



# COVID-19 EPRR Community Daily Discharge SitRep

## Technical specification

Version 2, 5 May 2021

### Introduction

This is a revised version of the guidance previously relating to the COVID-19 EPRR Community Daily Discharge SitRep, to reflect changes to this data collection highlighted in **yellow**.

We have added and revised content to reflect the development of the new option to discharge people to hotels as temporary residences, as they are medically fit for discharge but currently unable to return to their own home. The discharge destination option 'Hotel as temporary residence' has been added to question 4 of this collection. For more information on this please see the [letter of 20 January on improving discharge patient flow from acute settings](#).

**It is important that this is a clinically driven data collection, not one that should be done from information that may be an interpretation of the medical opinion from another information source.**

Thank you for your help in collecting this data. Outputs of this SitRep are regularly reviewed by local, regional and national teams and your returns are helping to drive the effective implementation of wider Discharge to Assess policies, leading to better care for patients and service users.

### Background

1. The Community Daily Discharge Situation Report (SitRep) collects data on the inpatient population of community hospital bed providers and their discharge status

each day using the Strategic Data Collection Service (SDCS) portal. This guide outlines how to complete the SitRep.

## Submission process

2. The submission template will need to be populated by all organisations listed as providing bedded services within community hospitals for the purposes of physical health recovery and rehabilitation. This will include:
  - NHS community trusts
  - acute trusts that also provide community services which include community hospitals (with only their community hospital beds covered by this data collection)
  - mental health trusts that provide physical health community services which include community hospitals (with only their community hospital beds covered by this data collection)
  - community interest companies and others that provide physical health community services and community hospital beds.
3. Please note that, to avoid double counting, organisations should not submit data on behalf of any other trust – those trusts will now be submitting their own data directly.
4. Daily reports must be signed off by a duty director, or other senior manager, appointed to this role by the trust's chief executive. It is the responsibility of each trust to ensure its return is accurate and reflects the real position for the relevant time period.
5. The deadline for this collection is 11am, and there will be no opportunity to amend the data submitted. During the submission period from 8 to 11am each day, trusts are expected to submit data as at 17.00 the previous day.
6. The collection will run seven days a week, so uploads will run over the weekend, to the same timetable as during the week, in line with COVID-19 incident arrangements.<sup>1</sup>

## Guidance notes on data items

7. The full, revised set of questions for this data collection are reproduced below, with commentary.

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<sup>1</sup> See: COVID-19 NHS preparedness and response – notification of return to Incident Level 4.  
[https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/11/KW\\_Level\\_4-letter\\_4Nov.pdf](https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/11/KW_Level_4-letter_4Nov.pdf)

## Contacts and resources

8. Please direct queries relating to this collection to:  
[england.communityhealthservicesdata@nhs.net](mailto:england.communityhealthservicesdata@nhs.net)
9. An Excel workbook has been produced to assist trusts to complete this data return, and an updated, improved version of this will be supplied to nominated provider SitRep leads.
10. The Excel workbook has been carefully designed to allow its quickly completion at the morning and afternoon board rounds under the guidance of clinicians, to keep the burden of collecting this important data to a minimum (though trusts can use other systems they may already have in place – the use of the Excel workbook is not mandatory).

## SitRep questions

1. The number of patients who meet the criteria to reside in total, and split by the number falling into the following reasons to reside categories:
  - a. **Highly dependent** – the person currently has a significant level of dependency that requires 24-hour support and is currently unable to return home without significantly impacting on their future long-term recovery, eg needing the assistance of two to three people to transfer and showing good progress in recovery.
  - b. **Increased dependency** – the person is showing a higher level of dependency and unable to return home with the level of support available or where behavioural issues are impacting recovery.
  - c. **End of life care** – end of life care is being provided in the community bed and all other options have been discussed/patient choice decision.
  - d. **Waiting for information from acute trust** – only to be used where this is creating an issue with the ongoing interventions, eg clarification of a weight bearing status postoperatively is preventing ongoing input.
  - e. **Medically unwell** – where the person's medical condition is delaying therapeutic intervention and progress on the pathway.
  - f. **No plan** – where the patient's function will allow for continuation of their recovery at home but there is no plan or the plan is still unclear.

This is a **mandatory field** and must be completed.

2. The number of patients who meet the criteria to be discharged by 17.00 that day.

This is the count of all patients who meet the criteria to be discharged. 'Discharged that day' refers to the period from midnight on the previous day to midnight on the current day for which the data is being collected.

This is a **mandatory field** and must be completed.

3. The number of patients who were discharged by 17:00.

This is the number of patients as specified in question 2 who were actually discharged by 17:00 or shortly thereafter.

Please note that this number will be automatically populated as the sum of the numbers submitted for the different sub-categories under question 4. This number needs to be lower or the same as the number submitted under question 2. If this number is higher it will cause an 'error', meaning that data cannot be submitted.

This is a **mandatory field** and must be completed.

4. Of the patients who have been or will be discharged by 17.00, the number intended to be discharged to the following locations:

- a. **Home without reablement support** – please count all discharges to a patient's home address where there is no reablement support.
- b. **Care home** – please count all discharges to a care home if this is not the same address they were admitted from (eg the patient previously lived in their own home but is discharged to a care home).
- c. **Hospice** – please count all discharges to a hospice.
- d. **Home with reablement support** – please count all discharges to a patient's home address where reablement support has been put in place – this includes discharge to assess pathway 1.
- e. **Other** – please count all discharges to any other location not included under a. to d. This could include a hostel, a hotel or a relative's or friend's home or any other new or temporary accommodation, which is not their normal home address.
- f. **Designated setting** – please count all discharges to designated settings as described in the government guidance 'Discharge into care homes: designated settings'.

**g. Hotel as temporary residence** – please count all discharges to any appropriate hotel (in line with guidance issued) which accepts a transferred patient from a hospital setting (acute or community) as an interim discharge location, before being discharged to their own home.

This is a **mandatory field** and must be completed.

**Data for question 5 relates to government policy on discharge of people to care homes and requirements around COVID-19 testing prior to discharge – set out in ‘Discharge into care homes: designated settings’.**

5. Of the total number of people who are to be discharged to a care home, the number who continue to reside in hospital because they have not received a COVID-19 test result within 48 hours of their prospective discharge (unless this is not required under the terms of ‘Discharge into care homes: designated settings’).

This is a **mandatory field** and must be completed.

**Data for question 6 relates to government policy on discharge of care home residents with a COVID-19 positive test to designated settings – set out in ‘Discharge into care homes: designated settings’.**

These designated settings will be used for those who would otherwise be returning to the care home from where they were admitted, or for the small proportion of individuals who are unable to go home and are therefore being discharged to a care home for the first time.

6. Of the total number of care home residents who are to be discharged, the number who have received a positive COVID-19 test result and who continue to reside in hospital because they are awaiting a place in a designated setting.

This is a **mandatory field** and must be completed.