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LICHFIELD DISTRICT COUNCIL AND TAMWORTH BOROUGH COUNCIL

HOSPITAL DISCHARGE PROTOCOL



PROTCOL

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Revision History

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Document Review Plans

This document is subject to a scheduled annual review. Updates shall be made in accordance with business requirements and changes and will be with agreement with the document owner.

Distribution

The document will be available on the Intranet and the website.

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Introduction

Most people admitted to hospital are not homeless and can return home to the address they came in from. However, a few people have nowhere to go on discharge, or their housing is unsuitable for them to return to meaning their stay in hospital is extended. This protocol is written to establish the procedures that should be followed to ensure that in this situation those who have no home or an unsuitable home to be discharged to receive the best possible service from all those involved in their care to provide them with decent secure accommodation on release from hospital so that no person is discharged from hospital either homeless or back to a home where conditions make it unsuitable for them to live in.

In its 2003 guidance, 'Discharge from hospital: pathway, process and practice', the Department of Health (DoH) stated that all acute hospitals should have formal admission and discharge policies to ensure that homeless people are identified on admission and that their pending discharge be notified to relevant primary health care and homelessness services. Subsequent guidance in 2006 set a clearer expectation that it is the joint responsibility of hospitals, Primary Care Trusts (PCTs), local authorities and the voluntary sector to ensure a protocol is in place so that no one is discharged from hospital to the streets or inappropriate accommodation.

In 2011, the Government committed to ending rough sleeping in their strategy Vision to End Rough Sleeping: No Second Night Out Nationwide. To achieve this vision, local areas need to focus on meeting four simple pledges:

- 1. No one new to the streets should spend a second night out
- 2. No one should live on the streets
- 3. No one should return to the streets once they have been helped off them
- 4. No one should arrive on the streets.

Preventing someone becoming homeless when they leave hospital will contribute to meeting these aims, and one of the first commitments of the Ministerial Working Group on Homelessness was to identify what else needs to happen to make sure nobody is discharged from hospital onto the streets.

This commitment resulted in a report being commissioned by the DoH, completed by St Mungos and Homeless Link which looked at how homeless people are treated by hospitals. The report was produced to inform the National Inclusion Health Board and delivered against the Ministerial Working Group on Homelessness commitment to identify what more must be done to prevent people at risk of rough sleeping being discharged from hospital without accommodation.

The report indicated that more than 70% of homeless people are being discharged from hospital back onto the streets, damaging their health. But it also cites examples of best practice. It found that National Health Service (NHS) staff can improve health outcomes for homeless people and save the NHS money by ensuring all patients have somewhere appropriate to stay when they are discharged from hospital.

This report can be found here:

http://homeless.org.uk/sites/default/files/siteattachments/HOSPITAL_ADMISSION_AND_DISCHARGE__REPORTdoc.pdf

The aim of this protocol is therefore to support hospitals, Clinical Commissioning Groups (CCGs), local authorities and the voluntary sector, working in partnership, to develop an effective admission and discharge procedure for people who are homeless, living in temporary or insecure accommodation or accommodation where the conditions prevent a return home. The over arching aim of the protocol will be to ensure that no one is discharged from hospital to the streets or into inappropriate accommodation in line with government commitments therefore preventing cyclical re-admission and engagement with housing services and overall improving health outcomes for some of the most vulnerable people.

This document applies to the situation when a person who is homeless or living in temporary or insecure accommodation is admitted to, and discharged from, a hospital ward. Most of the underlying principles apply also to Accident and Emergency (A&E) Departments; however, the document is not designed to cover fully the issues that arise in A&E.

For the purposes of this document homeless can be taken to mean any of the following:

- Those who are considered to be rough sleeping or sometimes called street homeless – those who literally have no roof over their head or who are sleeping in spaces which are not fit for habitation, such as stairwells or sheds
- Individuals or families who the Council have accepted as being homeless and are in the process of re-housing them but until accommodation is found they are living in temporary accommodation.
- People living in hostels, night shelters, squats, or in bed and breakfast accommodation or those that have been in institutional care such as prison

The protocol also includes people who may not be able to return home as their housing conditions prevent them from doing so or they require adaptations to allow them to do so

The guidance issued by Communities and Local Government suggests that a protocol will be fit for purpose if it:

- establishes a patient's housing status on admission to hospital
- includes procedures for obtaining patients' consent to share information
- includes procedures for ensuring that existing accommodation is not lost
- identifies key external agencies to notify about a homeless person's admission
- develops the resources and training needed
- involves voluntary sector agencies, primary care providers and local authorities throughout the discharge process

The protocol applies only to hospital patients who reside in the Lichfield or Tamworth Council areas, and who are patients of hospitals in Staffordshire and neighbouring local authority areas such as Birmingham.

