



**Broken
Promises:
Delayed
Discharge
Under The
SNP**

Introduction



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This summer, Scottish Labour's Shadow Cabinet are shining a light on key problems in our public services. The NHS is Scotland's most valued public service and Labour's proudest achievement in Government. When it was launched by the then minister of health, Aneurin Bevan, on July 5 1948, it was based on three core principles:

- that it meet the needs of everyone
- that it be free at the point of delivery
- that it be based on clinical need, not ability to pay

After years of Tory austerity passed on in Scotland by the SNP, now more than ever, we need a health service based on patient need not the ability to pay.

The SNP are letting down NHS staff and patients. Our NHS staff are doing the best they can under the circumstances, but they are over worked, undervalued and under resourced.

The 2015 annual NHS staff survey revealed only a third of NHS staff believe there is enough of them to do their jobs properly.

BMA Scotland last month warned that our NHS will struggle to deliver all the services that patients need without urgent and significant change, while, according to a Royal College of Nursing survey, only 12.8% of Scotland's nurses don't believe the NHS can meet expectations.

When NHS staff are overworked and undervalued patients lose out. It's time to build a health service fit for the challenges of the future and ditch the sticking plaster approach the SNP have taken for nearly a decade.

This briefing is on delayed discharge. It was identified by the Cabinet Secretary for Health, Shona Robison, as a key challenge facing our health service in November 2014. Only a few months later the same Cabinet Secretary promised to eradicate delayed discharges by the end of 2015.

Instead, as this briefing shows, since regular reporting began four years ago, our NHS has lost more than 2 million days to delayed discharge.

Labour won't allow the SNP Government to focus only on Brexit or to continue to make the case for independence when they need to be dealing with our public services.

We'll make the case for progressive taxation to protect public services. We want to use the new powers of our Scottish Parliament to ask the richest to pay a bit more so we can stop the cuts to public spending and invest in Scotland's future.

The Briefing: Delayed discharge under the SNP

What are delayed discharges?

The Information Services Division (ISD) Scotland provides health information, health intelligence, statistical services and advice that support the NHS in Scotland.

They explain “*A delayed discharge is a hospital patient that is clinically ready for discharge from inpatient hospital care but continues to occupy a hospital bed beyond the ready for discharge date.*”

How many ‘bed days’ are being lost to delayed discharge?

ISD Scotland began regular public publication of Bed Days Occupied in August 2012 which included data from April 2012.

Bed days are the number of days patients spend delayed in hospital following their ready for discharge date. In calculating the number of bed days which are occupied by delayed discharge patients all days that occur between the ‘ready for discharge’ date (RDD) and the discharge date (the date the delay ended) are counted. The ‘ready for discharge’ date (RDD) is not counted however the ‘discharge date’ (the date the delay ended) is included.

Since reporting began **over 2.25 million bed days** have been occupied by delayed discharge patients.

Since the end of 2015 when Shona Robison committed to eradicate delayed discharge there have been **182,012** bed days recorded as occupied by delayed discharge patients.

Bed Days Occupied by Delayed Discharge Patients						
Type of Delay	2012/13	2013/14	2014/15	2015/16	2016/17*	Total
Standard Delays	386,684	421,157	498,545	438,832	32,244	1,777,462
Code 9† Delays	105,037	111,342	124,893	129,021	11,736	482,029
All Delays	491,721	532,499	623,438	567,853	43,980	2,259,491

All data via ISD Scotland

*Data only available up to April '16

†This code was introduced for very limited circumstances where NHS Chief Executives and local authority Directors of Social Work (or their nominated representatives) could explain why the discharge of patients was out with their control. These would include patients delayed due to awaiting place availability in a high level needs' specialist facility where no facilities exist and where an interim option is not appropriate, patients for whom an interim move is deemed unreasonable or where an adult may lack capacity under adults with incapacity legislation.

How many cases of delayed discharge have there been?

