

HEALTH AND WELLBEING BOARD



Report subject	Hospital Discharge Programme Funding
Meeting date	14 October 2021
Status	Public Report
Executive summary	<p>At the June Health and Wellbeing Board the council and CCG committed to bring a full report on Hospital Discharge Programme (HDP) funding to the October Board. However, the reconciliation of the funding for April to September 2021 is not yet available therefore cannot be shared at this meeting.</p> <p>On 6th September 2021 the Government confirmed, via a press release, the extension of the HDP funding for a further six months. The allocation for Dorset Integrated Care System is £8.889m.</p> <p>The Pan Dorset Home First Board continues to review options and service models to meet the significant challenge it faces in supporting people with a swift and safe discharge from hospital. There remains significant financial concern and workforce pressures despite the additional funding being made available. The Home First Board have engaged Impower as a strategic partner to assist in developing a plan to support the changes needed to improve our position.</p>
Recommendations	<p>It is RECOMMENDED that:</p> <p>There is an extension to the period of delegated authority for the Chair and Vice-Chair of the Board (following discussions with the Cabinet Portfolio Holder and subject to Council and CCG governance processes) to make relevant decisions on behalf of the Board related to Dorset Integrated Care System funding for the Hospital Discharge Programme for the period up to the end of March 2022.</p>
Reason for recommendations	As stated in the report to the Board in June 2021, national funding has been made available to support the Hospital Discharge Programme during 2020/21 and has been extended for the period April to September 2021. National

	<p>guidance was issued that requested Health and Well-Being Boards be involved in making decisions on local budgets for this programme. Spend against funding has yet to be reconciled as we are not at the end of the period consequently the final position in relation to local budgets it yet to be confirmed.</p> <p>Confirmation from Government on Dorset's share of the additional £478 million HDP funding for October 2021 to March 2022 as released on 4 October. This funding was announced on the 6 September as part of the Government's commitment of an extra £5.4 billion over the next six months to support the response to Covid-19 and tackle waiting lists.</p>
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Portfolio Holder(s):	Councillor Karen Rampton, Portfolio Holder for Adults
Corporate Director	Graham Farrant, Chief Executive
Report Authors	Phil Hornsby, Director of Commissioning for People
Wards	Council-wide
Classification	For Decision

Background

1. At the start of the Covid-19 pandemic, a national fund was provided to support the rapid discharge of patients from hospital settings as soon as it was clinically safe to do so.
2. Initially the costs of care for all discharged patients, from the time of discharge to the point of completing assessments of care requirements, were eligible to be reimbursed. This was scheme 1 and was in place from mid-March to the start of September 2020.
3. From September 2020 until the end of March 2021, the eligibility rules changed and only the additional costs of care, for up to the first six weeks following discharge, were eligible for reimbursement. This was extended until June 2021.
4. From 1st July to end of September 2021, the eligibility rules remained the same however the length of time reduced from six weeks to four weeks following discharge,
5. The funding for the schemes has been managed via amendments to existing Better Care Fund Section 75 Agreements between the local authorities and the CCG, as recommended in the guidance.

6. On 6th September the Government confirmed via a press release the extension of the HDP funding for a further six months and confirmed on 4 October 2021 the allocation for the Dorset ICS as being £8.889m.

[Additional £5.4 billion for NHS COVID-19 response over next 6 months - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/additional-5-4-billion-for-nhs-covid-19-response-over-next-6-months)

Options Appraisal

7. The Pan Dorset Home First Board continues to review options and service models to help best meet the significant challenge the health and care system faces in supporting people with a swift and safe discharge from hospital. There remains significant financial concern and workforce pressures despite the additional funding being made available. The Home First Board have engaged Impower as a strategic partner to assist in developing a plan to support the changes needed to improve our position.

Summary of financial implications

8. Work is ongoing on the reconciliation of 2021/22 funding in order to present the Board with the financial position in relation to the £8.4 million Government funding.
9. Confirmation of an additional £8.889m funding for October 2021 to March 2022 has been given for the Dorset system.

Summary of human resources implications

10. The Hospital Discharge Programme requires NHS organisations and local authorities to provide access to safe and timely discharge seven days per week. This has led to the requirement across agencies to have suitably qualified and experienced staff available at weekends and for evening working.

Summary of sustainability impact

11. All partner agencies are mindful in their strategic and operational planning of the commitments, which they have taken on to address the impact of climate change.

Summary of public health implications

12. The partners across Dorset report a similar picture to many other areas in the South West and nationally in relation to the challenges facing people with health and social care needs and the availability of provision to support the needs. Some South West authorities are on high alert and have Government help in place to support the management of Covid-19 numbers and service response.
13. One of the highest risks here is the challenge brought about by lack of available therapy and increased home care demand. The lack of availability of these two services reduces our ability to discharge people swiftly and to help optimise their ability to become more independent. The system, like other areas, has a challenged workforce with staff shortages.

Summary of equality implications

14. It is important that people receive care and support in the most appropriate setting. This includes ensuring that people are provided with quality community treatment, care and support services so that they are not admitted to hospital when this could be avoided and also ensuring that people are discharged from hospital safely and

with access to services which will support their continued recovery, at the earliest possible opportunity when they are medically fit to leave hospital.

Summary of risk assessment

15. The Hospital Discharge Programme was initiated in March 2020 to ensure that NHS, particularly hospital services, were able to respond to the very high demand for care and particularly hospital admissions which arose as a consequence of the COVID19 pandemic. It continues to be essential that NHS, Council, the social care sector and 5 the voluntary sector work together to support people to receive quality, safe and care in the right setting. Pressures continue in terms of demands for NHS services, including hospital services.

Background papers

Health and Wellbeing Board 17 June 2021: Hospital Discharge Programme report

[http://ced-pri-cms-](http://ced-pri-cms-02.ced.local/documents/b15536/Hospital%20Discharge%20Programme%2017th-Jun-2021%2010.00%20Health%20and%20Wellbeing%20Board.pdf?T=9&LO=1)

[02.ced.local/documents/b15536/Hospital%20Discharge%20Programme%2017th-Jun-2021%2010.00%20Health%20and%20Wellbeing%20Board.pdf?T=9&\\$LO\\$=1](http://ced-pri-cms-02.ced.local/documents/b15536/Hospital%20Discharge%20Programme%2017th-Jun-2021%2010.00%20Health%20and%20Wellbeing%20Board.pdf?T=9&LO=1)

Appendices

There are no appendices to this report