

Social care and the NHS

Social care largely delivered by Councils with the help of a range of contractors and service suppliers needs to work smoothly alongside the NHS.

Councils have a vital role to play in helping reduce the burden on NHS hospitals. It is too easy to place elderly and infirm individuals into hospital where they should be safe, even though they do not need hospital treatment. They may go in for tests, only to have to stay because there is no sufficient care package to allow them to go home alone. Hospitals are also open all hours and at week-ends, whereas social care services may be more restricted outside weekday regular hours.

Social care nurses or executives may think it prudent to send someone for tests after an incident even though there are no signs of harm and even though the patient is saying they are not in pain or difficulty. It often takes time to assemble a case conference and assessment to upgrade care so an individual can look after themselves with suitable support.

Social care also needs to work well alongside GPs, and with hospitals after the discharge of patients. Elderly and infirm individuals may need help with daily tasks, and need some supervision or assistance with a course of treatment at home. It can be cheaper as well as better to take the care to the patient, but needs organising successfully.

Councils say they need more resource to do their jobs well, whilst hospitals are worried that they are still having to look after people who could manage at home with suitable help. The border disputes between the NHS and social care go back a long way and have happened under a variety of governments. There is no easy solution, but it would be good if Councils and the NHS can improve their joint working where there currently issues with bed blocking or inadequate medical back up out of hospital.

I would be interested in comments on this matter. I am not raising it as a result of any local complaints which I would handle in another way.