## CYNGOR SIR POWYS COUNTY COUNCIL

## County Council 22<sup>nd</sup> October 2014

**REPORT AUTHOR:** County Councillor Darren Mayor, Portfolio Holder for

**Adult Social Care** 

SUBJECT: Question from County Councillor John Morris

Kirsty Williams AM has received a number of letters highlighting delayed transfer of care, bed blocking because the care agency was unable to supply care.

These include a letter from Dr. D. Paton Chair of the Powys sub-committee of the Dyfed Powys Local Medical Committee. It is stated that the widespread failure to provide packages of care has increased the pressure on District General and Local Community hospitals to the detriment of these vulnerable patients and the provision of services to other patients.

What is the extent of this bed blocking across Powys due to DTOC and how are you directing the care agencies to deal with this important issue?

To date, we have not received correspondence from Dr D. Paton Chair of the Powys sub-committee of the Dyfed Powys Local Medical Committee.

Reducing delayed transfers of care (DToC) and ensuring people are safely supported in the most appropriate way is our highest priority. During August and the beginning of September the number of delayed transfers of care had increased to a level where some service users were delayed for an unacceptably high level of time, particularly across north Powys, these are now reducing significantly.

I am pleased to report that by Mid-September concerns over delayed transfers of care have reduced significantly.

The number of delayed transfers of care within health and social care systems continue to be closely monitored are often involve complex and various individual reasons.

At the height of the pressure on delayed transfers of care, on the 10<sup>th</sup> July 2014, there were 28 Powys DToC in the Community Hospitals and 19 people were waiting for discharge home with a package of domiciliary care support. As of 14<sup>th</sup> August 2014, there were 30 DToC, 17 of which were waiting for a domiciliary care package and as

of 11<sup>th</sup> September 2014, there were 28 DToC, 16 of which were waiting for a domiciliary care package.

On the weekly list for PtHB Community Hospitals issued on Thursday 9<sup>th</sup> October there were 25 delayed transfers of care recorded and 9 were waiting for domiciliary care packages.

For those patients who chose a care home for which there is a waiting list or if the patient is 'self-funding' the role of the Council is limited to the provision of advice and guidance to the patient and their family.

The arrangement for discharge of patients to a more appropriate care setting varies according to the needs of each patient and the availability of required interventions that support patient discharge. As a result, the number and nature of hospital discharge delays can significantly vary from day to day depending upon individual circumstances.

Hospitals supported through the DToC work include:

North Powys: Royal Shrewsbury Hospital, Ludlow Community Hospital, Powys Community Hospitals, Robert Jones & Agnes Hunt Orthopaedic Hospital, Bronglais Hospital in Aberystwyth

South Powys: Powys community Hospitals, Hereford Hospital, Neville Hall Hospital, Morriston Hospital, Neath & Port Talbot Hospital

Over the last 6 weeks delayed transfers of care have substantially reduced and this reduction is being achieved through integrated work across partner agencies including:

- Continue to increase capacity within the domiciliary care market
- DToC cases have been prioritised with homecare providers
- Montgomeryshire are currently reviewing and discussing with colleagues in PtHB all Dtocs across the North Health economy on a twice weekly basis due to the significant decrease in the overall level of DToCs [ this was previously been undertaken on a daily basis ]
- In the South (Brecknockshire & Radnorshire) 3 conference calls a week with colleagues in PtHB have been established to permit more regular and targeted work to be undertaken to drive the number of cases down more quickly;
- Managers continue to work with providers to increase market capacity by creating more efficient care runs across north Powys;
- The in-house Reablement Service is up and running in South Powys, and work is ongoing to implement the service across the north as soon as possible;
- Team managers are working with health colleagues and providers to optimise available capacity to meet the needs of people who need services the most.
- Weekly conference calls exist between the deputy CEO of PtHB and the Strategic Director of People to ensure strategic overview and accountability.

- Greater use of direct payments is being promoted, and residents encouraged to commission their own, more personalised packages of care in line with our agreed approach of 'promoting independence and 'doing with and not doing for'.
  - A Strategic commissioning post focused on prevention and early intervention has been included within the Adult Social Care restructure to help reduce future hospital admissions.
  - In addition to the specific DToC calls/discussions the weekly resource panels continue to scrutinise the DToC waiting lists for each of their areas.

## Additional investment is also being planned to increase market capacity

- Additional intermediate care beds are being commissioned. Capacity increases are being sourced both within Powys and within neighbouring authorities. Intermediate care beds will support hospital discharge whilst reablement / longer term care as appropriate is sourced.
- The domiciliary care contract vacated by Reach will be retendered following completion of the independent review of the commissioning process and adoption of lessons learnt.
- Home from hospital services are being reviewed in partnership with the PtHB to identify how future services can be used to provide additional support.
- Shared Lives are also being explored as short term placement options where appropriate.