

MEETING	SERVICES SCRUTINY COMMITTEE
DATE	26.01.17
TITLE	Progress made against the recommendations of the 'From Hospital to Home' Scrutiny Investigation
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No	Recommendation	Comments
1.1	Check that the Betsi Cadwaladr University Health Board (BCUHB) Discharge Protocol has been reviewed and is consistent with the operational arrangements of Gwynedd Council and community partners.	<p>The discharge protocol was reviewed January 2016 with the local authorities and the next review is due in 2018.</p> <p>Patient discharge leaflets attached.</p> <p>Appendix 1 – Information Leaflet- Discharge from Community Hospital Appendix 2 – Information Leaflet- Discharge from Hospital Appendix 3 - Information Leaflet – Moving from Hospital to a Care Home</p>
1.2	Ask the Adults, Health and Well-being Service to collaborate with the Hywel Dda Health Board to agree on a hospital discharge protocol and on practical arrangements for its implementation.	<p>Arrangements to improve cross boundary working between BCU and Hywel Dda Health Board regarding Bronglais discharges for Meirionnydd patients were implemented in the summer of 2016.</p> <p>Every Tuesday at 1pm a liaison meeting is held in Tywyn hospital. This is a multidisciplinary team meeting which includes a nurse from the ward, social worker, community nurse, occupational therapist and physiotherapist, community psychiatric nurse (CPN) (if available). The first part of the meeting discusses the patients on the ward and their discharge plans. Following this, the patients in the community are discussed, for example patients on</p>

		<p>intermediate and enhanced care services. For the final part of the meeting the team video link in with the discharge team from Bronglais hospital, to discuss the discharge plans for patients from Meirionnydd who are in Bronglais hospital. The community nurse takes the lead in this part of the meeting so that all available options are discussed to aid the efficient, safe and effective repatriation of patients back to South Gwynedd.</p>
1.3	<p>Review collaboration and communication arrangements between those teams that facilitate hospital discharges and transfers and those agencies offering support in the community in order to identify opportunities to improve the service for patients and look at good practice in other areas.</p>	<p>Gwynedd short term care beds - ICF monies have funded 26 short term care beds initially in four residential homes across Gwynedd but this has now been extended and spread across all residential homes. The beds provide intermediate (step up / step down care), reablement and respite care for older people and have been extremely successful since their launch in 2015-16.</p> <p>Twice weekly progress meetings are held in Ysbyty Gwynedd between ward sisters, area matrons and area management team reps to chase discharges and those medically fit patients who are ready for transfer out of the acute setting.</p> <p>Llys Cadfan EMI project – Gwynedd Council and the Health Board is also working in partnership on a project to increase dementia capacity in the Tywyn area (in Llys Cadfan Residential Care Home). The initial proposals involve undertaking capital changes to Llys Cadfan Residential Home (funded from 2016-17 ICF monies) to accommodate more dementia and specialist beds for the south of Meirionnydd.</p> <p>Ffordd Gwynedd - The Ffordd Gwynedd team think outside the box to expedite discharges and prevent hospital admissions. Their methodology centred around the “What Matters” conversation and supporting patients to make an informed choice at the right time and in the right place. Interventions are based on what matters to the individual through working in partnership with their local networks.</p>
1.4	<p>Review the 7 day discharge and transfer service that has been temporarily offered at Ysbyty Gwynedd and consider any relevant matter when developing a similar service within the Intermediate Care Project in the same field.</p>	<p>Advanced Discharge Team / 7 Day Working - This project which focuses on improving discharge support arrangements over the weekend through continuation of the Advanced Discharge Team (ADT) activity, continues to work well. Additional physiotherapy and occupational therapy over the weekend is helping to avoid admissions to the acute wards, triage and signposts patients to community services; it also facilitates earlier commencement of Occupational Therapy and Physio intervention for appropriate patients. The ADT work is being</p>

