

# WEST DUNBARTONSHIRE COUNCIL

## Report by the Director of Social Work Services

Health Improvement and Social Justice Partnership: 22 November 2006

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**Subject: Delayed Discharge Performance**

### 1. Purpose

1.1 The Partnership is advised of the report on Delayed Discharge performance submitted to the Social Justice Committee on 8<sup>th</sup> November 2006 (Appendix I).

1.2 The report highlights improved performance on the key target areas of reducing the number of people whose hospital discharge is delayed by 6 weeks or more, and reducing the number of people whose discharge is delayed (for any length of time) while they are occupying a short-stay or acute hospital bed..

### 2. Background

2.1 Reducing delayed hospital discharge is an important priority for the NHS and for West Dunbartonshire Council. While hospital beds are “blocked”, the patient in that bed is not accessing the best model of care for his or her needs, and planned admissions for people in the wider community may have to be postponed.

### 3. Main Issues

3.1 The Scottish Executive has stipulated some key performance targets to reduce delayed discharge.

3.2 The West Dunbartonshire targets are detailed in the body of the report to the Social Justice Committee.

### 4. Personnel Issues

4.1 No personnel issues.

### 5. Financial Implications

5.1 No financial implications.

### 6. Conclusions

6.1 The Partnership is asked to note the improved performance under the two key target indicators.

6.2 We aim to reduce the overall number from 33 at 15 September 2006, to 20 by 15 April 2007, in line with our target.

## 7. Recommendations

7.1 The Partnership is asked to note the content of the report.



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William W Clark  
Acting Director of Social Work Services

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Keith Redpath,  
Director of West Dunbartonshire CHP

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**Background Papers:** Delayed discharge report to the 9<sup>th</sup> November Social Justice Committee.

**Wards Affected:** All council Wards.

## WEST DUNBARTONSHIRE COUNCIL

## Report by the Director of Social Work Services

Social Justice Committee: 8 November 2006

**Subject: Delayed Discharge Position**

**1. Purpose**

- 1.1** This report advises the Committee of performance improvements in the key target of reducing the number of West Dunbartonshire residents whose hospital discharge has been delayed at the point of the 15 September 2006 local census.
- 1.2** It also advises of the actions taken to sustain the current downward trend in line with national policy and locally agreed improvement targets.

**2. Background**

- 2.1** Delayed hospital discharge has been recognised by West Dunbartonshire Council and the Health Improvement and Social Justice Partnership as an issue that has negative consequences for patients and for local hospital systems. The Scottish Executive Health Department issued a directive on 23 February 2006 which set out future target setting for local partnerships and short-stay specialties (formerly described as “acute”). This directive instructs that the key targets will be

- or 2006-07, to reduce all delays over 6 weeks by 50%; F
- or 2006-07, to free up 50% of all beds occupied by delayed patients in short-stay beds; F
- or 2007-08, to reduce to zero patients delayed over 6 weeks; and F
- or 2007-08, to reduce to zero those delayed in short-stay beds. F

- 2.2** On delays over 6 weeks, the starting position for each partnership will be set against performance in relation to the April 2006 target. This means that those who surpass the target will have fewer reductions to make in 2006-07. Partnerships who miss the April target will have to make up lost ground.

**3. Progress**

- 3.1** In August 2006 the Health Improvement and Social Justice Partnership agreed revised action plans to reduce the numbers of delayed discharges, particularly in respect of the key target areas of delays exceeding 6 weeks, and delays (of any duration) occurring in short-stay beds. The implementation of these plans has resulted in a significant reduction in the numbers in both of these key target areas.

**Table 1: Number of people whose hospital discharge has been delayed by 6 weeks or more.**

	<b>April 2006 Actual</b>	<b>September 2006 Actual</b>	<b>April 2007 Target</b>
<b>Delay of 6 weeks or more</b>			
Clydebank	5	5	3
Dumbarton/ Alexandria	26	10	13
<b>TOTAL</b>	<b>31</b>	<b>15</b>	<b>16</b>

**3.2** Table 1 shows that the number of people delayed for 6 weeks or more has more than halved. The individuals involved benefit from being supported to more appropriate models of care, and this is happening faster than before. Hospital services are under less pressure for hospital beds, meaning that planned admissions are less likely to have to be cancelled due to bed availability. This in turn has benefits for local people awaiting planned admissions or procedures.

**Table 2: Number of people whose hospital discharge has been delayed whilst occupying a short-stay specialty (acute) bed.**

	<b>April 2006 Actual</b>	<b>September 2006 Actual</b>	<b>April 2007 Target</b>
<b>Short-stay Specialties</b>			
Clydebank	0	3	0
Dumbarton/ Alexandria	18	4	9
<b>TOTAL</b>	<b>18</b>	<b>7</b>	<b>9</b>

**3.3** Tables 1 and 2 on both measures show a significant reduction in the number of people whose hospital discharge has been delayed whilst occupying a short-stay specialty (acute) bed. This is a key target area because the particular hospital beds involved are amongst the busiest in the system, and delays in short-stay specialties can very quickly compromise the hospital's ability to deliver emergency or urgent care.

**3.4** Table 2 also shows that our partnership is at present ahead of its April 2007 target. This places us in a more favourable position as we approach winter, when hospitals traditionally experience higher unplanned or emergency admission levels.

**Table 3: Total number of people who have been classified as ready for discharge but remain in hospital.**

	<b>April 2006 Actual</b>	<b>September 2006 Actual</b>	<b>April 2007 Target</b>
<b>Overall Number of Delayed Discharges</b>			
Clydebank	5	10	3
Dumbarton/ Alexandria	28	23	17

<b>TOTAL</b>	<b>33</b>	<b>33</b>	<b>20</b>
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**3.5** Although the overall number of delayed discharges still stands at 33, the improvements in the key target areas (tables 1 and 2) show that length of delay is becoming shorter. This represents a considerably improved outcome for the patient, and an overall improvement in the management of hospital discharge.

**3.6** We are continuing to monitor our joint performance closely, and are optimistic that we will achieve all of our April 2007 targets. At 15 September we had exceeded both of the key targets, placing us in a favourable position to sustain our performance over the winter period.

**4. Personnel Issues**

**4.1** The delayed discharge targets set by the Scottish Executive are challenging. However there appear to be no direct issues in terms of staffing levels.

**5. Financial Implications**

**5.1** The targets demand that we retain a clear focus on managing existing budgets, which may be put under additional pressure if we continue to have such a strong reliance on care home places.

**6. Conclusions**

**6.1** Timely implementation of the revised action plans has resulted in a notable improvement in performance. Both the Community Health Partnership and the Department of Social Work Services will continue to work together to sustain current performance levels.

**7. Recommendations**

**7.1** Members are asked to consider the report, and to make comment to the Director of Social Work Services.



William W Clark  
Director of Social Work Services



Keith Redpath,  
Director of West Dunbartonshire CHP

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**Background Papers:** Scottish Executive Health Department letter of 23 February 2006.

**Wards Affected:** All council Wards.