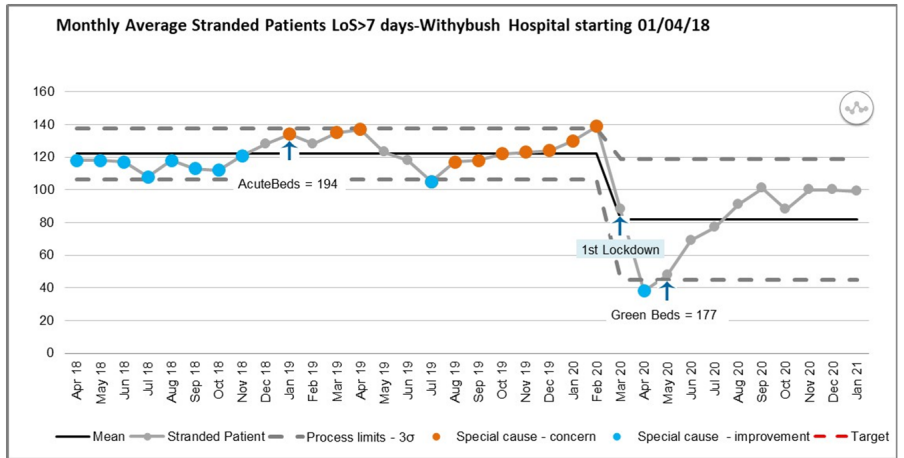
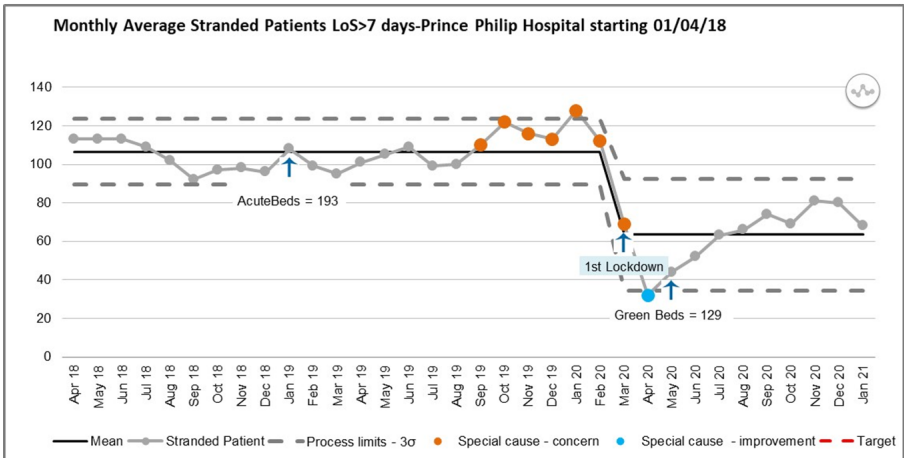
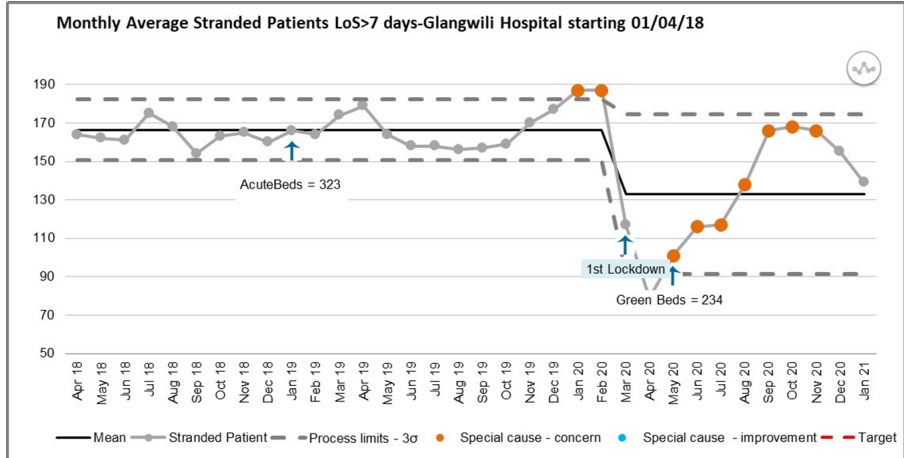
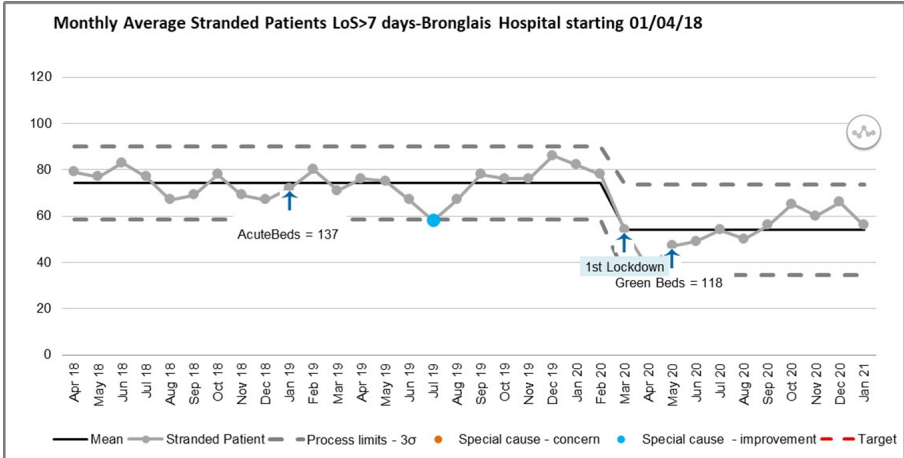


