:	All

1. Requested by

Councillor Matthew Winnington, Cabinet Member for Community Wellbeing, Health & Care

2. Purpose

- a) To update Members (following the Cabinet update in January 2023) on the delivery of the Health and Care Portsmouth vision for developing a local, integrated intermediate care offer to enable patients within Portsmouth Hospitals University NHS Trust (PHUT) to be discharged for assessment of their long term needs outside of the acute hospital (D2A).

3. Information Requested

Section 91 of the Health and Care Act came into force on 1 July 2022, revoking procedural requirements in Schedule 3 to the Care Act 2014 which require local authorities to carry out long-term health and care needs assessments, in relevant circumstances, before a patient is discharged from hospital¹.

From 1 April 2022, Adult Services has been working with the Integrated Care Board, (ICB) to deliver a discharge to assess process that meets the needs of citizens across Portsmouth and Southeast Hants. This has focused on a 'home first' approach to enable more people to go straight home (to their usual place of residence) following discharge.

For the 2022/23 and 2023/24 financial years, Portsmouth City Council agreed with ICB (Portsmouth) that the ICB would fund up to 4 weeks of care support post discharge to enable

¹ [Health and Care Act 2022 \(legislation.gov.uk\)](https://www.legislation.gov.uk)



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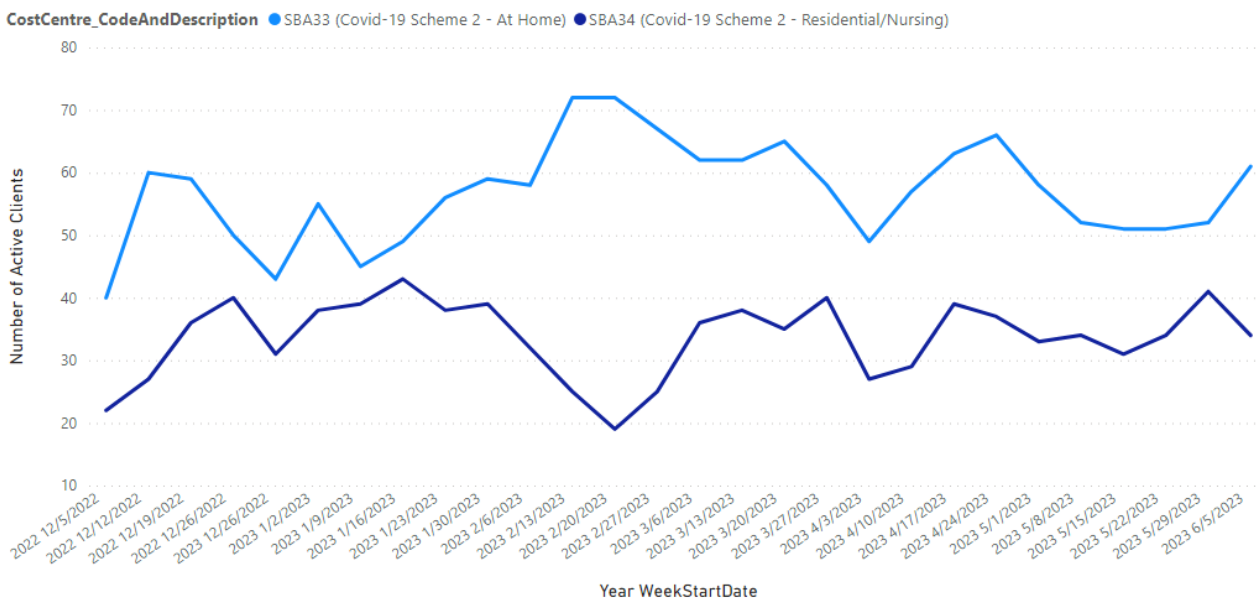
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assessment of need to be completed and a decision made as to whether the residents' needs should be met by the Council. Where the Council is unable to respond within that time

frame, there is a provisional allocation against the Council's budget for the care support, until an assessment is completed.

Current external D2A placements as at 05/06/2023 are 61 residents being supported at home with 34 within Residential / Nursing homes. The Adult Services D2A costing model assumes, for 23/24 onwards, 10 external Residential / Nursing placements.

External Discharge to Assess Placements





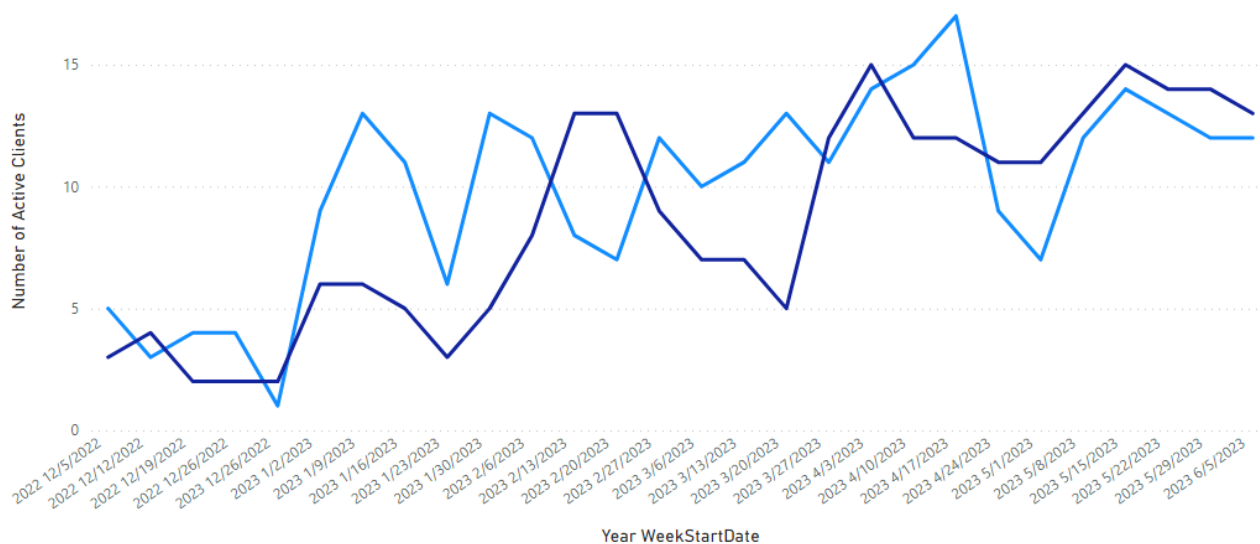
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Currently, residents who are outside of the agreed 4-week ICB funding window pending ASC assessments as at 05/06/22 are 12 at home and 13 within Residential / Nursing homes.