Without this Protocol, if there is a housing issue health and social care workers could spend significant time trying to identify solutions for patients. Similarly it could also

be difficult for housing staff in a local authority to find an available and appropriate housing solution at very short notice, without access to necessary information. This in turn could then impact in the health and wellbeing of the patient potentially causing re-admission to hospital at additional cost to the Health Service.

Therefore this protocol provides clear procedures, providing information on who does what, and by establishing clear roles and lines of communication will try and deliver the best service possible for the patient ensuring they have access to decent secure accommodation upon discharge from hospital and therefore improving their health and wellbeing and potentially preventing costly readmissions to hospital.

Who has signed up to the Protocol

This Protocol has been developed by key agencies in Lichfield and Tamworth that work with homeless people who may be admitted to hospital and those who may be discharged homeless or back to unsuitable housing without positive and professional interventions.

The Protocol has been signed-up to by:

- Lichfield District Council
- Tamworth Borough Council
- Sir Robert Peel Community Hospital
- George Bryan Centre
- Queens Hospital, Burton Upon Trent
- County Hospital (Formerly Stafford Hospital) Stafford
- Good Hope Hospital
- Samuel Johnson Community Hospital
- Staffordshire and Stoke on Trent Partnership Trust (SSOTP)
- West Midlands Ambulance Service

At any time other key partners could sign up to the protocol if agreed by the group where it was felt necessary that their role will enhance and improve the ongoing work and deliver positive outcomes for patients.

Achieving the aims of the Protocol

To achieve the aim of ensuring no one is discharged from hospital to the streets or into inappropriate accommodation, in line with the government commitments set out in No Second Night Out, the organisations signed-up to this protocol should work together under the principle that every effort should be made to ensure that patients are not discharged from hospital before appropriate housing options are identified.

The following principles should be adhered to ensure this protocol achieves its aims:

- People being discharged from the hospitals that sign up to this protocol who normally reside in Lichfield or Tamworth regardless of length of stay in hospital will have their needs assessed in time to make appropriate referrals in advance of a discharge date
- No agency should rely on a hospital bed being available in place of suitable housing
- People leaving hospital who are returning to Lichfield or Tamworth should have the best available and appropriate accommodation to meet their housing and support needs
- Lichfield District or Tamworth Borough Councils, and the agencies signed-up to this Protocol, should make every effort to prevent patients becoming homeless during their hospital stay
- Staff working in all relevant agencies should know who to contact to help to resolve any problems that arise in the process
- Agencies should work together effectively to jointly resolve housing problems, where possible prevent a homeless application being made.

Sharing Information and Confidentiality

An important feature of this protocol is information sharing which should ensure successful outcomes for the patient. Any information about the patient needs to be shared both quickly and confidentially to allow the situation to be resolved as efficiently as possible. However, before any contact is made with housing and related professionals by hospital staff, the patients consent must be obtained.

Information should only be shared with agencies which can help the patient to obtain or keep appropriate housing and support services. Such agencies should abide by the Data Protection legislation, and should have guidelines for staff about how and what information to share, how to store information, and what will happen if data protection rules are breached.

All organisations signed-up to this Protocol agree to ensure that information is not disclosed without the consent of the service user, and that it is not disclosed to people who are not entitled to have such information or do not intend to use it in the best interests of the service user. All parties should also agree to deal with any breaches of confidentiality by their staff or organisation.

What to do if someone is homeless or inappropriately housed

STEP 1

Once any immediate medical crisis has been dealt with then the patients housing status should be checked.

