RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL
MUNICIPAL YEAR 2023/24

COMMUNITY SERVICES SCRUTINY COMMITTEE

Agenda Item No. 7

25TH SEPTEMBER 2023

HOSPITAL DISCHARGE – PATHWAY TO CARE

REPORT OF THE INTERIM DIRECTOR OF SOCIAL SERVICES

REPORT OF THE INTERIM DIRECTOR OF SOCIAL SERVICES, IN DISCUSSION WITH THE RELEVANT PORTFOLIO HOLDER, CLLR CAPLE.

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1. PURPOSE OF THE REPORT

1.1 This report has been prepared to provide the Community Services Scrutiny Committee with an update on the regional hospital discharge arrangements.

2. RECOMMENDATIONS

It is recommended that the Community Services Scrutiny Committee:

2.1 Note the content of this report.

2.2 Consider whether they wish to scrutinise in greater depth any matters contained in the report.

3. REASONS FOR RECOMMENDATIONS

3.1 To provide the Community Services Scrutiny Committee with an update on the regional arrangements to support hospital discharge.

3.2 To provide the Community Services Scrutiny Committee an opportunity to examine performance against the new reported Pathway of Care Delays validated for the Rhondda Cynon Taf Local Authority area.

4. BACKGROUND

4.1 In November 2022, the Community Services Scrutiny Committee were updated on the pressures across health and social care and the continued efforts to support safe and timley discharges for residents with eligible needs in Rhondda Cynon Taf. Members asked that a further report be prepared in the autumn of 2023 to provide an update on developments.

4.2 The report in November 2022 illustrated the interdependancy between health and social care and that capacity in hospitals was tested by increased demand and the pressures and capacity constraints in the social care system particularly in home care and care homes. Members are advised that we are anticipating a winter of similar demand challenges this year and whilst there has been some improvement in capacity through the year this remains fragile (e.g. the closure of the Willows Care Home in Perthcelyn, a 40 bed EMI Nursing Home in August 2023).

5. BUILDING CAPACITY THROUGH COMMUNITY CARE

5.1 Preventing the need for people to attend at a hospital is a growing area of focus following the publication of the Welsh Government Building Capacity through Community Care – Further Faster statement attached as Appendix 1.

5.2 This statement of intent refers to the challenges faced in meeting the needs of a growing eldely frail population and emphasises the need for collaborative approaches across health and social care in the community. This message is important as it recognises that a focus on the challenges and resources at the hospitals will not necessarily resolve the reason people present there in the first place and the capacity to support them home once they are well.

5.3 The Cwm Taf Morganwwg Regional Partnership Board had identified this shift in emphasis previously and have agreed a model of integrated community services for implementation.

5.4 The model agreed is based on two pathways of integrated care:

- **The urgent pathway of care** - an urgent, unscheduled community response for intensive, wrap around multidisciplinary team support that is time limited.

- **The population health management** - a multidsciplinary response to population segmentation to embed a preventative ethos across all levels of need.

5.5 The Adult Services Regional Commissioning Group is currently tasked with the design and implementation of the urgent pathway of care reponse as a priority with a final recommendation expected later in the autumn.

6. DISCHARGE TO RECOVER AND ASSESS (D2RA)

https://www.youtube.com/watch?v=3rb34_0_aNc
These YouTube videos provide a simple explanation for the public about the pathways for D2RA