Delayed Transfers of Care

Current Position

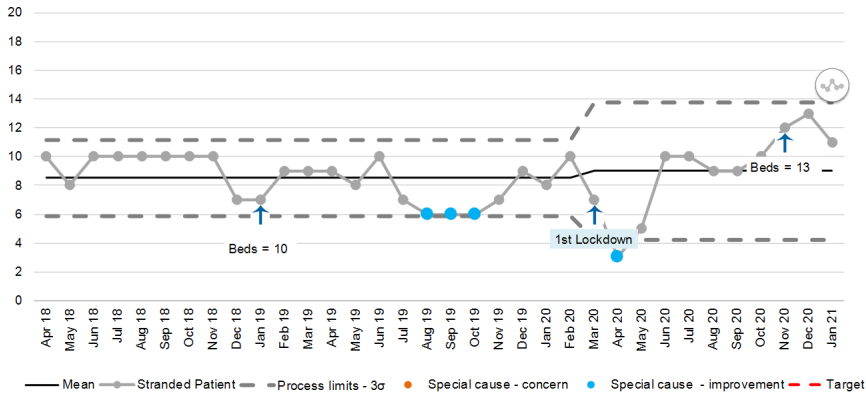
- Formal Delayed Transfers Of Care (DTCOC) reporting has been stood down by Welsh Government(WG).
- Discharge to Recover and Assess Reporting has been introduced – Discharge Requirement standards established based on Home First principles.
- Standards developed and agreed regionally.
- Hywel Dda University Health Board (HDdUHB) developing Sharepoint system to be able to better track changes in delays for patients – first revised reporting data mid-March for review.
- Stranded patient analysis : Over 7 days length of stay.