Delayed Discharge Cases						
Type of delay	2012/13**	2013/14	2014/15	2015/16	2016/17***	Total
Standard Delays	7,091	9,495	11,356	10,123	1,528	39593
Code 9 Delays	2,130	3,209	3,843	4,063	702	13947
All Delays	9,221	12,704	15,199	14,186	2,230	53540

All data via ISD Scotland

** Data available from July '12

*** Data available up to May '16

Since the end of 2015 when Shona Robison committed to end delayed discharge there have been **5,727** delayed discharge cases recorded.

What are the reasons behind delayed discharge?

There are a number of reasons why a patient may have their discharge delayed. In general, delayed discharge happens when an elderly patient requires assistance at home but there is a problem with accessing local authority support. Cuts to local government funding only add to that problem.

As shown below, in 2015/16 a third of standard delays were patients waiting to go home (ISD Scotland state "*Patients waiting to go home: patients waiting for care arrangements to be put in place in order to go home*"), while 1 in 4 delays was patients awaiting a Community care assessment.

2015/16 - Principal Reason for standard delays						
Awaiting Community Care Assessment	Patients waiting to go home	Awaiting funding for care home placement	Awaiting availability in care home	Healthcare Arrangements	Other	Total
2,679	3,344	381	3,157	228	334	10,123

Why recording delayed discharges matters?

The experts at ISD Scotland state that "*Timely discharge from hospital is an important indicator of quality and is a marker for person centred, effective, integrated and harm free care.*"

Quite simply it is important to get people out of hospital as soon as they are fit to leave for their own safety. Furthermore, patient flow through a hospital is significantly impacted when beds are unnecessarily occupied by patients who are ready to leave.

What the SNP have said about delayed discharges

Speaking at the SNP Conference in October 2011, Nicola Sturgeon said:

“There are still far too many patients who are stuck in hospital for up to six weeks just because the right care is not available for them in the community. That is far too long.

“Delayed discharges waste NHS resources. 200,000 bed days are lost every year.

“That's equivalent to a large acute hospital being occupied all year by people who don't need to be there. And it costs £ 50m. But worse, much worse, is that delayed discharges rob older people of their quality of life. We must do more to tackle these unnecessary waits. And, delegates, I am determined that we will. ”

Source: <http://bit.ly/1WkAH7V>

When she was appointed Health Secretary in November 2014 Shona Robison said fixing the problem of delayed discharge was her priority:

“In presenting the Government's programme for the year ahead, the First Minister made it clear that addressing delayed discharge is one of our key priorities and it is one to which I give my personal commitment.”

Source: <http://bit.ly/1Uo2q8j>

Then, in February 2015 she pledged to eradicate delayed discharge from our NHS by the end of the year

“I want over the course of this year to eradicate delayed discharge out of the system and I am absolutely determined to do that.”

Source: Shona Robison, BBC Radio Scotland's Good Morning Scotland programme, Wednesday 25 February 2015

Instead 567,853 days were lost to delayed discharge in 2015/16.

What is Labour's plan to tackle the problem?

Labour plan is to use the powers of the Scottish Parliament to stop the cuts to our public services. Dealing with delayed discharge and taking the pressure of our hospitals means properly funding social care in Scotland.

Scottish local authorities who deliver social care have faced a £1.4 billion cut since the SNP came to power in 2011.

Research carried out by MND campaigner Gordon Aikman revealed that 270 people died in 2015 waiting for a social care package.

Faced with the choice between using the powers or continuing with cuts, we believe that government should use the powers. That's why Labour call on the SNP government to set income tax in Scotland 1 penny higher, this would stop the cuts to our local services. This would enable us to guarantee a social care package within a week, relieving the pressure on NHS services.

Fixing social care doesn't just require investment, it needs reform too – with one in five care workers leaving their job each year something needs to change.

That is why Labour is calling on the SNP Government to establish a National Guarantee for care workers and implementing Unison's Ethical Care Charter to provide staff with the professionalised industry that they and patients deserve.

That would mean:

- Every care worker paid the living wage
- Ensuring they are paid for travel cost and travel time
- No zero hour contracts
- Appropriate training for staff

Labour led Renfrewshire Council has already implemented these key targets and service users and staff are seeing the benefits with improved productivity and reduced staff turnover.

Only a package of funding and reform can solve the problem of delayed discharge in our NHS – and take the pressure of our hardworking staff to let them deliver for patients.