



Committee and Date

**Health & Adult Social Care
Scrutiny**

30th January 2017

Item

Public

DELAYED TRANSFER OF CARE

Responsible Officer: Andy Begley

e-mail: Andy.begley@shropshire.gov.uk Tel: 01743 258911

1. Summary

- 1.1 Results for Shropshire show that number of patients facing delayed transfer of care, according to the snapshot survey, have stabilised and are slightly better than last year. However, the number of delayed days is increasing, albeit at a slower rate than the national average.
- 1.2 Stabilised rates of patient delays and increased days would indicate that patients are facing longer delays in hospital.
- 1.3 Delay rates attributed solely to the NHS has seen a decrease whilst those attributed solely or jointly with social care continue to increase. This is mirrored across the country where social care departments face budgetary pressures, which is exacerbated in our rural county with an above average rate of elderly population.
- 1.4 Whilst attribution of delay is a factor, the priority continues to be working with our NHS partners to reduce discharge delays and prevent re-admission.
- 1.5 Recent initiatives include block purchase capacity to meet increased demand over winter. This went live first week of October and has already seen an increase in patient flow and fewer care package delays. The health service has also introduced a daily operational call to map capacity and escalate delays that cannot be resolved within a 24-hour period. This has seen an increase in complex discharges.

2. Recommendations

- 2.1 Committee members are asked to note key underlying and emerging issues in this report
- 2.2 Committee members are asked to note the partnership working with the NHS to address the challenges of delayed transfers.

REPORT

3. Risk Assessment and Opportunities Appraisal

- 3.1 Delayed transfers could have implications of bed blocking and thus preventing new admissions and cancelled operations.
- 3.2 Delayed transfers could have implications on delayed patients whose recovery would benefit from being at home or in a more suitable environment.

4. Financial Implications

- 4.1 There are no direct financial implications in relation to this report. However, addressing and meeting the needs of patients does require prioritisation and use of resources.

5. Background

- 5.1 A delayed transfer of care occurs when a patient is ready for transfer from a hospital bed, but is still occupying such a bed. There are two key measures for delayed transfers.

Delayed patients. The delayed patient data is a snapshot count of the number of patients who are awaiting transfer. The count is taken at midnight on the last Thursday of the month. The count does not reflect all patients who have faced a delay during the month merely those delayed at that moment in time. Delayed patients are measured as part of the Adult Social Care Outcomes Framework (ASCOF) series of measures.

Delayed days. The data is the total number of delayed days that all adult patients have faced during the month. This includes patients who have been transferred during the month and those still awaiting transfer. Delayed days are measured as a joint service measure for the Better Care Fund.

In both instances, the NHS determines which organisation is deemed to be causing the transfer of care being delayed. The options are; the NHS, Adult Social Care or a joint responsibility. Each delay has a primary reason for delay attributed to it.

6. Additional Information

- 6.1 The NHS is facing an increase in demand on services. Accident and Emergency attendances for November 2016 show an increase of 9.5% compared to November 2011. The number of days that patients are remaining in hospital, who are ready to be transferred, has also increased. In November 2016, the number of delayed days in England was 65.4% higher than the same period in November 2011.
- 6.2 Data shows that adults aged 65+ are more likely to face longer delays in transfer. Shropshire has a higher percentage of residents aged 65+, which will increase pressure on local services.

