

**RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL
MUNICIPAL YEAR 2014/15**

**COMMUNITY & CHILDREN'S SERVICES
SCRUTINY COMMITTEE**

15TH APRIL 2015

**REPORT OF THE GROUP DIRECTOR,
COMMUNITY & CHILDREN'S SERVICES**

Agenda Item 5

**COMMUNITY AND HOSPITAL
INTERFACE AND DELAYED
TRANSFERS OF CARE (DToC)**

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1. PURPOSE OF THE REPORT

To keep Members updated on work that is being undertaken to support the interface between community and hospital services and update Members on the numbers of people whose discharge from hospital is delayed.

2. RECOMMENDATIONS

It is recommended that Members:

- 2.1 Note the work being undertaken to ensure that hospitals are able to manage the demand on their services over the winter months.
- 2.2 Note the number of delayed transfers of Care for Social Care reasons

3. BACKGROUND

- 3.1 The ability of Local Health Boards and Councils to work together to ensure that people are discharged from hospital in a timely and safe manner continues to be seen as measure of success in developing partnership working.
- 3.2 Over the last winter the hospitals across Wales experienced exceptional demand on their services and on a number of occasions were closed to new admissions.

4 WORK UNDERTAKEN

- 4.1 This winter has again seen unprecedented pressures on the hospital system and the demands it places on both Community Health and Social Care services.
- 4.2 Particular pressures came immediately after Christmas when for a period of four weeks the District General Hospitals were at level 4 for a number of days at a time. Level 4 means that the hospital is closed to all new admissions.

- 4.3 A winter plan was agreed with Merthyr, RCT and Cwm Taf UHB to mitigate the risks they included actions for all of the partners, some of the key actions are identified below:
- A more proactive approach from senior managers to ensuring timely discharge
 - An ability to manage increased demand by opening additional bed capacity
 - Continuing to make best use of community resources such as district nursing, intermediate care and reablement services.
 - Closer working with regard to escalation
- 4.4 In addition the Health and Social care system benefitted from an Intermediate Care fund (ICF), a one year grant from Welsh Government amounting to over £4 million across the Cwm Taf region.
- 4.5 The grant was used in part to add additional capacity within the Intermediate care and reablement service and to extend the service to people with dementia.
- 4.6 Additional capacity was also provided to social workers who had a focus on hospital discharge with particular emphasis later in the year on complex discharges from the community hospitals.
- 4.7 The ICF was also used to work with housing providers to increase the capacity of specialist units for people with complex disabilities, to provide increased Health support to the nursing home sector to avoid unnecessary hospital admissions.
- 4.8 Whilst the ICF fund was initially for a year Welsh Government indicated that monies will be made available, at a reduced level, through the NHS to continue some level of funding. At the time of writing Welsh Government have not confirmed the detail of the funding but Cwm Taf, Merthyr and ourselves have been prioritising schemes that we would want to continue with into 2015-2016.
- 4.9 Cwm Taf LHB are reporting that these actions are having a positive impact on ensuring that they continue to have capacity to manage the demand and pressures on hospital admissions.

5. DELAYED TRANSFER OF CARE

- 5.1 The work identified above is improving the flow of patients through the hospital, inevitably though there will continue to be a very small number of people who remain in hospital longer than they need to. Work is ongoing to consider whether a better performance measure which will have more meaning and value to partners is the length of stay of an individual. For instance, if a person's length of stay was beyond an agreed number of days, actions would be triggered to review the discharge planning arrangements to ensure timely discharge.

5.2 Our performance on delayed transfers is given in the following tables and Members will see very poor performance during the summer months. This was due to high staff sickness levels and the level of demand from the hospitals. Our sickness levels in the Assessment teams has fallen and the increased capacity generated from the ICF grant has led to considerable improvement over the last two months.

5.3 Delayed transfers of care for social care reasons

	2011/2012	2012/2013	2013/2014	2014/2015
April	5	8	4	13
May	3	5	5	13
June	13	7	6	14
July	15	3	3	28
August	13	5	12	21
September	9	7	13	14
October	11	1	5	16
November	11	5	6	17
December	5	8	3	11
January	6	13	4	5
February	8	6	8	4
March	10	7	13	
Total	109	75	82	156* up to Feb 2015

5.4 For patient related reasons

	2011/2012	2012/2013	2013/2014	2014/2015
April	12	7	8	4
May	18	6	7	7
June	6	8	4	7
July	9	9	13	10
August	10	10	7	8
September	11	7	7	9
October	13	4	10	7
November	14	9	6	5
December	12	13	8	5
January	11	9	6	2
February	6	7	5	4
March	9	4	8	
Totals	131	93	89	68* up to Feb 2015

5.5 Comparisons with previous years

Year	Target	Performance
2011/12	5.86	5.40
2012/13	5.84	5.81
2013/14	5.75	4.46
2014/15	5.30	8.36 up to Feb 2015

6. CONCLUSION

- 6.1 There continues to be a focus on addressing the issues that will reduce the pressure on the hospital system. Rhondda Cynon Taf are contributing to this work to ensure there is clear and timely communication between our partners.
- 6.2 Whilst seeking to address the immediate pressures we are also ensuring that longer term solutions, such as intermediate care and reablement are sustainable into the future, the continuation of the ICF fund to support key services will be vitally important in continuing to manage the hospital community interface.

LOCAL GOVERNMENT ACT 1972

AS AMENDED BY

THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

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Item: Community and Hospital Interface and Delayed Transfers of Care (DtoC)

Background Papers

WELSH GOVERNMENT

**DELAYED TRANSFERS OF CARE
DATABASE IMPLEMENTATION & PROCESS: GUIDANCE NOTES
VERSION 3 (UPDATED OCTOBER 2009)**

**LG/ML/001/11 SUPPLEMENTARY GUIDANCE TO WELSH HEALTH CIRCULAR
2004(066): PROCEDURES WHEN DISCHARGING PATIENTS FROM HOSPITAL
TO A CARE SETTING**

**TEN HIGH IMPACT UNSCHEDULED (USC) CARE TRANSFORMATIONAL STEP
(JUNE 2011)**

<http://www.wales.nhs.uk/documents/Ten%20High%20Impact%20Steps%20to%20Transform%200%20Unscheduled%20Care%20-%20June%202011%237%20%285%29.doc>

**10 HIGH IMPACT CHANGES FOR COMPLEX CARE
<http://www.complexcarewales.org/Home.aspx?SitePageID=150>**

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