ASC Clients Awaiting Assessment - Following D2A Placement

CostCentre_CodeAndDescription ● SBA35 (Awaiting Assessment - At Home) ● SBA36 (Awaiting Assessment - Residential/Nursing)



From the 1st of October 2022, Solent NHS Trust have been operating the D2A unit at Harry Sotnick House, (now called Jubilee Unit until a new name has been selected) and this has been established through the consolidation of staffing transferred from the closure of Solent NHS Trust led Jubilee House rehabilitation and reablement unit and transfer of the existing cohort of staff from the PCC Southsea unit.

It is expected that the length of stay for people remaining in Jubilee Unit will be no more than 18 days. This will enable a reduction of the reliance on 'spot' D2A placements and enable the D2A model to remain affordable. The performance against this target is being monitored through a monthly governance board which reviews the data across all D2A activity to be able to take mitigating action where trajectories are not being met.

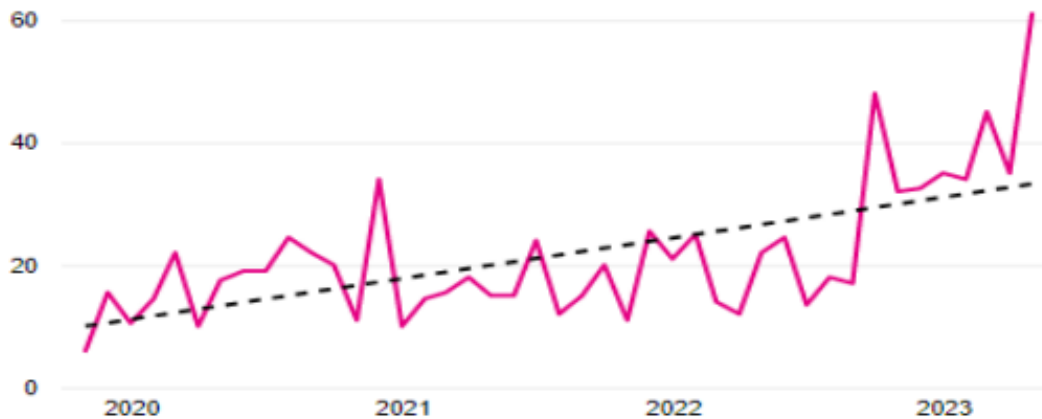
Current performance is seeing an increase in length of stay. Contributing factors are due to flexing admission criteria to support homeless clients, Hampshire residents (where they have a Portsmouth GP, they fall under the Portsmouth D2A process but require Hampshire County Council social work to support onward care planning), and a loss of temporary staff within the D2A social work team.

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Jubilee

Median length of stay



There is currently £1.7m funding available from ICB (from non-recurring funds) for external placements and additional staffing for 23/24. Based on extrapolating APRIL 2023 activity, the spend for the year may exceed this funding level. This would lead to a review of our D2A arrangements which could see a return to hospital delays pending available capacity within Spinnaker Unit and Jubilee Unit. Therefore, as well as discussing with the ICB how we increase the size of the D2A social work team and look at structure of social work across intermediate care settings, an action plan is in place to ensure we improve discharge pathways for those that currently contribute to the greatest pressures for our delays in out of hospital D2A capacity, which include:

- Look into where residents are flowing in error via Portsmouth D2A:
 - **Residents who are homeless** with no ongoing care needs - operationally, support for these residents should be outside of the D2A process.
 - meeting set up to consider residents currently at Jubilee Unit, to plan how to move them on to a more appropriate setting and use that knowledge so that same approach can be used directly by Portsmouth Hospitals going forward.
 - **Hampshire residents** - operationally, support for these residents should be outside of the D2A process.
 - meeting set up to consider residents currently at Jubilee, to decide how to move them on to a more appropriate setting and under the responsibility of Hampshire and use that knowledge so that the same approach can be used directly by Portsmouth Hospitals going forward.
- **Reduce Length of Stay at Jubilee Unit**
 - Meeting in place to understand themes of reasons for delays to discharge from Jubilee Unit and to understand whether alternative pathways out of QA could have been considered (i.e., more 'home first' through a consideration of risk level based on residents presenting needs).



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We expect to start planning discussions with urgent care system partners towards the end of the summer in preparation for D2A arrangements over winter 2023/24. There is no confirmation of additional, (to the Discharge grant) winter funding currently, although it is expected. However, our approach to planning over the previous winter, and will continue this winter, is that we will only be committing to deliver schemes and plans that we consider to be achievable, have value to those of our residents with the highest needs and be provided only for the period that any additional funding is received to cover.

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Signed by (Director)

Appendices:

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location