



Meeting Date	Performance Committee 19 th March 20	and Finance	Agenda	a Item	5.1				
Report Title	Delayed Transfers of Care (DTOC) Report								
Report Author	Jason Crowl, Unit Nurse Director PCS								
Report Sponsor	Chris White, 0	Chief Operating (Officer						
Presented by	Chris White								
Freedom of	Open								
Information									
Purpose of the Report	To inform the Committee of the current position in relation to Delayed Transfers of Care within existing ABMU Hospitals.								
Key Issues	 A delay in hospital can harm the wellbeing of the individual and can have a negative impact on their independence. It also has an adverse effect on the wider health and social care system as delays can potentially deprive others from receiving timely care. In 2018 DTOCS increased in ABMU Under the direction of the Unscheduled Care Group a dedicated Transformation Team has been charged with returning the position to the national average by 2020. 								
Specific Action	Information	Discussion	Assura	ance	Approv	/al			
Required			1						
(please ✓ one only)									
Recommendations	Members are asked to:								

TITLE OF REPORT

1. INTRODUCTION

A delay in hospital can harm the wellbeing of the individual and can have a negative impact on their independence. It also has an adverse effect on the wider health and social care system as delays can potentially deprive others from receiving timely care. In 2018 Abertawe Bro Morgannwg University Health Board experienced an increase in the number of patients delayed. The paper summarises actions that are being taken across the health board to improve the flow of patients and reduce the number of people who are delayed in hospital beds.

2. BACKGROUND

A patient becomes a Delayed Transfer of Care (DTOC) when they are ready to move on to the next stage of care but is prevented from doing so for one or more reasons. After a stay in hospital, most patients need little or no onward care. Delayed transfers are usually associated with complex cases where patients need a care package or move to a different care setting such as a care home. These patients are more likely to be older, vulnerable people.

The monthly delayed transfer of care census has been undertaken over a number of years and therefore provides an insight over time into the way the health and social care system is functioning. The delayed transfer of care census is undertaken using methodology prescribed by Welsh Government and contributes towards the overall picture of health board performance.

Delayed transfers of care are a complex problem and require effective partnership working by health and social care organisations. Transferring patients from one care setting to the next relies on appropriate joint processes and a patient centred approach by all parties and is a joint responsibility for health and social care.

3. ASSESSMENT

It is well recognised that good flow of patients across the health and social care system is vital to creating and maintaining capacity. Within ABMUHB there has been an increased focus on delayed transfers in of care in 2018 following an increase in numbers.

Under the direction of the ABMU Unscheduled Care Board a dedicated DTOC Improvement Team has been developed and commenced targeted work in November 2018 and the monthly report is attached in Appendix 1.

The aim of the Improvement work are as follows:

- 1. To reduce number of patients who are Delayed Transfers of Care to below 50 patients on a rolling monthly basis by March 2020.
- 2. To reduce number of days delayed to below 4000 days on a rolling monthly basis by March 2020.
- 3. Aim to meet IMTP performance Trajectory 70 April 2019, April 70, May 65, June 65, July 60, August 60, September 55, Oct 50, Nov 50, December 50, Jan 60, Feb 50, Mar 50
- 4. Measurement of harm to patients during delayed periods

National January 2019 position

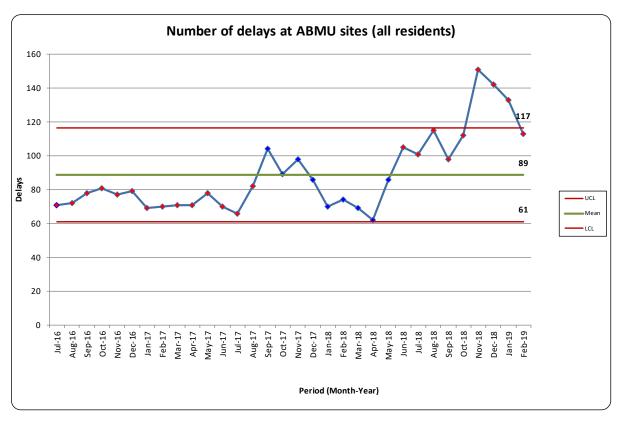
	All reasons									
	All community care	All healthcare	Selection of care home	Waiting for availability of care home	Protection issues, unable to discharge to safe environment		Disagreeme nts	Legal / Financial	Other	All reasons
ısts	183	86	31	44	18	1	10	3	39	415
Betsi Cadwaladr University HB (1)	26	11	6	13	2			1	6	65
Powys Teaching HB	13	1	2	4	1				1	22
Hywel Dda HB (2)	20	12	1	4			1		1	39
Abertawe Bro Morgannwg University HB	60	29	11	17	2	1	6	1	6	133
Cwm Taf HB	9	4	8	1	4				5	31
Aneurin Bevan HB	29	23	3	2	6		1	1	12	77
Cardiff and Vale University HB	25	5		3	2		2		8	45
Velindre NHS Trust (3)	1	1			1					3

