

Health Overview & Scrutiny Committee

15 November 2007

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**Delayed Transfers of Care Task Group – First Interim Report**

**1. Purpose of Report**

To update the Committee following the first meetings of the task group formed to look into the issues surrounding delayed transfers of care from hospitals to the community.

**2. Background**

At the July meeting of the Health Overview & Scrutiny Committee members heard from James Cawley, Assistant Director for Strategy & Commissioning in Community Services, that delayed transfers of care from hospital to the community or other forms of care continue to be a problem in Wiltshire.

The Committee asked the Task Group to:

Look into the issue of delayed transfers of care with a focus on a whole system approach from health and social care.

**3. Scoping Meetings**

The Task Group met for the first time on 15 August; however, not all members could be present.

There was an early discussion about the nature of the problem and the steps being taken by all concerned in order to tackle the issue. The Task Group was told that a protocol had been agreed by County Council, the Primary Care Trust, the three acute hospital trusts and the Avon & Wiltshire Mental Health Partnership which has set out a pattern of working aimed at reducing delayed transfers across the county.

At the end of the first meeting it was decided a further scoping meeting was required to allow a greater understanding of the causes of delayed transfers. This meeting took place, after some delay, on 11 October.

At the second meeting the Task Group explored in more detail the process by which people are admitted to hospital, what happens when they get there and the reasons why they may be delayed before returning to the community or other forms of care.

#### **4. Conclusions from the Scoping Meetings**

The members agreed that Malcolm Hewson would chair the Task Group.

The Task Group agreed that there are two distinct issues that warrant further investigation.

Firstly, there is the work going on to analyse why people are admitted to hospital, the **extent to which all admissions are appropriate, and whether inappropriate admissions could be reduced by altering the current pattern of preventative and support services.**

Secondly, there is the issue of what actually happens to people in hospital to cause them becoming a delayed transfer, how this can be tackled through joint working and how each trust is applying the protocol.

These two strands of work will form the basis of the Task Group review. The Task Group will seek to report on the effectiveness of the joint working protocol, following evidence from each of the agencies involved and the impact their actions have on reducing the number of delayed transfers in hospital.

#### **5. Next Phase of the Review**

The Task Group has agreed to invite representatives of each of the three acute hospital trusts: Royal United, Swindon & Marlborough and Salisbury to discuss how they apply the joint working protocol and what effect they think it's having on their delayed transfer figures. It will also give the trusts the opportunity to give their views on the issue and further suggestions for solving the problem.

The Great Western Hospital currently has the lowest figures for delayed transfers of care, so the Task Group is aiming to see representatives from Swindon & Marlborough Trust first in order to compare their situation with that of Royal United and Salisbury.

The Task Group will also invite Avon & Wiltshire Mental Health Partnership Trust to a meeting to discuss the particular issues around delayed transfers and mental health services.

Finally, the Task Group will do some investigative work to find out whether other local authorities in the region have experienced similar problems to Wiltshire.

The Task Group will continue to **take evidence from** the PCT and Community Services in order to receive up to date figures for delayed transfers and further detailed information about the reasons for admission to hospital and the range of support services currently available.

#### **6. Financial Implications**

There are no financial implications in this report.

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**Stephen Gerrard**  
Assistant Director, Corporate Resources

Report Author  
**Joanna Howes**  
Health Scrutiny Officer