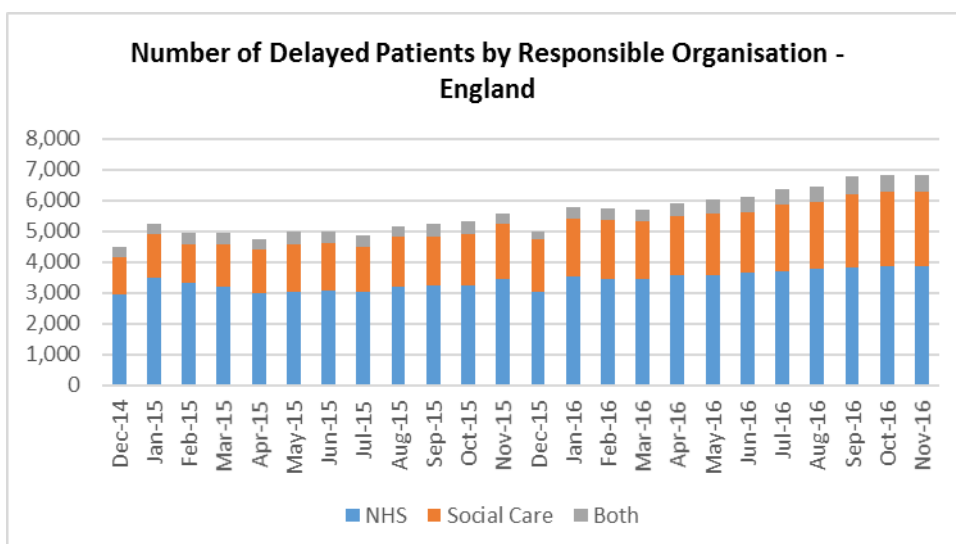
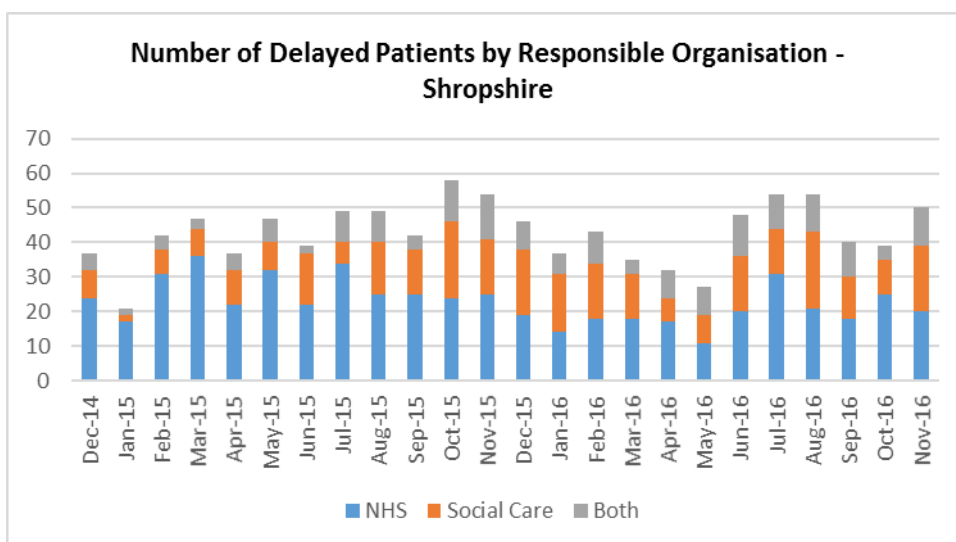
6.3 During the year 2015/16, the rate of increase for delayed transfers in Shropshire increased at a faster than that for England. During the current year, the rates of increase in England are now higher than those for Shropshire.

Delayed Patient Data

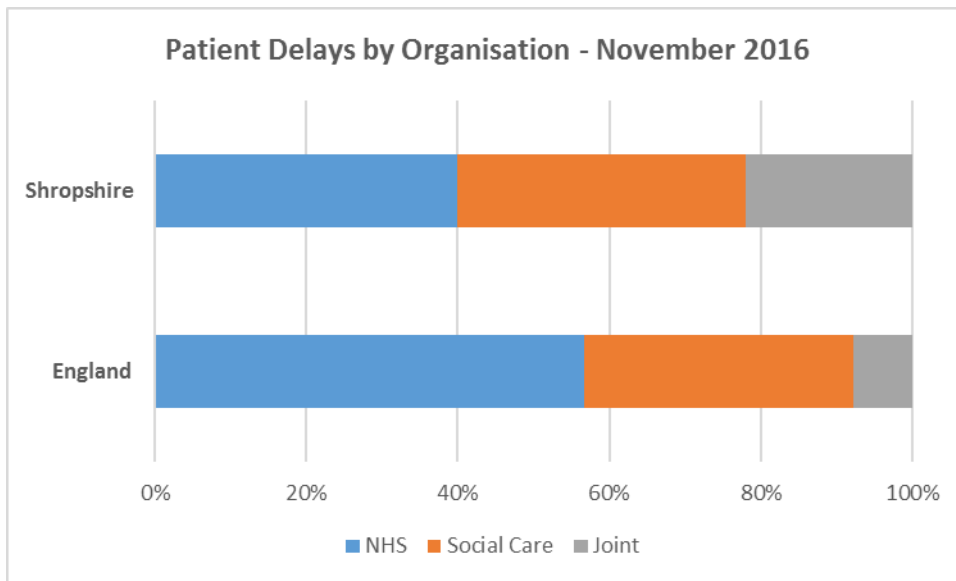
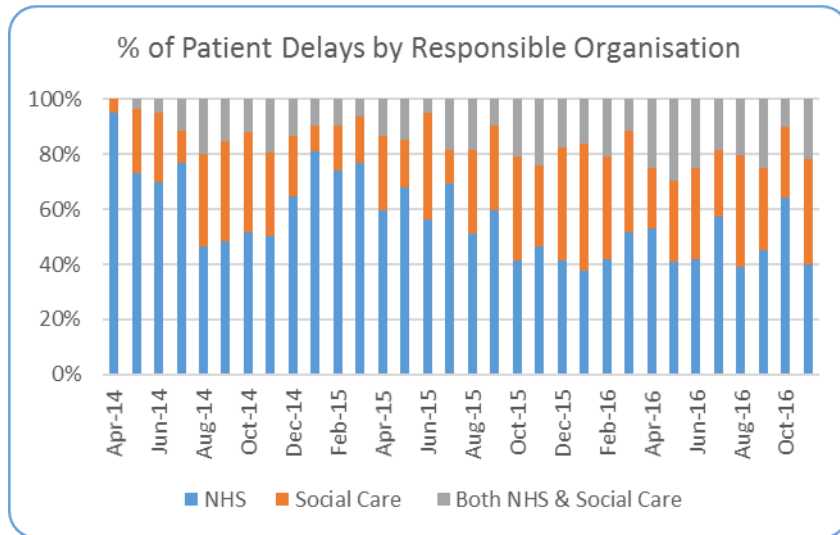
6.4 The following charts show the number of patient delays for Shropshire and England. Each chart shows the organisation which is attributed to the delay. Results for Shropshire will show higher monthly variation due to the relatively small numbers.

