

## **How to manage Unsatisfactory/Adverse Hospital Discharge and when to consider a referral to Safeguarding**

**Note: The following guidance applies in respect of discharge only (refer to separate document in relation to admission).**

### **1) Hospital Discharge**

- ❖ Discharge is the term used when a person leaves hospital, as a period as an in-patient or following a visit to an accident and emergency department. A key aim of effective discharge planning is to reduce hospital length of stay and unplanned readmission to hospital, and to improve the co-ordination of services following hospital discharge.
- ❖ When concerns are identified around discharge arrangements, the following guidance can be used to support the decision making and determine whether a safeguarding concern should be raised.
- ❖ The guiding principle is to consider whether an individual with care and support needs has been placed at risk of, or has suffered significant harm as a consequence of unsatisfactory and/or adverse discharge arrangements. The harm may include care not provided resulting in deterioration of health or confidence, and avoidable readmission to hospital.

### **2) Unsatisfactory/Adverse Discharge may present as the following**

- ❖ Lack of engagement of the individual in discharge planning
- ❖ Lack of involvement and engagement of relevant others (i.e. professionals, care providers, family and friends),
- ❖ Lack of recognition of complex care and support needs
- ❖ Failure to consider and apply MCA and appropriate Best Interests
- ❖ Poor quality of discharge planning, including appropriate referrals
- ❖ Poor sharing of information (including failure to provide appropriate documentation)
- ❖ Failure to respond to identified concerns
- ❖ Failure to supply correct prescription and medication

### **3) Responsibilities of the Regulated Care Providers**

Whenever there are concerns identified around a discharge, in the first instance, it is the responsibility of the Care Provider to:

- ❖ Identify the nature of the concern
- ❖ Ensure the immediate safety of the individual, involving relevant professionals
- ❖ Refer to the organisations safeguarding policy ([LSAB Guidance for raising Safeguarding Concerns](#)).
- ❖ Contact the [ward/department](#) of the organisation responsible for the discharge as per details provided on discharge paperwork (or contact main switchboard for the relevant hospital) to inform of the concern.
- ❖ Seek a prompt and safe resolution with the hospital ward/department, where this is possible.
- ❖ Keep the individual and family, if appropriate, informed of the concern and the actions being taken.

*\*Local hospital and Local Authority contact details are included on page 3 of this document.*

**The CQC, as part of the inspection process, will require recorded evidence to confirm that all concerns have been addressed appropriately, with necessary actions having been undertaken.**

## **Raising a Safeguarding Concern Following an Unsafe and/or Unsatisfactory Hospital Discharge**

Under the Care Act 2014\*, agencies have a legal responsibility to raise safeguarding concerns where there is a **suspicion that abuse** of a vulnerable adult has occurred which may be as a result of neglect or omission of care. This is supplementary to the requirements set out above around the management of service user incidents.

*\*Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action'.*

### **1) Raising a safeguarding concern re unsafe and/or unsatisfactory hospital discharge**

The Regulated Care Provider must consider whether or not the concern has resulted in the individual with care and support needs having been placed at risk of, or suffered **significant harm as a result of the discharge arrangements**.

A safeguarding concern should be raised where there are concerns that:

- Themes from the same discharging organisation are recurring
- There has been a failure to respond to signs of neglect and/or abuse
- There has been a failure to act on evidence of omission of care

The list is not exhaustive, all incidents should be considered fully and in partnership with the discharging organisation in the first instance.

### **2) When a safeguarding concern does not need to be raised**

A safeguarding concern does not need to be raised if the concern is:

- Resolved in an appropriate and timely manner (resulting in the removal of the risk of harm and/or no actual harm has occurred) and the concern was:
- An isolated incident with a reasonable explanation given regarding the circumstances
- Resolved to the satisfaction of the individual involved.

In these situations, the following action should be taken:

- The concern should be formally documented and recorded in the individual's record/care plan.
- The details of the concern shared with the discharging organisation/hospital safeguarding team to reduce the risk of recurrence.

### **3) Systemic failings**

Where there are systemic failings in a hospital, ward or departments discharge planning process which leads to repeated concerns from discharges, a safeguarding concern should be raised under organisational abuse.