Stranded Patients – Acute Hospitals

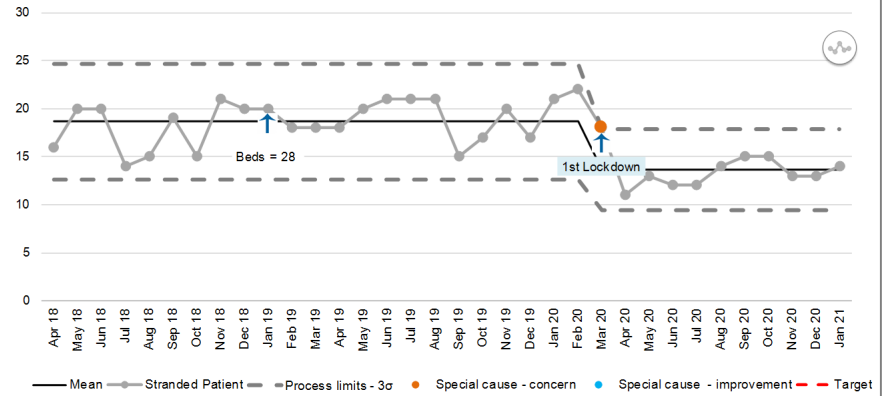


Stranded Patients – Community Hospitals

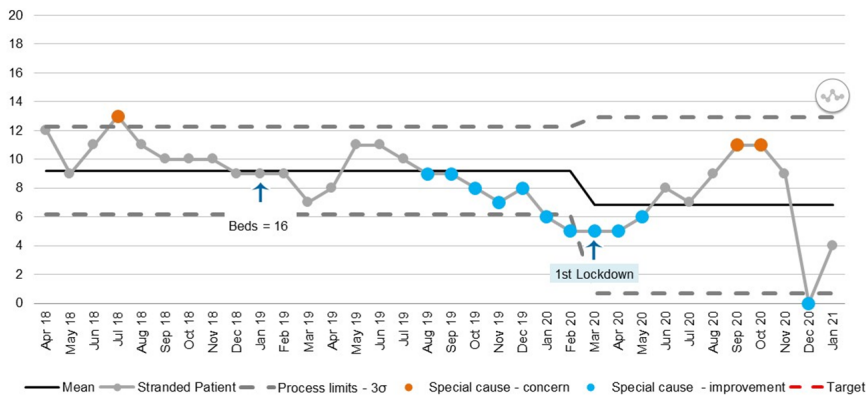
Monthly Average Stranded Patients LoS>7 days-Tregaron Hospital starting 01/04/18



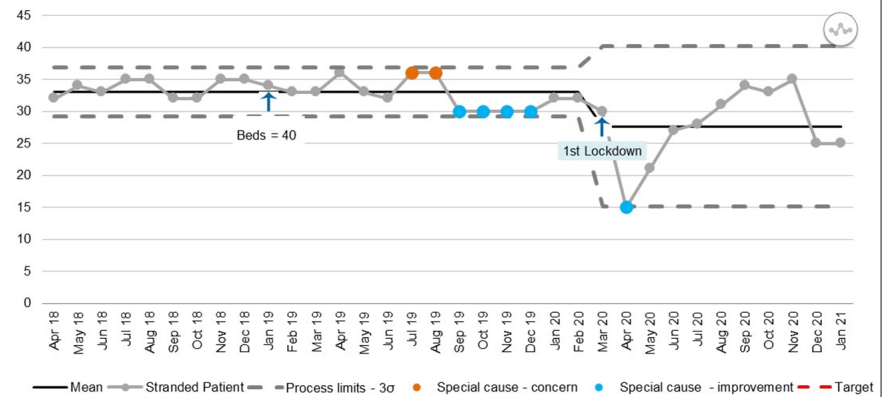
Monthly Average Stranded Patients LoS>7 days-Amman Valley Hospital starting 01/04/18