6.5 Delayed patient numbers in Shropshire for the 12-month period to Nov 2016 have slightly decreased when compared to the previous 12 months. The average number of patients delayed per month is 42 compared to 44 (-4.5%). During the same period, there has been an increase of 21.6% across England.

6.6 Whilst the overall numbers have reduced the numbers attributed to social care have remained static, the number jointly attributed to both NHS and Social Care have increased and to NHS decreased.



6.7 The following chart shows that the proportion of jointly attributed organisations in Shropshire varies from England. Joint responsibility has seen an increase since the summer of 2014 and is now higher than the national average.



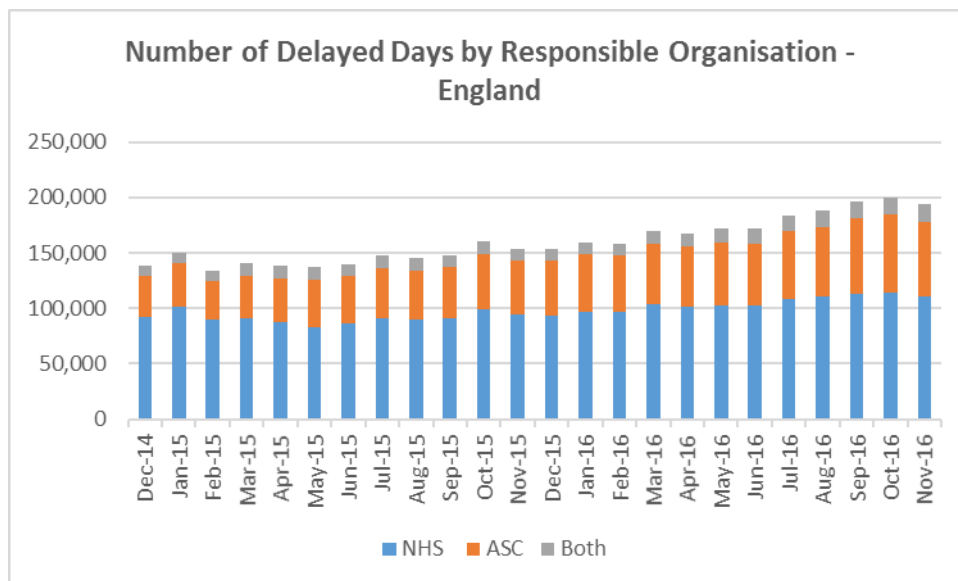
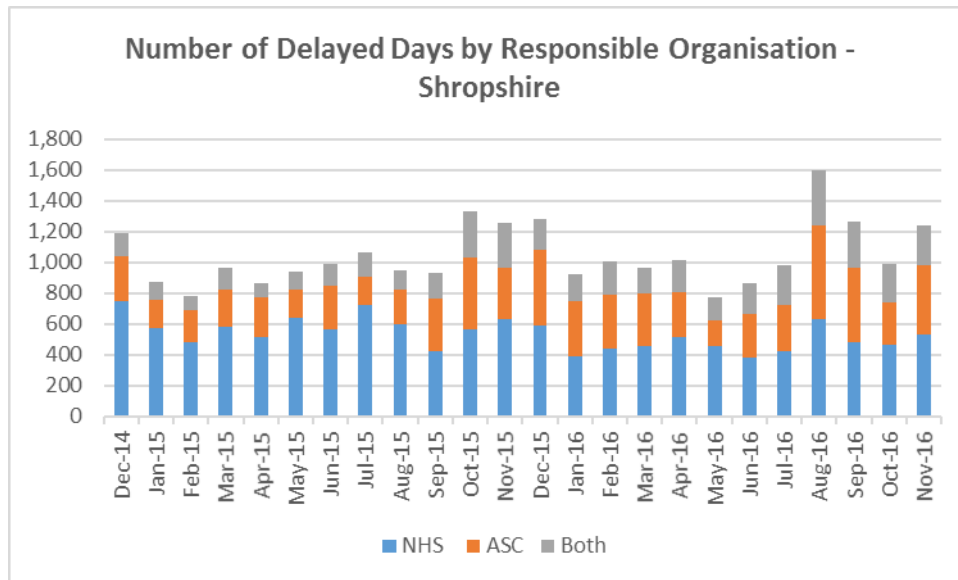
Delayed Days Data