		<p>refocused with the development of a new older people's assessment unit (frailty) based in Ysbyty Gwynedd.</p> <p>24/7 District Nursing - Across Gwynedd and Mon community nursing services are extending from their current hours 9.00am to 5.00pm to a round the clock service. This is already in place in Arfon and has followed in Dwyfor and Meirionnydd. Both Dwyfor and Meirionnydd are now 24/7 although consistency will remain challenging as and when vacancies / sickness occur.</p>
1.5	Report back to the Scrutiny Committee on the progress of the Intermediate Care Project which is equivalent to an expenditure of £1.3 million.	<p>Gwynedd Council, the Health Board and the Third Sector is continuing to work in collaboration on a range of Welsh Government funded Intermediate Care Fund schemes across the county. The ICF Fund has been running since 2015/16 now and the schemes are primarily aimed at supporting people's independence and remaining at home as long as possible, avoiding inappropriate admission to residential care and avoiding unnecessary hospital admissions and delayed discharges.</p> <p>Current schemes include funding roll out of Ffordd Gwynedd, step up / down beds across all the residential homes across Gwynedd including enablement and respite care, supporting weekend working, Dementia GO sessions in Leisure Centres to support people with dementia, relatives and carers to live well with condition through physical activity sessions, supporting Age Cymru Living Well centre. Some of the new schemes this year include a Social Prescription pilot in Arfon focusing on individuals who frequently visit GP surgeries, supporting them to recognise their own needs and signposting to other organisations who provide community and other activities. In addition, we are currently working on an exciting new project to increase much needed dementia capacity in Llys Cadfan Residential Home in Tywyn, as there is a dearth of dementia home placements in that area.</p> <p>ICF monies have also been made available this year for Learning Disabilities and Children with Complex needs and these schemes are currently being worked through.</p>
1.6	Press for improvements to the Transfer Lounge making it a comfortable and purpose-built room that includes changing facilities and moving the	Fully achieved.

	disabled toilets closer to the Lounge for convenience.	
1.7	Ask BCUHB for an update on their schemes to implement 'More than Words'	Appendix 4 – Delivery in line with 'More than just words'
1.8	Develop ways to compile data regarding older patients' satisfaction on the discharge and transfer service to ensure that they have a voice in the process of developing the service further and improving provision.	<p>The All Wales NHS Patient Experience Survey which is conducted in NHS settings does not contain a question specific to discharge or transfer, but it does ask the following:-</p> <ul style="list-style-type: none"> • Where you involved as much as you wanted to be in decisions about your care? • Where things explained to you in a way you could understand? • Did you feel you understood what was happening in your care? <p>In terms of ensuring that older people have a voice in the process of further developing the discharge / transfer service, the "What matters" conversation takes place between patients and professionals and is monitored via the ward to board monthly audit scores.</p> <p>Regarding clinical audit, discharge planning is included in the list of topics for Corporate clinical audit.</p>

No	Recommendation	Comments
2.1	Address some of the weaknesses of the patient transfer arrangements giving due focus where necessary to drawing up a new Care Plan or adapting the current Care Plan soon after the patient arrives at Hospital.	<p>As part of the attempt to work in an integrated way across the Care and Health, a general change of emphasis has now been established when assessing individuals. The principle that the assessment should be carried out in the best possible circumstances for the individual is agreed with, and very often that is in their homes - normally this is where they are most familiar with and comfortable in. Therefore, this is an obvious attempt to move away from the previous traditional way of assessing in the hospital.</p> <p>Following a recent exercise (A week in a room) involving local authorities, health board</p>

		<p>(representatives from both primary, community and secondary care) and the third sector, the decision to re-launch the 'What matters' conversation was made, to reinforce the its importance.</p>
2.2	<p>Support the Third Sector to co-ordinate preventative and specialist support services in the community and ensure that they have adequate resources to address this and to increase the frontline workers' knowledge and awareness of third sector services.</p>	<p>Gwynedd ICF monies in 2016/17 have been invested in a number of third sector projects which coordinate preventative and specialist support services within the community, for example:</p> <p>Dementia GO - Sessions with Leisure Centres that aim to support people with dementia, relatives and carers to live well with the condition by offering physical activity sessions. The project also continues to raise awareness and educate communities about dementia.</p> <p>Housing & Adaptations – Care and Repair - The safety at home scheme in Gwynedd ensures that older people over the age of 60, that are owner occupiers or live in privately rented homes, are able to live in their homes for as long as possible by carrying out minor repairs and adaptations to their property, thus ensuring a safe and secure living environment.</p> <p>Age Cymru – Living Well Centres - The project supports older people to be independent within their own communities, empowering them to shape the service that they receive. The aim is to create a preventative service that delays need for statutory service provision. Services include lifelong learning and physical activities to keep the body and mind active, creating lunch clubs within the communities, socialising opportunities, home and centre support and care services (including foot care), and developing monthly information & advice and benefit surgeries.</p> <p>Arfon Social Prescription Scheme (Mantell Gwynedd) - A Community Facilitator has been appointed who is working closely with GP surgeries/primary care/community nurses etc to ensure that individuals who are attending GP surgeries regularly (with little or no medical need) are supported on a practical level to take advantage of local activities and facilities.</p> <p>The Community Facilitator is liaising and working closely with GP surgeries in the area and is the first point of contact when pursuing solutions to social issues of the patients that are referred into the scheme. The Community Facilitator also links in with Community First areas and is establishing good working links with the relevant officers. The scheme will be open to anyone who can benefit from it with the aim of improving their health, well-being and a better quality</p>