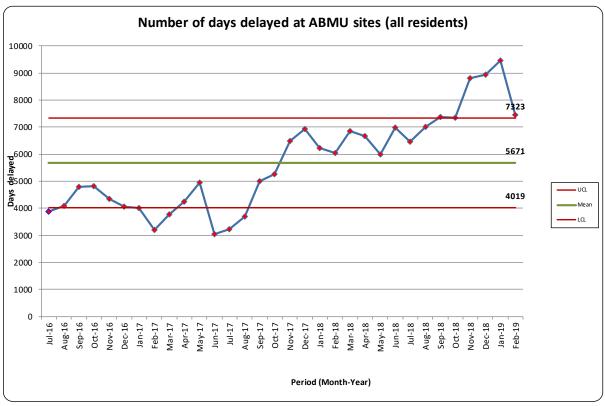
Current Work

Work streams have been implemented Across ABMU in partnership through Western Bay to provide a focus on managing DTOC performance.

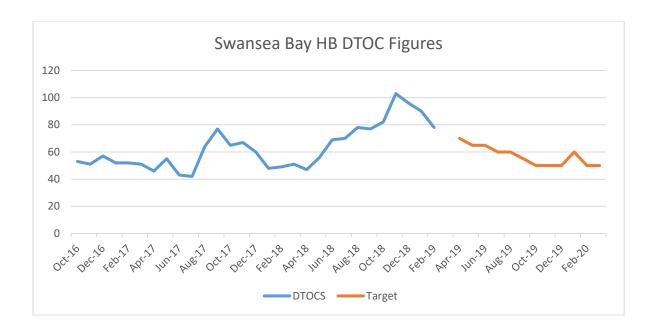
- 1. Compare ABMU position with other Health Boards.
- 2. Undertake site visits to Cardiff and Vale to review their process
- 3. Develop anticipated DTOC figures for current and future populations based on an average of the national position.
- 4. Cross Unit Improvement Plan linked to ABMU Discharge Audit commenced in November 2018
- 5. Western Bay Operational Subgroup completed a Workshop 3rd October to review the Community Optimal Model focussing on discharge flow
- 6. Implemented standardise process times in February 2019.
- 7. Standardise approach taken across all Units to weekly stranded patient meetings
- 8. Undertake centralised monthly DTOC validation scrutiny meeting
- 9. Undertake Monthly DTOC debrief meeting
- 10. Work through transformation of services to improve and quicken the assessment process between organisations
- 11. Provide improve communication and Liaison between organisations
- 12. Through transformation of services implement new pathways of care to support discharge, eg home from hospital models.
- 13. Continue investment in additional community capacity to reduce admissions
- 14. Document all cases on the DTOC system
- 15. Measure and reduce hospital acquired harm during delayed period.
- 16. Provide regular patient lists to key LA colleagues.

February ABMU Position





In anticipation of the new Swansea Bay population size the following projected DTOC improvement figures have been developed based on the national average in wales.



4.0 RECOMMENDATIONS

 The Committee is asked Approve the current DTOC Improvement Workstream

Governance and Assurance										
Link to corporate objectives (please)	Promoting and enabling healthier communities		Delivering excellent patient outcomes, experience and access		Demonstrating value and sustainability		Securing a fully engaged skilled workforce		Embedding effective governance and partnerships	
	✓		✓		✓		✓		✓	
Link to Health and Care Standards (please /)	Staying Healthy	Safe Care	-	Effective Care		Dignified Care	Timely Care	Indiv Care	ridual e	Staff and Resources

Quality, Safety and Patient Experience

Improving the DTOC position should reduce delays experienced by patients, associated deconditioning and hospital acquired infections.

Financial Implications

Reducing unnecessary delays should improve patient flow and more efficient use of available inpatient beds.

Legal Implications (including equality and diversity assessment)

None identified

Staffing Implications

None identifed

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015 - https://futuregenerations.wales/about-us/future-generations-act/)

Reducing unnecessary delays will be beneficial for the effective use of resources and supports the community as a whole

Report History	Finance and performance Committee March 2019						
Appendices	February DTOC Report						