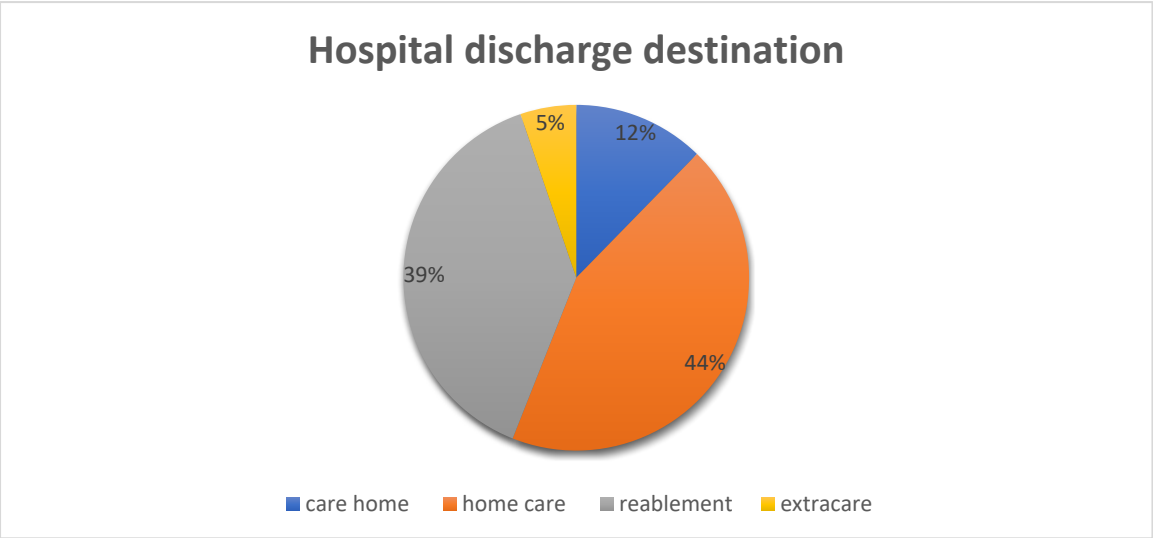
6.1 Discharge to Recover and then Assess (D2RA) supports effective and timely discharge from hospital for people who no longer require an acute hospital bed. The pathways of care are underpinned by a 'home first' principle of moving assessment for ongoing care, rehabilitation and support needs away from the acute hospital into the most appropriate community setting, focusing on what matters to the person.

6.2 Work to incorporate D2RA has progressed throughout the year with most of the development activity required at the hospital including:

6.2.1 All the wards in acute hospitals using the electronic white board. This technology manages patient information and supports a focus on making sure people's stay in hospital is minimised. Data for the length of stay and pathway of care delay performance is managed through this system and the referrals for social care are generated through this mechanism. Rhondda Cynon Taf is currently waiting for our hospital discharge staff to have remote access to the white board data so that we they can track patient details and progress directly and share social care information seamlessly with the ward. This will make a significant difference in terms of communication between agencies to the benefit of the patient.

6.2.2 All hospital wards send referrals through to our Single Point of Contact using an Electronic Transfer of Care form (EToC). This is intended to be a trusted proportionate assessment for Adult Services to use in determining onward care arrangements. This form continues to cause some challenges for the Local Authority in terms of content and quality. A review of the form was completed in the summer to make improvements to the content, but the revised form is not yet available.

6.3 Whilst there are some teething difficulties with the transfer of data to Rhondda Cynon Taf, we are managing to support on average around 50 discharges per week. Data recorded since the beginning of July 2023, as shown in the chart below, indicates that the majority of people are returning to their own homes including extra care.



7. PATHWAY OF CARE DELAYS

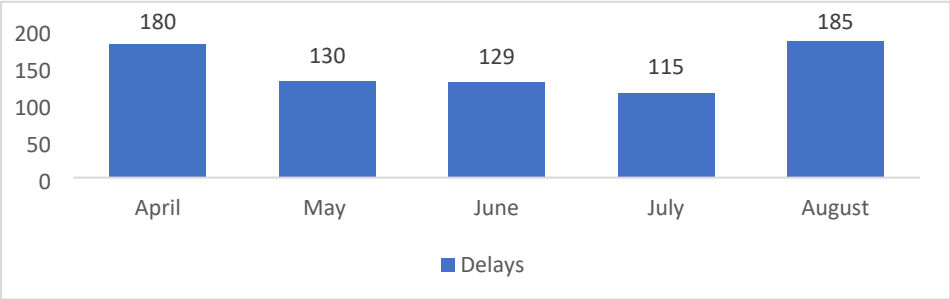
7.1 Delayed Transfer of Care (DToC) reporting was suspended during COVID and a revised process in line with D2RA implemented as a pilot supported by the NHS executive called Pathway of Care Delays (PoCD).

