



**Item No. 12**

**Meeting Date Wednesday 26<sup>th</sup> June 2024**

**Glasgow City  
Integration Joint Board**

**Report By: Karen Lockhart, Interim Assistant Chief Officer, Adult Services**

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**Discharges from Learning Disability Inpatient Services – Progress Report**

**Purpose of Report:**

To inform the Integration Joint Board of work to discharge people from learning disability inpatient services. This includes the current status of work to discharge people recorded as a delayed discharge, as well as work to discharge people who are part of the programme to transition from NHS long-term care to a suitable alternative model of community provision.

**Background/Engagement:**

In line with the recommendation made to the IJB in [September 2021](#), GCHSCP has secured accommodation for a new enhanced community living service for adults with a learning disability and has successfully tendered to secure the services for an adult social care provider to deliver that service. The accommodation will come under care home registration, and the ethos of the new 6-person service is to provide person-centered support based on the needs of each individual. The service will be based on best practice in complex support service provision and delivered using positive behavioural support, human rights based and trauma informed approaches. The target date for the service to be operational is July 2024.

Discharging people with complex needs from inpatient services has been particularly difficult over recent years; services for complex people require to be intensively staffed by skilled individuals, at a time when recruitment and retention within the social care setting is extremely challenging. Added to that is the impact which the COVID

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	pandemic has had on the housing market and the impact of the current Housing Emergency. This has contributed to a lack of housing, generally, and particularly for adapted housing for people with complex needs and has further delayed people in hospital discharge.
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<b>Governance Route:</b>	<p>The matters contained within this paper have been previously considered by the following group(s) as part of its development.</p> <p>HSCP Senior Management Team <input checked="" type="checkbox"/> Council Corporate Management Team <input type="checkbox"/> Health Board Corporate Management Team <input type="checkbox"/> Council Committee <input type="checkbox"/> Update requested by IJB <input type="checkbox"/> Other <input type="checkbox"/> Not Applicable <input type="checkbox"/></p>
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<b>Recommendations:</b>	<p>The Integration Joint Board is asked to:</p> <p>a) Note the content of this report.</p>
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<b>Relevance to Integration Joint Board Strategic Plan:</b>	
<p>The IJB Strategic Plan 2023-26 confirmed the intention to develop and tender for an enhanced community living service for adults with a learning disability to support people to be discharged from hospital care. The Strategic Plan also confirmed the intention to focus on a range of initiatives to reduce delayed discharges.</p>	

### Implications for Health and Social Care Partnership:

<b>Reference to National Health &amp; Wellbeing Outcome:</b>	<p>This work is relevant to all outcomes, particularly outcome 2: 'People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.'</p>
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<b>Personnel:</b>	None.
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<b>Carers:</b>	Carers are involved fully in discharge planning arrangements.
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<b>Provider Organisations:</b>	Provider organisations play a crucial role in enabling the discharge of individuals and supporting individuals in the community.
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<b>Equalities:</b>	An <a href="#">Equalities Impact Assessment</a> was undertaken to inform the recommendation made to the IJB in September 2021.
<b>Fairer Scotland Compliance:</b>	None.
<b>Financial:</b>	None.
<b>Legal:</b>	None.
<b>Economic Impact:</b>	None.
<b>Sustainability:</b>	None.
<b>Sustainable Procurement and Article 19:</b>	None.
<b>Risk Implications:</b>	Patients whose discharge is delayed presents a risk to those individuals in that they are not yet in a setting that aligns with their assessed need. It can also present operational risks within the ward environment and impede timely hospital admission for others.
<b>Implications for Glasgow City Council:</b>	None.
<b>Implications for NHS Greater Glasgow &amp; Clyde:</b>	None.

### 1. Purpose

- 1.1. To inform the Integration Joint Board of work to discharge people from learning disability inpatient services. This includes the current status of work to discharge people recorded as a delayed discharge, as well as work to discharge people who are part of the programme to transition from NHS long-term care to a suitable alternative model of community care.

### 2. Background

- 2.1 In line with the recommendation made to the IJB in September 2021, GCHSCP has secured accommodation for the new enhanced community living service for adults with a learning disability and has successfully tendered to secure the services for an adult social care provider to deliver that service. The accommodation will come under care home registration, and the ethos of the new 6-person service is to provide person-centered support based on the needs of each individual. The service will be based on best practice in complex support service provision and delivered using positive

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behavioural support, human rights based and trauma informed approaches. The target date for the service to be operational is July 2024.

