

4 April 2017

Our Ref: RFI 19743

Dear

**Freedom of Information Act 2000
Information in Relation to Delayed Discharges from Mental Health Inpatient
Units from 1 January 2015 to Date**

I am writing to confirm that the South Eastern Health & Social Care Trust (the Trust) has now completed its search for the information relating to the above which you requested on 28 February 2017.

A response to each of the questions raised has been provided by Adult Services & Prison Healthcare Directorate and is attached in Appendix A.

Under the terms of the legislation, if you are unhappy with this response you have the right to seek a review within the Trust in the first instance. If you wish to do so, please write to me at the address below.

If after such a review you are still unhappy with the response, you have the right to appeal to the Information Commissioner who will undertake an independent review. The Information Commissioner can be contacted at The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, SK9 5AF.

If you have any queries about this letter, please do not hesitate to contact me. Please remember to quote the reference number above in any future communications.

Yours sincerely

**Lynda McAree (Miss)
Head of Information Governance &
Directorate Support**

Enc

The following freedom of information act request is about delayed discharges from your mental health inpatient units.

Q1. Please state the five longest delays (in days) which patients who were ready for discharge, have had before they were able to leave the hospital during the period from January 1st 2015 to date.

For each of these delayed discharges, please state:

- i) The age of the person concerned.
- ii) The original reason for admission to hospital.
- iii) The reason for the delayed discharge.
- iv) The date on which the patient was ready for discharge.
- v) The date on which they were in fact discharged.

A1. The five longest delays (in days) which patients were ready for discharge during the period 1 January 2015 to date are provided below.

This identifies the time period the patients were actually in delay and excludes periods of time that a patient was too sick to discharge:

- i) Patient 1: 641 days
- ii) Patient 2: 576 days
- iii) Patient 3: 423 days
- iv) Patient 4: 339 days
- v) Patient 5: 149 days

A1i) Please see information provided in Table 1 below which has been broken down by the age band which the identified patients with the longest delayed discharge:

Table 1

Age Band	Number of Patients
30-39 years	Patient 5
40-49 years	Patient 3
50-59 years	0
60-69 years	Patient 1
70-79 years	Patients 2 & 4

A1ii) A list of reasons for admission is provide below:-

- 1. Patient 1: An alcohol related brain injury
- 2. Patients 2,3,4,5: Schizophrenia

A1iii) The reason in three cases for the delayed discharge was the lack of suitable community placements to meet the needs of these patients. This was also the case in the two other delays, which were also compounded by the requirement to undergo legal proceedings before discharge could be achieved.

A1iv) The dates on which individuals were ready for discharge is outlined in Table 2 below, by quarter:-

Table 2

Quarter	2014	2015	2016
Quarter 1 (April – June)	0	Patients 1 & 4	Patient 3
Quarter 2 (July – Sept)	0	0	Patient 5
Quarter 3 (October – December)	Patient 2	0	0
Quarter 4 (January – March)	0	0	0

A1v) The dates on which individuals were in fact discharged is outlined in Table 3 below, by quarter:-

Table 3

Quarter	2016	2017
Quarter 1 (April – June)	0	Patient 4
Quarter 2 (July – Sept)	Patient 2	0
Quarter 3 (October – December)	Patient 5	0
Quarter 4 (January – March)	Patient 1	0

Patient 3 remains on leave from hospital and the full discharge date is yet to be confirmed.

Q2.

- i) On 28th February 2017, how many of your acute beds were occupied by people who were ready for discharge?
- ii) What percentage of your overall number of acute beds were being used by people who were ready for discharge?

iii) Have you had to open extra transitional, re-enablement or similar beds to meet the additional demand caused by delayed discharges?

iv) If yes, please state how many beds and the cost per day of providing these.

A2i. On the 28 February 2017, there were four acute mental health beds occupied by individuals who were ready for discharge.

A2ii. The percentage of overall acute mental health beds being used by people who were ready for discharge is 2.88%.

Aiii. The Trust does not deploy transitional or re-enablement beds caused by delayed discharges.

Aiv. Not Applicable.