7.2 The Cwm Taf Morgannwg region engaged with the pilot project and have been submitting data since November 2022 and a new process was developed to collate and validate data. From April 2023 the pilot has become the formal reporting process for PoCDs and is reported to Welsh Government to illustrate the regional performance.

7.3 Delay codes are recorded by ward staff on the electronic whiteboards and data is pulled into a report for validation with the Local Authorities. The accuracy of the electronic whiteboards is a vital component of effective reporting and this is still an area for improvement within the Health Board.

7.4 The Pathway of care delay reports are attached as Appendix 2 and illustrate performance for the months April – August 2023. Performance is set out into Local Authority areas and delay reasons detailed into specific numerical codes.

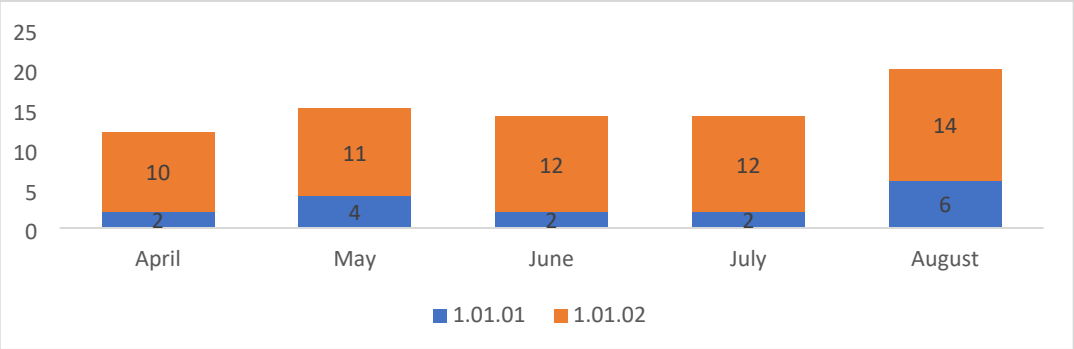
7.5 Overall number of delays for Rhondda Cynon Taf residents across health and social care by consensus period are shown below:



7.6 Whilst collaborative working will provide improvements across all codes the areas of greatest influence for the Rhondda Cynon Taf are:

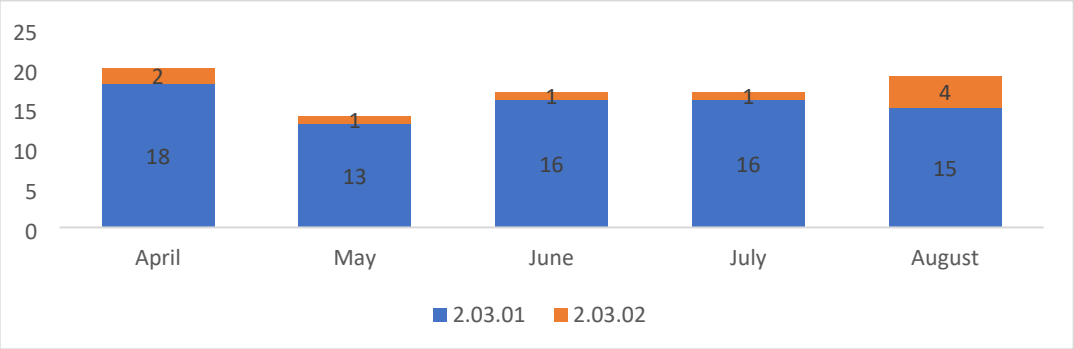
- 1.01.01 and 1.01.02 - these codes illustrate the effective deployment of the social work resource to allocate a case and complete the assessment. Members will note that the Rhondda Cynon Taf data demonstrates an effective deployment of the social work resource reflecting the priority placed on hospital discharge by the Council.