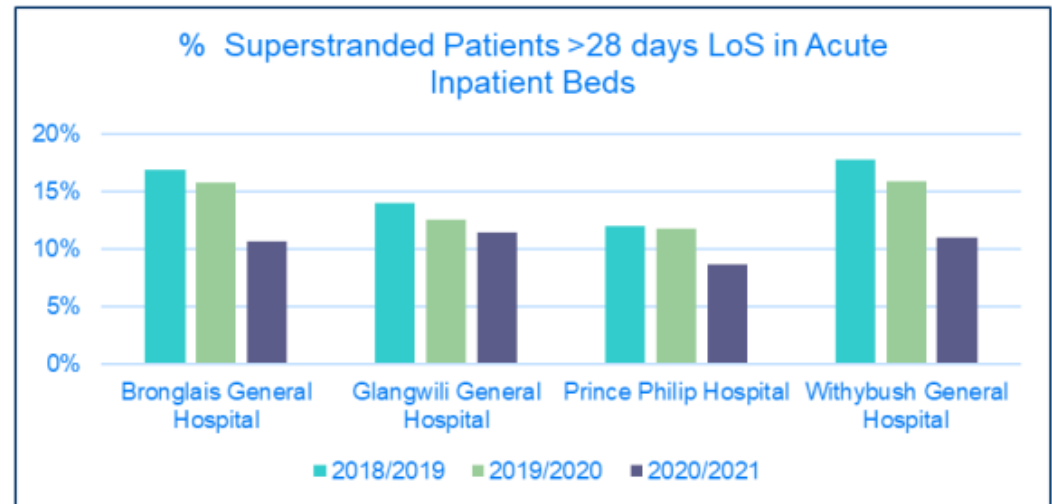
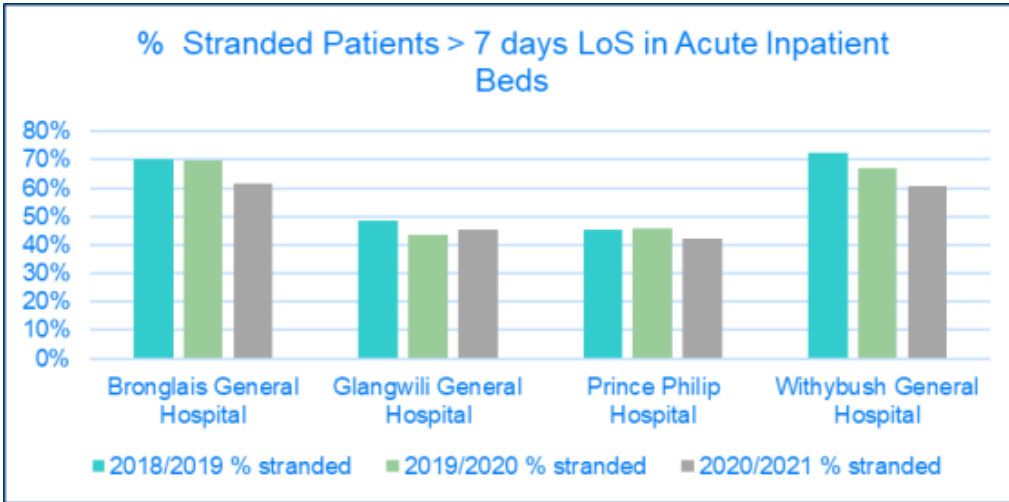
Monthly Average Stranded Patients LoS>7 days-Llandovery Hospital starting 01/04/18



Monthly Average Stranded Patients LoS>7 days-South Pembrokeshire Hospital starting 01/04/18



% Stranded (7d) & Super-stranded (28d)



Discharge to Recover & Assess

Pathway	Definition	Patient Outcomes
1 : Front door turnaround	Comprehensive assessment at the 'front door' and turnaround for individuals deemed safe to assess, treat and support at home.	Maximised independence and signposting. Avoidance of in-patient deconditioning and infection risks. Seamless transfer to longer-term support if required.
2 : Home with support	In-patient treatment is complete (patient is medically optimised?) Individual is ready to return home but needs support during the recovery phase and, potentially, going forward.	Avoidance of in-patient deconditioning and infection risks. Maximised recovery and independence. Reduced reliance on statutory services. Seamless transfer to longer-term support if required.
3 & 3A : Transfer to bedded 'step down' facility	In-patient treatment is complete. Patient currently has medium to high dependency needs (including overnight) that rule out Pathway 2.	Avoidance of in-patient deconditioning and infection risks. Sufficient time in a supportive environment to recover from the acute episode. Seamless transfer to longer-term support or placement if required.
4 : Transfer back to person's existing care home	Where individuals have been admitted from a care home and it looks as if their needs have changed, they should be assessed in their usual environment, based on the same rationale for Pathways 1, 2 & 3.	Avoidance of in-patient deconditioning and infection risks. Least disruption to individual's physical and mental well-being. Reduced mortality risk.

National Measures :

- Number of people transferred on to each Discharge to Recover and Assess (D2RA) pathway.
- % of those transfers that took place within 48 hours of the decision being made (that they were ready for transfer from hospital to this pathway for supported recovery and assessment).
- % people transferred to a D2RA Pathway with a co-produced recovery plan in place.
- % people transferred out of the D2RA Pathway to their usual place of residence.
- % people readmitted to hospital within 28 days.

Carmarthenshire County System

- Improvement in conveyance and conversion rates – demonstrating growth in number of people being treated at home where possible.
- Acuity of patients with complex discharge requirements has increased in hospital and may contribute to slight increase in ‘stranded’ patients in Glangwili General Hospital (GGH).
- Improvement in ‘super stranded’ patients delays across both Prince Philip Hospital (PPH) and GGH.
- 75% Medically optimised patients in hospital beds pending interdisciplinary agreement regarding safe transfer destination.
- D2RA pathway 2 for packages of care at home – 91% packages placed in 72 hours following investment from temporary external funding. Plans being progressed to sustain this provision.
- D2RA pathway 3 & 4 – Area of provision that has contributed most to delays and relate to Covid related IP&C Care Home measures.

