

UPDATE ON HOSPITAL TO HOME SUPPORT SERVICE

Head of Service/Contact:	Ian Dyer, Head of Operational Services
Urgent Decision?(yes/no)	No
If yes, reason urgent decision required:	
Annexes/Appendices (attached):	None
Other available papers (not attached):	Report and Minutes of Community and Wellbeing Committee, 12 June 2018 and 19 March 2019

Report summary

The purpose of this report is to update Committee on the progress of the Hospital to Home Support Service.

Recommendation (s)

- (1) That the Committee notes the progress of the Home to Hospital since 19 March 2019.**

1 Implications for the Council's Key Priorities, Service Plans and Sustainable Community Strategy

- 1.1 The establishment of a Hospital to Home Support Service strengthens the provision of services that we offer and builds on our key priorities of "supporting our community" and "managing our resources" by delivering efficiency savings and cost reductions.

2 Background

- 2.1 Surrey Downs Clinical Commissioning Group (CCG) asked the Borough and District Councils that make up the Surrey Downs catchment area to consider the possibility of delivering a Home from Hospital service. These borough and districts are Epsom & Ewell Borough Council, Elmbridge Borough Council, Mole Valley District Council, Reigate and Banstead Borough Council.

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- 2.2 The Hospital to Home Service commenced in Epsom & Ewell on 1 October 2018.

3 Progress

- 3.1 The Hospital to Home Support Service (HtHSS) provides short term, non-clinical support for people to access existing community services, so that they are facilitated to return home safely from hospital.
- 3.2 It is responsive and flexible to reflect individual needs and circumstances, during a maximum period of six weeks after leaving hospital.
- 3.3 Our Community and Wellbeing team, will either undertake a home-based or telephone assessment to ascertain the patient's needs, which includes a check on basic issues such as home safety, key safe, heating, hydration and daily basic living needs.
- 3.4 The Community and Wellbeing team makes links to other local community services as appropriate, and accesses information and services from colleagues within the borough and voluntary, community and faith sector.
- 3.5 Where a need arises, appropriate onward referral will be taken by the Social Prescribing Link Worker.
- 3.6 The HtHSS is not an early supported discharge service, nor is it an emergency, statutory or personal care service
- 3.7 From the period of 1 March 2019 to 30 September we have had 39 referrals. This averages 5 per month which is below the expected level referrals to be received.
- 3.8 We have found that not all members of the hospital teams are aware of the service and we will be having information sessions with the discharge team at Epsom General Hospital along with the New Epsom and Ewell Community Hospital (NEECH) to improve the level of referrals.
- 3.9 In July 2019, Elmbridge Borough Council discontinued its offer of the HtHSS to the East Elmbridge population, this was due to staffing issues.
- 3.10 Surrey Downs CCG enquired if either Epsom & Ewell Borough Council or Mole Valley District Council would like to deliver the HtHSS to the East Elmbridge area.
- 3.11 Geographically Epsom & Ewell Borough Council were best placed to deliver the Service and we could deliver it within our existing resources.
- 3.12 Delegated Authority was sought from the Chairman of the Community and Wellbeing Committee on the 15 August 2019 to commence the HtHSS to East Elmbridge.

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3.13 The funding provided for the delivery of the HtHSS to East Elmbridge from 1 August 2019 to 31 March 2020 is £11,200.

3.14 From the 1 August 2019 to date we have had 4 referrals for East Elmbridge.

4 Financial and Manpower Implications

4.1 Surrey Downs CCG's funding of £20,300 covers the cost of running this service for 100 hospital discharge client referrals for Epsom & Ewell.

4.2 Surrey Downs CCG's funding of £11,200 covers the cost of running this service for 50 hospital discharge client referrals for East Elmbridge.

4.3 **Chief Finance Officer's comments:** It is anticipated that referrals for East Elmbridge can be dealt with using existing resources. The additional funding available will offset Epsom & Ewell service delivery costs.

5 Legal Implications (including implications for matters relating to equality)

5.1 None for the purposes of this report.

5.2 **Monitoring Officer's comments:** None for the purposes of this report.

6 Sustainability Policy and Community Safety Implications

6.1 This project supports vulnerable adults within the Borough.

7 Partnerships

7.1 We are working in partnership with Surrey Downs Clinical Commissioning Group and Surrey County Council.

7.2 We are also working in partnership with Elmbridge Borough Council, Mole Valley District Council, Reigate and Banstead Borough Council who are in the catchment area of mid Surrey

8 Risk Assessment

8.1 The service will cease if no further funding is provided by the Surrey Downs CCG's after the 30 March 2020.

8.2 Demand for our services needs to be monitored to ensure there is sufficient capacity to accommodate a possible increase of demand from hospital discharges.

8.3 Low referrals as noted in 3.7 may have an impact on the continuation of further funding from Surrey Downs CCG.

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9 Conclusion and Recommendations

- 9.1 The Committee is requested to note the progress and challenges with the Hospital to Home Support Service since 1 March 2019, as detailed within this report.

Ward(s) Affected: (All Wards);