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**Decision Maker:** HEALTH SCRUTINY SUB-COMMITTEE

**Date:** Tuesday 17<sup>th</sup> January 2023

**Decision Type:** Non-Urgent                      Non-Executive                      Non-Key

**Title:** One Bromley Winter Plan 22-23

**Contact Officer:** Jodie Adkin – AD – Urgent Care, Hospital Discharge and Transfers of Care –  
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**Chief Officer:** Angela Bhan, Bromley Executive Lead – SEL ICB

**Ward:** All

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1. Reason for decision/report and options

1.1 The purpose of the item is to

1.1.1 provide a verbal update on winter pressures over the Christmas and New Year period.

1.1.2 provide information and an overview of the proposed allocation of the new Hospital Discharge monies that have been allocated via the Better Care fund to the Bromley system.

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2. **RECOMMENDATION(S)**

The committee is asked to:

- Note the verbal feedback provided on the systems response to Christmas and New Year winter pressures
- Note the Hospital Discharge Monies submission to NHSE as agreed by the Health and Wellbeing Board

## Impact on Vulnerable Adults and Children

1. Summary of Impact: As a result of whole system working vulnerable adults and children will be able to access the right care in the right place at the right time. This includes access to hospital-based care, as well as community-based health and care services.

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## Transformation Policy

1. Policy Status: Existing Policy
2. Making Bromley Even Better Priority (delete as appropriate):
  - (2) For adults and older people to enjoy fulfilled and successful lives in Bromley, ageing well, retaining independence and making choices.
  - (5) To manage our resources well, providing value for money, and efficient and effective services for Bromley's residents.

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## Financial

### 1. Cost of proposal: Estimated Cost

The allocation is part of the £500 million Adult Social Care Discharge Fund monies announced in September 2022. Details of the allocation were provided to local areas in December 2022. The monies are being pooled into local BCF plans and Section 75 agreements. Funding is provided through grants to Local Authorities (40% of the national fund) and allocations via ICBs (the remaining 60%).

The funding is ringfenced to fund activity associated with hospital discharge only and must be spent on actual activity between 19 December 2022 and 31 March 2023. The monies are non-recurrent.

The following funding has been allocated to the Bromley Health and Wellbeing Board area

Source of funding		Amount pooled	Planned spend	
LA allocation		£ 992,046	£992,046	
ICB allocation	NHS South East London ICB	£ 1,322,356	£1,322,356	£2,314,402

2. Ongoing costs: Non-Recurring Cost
3. Budget head/performance centre: ICB / LBB
4. Total current budget for this head: £2,314,402
5. Source of funding: NHSE

## Personnel

1. Number of staff (current and additional): N/A
  2. If from existing staff resources, number of staff hours: N/A
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## Legal

1. Legal Requirement: None
  2. Call-in: Not Applicable: Further Details
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## Procurement

1. Summary of Procurement Implications: There are no procurement implications for this report
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## Property

1. Summary of Property Implications: None
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## Carbon Reduction and Social Value

1. Summary of Carbon Reduction/Sustainability Implications: N/A
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## Customer Impact

1. Estimated number of users or customers (current and projected): *N/A*
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## Ward Councillor Views

1. Have Ward Councillors been asked for comments? Via the Health and Wellbeing Board
2. Summary of Ward Councillors comments: The proposal was agreed by the Chair of the Health and Wellbeing Board with the following comments

*“Thank you, I have read through the paper and studied the spreadsheet. I think you have done a great job in allocating the extra funding to those programmes which should make a major difference to removing obstacles to hospital discharges and keeping residents out of hospital and in the community.*

*I note the comments from Angela Bhan and Kim Carey.*

*I have no additional comments and fully support the plan and the submission to NHS England tomorrow.”*

### 3. COMMENTARY

Compared to national and local neighbours, Bromley performs very well in achieving timely hospital discharge for residents. The hospital discharge system locally is exemplary, winning the MJ award for health and care integration in this area. The system is mature, with health and care teams working closely and flexibly to meet the needs of people being discharged from hospital achieving performance of 82% of patients discharged on the day they are medically fit for discharge.

There are however some challenges in the Bromley discharge system including:

1. **Increase in demand on hospital discharge services during winter months as more people are admitted to hospital**
2. **2022/23 winter context: cost of living impact and sustaining services over Christmas bank holidays**
3. **Increase in presentations for people with complex social care and housing situations**
4. **Pathway 3 - the discharge of clients requiring a care home placement**

The approach to allocating the funding has therefore been to invest in areas that specifically relate to the challenge areas in Bromley (as above), which are already in development and, with some pump prime investment, can be quickly mobilised. This includes considering some joint working across SEL where it makes sense to do so.

