

The Rt Hon Rishi Sunak MP  
The Chancellor of the Exchequer  
HM Treasury  
1 Horse Guards Road  
London  
SW1A 2HQ

23 September 2020

Dear Chancellor,

### **Discharge funding in the Comprehensive Spending Review**

As we approach the Comprehensive Spending Review in the autumn, we know that the Treasury will face difficult choices about where Government money will be spent in the coming three years. There is no doubt that the economy is entering a challenging period and the coming few months will be tough for many people.

The COVID-19 pandemic has been devastating for older people, with nearly 90% of deaths from COVID-19 taking place in people aged over 65.<sup>1</sup> The pandemic has shone a light on the crisis in social care, something this Government is well aware of as the Prime Minister has made several public commitments to resolve it before the end of this Parliament. A sustainable social care solution, combined with continued implementation of the Ageing Well programme in the NHS Long Term Plan, will make a real difference to the lives of millions of older people in England, particularly those living with frailty and complex health and social care needs.

The announcement in August of additional funding of £588million to support the health and social care needs of people discharged from hospital was a welcome boost.<sup>2</sup> Appropriate health and social care support in the 6-week period immediately after a hospital stay is critical to an individual's chances of rehabilitation and recovery. Without it, older people risk expensive hospital re-admission or referral to a care home, when the best option for the majority is to return to and remain in their own homes.

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<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/coronaviruscovid19roundup/2020-03-26>

<sup>2</sup> <https://www.gov.uk/government/news/more-than-half-a-billion-pounds-to-help-people-return-home-from-hospital>

We are concerned that this NHSE funding is due to last only until the end of this financial year. The need for post-discharge support will not disappear at the end of March 2021, particularly in the context of a second Covid wave, and people will continue to come out of hospital with ongoing care and support needs. The NHS and social care system cannot operate without certainty of funding and a six-month cash injection, while welcome, is not sufficient to allow local systems to manage population health during a second Covid wave and to plan for the future. Systems need to be able to develop and invest in a multidisciplinary workforce across health and social care, as set out in the NHS People Plan 2020/21.<sup>3</sup> Building this workforce will take time and money, hence the need for long term investment in skills and capabilities across a wide variety of professional groups.

Providing good quality post-discharge reablement and rehabilitation in the community for six weeks while longer term care and support are arranged will release vital capacity in hospital and enable people to recover well from their period of ill health, reducing the demand for longer term care and support. This will allow person-centred decision-making, ensuring that the care and support provided are what the individual needs. The 'discharge to assess' model, which is the lynchpin of the new guidance, has been shown to reduce the need for intensive and longer term support when compared to assessment of patients' needs in hospital. This ultimately enables more people to live independently in their own homes and, in turn, results in fewer readmissions to hospital, reducing acute care costs and creating hospital capacity in the NHS. Caring for people in hospital or in a care home environment is very expensive and often leads to increased care needs in the long term. Providing care at home is better value for the NHS, as well as leading to better health outcomes, a better care experience and a more resilient and sustainable health and care system.

However, this will only be the case if long-term funding is available – six weeks of post-discharge care and support must become standard and funding must be available for this through NHS baseline funding. We urge you to announce this measure in the upcoming Comprehensive Spending Review. While not the solution to the social care crisis that we so urgently need, it is a step in the right direction. It will make a world of difference to older people being discharged from hospital across the country, and to their unpaid carers, and over the long term will reap savings on the initial investment.

We would also urge you and NHS England to review how this funding is allocated. Currently it is paid per person (or per care package) on a reimbursement basis. We would suggest that this is an impractical and overly burdensome way of distributing this funding and does not allow for systems to plan and create the required workforce capacity. We would suggest that going forward this funding should be allocated according to a formula

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<sup>3</sup> <https://www.england.nhs.uk/ournhspeople/online-version/>

based on population and weighted for age and deprivation.

Might we also urge you to ask NHS England to similarly review both the Better Care Fund and Continuing Health Care funding to ensure they are delivering the best value for money. One of the four [Grand Challenges](#) within the government's Industrial Strategy<sup>4</sup> is focussed on meeting the needs of an ageing society by promoting ageing well and caring well. It is crucial that these funds work optimally together in pursuit of this ambitious and important goal.

The upcoming Comprehensive Spending Review is an opportunity to make the initial six-month discharge funding recurrent, enabling older people to lead healthier, more independent lives at home for longer, and saving money by reducing avoidable expensive hospital and care home stays. As clinicians caring for those who are the largest group of users of the NHS, we urge you to signal the Government's commitment to ensuring older people are supported to live independently at home for longer by ensuring ongoing funding for patients discharged from hospital.

We would be happy to discuss this with you further – if you would like to take us up on this, please contact our Policy Manager, Sally Greenbrook, at [s.greenbrook@bgs.org.uk](mailto:s.greenbrook@bgs.org.uk).

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Tahir Masud', written in a cursive style.

**Professor Tahir Masud**

BGS President

Consultant Physician and Honorary Professor, Nottingham University Hospitals NHS Foundation Trust

Supported by:

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<sup>4</sup> <https://www.gov.uk/government/publications/industrial-strategy-the-grand-challenges/industrial-strategy-the-grand-challenges>

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Cc: The Rt Hon Boris Johnson MP, Prime Minister  
The Rt Hon Matt Hancock MP, Secretary of State for Health and Social Care  
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