

Guidance for Safeguarding Concerns

Appendix K: How to Manage Unsafe Hospital Discharge and When to Consider a Referral to Safeguarding

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 coordination 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 unsafe discharge arrangements. The harm may include care not provided resulting in deterioration of health or confidence, and avoidable readmission to hospital.

2) Unsafe 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 and whether the concern is significant and has a detrimental effect on the person who has been discharged.
- Contact Adult Social Care to inform them of an unsafe discharge where there is significant risk and detrimental effect on the person
- Ensure the immediate safety of the individual, involving relevant professionals
- Refer to the organisations safeguarding policy and the safeguarding indicator chart for guidance. Contact Blackpool Teaching Hospital to resolve any smaller issues directly, 01253 300000 © Keep the individual and family, if appropriate, informed of the concern and the actions taken.



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 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 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:

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.

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