  Reported delays for Rhondda Cynon Taf residents by consensus period:



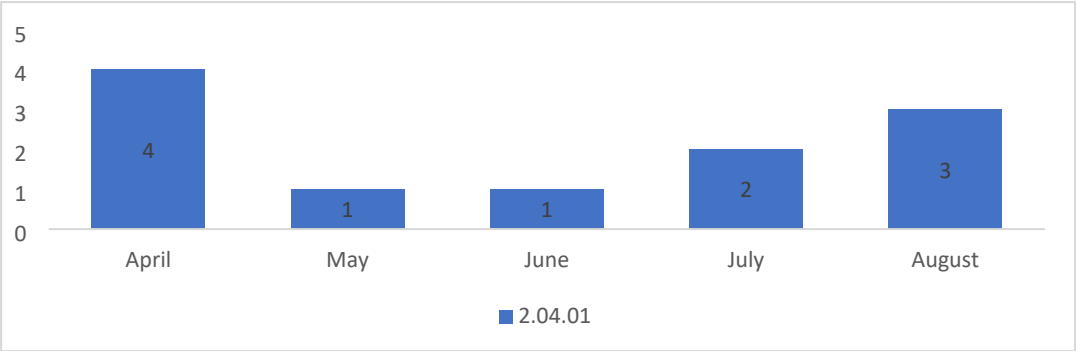
- 2.03.01 and 2.03.02 – these codes relate to delays associated with Home Care and indicate our ability to commission care to meet care and support needs. The data against these codes continues to illustrate some capacity concerns for Rhondda Cynon Taf but the position has improved.

  Reported delays for Rhondda Cynon Taf residents by consensus period:



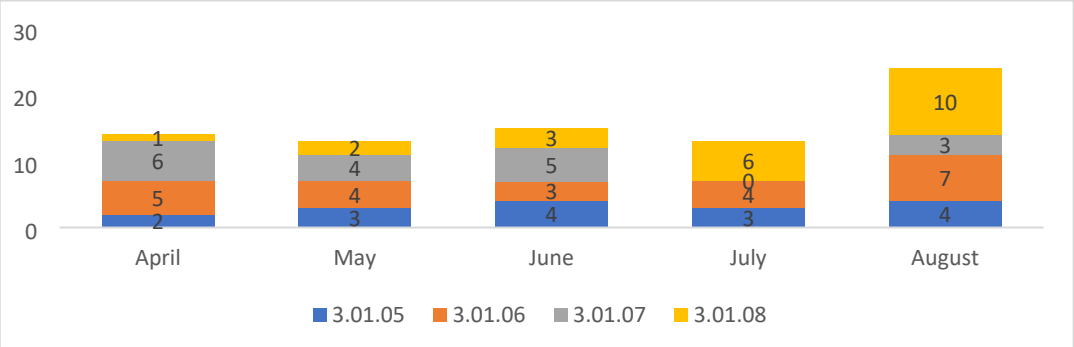
- 2.04.01 - this code is for reablement and should be expected to report a low or no delays as people identified as suitable for reablement are generally supported quickly out of hospital and into the programme.

  Reported delays for Rhondda Cynon Taf residents by consensus period:



- 3.01.05 – 3.01.08 - these codes relate to delays associated with the care homes and indicate our ability to commission care to meet care and support needs. The data against these codes continues to illustrate some capacity concerns particularly with regards to nursing care and EMI nursing care in August.

