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To: • Acute trust CEOs and COOs

- ICB chief executives
- Community trust CEOs and COOs

cc. • Directors of adult social services

- Local authority CEOs
- NHS England regional teams
- NHS England regional executive discharge leads

NHS England Wellington House 133-155 Waterloo Road London SE1 8UG

1 July 2022

Dear Colleagues

Acute Hospital Discharge '100-Day Challenge'

The National Health and Social Care Discharge Taskforce brings together partners from across health and social care to focus on opportunities to improve discharge. In particular, the taskforce aims to improve the outcomes for patients who no longer meet the 'criteria to reside' so they can be discharged from hospital, cared for in more appropriate settings, and to release much-needed capacity within acute providers.

We recognise and would like to thank you for significant efforts that you have made in improving system flow over several years. The taskforce has found there is still significant variation between hospitals and systems as a result of the processes employed by individual trusts and their partners. As a result, there is a need to codify and systematically implement change across England to ensure consistency and drive improvement for the benefit of patients, carers, and families.

Building on the work of the taskforce and the learning from the 14 NHS pilot sites and 12 social care sites that the taskforce has supported to date, 10 best practice initiatives have been identified that demonstrably improve flow and should be implemented in every trust and system to improve discharge:

- 1. Identify patients needing complex discharge support early
- 2. Ensure multidisciplinary engagement in early discharge plan
- 3. Set expected date of discharge (EDD), and discharge within 48 hours of admission
- 4. Ensuring consistency of process, personnel and documentation in ward rounds
- 5. Apply seven-day working to enable discharge of patients during weekends
- 6. Treat delayed discharge as a potential harm event
- 7. Streamline operation of transfer of care hubs
- 8. Develop demand/capacity modelling for local and community systems
- 9. Manage workforce capacity in community and social care settings to better match predicted patterns in demand for care and any surges
- 10. Revise intermediate care strategies to optimise recovery and rehabilitation.

The 100-day challenge approach

To support this rollout, we are launching a '100-day challenge' and asking you, across your systems and with our support, to adopt the above processes, which we know can make a significant difference in facilitating discharge and improving care for patients.

To deliver against the 10 initiatives there will be a need for engagement across systems with key leaders from the NHS, local government and other relevant local partners, and with support from regional executive discharge leads. We are writing to you about this challenge today, on 1 July, which marks the legal establishment of integrated care systems and presents a significant opportunity for local systems to make real progress in this priority area to improve care for their populations.

A number of the initiatives are directly within the control of NHS and NHS-funded provider organisations, and as such, we are requesting that all system and provider leadership teams ensure there is focused executive and clinical leadership from medical, nursing and allied health professional colleagues. There should also be consistent and appropriate oversight of discharge performance from trust boards and ICBs.

The aim of the 100-day challenge is to improve the current position around discharge and ensure that we are in the best possible position ahead of winter. By 30 September 2022 – which will be 100 days on from our 'soft launch' event on 23 June – we ask that all trusts and systems have:

- a full understanding of the 10 interventions and the associated tiered support offer available from NHS England to assist with implementation
- infrastructure in place to focus on the implementation of the 10 initiatives.

The 100-day challenge will lead to recommendations for the ongoing improvement, support and monitoring that systems may need around discharge going forwards.

Next steps

A dedicated national NHS England team will work with each regional executive discharge lead to establish a launch meeting in each system, that will ensure there is a focus on improving processes and performance around discharge and working across the wider system to address challenges. In the meantime, please do begin to discuss as a system your current application of the 10 initiatives, and identify leadership and operational teams, and governance and reporting mechanisms, to help drive implementation over the 100-day period.

I would like to take this opportunity to thank you and your teams for your continued hard work on the important issue of improving discharge in the challenging context of ongoing pressures throughout the health and care system.

Yours sincerely,

Sir David SlomanChief Operating Officer

NHS England