

CCG REPORT COVER SHEET

Meeting Title:	Governing Body in Public	Date: 10th June 2021								
Report Title:	Capacity required to support Discharge to Assess (D2)	Agenda Item: 3.2								
Chief Officer:	Sue Graham, Director Performance and Contracts									
Clinical Lead:	-									
Report Author:	Sarah Hannay – Deputy Chief Finance Officer									
Document Status:	Final									
Report Summary:	This report outlines and seeks approval of business case to support Discharge to Assess and ensure there is adequate investment in community capacity									
Report Purpose:	<table border="1"> <tr> <td>For Assurance</td> <td></td> <td>For Decision</td> <td></td> <td>For Approval</td> <td>x</td> <td>For Recommendation</td> <td></td> </tr> </table>	For Assurance		For Decision		For Approval	x	For Recommendation		
For Assurance		For Decision		For Approval	x	For Recommendation				
Recommendation:	The Governing Body is asked to approve the funding request from the system for a total of £3,859,736 to be funded from the Hospital Discharge Fund for the period 1 st April 2021 to 30 th September 2021.									
Link to Corporate Objectives: 2020/22	Ensure everyone has the opportunity to improve their health and well-being									
	Level-up health and care provision to ensure our communities in areas of high deprivation and need get the resources needed to minimise inequalities									
	Focus time and resources on areas where people receive most of their health and care services, the community	x								
	Facilitate organisations to join forces at ‘place’ and offer ‘patient first’ well-co-ordinated efficient services to those who need them.									
	Deliver our statutory financial commitments as best as possible		x							
CAF (Strategic Risk) Reference	Description of Risk	Current Risk Score								
CAF 03	There is a risk that the system will fail to achieve the expected 2021/22 cost base and planned deficit (as submitted to Regulators in January 2020) which will lead to non-delivery of the LTP trajectory.	20 (R)								
CAF 06	The restrictions to elective care delivery during the Covid-19 pandemic has led to longer waits for care. There is a risk that these longer waits have the potential to lead to patient harm.	20 (R)								
Impact Assessments	Equality	N/a to this paper								
	Health Inequalities									
	Health Impact									
	Data Privacy									
	Sustainability									
Quality										
Financial Impact	£3.9m of funding requested covering the period 1 st April 2021 to 30 th September 2021. To be funded from NHSE Hospital Discharge Fund, of which Cambridgeshire & Peterborough are allocated £8.159m. If costs exceed this allocation, the system will need to fund discharges in accordance with the Hospital Discharge guidance up to 30 th September 2021.									
Chief Officer/ SRO Sign Off:	Sue Graham, Director Performance and Contracts									
Chief Finance Officer Sign Off: (if required)	Louis Kamfer, Chief Finance Officer									
Legal implications	Nil									
Conflicts of Interest	Any Conflicts of Interest will be raised in line with the CCG’s CoI Policy									
Report history:	Report prepared for Governing Body									
Next steps:	As per recommendations									

MEETING: GOVERNING BODY IN PUBLIC

AGENDA ITEM: 3.2

DATE: 10TH JUNE 2021

TITLE: CAPACITY REQUIRED TO SUPPORT DISCHARGE TO ASSESS

**FROM: SUE GRAHAM
DIRECTOR OF PERFORMANCE AND CONTRACTS**

1 ISSUE

- 1.1 Due to the continuation of the pressures caused by the Covid-19 pandemic, the discharge to assess (D2A) pathway remains under severe pressure. The NHSE funded Hospital Discharge Pathway fund has been continued to support discharges from hospital up to 30th September 2021.
- 1.2 As part of the 6-week review of the D2A pathway, the system operational leads and commissioners have reviewed the pathway data and discussed the services required to continue to support the current and predicted level of hospital discharges up to 30th September 2021.
- 1.3 This paper sets out the level of investment requested by the system, the support this investment provides and the funding mechanism.

2 HOSPITAL DISCHARGE FUNDING

- 2.1 In March 2021 NHSE confirmed that the Hospital Discharge Funding would continue up to 30 September 2021 for new or extended packages of care on discharge from hospital. The guidance states that systems must ensure they provide adequate health and social care discharge services, operating 7 days a week to ensure people receive the most appropriate care at home where possible.
- 2.2 The funding provides up to a maximum of 6 weeks funding for discharges occurring from 1st April 2021 to 30th June 2021, and up to a maximum of 4 weeks funding for discharges occurring from 1st July 2021 to 30 September 2021. The additional funding should only be used to fund activity arising from the programme that is over and above activity normally commissioned by CCGs and local authorities.
- 2.3 The Cambridgeshire and Peterborough system has been allocated a total of £8.159m from 1st April 2021 to 30th September 2021. If this allocation is fully utilised, the system will need to fund and maintain hospital discharge services from its core system budgets up to 30 September 2021. This is to ensure that there is no reduction in activity on discharge pathways, performance is maintained and delays in discharging people are minimised during these 6 months. The forecast for Cambridgeshire and Peterborough system is £6m currently, including the investment

requested in this paper, but actual spend will heavily depend on the level of discharges over this period.