  Reported delays for Rhondda Cynon Taf residents by consensus period:



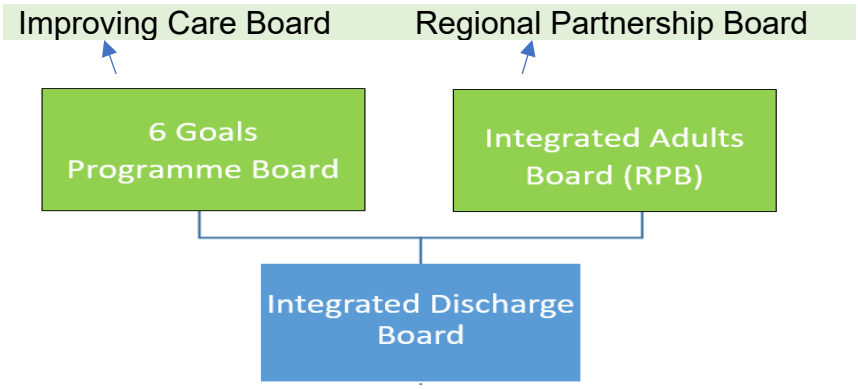
7.7 The Integrated Discharge Board has identified that the following delays (shown below) are the priorities for action in Cwm Taf Morgannwg and a joint action plan is under development and expected to be agreed at the next meeting in September.

- assessment across all partners
- home care capacity
- care home capacity
- disputes

8. CWM TAF MORGANNWG INTEGRATED DISCHARGE DELIVERY BOARD

8.1 The Integrated Discharge Board has overall accountability for discharge performance, ensuring PoCD are reported effectively, and for implementation of an improvement plan in line with the D2RA model for Cwm Taf Morgannwg. Prior to this there was no established governance arrangements in place for integrated senior sign off or accountability to the Regional Partnership Board.

8.2 The Integrated Discharge Board has been established as part of the 6 Goals of Urgent and Emergency Care and is accountable to both that Programme Board and the Integrated Adults Board as outlined below:



8.3 The key areas of focus for the Integrated Discharge Delivery Board's improvement plan are currently.

- The PoCD action plan that includes the integrity of the reporting process and validation.
- The implementation of the electronic data management system including the whiteboards, transfer of care documentation and data quality improvement.
- The role and function of the trusted assessor to create a more flexible and responsive approach to assessment across agencies. (A good example of a trusted assessor would be the Stay Well @Home assessors in A&E that are both health and social care staff).

9. EQUALITY AND DIVERSITY IMPLICATIONS / SOCIO-ECONOMIC DUTY

9.1 There are no equality and diversity or socio-economic implications arising directly from this report.

10. WELSH LANGUAGE IMPLICATIONS

10.1 There are no Welsh Language implications arising directly from this report.

11. CONSULTATION / INVOLVEMENT

11.1 There are no consultation requirements arising directly from this report.

12. FINANCIAL IMPLICATION(S)

12,1 There are no financial implications arising directly from this report.

13 LEGAL IMPLICATIONS OR LEGISLATION CONSIDERED

13.1 There are no legal implications arising directly from this report.

13.2 The Social Services and Wellbeing (Wales) Act 2014 and accompanying Part 4 Code of Practice sets out that where a local authority has carried out an assessment which has revealed that the person has needs for care and support then the local authority must decide if those needs meet the eligibility criteria, and if they do, it must meet those needs.

14 LINKS TO THE CORPORATE AND NATIONAL PRIORITIES AND THE WELLBEING OF FUTURE GENERATIONS ACT

14.1 Supporting the discharge of someone from hospital links with the Council's priority: "Ensuring People are independent, healthy, and successful". It also allows the Council to meet the requirements of the Social Services and Wellbeing (Wales) Act 2014 and the Wellbeing of Future Generations (Wales) Act 2015, in that they meet the needs of the Council's residents, including an ageing population and those with more complex needs, are more sustainable and increase focus on wellbeing and independence, resulting in the wellbeing goals of a Wales of cohesive communities, and a healthier Wales being supported.

15. CONCLUSION

15.1 Rhondda Cynon Taf, along with all other local authorities continues to face pressures across the health and social care system. As we move into the busy winter months, Adult Services will be working together with the regional partners and our commissioned providers to support an effective flow in the hospitals and prevent people remaining in hospital longer than is necessary.

LOCAL GOVERNMENT ACT 1972

AS AMENDED BY

THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

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Background Papers:

Community Services Scrutiny – November 2022

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