Patients should be asked for an address and whether they can return to this address

Ward staff are asked to be particularly careful to ask this question where:

- The patient was noted by the West Midlands Ambulance Service as being inappropriately housed or of no fixed abode (NFA)
- The patient was noted by A&E as being inappropriately housed or NFA
- The patient is known to be staying at a hostel or other temporary accommodation
- The patient has been admitted following an overdose and referral from the Psychiatric Liaison Team.
- Where the patient is "known" to the hospital and presents regularly

However **every** patient should be asked this question once their immediate medical crisis has been resolved. If there is any suspicion that that patient is homeless, living

in unsuitable conditions or the patient advises that they are homeless or their home is not suitable then staff should progress to step 2.

STEP 2

If the patient has no accommodation, or is not confident that they can return to their address, the following questions should be asked before deciding what to do next:

- Does the patient come from Lichfield or Tamworth area?
- Can they return to appropriate accommodation elsewhere?
- If they had a home before coming into hospital, why are they not able to go back there?

If the patient is homeless, inadequately housed and comes from either Lichfield or Tamworth then, hospital staff should go to step 3

For any patients who do not reside in Tamworth or Lichfield the Ward Staff should notify the relevant housing options team in the area where the person normally resides.

STEP 3

If the patient is homeless or their housing is not suitable for them to return to and they live in either Lichfield or Tamworth then the Hospital should contact

In Tamworth – the Councils Housing Solutions Service– 01827 709709

In Lichfield – the Councils Housing Options Team – 01543 308703

Alternatively a referral form can be completed (attached as Appendix A) and faxed or emailed to the relevant worker in Tamworth or Lichfield – however there is a recognition that to assist the process the referral should be as simple as possible and therefore a phone call is acceptable. The relevant person from each area will then take some details over the phone, and will arrange a visit if there are more complex needs where a longer interview may be required. This will take place within 2 working days of receipt of the referral in urgent cases and within 5 working days where the cases are less urgent – However in most instances the assessment of the patient will be completed much more quickly than this. Any relevant information the ward staff may have collated about the patient at this point should be passed on to the person taking the referral.

Where the patient is homeless or their housing is inadequate it is essential that the referral to the Housing Services is made as early as possible - this ensures that either accommodation can be sought, or alternative accommodation secured or their main home can be prepared for them to return to allowing them to sustain their existing accommodation

Where the patient is homeless the Housing Solutions Service or the Housing Options Team will then make enquiries as to the person's suitability for housing or their situation and will provide feedback to the referrer on progress and outcomes of the case.

Monitoring and Reviewing the Protocol

Outputs and outcomes from the Protocol will be monitored through use of the following:

• Numbers of people leaving hospital who are seeking help as homeless

Information will be shared on a quarterly basis to monitor numbers and trends.

Those signed up to the protocol will try to ensure that there is one officer in each agency who will take responsibility for ensuring that the protocol is working as it is intended to do and preventing patients from being discharged from hospital either homeless or back to housing which does not meet their needs.

Signatures of those signed up to the Protocol

Appendices

Appendix A – Referral Form Hospital Discharge Policy





Homeless or Unsuitably Housed Patient

Please refer by phone to Tamworth 01827 709459 or Lichfield 01543 308703/ 308711/ 308709 Or Alternative you can Fax the referral to Tamworth 01827 709376 or Lichfield 01543 308712 Finally you can email the referral to Tamworth: <u>housingsolutions@tamworth.gov.uk</u> or for Lichfield: <u>housing@Lichfielddc.gov.uk</u>

	Referrers na	ame:			
	Position:				
	Contact details:				
	•				
Full Name			Consent Obtained? (please circle)	Y	N
Title			DOB		
Address or if Homeless last known address.					
Contact number			Communication needs/issues		
Is the client homeless? (please circle)	Y	N	Accommodation unsuitable? (please circle)	Y	N
Reason for referral (brief description of why the service is needed. If hospital discharge please include reason for admission and expected date of discharge)	Urgent		Routine (5 work		
Risk information (inc. risk to self, staff or others)	(2 working d	ays)	(5 work	ing days)	

	If any risks identified please attach an up to date risk assessment		
Religious or Cultural sensitivities (if any)			
Additional information (Please include any other relevant information including whether any other professionals are involved, Any Learning difficulties, additional needs, mental health, physical health etc.)			

By signing this form you agree to a referral being made to Tamworth Borough Council or Lichfield District Council.

The personal details you give may be shared with certain external agencies that help assess and/or give services, and also as part of any statutory duties requiring such a disclosure. By signing you confirm that you understand and agree with this.

Service user Signature	Referrer Signature	
Date	Date	