- 2.2 Discharging people with complex needs from inpatient services has been particularly difficult over recent years; services for complex people require to be intensively staffed by skilled individuals, at a time when recruitment and retention within the social care setting is extremely challenging. Added to that is the impact which the COVID pandemic has had on the housing market and the impact of the current Housing Emergency. This has contributed to a lack of housing and particularly for adapted housing for people with complex needs and has further delayed people in hospital discharge.

### **3. Summary of multi-agency activities to support discharge.**

- 3.1. GCHSCP, along with other GG&C HSCPs, has committed to work together to take forward a programme of redesign of inpatient services, the emphasis being on improving our responses in the community to reduce the use of inpatient beds when not clinically required. East Renfrewshire HSCP, as the host for inpatients, leads this work and has established a programme board which provides strategic leadership and governance and directs the work of community and inpatient redesign going forward. As well as achieving hospital discharges, a key priority is preventing admission to inpatient services and to minimise the risk of placement breakdown in the community.
- 3.2. Progress made to date through the above approach includes:
- Developed dynamic support registers, ensuring the identification of people / early intervention to support collaborative practice across partnerships and third sector organisations to explore and deliver new models of support and maximise collaborative commissioning.
  - A multi-agency collaborative commissioning group has been established, providing an opportunity for joint commissioning across GG&C with a focus in the first year to discharge individuals currently delayed.
  - Collaboration on the redesign of inpatient beds with a focus on decommissioning and reinvesting in emerging community models, supported by the allocation of funding as part of the national 'community living change fund'.

### **4. Current Status**

- 4.1. There are currently 23 Glasgow City patients within learning disability inpatient services assessed as suitable for discharge. From that patient cohort, 6 people will transfer to a newly commissioned residential service (please see section 5.1, below, for further details). In addition, discharge planning arrangements are at a relatively advanced stage for a further 5 individuals, with provisional discharge dates identified in 2024. Accommodation has been identified for a further 3 individuals and we are working through issues with the respective providers to agree dates for discharge.

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- 4.2. Since late 2023 there have been 3 people with complex LD who were classed as delays who have been discharged from hospital to their own tenancies with support, so while there has been progress made on discharging people unfortunately the delays figure has not reduced significantly due to other patients who were in treatment then becoming classed as delayed discharges.
- 4.3. We are working closely with partners to identify suitable care options for the remaining 9 individuals. This includes setting up meetings with Housing Associations to explore the potential to access additional properties. However, the complexity of need for many of those individuals is such that there is currently a lack of suitable placement options to meet their needs.

### **5. Transition from NHS Long Stay to Community Provision**

- 5.1 As previously mentioned, we have secured and substantially refurbished accommodation and surrounding grounds for a new enhanced community living service for adults with a learning disability who have complex needs; designed as part of the model to replace NHS long stay beds for such individuals. This facility has been funded via Change Fund monies made available from the Scottish Government's Coming Home Strategy. We have successfully tendered and secured the services of an adult social care provider to deliver this service. The accommodation will be registered as a care home with the Care Inspectorate.
- 5.2 It is anticipated this service will be operational in July 2024, enabling the placement of 5 Glasgow City individuals from NHS long stay care, along with a further patient who has been living in hospital for several years. Thereafter, the NHS long stay ward where the patients are currently based will be decommissioned. As the individuals who are moving to this new accommodation have been living in NHS care for many years, there is an agreement that NHS in-patient services will provide support to the care home for the first 6 months.

### **6. Planned Placements 2024**

- 6.1 There continues to be a number of issues relating to patients being delayed in hospital including lack of:
- Available social care staff
  - Suitable accommodation
  - Specialist and residential nursing places

However, there are plans either already in place or currently under discussion for the 23 delayed patients. The table below provides a summary.

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<b>Number of Patients</b>	<b>Outcome/Plan</b>	<b>By When</b>
Two	Moving to shared accommodation	End of June 2024
Six	Will be moving to the newly commissioned residential facility	August 2024
Four	Moving to individual accommodation already identified within the city	September 2024
One	Moving to shared accommodation already identified	September 2024
One	Moving to individual accommodation already identified	December 2024
Nine outstanding	<ul style="list-style-type: none"><li>• 2 undergoing matching process to move to named property.</li><li>• 2 require nursing care and accommodation currently being sourced.</li><li>• 1 suitable for residential care still to be identified.</li><li>• 3 have been placed multiple times previously and currently looking at appropriate model for them longer term.</li><li>• 1 previously discharged but had to return due to non-compliance and requires robust residential specialist care with clinical staff involved in care plan</li></ul>	To be Confirmed

**7. Recommendations**

7.1 The Integration Joint Board is asked to:

- a) Note the content of this report.