3 INVESTMENT

3.1 In March 2021, the system agreed that additional support for the discharge to assess pathway would be required, while the 6 week review work was completed and would be funded by the system if national funding was not made available. Subsequently NHSE issued the Hospital Discharge guidance and the notification that funding would be available until 30th September 2021.

3.2 As part of the D2A review at the start of this financial year, the services required to support discharges from hospital were reviewed and the associated funding requirements calculated. Table 1 below reflects the initial 6 week funding requirement to 12th May 2021, and the subsequent funding request for the remainder of the period to 30th September 2021. The funding request takes account of the reduction in the number of maximum funded weeks, during quarter 2 of the period.

Table 1

Organisation	Service	Funding for 6 weeks 1st April 2021 - 12th May 2021	Funding for 20 weeks 13th May 2021 - 30th September 2021	Total Funding	Description
CCG	Care at Home - MIDAS cars	£104,564	£513,115	£617,679	To support 11 domiciliary care cars and co-ordination support 7 days/week
CCG	Healthcare at Home Bridging support	£45,360		£45,360	To provide support on discharge until social care package is in place
CCG	GP Cover Health Interim beds	£13,680		£13,680	To provide support to additional health interim beds. Additional beds de-commissioned from 12th May 2021.
CCG Total		£163,604	£513,115	£676,719	
CPFT	D2A Expansion		£93,399	£93,399	6.8 wte Admin and business hub support for pathway 2.
CPFT	ICWs	£142,740	£441,851	£584,591	32.4 wte ICWs to support discharges
CPFT	Care Coordination		£53,847	£53,847	3 wte care co-ordination
CPFT	SPA		£12,393	£12,393	1 wte referrals co-ordinator
CPFT	Therapy Support		£417,598	£417,598	6 wte therapy assistants, 8 wte therapists, 3 discharge planning nurses, 1 wte team,/clinical lead
CPFT	GP Cover CPFT beds	£37,000	£88,550	£125,550	GP Cover for inpatient wards
CPFT Total		£179,740	£1,107,638	£1,287,378	
LA	Social workers	£40,416	£134,720	£175,136	Social worker capacity to support discharge pathway, includes the cost of agency staff due to vacancies and staff turnover
LA	Brokerage	£42,348	£141,160	£183,508	Supports 7 day working of brokerage provision
LA	Domiciliary Care car capacity	£295,000	£983,333	£1,278,333	1500 hours/week of domiciliary care car capacity to support pathway 1
LA	Adult social care in Acutes	£35,903	£156,676	£192,579	7 social workers in acute to support home first model.
LA	LD/MH flats	£29,760	£10,850	£40,610	Funding for 4 Sanctuary flats until 4th June 2021. Flats under utilised and will be de-commissioned from this date.
LA	Social workers to support assessments	£5,129		£5,129	Additional capacity will be funded from alternative source from 13th May 2021.
LA	NRS Equipment	£6,923		£6,923	Not required beyond 12th May 2021.
LA	Emergency Response Service Peterborough	£13,061		£13,061	Funded from alternative source from 13th May 2021.
LA Total		£468,540	£1,426,739	£1,895,279	
Total Funding Requested		£811,884	£3,047,492	£3,859,376	

3.3 The above table shows the estimated maximum funding required by the system. Only actual costs incurred will be claimed against the hospital discharge funding, up to the maximum amounts shown above. Actual costs will be claimed by the CCG to NHSE for reimbursement from the Hospital Discharge Fund. Funding is passed by the CCG to the relevant organisation.

4. NEXT STEPS

- 4.1 The system is continuing to work together to review the D2A pathway and the medium to long term service and funding requirements needed to continue to support effective and optimal discharges from hospital. Further updates will be brought to Governing Body as this work progresses.

5. RECOMMENDATION

- 5.1 The Governing Body is asked to:
- Approve the funding request from the system for a total of £3,859,736 to be funded from the Hospital Discharge Fund for the period 1st April 2021 to 30th September 2021.

6. REASON FOR RECOMMENDATION

- 6.1 The system is required to support adequate health and social discharge service, operating 7 days a week , to ensure the most appropriate care at home where possible. A review by the system has identified a need for the additional funding, in order to be able to achieve this outcome and will be supported through the NHSE funded Hospital Discharge Fund up to 30th September 2021.

Author

**Sarah Hannay
Deputy Chief Finance Officer
3rd June 2021**