**This document is intended as a guidance tool, and should be used in conjunction with professional judgement. When there is any doubt as to whether to raise a safeguarding concern, staff should always speak to the safeguarding lead in their organisation, and if further advice is required to the local authority safeguarding team via the Customer Access Service safeguarding line: 0300 123 6720 or the respective hospital safeguarding duty team.**

## CONTACT INFORMATION

<b>HOSPITALS</b>			
<b>Organisation Name</b>	<b>Hospital Name</b>	<b>Main Switchboard</b>	<b>Adult Safeguarding Duty</b>
Blackpool Teaching Hospitals (BTH)	Blackpool Victoria Hospital	01253 300000	01253 953262
BMI Healthcare	The Beardwood Hospital, Blackburn	01254 507607	
	The Lancaster	01524 597502	
East Lancashire Hospital Trust (ELHT)	Royal Blackburn Hospital	01254 263555	01254 732848
	Burnley General Hospital		
	Accrington Victoria Hospital		
	Clitheroe Community Hospital		
	Pendle Community Hospital		
Lancashire South Cumbria Foundation Trust (LSCFT)	Longridge Community Hospital	01772 777400	01772 777153
Lancashire Teaching Hospitals (LTH)	Royal Preston Hospital	01772 716565	01772 523676
	Chorley General Hospital	01257 261222	
Ramsay Healthcare	Euxton Hall Hospital	01257 276261	01257 276261
	Fulwood Hall Hospital	01772 704111	01772 704111
	Renacres Hospital, Ormskirk	01704 841133	01704 842001
Southport & Ormskirk Hospital Trust (SOHT)	Southport Hospital	01704 547471	01704 705248
	Ormskirk Hospital		
University Hospitals Morecambe Bay Trust (UHMBT)	Royal Lancaster Infirmary	01524 65944	01524 512425
	Furness General Hospital	01229 870870	
	Westmorland General Hospital	01539 732288	
	Queen Victoria Hospital	01524 406665	
	Ulverston Community Health Centre	01229 484045	

<b>LOCAL AUTHORITY</b>		
<b>Organisation</b>	<b>Contact Number</b>	<b>Email</b>
Blackburn with Darwen – Safeguarding Team	01254 585949	Email <a href="mailto:clo@blackburn.gov.uk">clo@blackburn.gov.uk</a>
Blackpool – Contact Adult Social Care	01253 477592	Email <a href="mailto:adult.socialcare@blackpool.gov.uk">adult.socialcare@blackpool.gov.uk</a>
Lancashire County Council – Customer Access Service	0300 123 6720	<a href="#">Complete Safeguarding Alert Form for professionals</a>

<b>CLINICAL COMMISSIONING GROUPS (CCGs) – Safeguarding Team Contact Details</b>	
<b>Organisation</b>	<b>Contact Number</b>
<b>Central Area</b>	<i>Email – <a href="mailto:csrccg.safeguarding@nhs.net">csrccg.safeguarding@nhs.net</a></i>
Chorley & South Ribble CCG	01772 214376
Greater Preston CCG	01772 214376
West Lancs CCG	01772 214376
<b>East Area</b>	<i>Email: – <a href="mailto:Penninelancs.safeguardingteam@Nhs.net">Penninelancs.safeguardingteam@Nhs.net</a></i>
East Lancs CCG	01282 644987
<b>North Area</b>	<i>Email: – <a href="mailto:Mbccg.gst@nhs.net">Mbccg.gst@nhs.net</a></i>
Fylde & Wyre CCG	01253 956555
Morecambe Bay CCG	01524 518957

## LINKS TO BEST PRACTICE GUIDANCE

### **NICE Guidance**

<https://www.nice.org.uk/guidance/ng27>

### **Age UK Factsheet 37**

[https://www.ageuk.org.uk/globalassets/age-uk/documents/factsheets/fs37\\_hospital\\_discharge\\_fcs.pdf](https://www.ageuk.org.uk/globalassets/age-uk/documents/factsheets/fs37_hospital_discharge_fcs.pdf)

### **Care Act 2014 – Reference to Discharge Planning**

[www.legislation.gov.uk/ukxi/2014/2823/pdfs/ukxi\\_20142823\\_en.pdf](http://www.legislation.gov.uk/ukxi/2014/2823/pdfs/ukxi_20142823_en.pdf)

### **Patient Advice and Liaison Service**

Find your nearest Patient Advice and Liaison Service, known as PALS. The service has been introduced to ensure that the NHS listens to patients, their relatives, carers and friends, and answers questions and resolves concerns as quickly as possible.

[https://www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-\(PALS\)/LocationSearch/363](https://www.nhs.uk/Service-Search/Patient-advice-and-liaison-services-(PALS)/LocationSearch/363)