Social Work and Hospital Discharges at East Surrey Hospital

1. Introduction

1.1 This report offers an overview of the current arrangements for facilitating hospital discharges from East Surrey Hospital, outlining the recent developments working in partnership with Surrey County Council and the way in which the whole health and social care system will work together to collectively improve services in both the acute and community settings.

2. Staffing at East Surrey Hospital

2.1 There are currently 5.5 full time equivalent permanent social work posts based at East Surrey Hospital. There are a further two full time equivalent temporary posts funded by NHS money for social care, one focusing on admission avoidance from Accident and Emergency, and one which supports the Integrated Discharge Team which is currently in the process of being developed. There is one full time Team Manager who manages all West Sussex County Council social care staff at East Surrey Hospital, alongside social care staff based at Crawley and Horsham hospitals.

2.2 Recruitment of staff to work at East Surrey Hospital has been problematic and at present we are reliant on some agency staff. The location of East Surrey Hospital is an issue for staff living in West Sussex as it is seen by many as too far to travel for work. Potential candidates already living in the East Surrey area tend to opt to work for Surrey County Council. I am in the process of reviewing where we currently advertise jobs and also whether it is appropriate to employ some unqualified staff.

3. Managing Patient Flow

3.1 The social care staff work very closely with ward staff, the multidisciplinary teams and the discharge coordinators to plan and arrange the safe and timely discharge of patients from hospital. The demand for beds at East Surrey Hospital means that staff work to very tight timescales to maintain patent flow and ensure that delays are kept to an absolute minimum. At any one time approximately 50% of patients admitted to East Surrey Hospital will be West Sussex residents.

3.2 All patients that are considered medically fit, and therefore ready for discharge, are discussed daily at a 10:00 am meeting. Progress is fed back to ward staff and hospital managers during the day. If the hospital is experiencing very high levels of demand and needs to
ensure sufficient bed capacity to meet it, conference calls can be
planned to allow all providers supporting Surrey & Sussex Healthcare
NHS Trust (SASH) to work together to improve patient flow and create
capacity within the hospital. Performance on delayed transfers of care,
are measured as an average weekly percentage per 100,000 of the
population aged 18 and over. We have a current target in West
Sussex to ensure delays in acute hospitals do not go above 1.2% and
we are achieving this. However it is acknowledged that performance
across individual hospitals can vary. There have been occasions were
the availability of services has impacted on our ability to discharge
patients. It is acknowledged that there is a need to undertake some
market development work to ensure that the services that our
customers need are available. This work will be progressed within the
County Council together with input from our health colleagues and the
clinical commissioning groups.

4. Joint Work with Surrey County Council

4.1 Last year West Sussex County Council jointly funded with Surrey
County Council a senior manager to lead on a joint project to provide a
more integrated social work service for East Surrey Hospital. This has
involved moving all the staff into one open plan office where they can
sit together and share skills and experience. We have created one
front door for social care referrals so that wards no longer have to
consider where a patient lives when referring for a social care
assessment. The administrative staff have been trained to used
Frameworki and once we have an information sharing agreement in
place, they will be able to support the West Sussex County Council
social care staff by placing referrals on to Frameworki and information
gather when new referrals are received.

4.2 A new system of working is in the process of being piloted on two
wards. This involves one social care worker attending the Multi-
disciplinary Team meeting on that ward and picking up all new
referrals regardless of whether or not they are for Surrey or West
Sussex residents. The intention is to avoid having to have two social
care workers – one from Surrey and one from West Sussex attending
each Multi-disciplinary Team meeting. It also means that the wards
have one named worker as an initial point of contact. We have
developed a simple flow chart for all wards illustrating the referral
process.

4.3 In addition to this we are working with SASH to develop a system of
daily ward rounds which involves all professionals gathering at the
same time to go through each of the patient’s progress. At the present
time different members of the Multi-disciplinary Team may attend the
wards at different times on the same day. This is a barrier to effective
communication and means time can be lost in progressing discharges.
5. **Meeting Structures Supporting the SASH Health and Social Care Economy**

5.1 There are now three key meetings that support the development of improved services across the SASH health and social care economy.

5.2 The Transformation board has now been reformed and will meet monthly. This meeting will set the strategic direction for service developments and improvements and will be supported by senior managers across all commissioners and providers.

5.3 The Systems Management Team will meet fortnightly where senior operational managers work on the agreed priorities set by the board, alongside addressing any more immediate operational issues.

5.4 Access to Community Services meets fortnightly and focuses specifically on operational issues relating to the community services that have been developed to support admission avoidance and/or expedite hospital discharges supporting SASH, Brighton & Sussex University Hospitals NHS Trust and the local community hospitals in the north of the county.

6. **Current Developments**

6.1 A significant amount of work has been undertaken recently to develop a step-down bed service to support discharges from SASH. This service provides a rehabilitation service in local nursing homes for patients who are medically fit, but are not yet ready to return home. The aim of these beds is to allow patients to regain enough independence to enable them to return home safely. These beds are also able to support patients who are non-weight bearing and need a period of care before they are ready to access re-ablement services.

6.2 Work is underway to develop a pathway that is better able to meet the needs of patients awaiting continuing health care assessments and at the same time release acute beds back to SASH. In the interim, five step down beds have been purchased for patients awaiting Continuing Health Care assessments to facilitate discharges when SASH is experiencing high levels of demand.

6.3 A nursing home project has been in place since June 2012. One element of the project’s work has been identifying those nursing homes that frequently call for an ambulance for their residents. Homes are then being offered advice and support from suitably qualified clinical staff to support them to manage their residents health needs more effectively and prevent unnecessary hospital attendances and admissions.
6.4 We will be looking at proportionate assessments for patients being assessed as part of their discharge planning. This allows us to develop an assessment format specifically designed to gather the information needed to facilitate discharge, particularly where re-ablement services are required and eligibility for an ongoing social care service will need to be assessed for at the end of the re-ablement period.

7. Conclusions

7.1 A considerable amount has been achieved in the last 12 months. Working relationships are much improved with both our hospital colleagues and our colleagues at Surrey County Council and Sussex Community Trust. The meetings in place to support future developments are more focused and effective. This has been evidenced in the whole system involvement in developing a safe and effective step-down bed pathway which has been key in maintaining patient flow out of East Surrey Hospital. We are working well in a fast moving and complex environment. There is a clearer understanding of the priorities for the coming year and I believe our commitment to working together means we can succeed in achieving them.

Rachael Roberts
Service Manager
Hospitals and Health
11/01/13