		of life.
2.3	Assess the success of the <i>Intermediate Care Project</i> and ensure follow-up following the end of the grant to deal with any shortcomings which remain in terms of maintaining the service of the hospital discharge teams and the community teams in full at weekends.	A group has been established with Gwynedd, Anglesey, Health Board and Third Sector representation and meets regularly to review and monitor projects and spend and consider slippage opportunities. In addition, joint workshops with senior health and social care representatives are arranged to agree the forth coming year's ICF priorities assessing the success of projects and their sustainability.
2.4	Collaborate with <i>Hywel Dda Health Board</i> to agree on an arrangement with the Ysbyty Bronglais Discharge Team to discharge patients to South Meirionnydd.	See point 1.2 The Health Board, and Ffion Johnstone the Area Director in particular, has a strong link with the Hywel Dda Health Board. In addition, Morwena Edwards, Corporate Director, and Gareth Roberts, Cabinet Member, are attending the 'Mid Wales Health Collaboration Board', a body that is also attended by the Health Board's Chief Executive and Chairman. The work streams established by the Mid Wales Health Collaborative include: Primary Care and Community Services Communication and engagement Telehealth Mental health / learning disabilities Bronglais General Hospital Palliative care/ end of life Centre for excellence in rural health care Health and wellbeing Access and Transport
2.5	It is given to understand that work is underway to improve the situation regarding the shortage of doctors and nurses and that the schemes need to be developed and communicated clearly and immediately, specifically focussing	Although we agree with the Committee's recommendation, it should be highlighted that we should not depend solely on traditional support and that there are alternative ways of meeting needs. Other professional groups can be used to satisfy the needs of individuals and the Health Board has received 'Primary Care Strategy' funding to consider the possibilities of developing multi-disciplinary teams. In particular specialist nurses, pharmacists, therapists, audiologists,

<p>on the critical situation in Dwyfor and Meirionnydd.</p>	<p>who would specialise in management of chronic conditions, community care, and the use of technology to facilitate allowing patient to stay in their home.</p> <p>GP/ Doctor recruitment - There is a National shortage regarding GPs which is in some instances impacts GP practices to recruit vacancies. The Health Board has been able to recruit GPs under an outstanding GP program, one GP being employed in Nefyn practice. And during 2017 we will be looking to recruit more 'outstanding GPs'. Also in 2017 we will be progressing a scheme to offer GPs who intend to retire from practice opportunities to be employed by the health board to provide support to practices that face recruitment difficulties.</p> <p>The health board actively attends recruitment fairs to highlight the benefits of working in North Wales and promoting any current vacancies that we have.</p> <p>As the rural primary care workforce is facing a number of challenges, the west area team is working with the Mid Wales Health Collaborative to establish Physician Associate roles which can contribute positively to the rural health workforce. Physician Associates are dependent practitioners who work for and with doctors.</p> <p>The west area team have agreed to fund one Physician Associates with a view to deploying within primary care in the South Gwynedd when trained.</p> <p>Nursing recruitment - There are ongoing nurse advertisement campaigns both nationally and locally as well as adverts in pharmacies and local GP practices, however it remains increasingly difficult to recruit new staff, particularly to rural areas.</p> <p>A number of workforce initiatives to support services in Gwynedd are ongoing. These include Nursing students being offered placements locally in the south of Gwynedd during their training so that they can experience working in a rural area. Placements are offered in community hospitals and also with the community nursing teams. Placements are also being facilitated for nursing students from outside Wales with elective placements being offered with the locality community nursing teams. Prospective nursing students are also being given the opportunity of work experience at the hospitals. The Locality Nursing Teams are also supporting healthcare assistants in achieving an assistant practitioner qualification which enables them to apply for</p>
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		<p>entry to the nurse training degree. Assistant practitioners have been introduced into community hospitals and the Health Board is also working with colleagues in Allied Health Professions in developing innovative roles.</p> <p>We are looking at nurse appointments flexibly in terms of retire and returns and reviewing internal district nurse caseloads and challenging current models care.</p>
2.6	Review the Discharge Protocol by consulting with key stakeholders including the patients and the public in line with the Language Policies of Gwynedd Council and the Health Board.	<p>The Discharge Protocol has now been adopted by the Health Board.</p> <p>More than Just words (Mwy na geiriau) is regarded as one of the main principles outlined in the Discharge Protocol. "All communication must be conducted in the patient's preferred language. (Mwy na geiriau, More than Just words) Where this is not possible, an interpreter can be arranged".</p>
2.7	Assess the success of the work that is underway on Lean/Vanguard at Ysbyty Alltwen to address the current bureaucratic arrangements to free staff's time to deal with their main duties of providing care and nursing.	<p>We will continue to challenge unnecessary bureaucratic arrangements as they arise.</p> <p>Ffordd Gwynedd will be rolled out across the rest of the county during 2017 building on the success of the initial pilot scheme in Eifionydd area based at Alltwen. The project plan is being developed to include: timescales, management strictures and key location bases for staff.</p>