

Dementia patients will be 'trapped on wards' over the Christmas period

Chris Smyth, Health Editor
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NHS hospitals are already up to 99 per cent full, but wards will only get busier
LYNNE CAMERON/PA

At least 1,400 people with dementia will be stuck in hospital on Christmas Day, up two thirds in five years, an analysis has found. Dementia patients make up a quarter of the estimated 5,600 people who will spend Christmas in a hospital bed because of delays in finding care for them elsewhere, according to calculations by the Alzheimer's Society.

Wards are "being turned into waiting rooms" because the social care system is failing to cope with the rising demand at a time when budgets have been cut, the charity said. Hundreds of thousands more older people are going without help with tasks such as washing and dressing as councils spend less on social care than seven years ago.

NHS hospitals are up to 99 per cent full shortly before the busy winter period, in part because the problems in social care mean that more older patients are arriving who cannot be sent home without help, which councils are struggling to provide.

Jeremy Hughes, the chief executive of the Alzheimer's Society, said: "From the woman who spent two months on a bed in a corridor because there were no available care home places, to

the man who died after months of waiting left him debilitated by hospital-acquired infections, people with dementia are repeatedly falling victim to a system that cannot meet their needs.”

He used NHS data from September for the number of people stuck on hospital wards — despite being medically fit to leave — to extrapolate numbers for the end of this month.

There was no mention of social care in the budget last month, despite Philip Hammond, the chancellor, handing the NHS a £2.8 billion bailout. A similar sum is thought to be needed to rescue the social care system, which has care companies close to bankruptcy.

Government plans to reform the system have been delayed until the summer after the issue helped to derail Theresa May’s election campaign. Plans to make people contribute more towards their care at home were called a dementia tax, but ministers argue that it would be unfair to make younger taxpayers fork out the costs.

In a letter to The Times, Eileen Burns, president of the British Geriatrics Society, and Amanda Thompsell, of the Royal College of Psychiatrists, urge the government to pay more attention to the problem of patients “well enough to go home, but trapped because of a social care system starved of funding”.

Professor Burns said that while many stuck in hospital had no close family, others had such severe needs that it was hard for families to take them even for a day. “There may be logistical issues eg can Mum manage the stairs . . . issues around whether or not the older person and their family are comfortable (on both sides) with help with more personal activities like toileting,” she said.

A Department of Health spokeswoman said: “This is a very small

survey based on statistics from September and isn't representative of the actual situation. No one should be stuck in hospital when their treatment has finished, that's why we've given an extra £2 billion funding for social care over the next three years."

5 comments

Donald Stickland

Bring back "Cottage Hospitals" - instead of flogging them off - as a half-way house (with some medical facilities immediately available) for re-integration to the patient's locality, to improve the general shambles of NHS discharges.

NHS need/s to more efficiently manage their scarce resources better, in my opinion, raised on UK resident compulsory taxpayers, whatever alleged cowardly Kerslake opines. As I wrote some 2 days ago, on this Times webpage: <https://www.thetimes.co.uk/article/lord-kerslake-resigns-as-nhs-trust-chief-oprotest-at-underfunding-w0j2jcf2g>

How about improving the discharge of inpatients ?

Here's a classic case study for "Shashi" :

Surgeon to patient "Shashi": It's 9am Shashi, and I've got good news: You've been in hospital following your operation 3 days ago, and you're now medically safe and fit to go home ...

Surgeon to patient "Shashi": ... BUT there's a problem. The pills ...

Surgeon to patient "Shashi": ... they may arrive at your bedside here at 11am ...

Surgeon to patient "Shashi": ... or they may arrive here, at 11pm

...

Surgeon to patient "Shashi": ... Is that OK ?

All of which raises this Q: Why can't patient's packs to take out be routinely be pre-planned for, and stored on the ward overnight, shashi, for handing over to the patient at around 10am ?

[borris](#)

The problem is that care and nursing homes are private and they can pick and choose who they want. They want the least amount of hassle for their money.

[peter rogol](#)

[@borris](#) The problem is lack of care homes as they receive too little funding per resident to remain open.

[Donald Stickland](#)

[@borris](#) ... spot on, borris, & Rec'd .

[Jack](#)

The Department of Health is just plain wrong on this one. My mother-in-law is just one of three such people on the same ward. In her case: dementia; social service funded care home; fall and broken femur; local hospital; can't do rehabilitation because she can't understand the instructions; original care home won't take her back because she needs nursing; other care homes won't take her because she needs nursing...