



Department
of Health

NHS
England

To:

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Copied to:

Jeremy Heywood
Una O'Brien
Andrea Sutcliffe
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David Pearson
Sarah Pinot-Duschinsky
Mike Potts

12th February 2015

Dear Colleagues,

Supporting out of hospital care during winter

Following the meeting chaired by Sir Jeremy Heywood and Una O'Brien in January and subsequent correspondence, we wanted to update you on the steps we have taken at a national level and ask for your help in responding to a few national issues and lessons learnt.

Firstly, we have set up the Helping People Home (HPH) team, to help drive and co-ordinate action around out of hospital care to reduce Delayed Transfers of Care between January and April this year. The team is headed by Mike Potts with support from Hannah Miller and Sarah Mitchell.

Secondly, Government has provided an additional £37m of ring-fenced funding to Local Authorities to support reductions in delayed transfers to spend by the end of March. Based on an assessment of the early plans of those authorities receiving part of the DH component (£25m) of this additional funding, we estimate that there will be significant additional

commissioning. Our analysis of the indicative plans suggests that there may be almost 2000 additional reablement packages (based on a unit cost of £2600 for a residential care placement), around 2000 additional weeks of residential/ nursing care (based on cost of £800 for a nursing home placement) and 3200 weeks of home care (based on an intensive care package of around £900 per week).

We are grateful for the information you provided that led to the capacity mapping and a number of local conversations on the potential role of the independent care sector to meet local demand. Our assessment of the 30 areas that we initially targeted is that they have all, to different degrees, taken positive steps to engage with the independent care sector and we can point to examples where additional capacity has already been or is in the process of being procured. We are confident that these areas do have robust plans in place to manage their delayed transfers of care and are continuing with their local discussions across the health and care sector.

We have moved onto the next phase of our work which is about providing more intensive support to a small number of localities to ensure that there is a robust plan in place. As part of these plans, our approach is to help these areas to work with the independent and voluntary sectors to broker additional support where this is appropriate, taking into account local circumstances. It is, of course, ultimately for local commissioners to manage their local market and commission care packages according to their own procurement rules. However, where it is appropriate, we welcome the direct support of the independent care sector in these areas. The HPH team will be in touch with your organisations to broker support as needed.

There are two issues that we have identified at national level from the work to date:

Compliance: We know that a proportion of the independent care market can be out of commission due to quality compliance or local safeguarding issues. In the residential sector we estimate that this affects around 3 per cent of national bed capacity, but for some local areas it is significantly higher. Clearly if there are process or administrative issues getting in the way of reinstating closed capacity then the HPH team will be happy to take that up with CQC and/or the local authority. But our strong view is that this should only happen if commissioners can be confident that it is safe to do so. When you do identify spare capacity we would therefore request that you do not put forward services that we know are under investigation or putting in place an action plan to rectify compliance issues.

Rapid discharge: The priority of all health and care professionals is to ensure that people leave hospital safely, with appropriate ongoing care packages in place and a clear understanding of the next steps. We are keen to work with you to consider best practice in the independent sector to supporting more rapid discharges, for instance at the weekend.

We trust that you see this as a positive way forward. If you want to discuss the approach further, the HPH team would be happy to have a follow up conversation, and the team will also be in touch when specific constraints are identified through their work with local areas over the coming weeks.

Finally, we will be inviting you to a meeting in the Spring to learn from the work this winter and how we can plan for next year. It would be helpful to hear your thoughts in advance

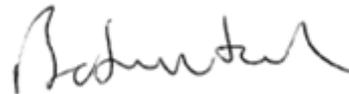
about lessons learned so that we can focus the discussion on future action. We will also make sure this is fully coordinated with the broader piece of work Barbara has agreed to undertake with you through NHS Partners across different aspects of independent sector provision.

We are copying this letter to Jeremy Heywood and Una O'Brien, as well as the Local Government Association, the Association of Directors of Adult Social Services and the Helping People Home Team.

Yours sincerely,



Jon Rouse
Director General of Social Care, Local
Government and Care Partnerships,
Department of Health



Dame Barbara Hakin
National Director: Commissioning Operations
NHS England