

To: SOCIAL WORK (OPERATIONS AND SERVICES) SUB-COMMITTEE		Subject: AUDIT SCOTLAND REPORT: MOVING ON? AN OVERVIEW OF DELAYED DISCHARGES IN SCOTLAND JUNE 2005
From: DIRECTOR OF SOCIAL WORK		
Date: 4 OCTOBER 2005	Ref: JN/AMJ	

1. PURPOSE OF REPORT

This report informs Committee of the content of the Audit Scotland review of delayed discharge in Scotland. Two key elements are identified as the focus of the report:

- An overview of delayed discharges across Scotland, based on national data and interviews with partnerships and the Health Department, Scotland.
- The development of an interactive whole systems computer model in Tayside that focuses on strategies to reduce delayed discharge in that locality. The model emphasises the need to understand the complexity of the whole health and social care system. The outcomes of this part of the study are tailored to the issues relevant to Tayside.

2. BACKGROUND

2.1 Reducing the number of patients waiting for discharge from hospital is a high priority for the Scottish Executive. This is important, not only in terms of providing the most appropriate care to patients, but also in terms of enabling the NHS to use resources as efficiently and effectively as possible. The review by Audit Scotland is intended to provide an overview an analysis of delayed discharge data, examine national measures to tackle delayed discharges, focus on local measures undertaken by partnership and offer advice on how taking a whole systems approach would help.

2.2 On 5 March 2002, the Minister for Health and Community Care announced a Delayed Discharge Action Plan that contained a number of requirements for local authority/NHS partnerships to take forward. An allocation of funding of £20 million between partner agencies across Scotland was increased to £30 million in 2003. The Lanarkshire partnership share of this funding was £2.126 million in the first year and over £3 million in the years following. This funding was intended to assist partnerships to reduce the numbers of delayed discharges and individual partnerships have been set targets to reduce delays by 20% year on year by 15th April of each year since the initiative was introduced

2.3 Target setting has been a source of continual debate and concern since the Scottish Executive introduced the Delayed Discharge Initiative. Targets bear no relationship to demands on the system, capacity within the partnership areas or performance previous to the introduction of the initiative. Instead targets are based on the share of funding given to each initiative

2.4 The target for the Lanarkshire partnership in 2004/5 was that delayed discharges should be reduced to 98 by 15th April 2005. As in previous years, this target was exceeded and the Lanarkshire delayed discharges totalled 97. This means that delayed discharges in Lanarkshire have reduced from 245 in April 2002 which represents a 60% reduction in delayed discharges for this partnership against a national average of 40%, a higher reduction than in almost any other mainland area of Scotland.

3. FINDINGS

3.1 The review identified that there has been significant activity and progress in reducing delayed discharges across Scotland, but that progress will be harder to maintain as the population of older adults increases.

3.2 The report identifies that while targets can be helpful in terms of focussing effort, current targets are not helpful for the following reasons

- There is the potential for current targets to penalise partnerships that perform well
- Current targets set successful partnerships more challenging targets
- There is too great an emphasis on numbers
- The current system provides no financial incentives to meet targets or exceed them
- The targets are not sufficiently sensitive to local circumstances
- Local Improvement Targets may add an unnecessary burden
- A mechanism to ensure robust evaluation is required to provide cost, quality and success measures
- The development of a whole systems approach to ensure a shared understanding of how changes in one part of the local health and social care systems can affect other parts of the same system

4. IMPLICATIONS FOR NORTH LANARKSHIRE COUNCIL

4.1 The Lanarkshire partnership more than achieved the target set for 2004/05. However targets have not been set for individual Council areas. Within the Lanarkshire partnership there is an assumption that the population split of 55:45 between North and South Lanarkshire respectively would serve as the target indicator for each Council area. This means that the Scottish Executive target of 98 should be shared on the basis of 54 in North Lanarkshire and 44 in South Lanarkshire. The contribution and effort of North Lanarkshire Council toward the initiative ensured that the Council more than met its share of the target by achieving an actual figure of 45. Without this significant contribution it is unlikely that the overall partnership target would have been achieved.

4.2 The findings of the review of delayed discharge by Audit Scotland in relation to how targets are currently set are to be welcomed particularly as they are reflective of concerns previously expressed by this Council

4.3 The approach adopted by the Lanarkshire partnership involves significant interagency working, a structure of rigorous and robust accountability from top to bottom in the partnership agencies and a strategy that pays as much attention to the prevention of hospital admission where possible as to the facilitation of appropriate and timeous

discharge with necessary supports. The current system and approach is reflective of a whole system approach without an interactive computer model as has been developed at Tayside and it is felt that there would be no significant benefit to this Council by the development of this model.

5. FINANCIAL / PERSONNEL / LEGAL / POLICY IMPLICATIONS

5.1 There are no such implications in relation to this report, which is for information only, but which reflects the Council commitment to adherence to the Executive's Discharge policy and targets.

6. RECOMMENDATIONS

6.1 Committee is asked to:

- (i) Note the contents of this report.



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Director of Social Work
(19th July 2005)

For further information on this report please contact Jim Nisbet, Manager, Community Care (Older People) Tel: 01698 332031

A copy of the report can be found in the members library