

## HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

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### HOSPITAL DISCHARGE PATHWAY 1: HOME FIRST – UPDATE ON THE SIX MONTH PILOT SCHEME

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#### Summary

A pilot service to support people that have reablement potential to return home from hospital and regain their independence has been in place for the six months April – September 2016, until the new intermediate care contract commenced service delivery on 1 October 2016.

This report informs Members about the success of the service, and how the changes in support to return home are being embedded from 1 October onwards.

#### 1. Budget and Policy Framework

- 1.1 This report is for information and there are no immediate budget or policy implications.
- 1.2 Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway. In carrying out health scrutiny a local authority must invite interested parties to comment and take account of any relevant information available to it, and in particular, relevant information provided to it by a local Healthwatch. The Council has delegated responsibility for discharging this function to this Committee and to the Children and Young People's Overview and Scrutiny Committee as set out in the Council's Constitution.

#### 2. Background

- 2.1 Home First is a multiagency response service that supports hospital discharge for people that are medically stable and have reablement potential: this is often referred to as Pathway 1.
- 2.2 The significant difference in this pilot work is that the reablement is delivered in their home setting not, as has traditionally been done, in a hospital ward or community bed.

- 2.3 Once their clinical needs have been met, people are discharged and have an assessment undertaken within two hours by an occupational therapist in their home. Following this assessment a reablement package is put in place for up to six weeks to regain full or as near to full independence as is possible.
- 2.4 The current Home First service is in three parts:
- A “one stop” co-ordinating and transportation function that gets the person from ward to home delivered by Medway Community Healthcare (MCH).
  - An Occupational Therapist (OT) assessment to create and agree a reablement plan which happens within two hours of the person returning home.
  - A short term (up to six week) enablement package delivered by a domiciliary care agency overseen by an OT which enables people to return the person towards independence.
- 2.5 The pilot Home First service operated between April and September 2016 and was funded by the Council and Medway Clinical Commissioning Group using reserves from the Better Care Fund.
- 2.6 The outcomes from the pilot informed the development of the reablement approach in Medway and also helped plug a service gap until the new Intermediate Care and Reablement Service (IC&RS) contract commenced on 1 October 2016.
- 2.7 Results of the pilot have demonstrated that some people were able to return home at least a day earlier than if they had waited for usual discharge process thus freeing a number of “bed days” at Medway Foundation NHS Trust (MFT).
- 2.8 Performance data also shows that:
- a) Between 4 April and 30 September 2016 940 people were referred to the Home First pathway (the target was 35 a week = 875)
  - b) Delays to Transfer of Care (DToC) due to Adult Social Care have reduced from 3 / 100,000 population (August 2015) to 1.5 / 100,000 (July 2016)
  - c) Permanent admissions to care homes for older people (65+) has dropped from 55 / 100,000 (September 2015) to 26.3 / 100,000 (September 2016)
  - d) The percentage of people who receive reablement and then do not go on to receive a long term service has increased from 76.0% (March 2015 – March 2016) to 77.7% (April – September 2016)
- 2.9 The Newton Europe diagnostic exercise demonstrated very clearly that there were significant (fourfold) differences between the levels of independence achieved by people following OT supported “enablement” packages delivered by domiciliary care agencies and that this has a long term positive impact on budgets.
- 2.10 Looking at results of good practice nationally, greater returns on investment should be realised from October onwards when dedicated reablement services will be available from the IC&RS contract.

### **3. The Way Forward**

- 3.1 The new IC&RS commenced on 1 October 2016 with Medway Community Healthcare is the lead provider for that service. Home First is now an embedded part of the new IC&RS which aims to extend the reablement opportunity to people requiring additional non-acute support to get them ready to go home.
- 3.2 The impact of this new service will be monitored closely to ensure that the maximum benefit to the greatest number of people is realised within the agreed financial envelope of this new contract.

### **4. Risk management**

- 4.1 There are no specific risk implications for Medway Council arising directly from this report.

### **5. Legal and Financial Implications**

- 5.1. There are no legal or financial implications for the Council directly arising from this report.

### **6. Recommendation**

- 6.1 It is recommended that the Committee notes the update provided in the report.

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#### **Appendices**

Appendix 1 - The Medway Home First Effect.

#### **Background papers**

None.

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