6.8 The following charts show the number of delayed days for Shropshire and England. Each chart shows the organisation which the delay is attributed to. Results for Shropshire show higher monthly variation due to the relatively small numbers.

6.9 Delayed day numbers in Shropshire for the 12-month period to Nov 2016 have increased when compared to the previous 12 months. The average number of delayed days per month is 1076 compared to 970 an increase of 10.9%. During the same period, there has been an increase of 22.1% across England.

6.10 Overall numbers in the year to Nov 16 have increased compared to the year to Nov 15. The number of delayed days attributed to NHS have decreased by 18.6% whilst there has been increases in days attributed to social care 38.2% and joint by 44.7%.

6.11 An unusually high numbers of delayed days occurred in Shropshire during August. This has accounted for the majority of the annual increase.



Benchmarking Maps

6.12 A number of benchmarking maps are included (annex a & b) to illustrate the performance of Shropshire relative to other authorities in England and with the most similar local authorities for adult social care provision. Please note that the mapping tool only allows a snapshot of the latest available dataset, which may not reflect longer-term performance.

6.13 Maps show that the rate of patient delays and delayed days per 100,000 population to show comparable performance. The maps show quartile performance based on the calculated score.

Delayed Patient Maps

- a. All acute and non acute patient delays shows Shropshire is in the fourth quartile when compared to all English authorities
- b. Delayed patients attributed to social care is in the fourth quartile when compared to all English authorities
- c. All acute and non acute patient delays shows Shropshire is in the third quartile when compared to similar authorities
- d. Delayed patients attributed to social care and joint with NHS is in the third quartile when compared to similar authorities
- e. Delayed patients attributed to social care is in the third quartile when compared to similar authorities

Delayed Day Maps

- a. Delayed days for all patients in Shropshire is in the third quartile when compared to all English authorities
- b. Delayed days for patients over 65 are in the second quartile when compared to all English authorities
- c. Delayed days for all patients in Shropshire is in the second quartile when compared to similar authorities
- d. Delayed days for patients over 65 are in the second quartile when compared to all similar authorities
- e. Delayed days for patients in Shropshire attributed to social care is in the second quartile when compared to similar authorities
- f. Delayed days for patients in Shropshire aged 65+ attributed to social care is in the second quartile when compared to similar authorities

7. Conclusions

- 7.1 Shropshire has an increasing and aging population who often require additional support to assist in their complex needs for a transfer of care.
- 7.2 Increases in the delayed transfer of care is a concern being experienced by most NHS trusts and Local Authorities
- 7.3 Delayed transfers, in Shropshire, have seen an increase in delays attributed to adult social care from January 2015. Adult Social Care and the NHS continue to work together to provide suitable transfers.
- 7.4 Prevention of delayed transfer of care and provision of effective re-ablement is a key priority to prevent re-admission to hospital.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Cabinet Member (Portfolio Holder)

Councillor Lee Chapman

Local Member

Appendices – Delayed patient maps, Delayed days maps