

Appendix 2 – Response to the Recommendations of the Adults and Health Scrutiny Panel on Hospital Discharge

No.	Recommendation	Suggested Response (Agreed/Not Agreed/Partially Agreed)	Response to Recommendation
1	<p>To make the report on the future model for reablement services from external consultancy 31Ten available to the Panel.</p> <p>In particular, clarity is needed on how the new model will develop a joined-up approach with locality teams, community partners, and hospital staff.</p>	<p>Agree</p>	<p>Agree with recommendation - we will share a report on the future model for Reablement, once finalised.</p>
2	<p>Close monitoring of hospital readmission rates is required after the implementation of the new reablement model to ensure that any reduction to the length of reablement programmes is not having a detrimental effect on patients and leading to more expensive hospital readmissions. Clarity is required on how data related to the implementation of the new service provision will be monitored and compared to the current service.</p>	<p>Agree</p>	<p>Agree with recommendation - operational reporting is in place and will be further refined once future model is implemented.</p>

3	<p>That the Council ensures robust monitoring of the new reablement model through:</p> <ul style="list-style-type: none"> • Close tracking of 30-day and 90-day hospital readmission rates to confirm that any reduction in programme length does not negatively affect patient outcomes or lead to increased readmissions. • Clear reporting on performance data, demonstrating how outcomes under the new model compare with the current service; and • Full financial transparency for the community-based approach, including evidence that the Council is not assuming a disproportionate share of system costs and a breakdown of Directorate contributions to joint working arrangements.-based approach, including evidence that the Council is not assuming a disproportionate share of system costs and a breakdown of Directorate contributions to joint-working arrangements. 	Agree	Agree with recommendation - operational reporting is in place and will be further refined once future model is implemented.
4	Housing officers to be included in multi-agency teams to assist with post-discharge support and prevention of hospital admission.	Agree	Agree with recommendation – already in place.
5	Expand types of trusted referrers to MACCT/multi agency-teams, for example sheltered housing providers.	Subject to Agreement with Partners	This recommendation would require multi-agency agreement, and the Council cannot agree this on behalf of partners. Council officers will discuss this through the governance of the Borough Based Partnership and will report back to the Panel.

6	Multi agency teams led by local authority and the ICB need to be linked together within the same hub to improve coordination and avoid duplication.	Subject to Agreement with Partners	This recommendation would require multi-agency agreement, and the Council cannot agree this on behalf of partners. Council officers will discuss this through the governance of the Borough Partnership and will report back to the Panel.
7	The Panel welcomed the progress in making vacant step-down units ready for people to be discharged to. The Panel highlighted the ongoing importance of maintaining quick turn-around times and ensuring that vacant step-down properties were, cleaned, furnished and ready to be occupied at short-notice in the future.	Agree	This is already in place.
8	<p>The Panel emphasised that clear written information should be provided to residents/families/carers/advocates prior to any assessment or checklist taking place so that they were clear about the process and the questions that would be asked.</p> <p>The information provided to residents should also:</p> <ul style="list-style-type: none"> • Make clear that the recording of assessments can be requested. • Make clear how decisions could be challenged and explain the process for this. <p>Provide details on financial assessment/eligibility and ensure that residents are clear about any financial contribution that may be required from them.</p>	Partially Agree	Partially agree with recommendation – this is agreed where the process is agreed by the Council (such as Financial Assessments or Care Act Assessments). Where this recommendation applies to NHS partners, the recommendation and report will be shared with them, and Council officers will discuss this through the governance of the Borough Partnership and will report back to the Panel.
9	A clearer agreement / memorandum of understanding should be developed with the Integrated Care Board (ICB) to specify funding		This recommendation would require multi-agency agreement, and the Council cannot agree this on behalf of partners. Council officers

	arrangements for CHC and to avoid the sticking points which are leading to the local authority and the ICB using public resources to dispute cases with each other.	Subject to agreement with Partners	will discuss this through the governance of the Borough Partnership and will report back to the Panel. It should be noted that CHC is governed by regional and national policy, protocols and guidance.
10	The Panel highlighted priorities for future monitoring including progress on previous recommendations and: <ul style="list-style-type: none"> • Improvements on contracts and commissioning, including through the Dynamic Purchasing System. • Monitoring and tracking of case progress, the use of the support plan as progress is made and how the resident is included in that process. • Accurately capturing the voice of residents in the discussions on their case. 	Agree	Agree with recommendations.
11	The Panel recommended that an assessment be made of whether the provision available at Osborne Grove is being fully utilised in circumstances where residents are unable to move on from step-down accommodation due to homelessness issues.	Partially Agree	The service at Osborne Grove is fully funded by ringfenced rough sleeping grant and generates significant cost avoidance for the Council's general fund. The criteria on resident eligibility for the service are set out in the grant conditions and has to be directly related to reducing rough sleeping in the borough. The Service has training and a community of practice in place to ensure that pathways are fully understood and utilised.
12	The Panel welcomed the forthcoming extension of Assertive Community Treatment (ACT) but was concerned that the threshold for this support to be provided post-discharge would only be for patients with the highest needs. The Panel recommended that further clarity was provided on how patients who fall below the threshold for ACT will be supported in the community by the multi-agency teams after discharge from hospital.	Subject to agreement with Partners	This recommendation would require agreement with the North London Foundation Trust. Council officers will discuss this through the governance of the Borough Partnership and will report back to the Panel.

<p>13</p>	<p>The Assertive Outreach team should be embedded with the multi-agency community teams to ensure that mental health patients receive co-ordinated support post-discharge.</p>	<p>Subject to agreement with Partners</p>	<p>This recommendation would require agreement with the North London Foundation Trust. Council officers will discuss this through the governance of the Borough Partnership and will report back to the Panel.</p>
<p>14</p>	<p>The 'Home from Hospital Service,' or similar support services, should be guaranteed to all post-discharge patients who require it:</p> <p>The Council and NHS Trusts should ensure that all patients being discharged from hospital are made aware of the service in the information that they receive prior to discharge.</p> <p>Information about the service should be provided to all Councillors in terms of the advice about support organisations that they can signpost their constituents to.</p> <p>Consideration should also be given to whether information about the Service should be prominently advertised in the Council's communications channels.</p>	<p>Partially Agree</p>	<p>Partially agreed. This Service is dependent on funding from the Better Care Fund, which is currently an annual process and detailed guidance, which is currently under review. The Council supports the recommendation in principle but is unable to guarantee the Service for this reason.</p> <p>Information about the Service is available on our website.</p> <p>https://haringey.gov.uk/adult-social-care/living-independently/returning-home-after-hospital/haringey-home-hospital-service</p>