#### DESCRIPTION

1. Throughout the winter there is a general **increase in demand on hospital discharge services** which require increased capacity to meet pressures in a timely way.  
*Hospital Discharge Funding* is being allocated to increase capacity in key discharge services, professionals and provision to meet the increase in demand
2. More generally the winter **2022/23 context** and the **cost of living** situation is predicted to have a significant impact on patients especially those who have been unwell and are being discharged back to their own home. Several **bank holidays** during the Christmas holidays also impact on sustaining service delivery. *Hospital Discharge Funding investment* provides additional support across the third sector to work with clients directly to access grants and have appropriately warm homes, nutrition, and amenities to aid their recovery and keep well. Monies to incentivise providers to maintain key adult social care capacity during bank holidays is also being funded.
3. Although less in volume, some of the longest discharge delays in hospital relate to clients with **complex social care and housing** situations, that are eligible for statutory services. This includes a steady increase in homeless people, hauding, drug and alcohol dependent, mental health needs, ordinary residence and people with no recourse to public funds. Having the right specialist knowledge in a range of areas has a significant impact on both the timeliness but also the quality of discharge for these client groups. This specialist provision and knowledge also mitigates any potential cost shift due to ensuring clients are supported by the right part of the health and care system.  
*Hospital Discharge Funding investment* to support around these client groups including specialist workforce, discharge capacity for homeless people and funding to undertake one-off requirements to ensure the home environment is suitable for care and support to be provided

4. The biggest challenge to the whole system relating to hospital discharge is **pathway 3 - the discharge of clients requiring a care home placement**. Sustained occupancy rates in the care home sector are resulting in ongoing inflation in placement price as well as delays in sourcing a suitable placement. Although the current care home situation is impacting on all adult social care clients, the increase in quoted bed price is particularly true for clients being discharged from hospital due to the Council and ICBs statutory requirement for timely discharge, giving the provider market an advantage and little room for negotiation on cost. *Hospital Discharge Funding investment* will be used to mitigate the budget pressure of inflated placement cost (scheme 16). Funding is also being allocated to undertake some transformation work to specifically address the occupancy and level of demand for placements enabling the council and ICB to re-introduce opportunity for negotiation on price and ensure the market is running at a more sustainable level within a suitable financial envelope

A 1% administration has also been made to provide resource to manage the payment processes as well as provide some project management resource to meet the strict reporting requirements.

## **IMPACT ON VULNERABLE ADULTS AND CHILDREN**

4. Summary of Impact: As a result of whole system working vulnerable adults and children will be able to access the right care in the right place at the right time. This includes access to hospital-based care, as well as community-based health and care services.

## **5. TRANSFORMATION/POLICY IMPLICATIONS**

The Winter Plan aims to improve experience for patients/clients in the borough of Bromley during the winter period and relates to the following two Making Bromley Even Better Priorities:

(2) For adults and older people to enjoy fulfilled and successful lives in Bromley, ageing well, retaining independence and making choices.

(5) To manage our resources well, providing value for money, and efficient and effective services for Bromley's residents.

## **6. FINANCIAL IMPLICATIONS**

As per Finance section above

## **7. PERSONNEL IMPLICATIONS**

N/A

## **8. LEGAL IMPLICATIONS**

N/A

## **9. PROCUREMENT IMPLICATIONS**

N/A

## **10. PROPERTY IMPLICATIONS**

N/A

## 11. CARBON REDUCTION/SOCIAL VALUE IMPLICATIONS

*Detail here any environmental, social or economic implications that have been considered as part of this proposal. This section should consider requirements of the 2012 Public Services (Social Value) Act if procuring goods or services. Authors should detail how the recommendations in this report will lead to a positive impact in terms of the Council's Carbon Reduction ambitions.*

## 12 CUSTOMER IMPACT

Public engagement on elements of the winter activity has been undertaken including the experience of those going through the hospital urgent treatment centre, emergency departments and the Bromley Discharge Single Point of Access.

Proactive public engagement to ensure residents are aware of what services are available and how to access them will be a key strand of the winter preparation and delivery for next winter.

## 13 WARD COUNCILLOR VIEWS

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<b>Non-Applicable Headings:</b>	7, 8, 9, 10, 11
Background Documents: (Access via Contact Officer)	[Title of document and date]