Ceredigion County System

- Acuity of patients with complex discharge requirements has increased partly due to the growth in individuals with lower acuity being treated at home where possible.
- Medically optimised patients still remain in acute and community hospital beds, due to access to long term packages of care and placements re-emerging as a significant constraint to discharge.
- Lack of availability of EMI Nursing Home placements locally and the requirement for care placements in out of region care settings.

Pembrokeshire County System

- D2RA Oversight Meeting & Pathway Groups established – Winter funding used to support further implementation.
- Positive admission avoidance – Withybush occupancy 41 beds lower than same period last year.
- Many patients more complex to discharge with IP&C controls in hospitals and care homes leading to new delays.
- D2RA Pathways constrained due to home based care capacity in the community – interim bedded facilities being increasingly utilized to support including field hospitals.
- Rapid assessment capacity essential to support further improvement – need to stabilize temporary funded intermediate care posts.

Long Term Care Pathway

Nursing Homes

- 28 Nursing Homes/no embargo's.

Current vacancy Position

- **Carmarthenshire vacancies:** 60 general nursing beds and 38 dementia beds. Of these 31 general nursing and 30 dementia beds are currently unavailable due to the homes being in an incident.
- The remaining available beds are in 5 homes, all of which having phased admissions i.e. 2 a week due to the need for increased staffing to manage the 14 day isolation needed for new admissions.
- **Ceredigion Vacancies:** 14 general nursing vacancies. Of these, 2 beds are currently unavailable due to the homes being in an incident.
- The remaining available beds are in 3 homes all of which having phased admissions i.e. 2 a week due to the need for increased staffing to manage the 14 day isolation needed for new admissions.
- **Pembrokeshire vacancies:** 34 general nursing beds and 18 dementia beds. Of these 20 general nursing and 14 dementia beds are currently unavailable due to the homes being in an incident.
- The remaining available beds are in 8 homes all of which having phased admissions i.e. 2 a week due to the need for increased staffing to manage the 14 day isolation needed for new admissions.

Complex EMI Nursing deficit

- Additional Capacity = 8 regional beds in one home
- 6 beds full, 2 pending admissions

LTC Pathway Caseload 2021

D2RA process, Nursing needs assessment supported by the LTC Team, discharge facilitated to placements and 2 week MDT to assess eligibility

Current Caseload numbers

Total caseload = 56

Ceredigion = 5

Pembrokeshire = 13

Carmarthenshire = 21

Total awaiting placement = 14

Total awaiting Dom Care = 3

LTC Pathway Caseload Feb 2020

Prior to D2RA process implementation

Total caseload = 65

Ceredigion = 9

Pembrokeshire = 31

Carmarthenshire = 25

Summary & Next Actions

- Workstreams set up to baseline, develop action plans to ensure implementation of the standards, all have an integrated membership across health, social care & 3rd sector (where appropriate)
 - **Home First** Focused on D2RA pathway 1 & 2.
Chair: Rhian Dawson
 - **Proactive Care** Standard in development helping our local population stay well & independent at home.
Chair: TBC
 - **Intermediate Care** Standard in place, focused on implementing D2RA pathway 3 & 4.
Chair: Elaine Lorton
 - **Digital Workstream** To develop metrics & reporting systems.
Chair: Elaine Lorton/Anthony Tracey
 - **Discharge to Recover & Assess** Standard in place, monitoring implementation regionally.
Chair: Rhian Dawson
 - **Same Day Emergency Care** Implementation of principles to support primary care in accessing diagnostics, hot clinics etc
Chair: Keith Jones
 - **Urgent Primary Care** Implementation of new phased approach to stream and review urgent need.
Chair: Rhian Dawson/Meinir Jones
- Membership on national community of practice and other working groups;
 - **Right-sizing Community Services** developing the work initiated by John Bolton/DU in understanding the demand/capacity of our community services and highlighting areas for investment/development.
 - **D2RA Evaluation Group** developing key national measures that can be consistently reported across Wales.