

23.05.02

**5 Deputy M.R. Scott of the Minister for Health and Social Services regarding the discharge of patients from hospital and support in the community (OQ.87/2023)**

Will the Minister advise how many hospital beds are currently occupied by patients unable to be discharged due to either a lack of supplies of equipment (such as respirators) for use outside the hospital, or support in the community that would otherwise allow their release; and what measures, if any, are currently being taken to alleviate any such bed-blocking situations?

**Deputy K. Wilson of St. Clement (The Minister for Health and Social Services):**

Currently I can advise the Assembly that there are 29 medically fit for discharge patients waiting for either a domiciliary care package or placement in a residential nursing home. As of last week, of the 29 patients, 9 were waiting for assessments for a domiciliary care package, a specific nursing home or residential placement, 10 have been assessed and accepted for either a domiciliary nursing home or residential care placement and are expected to be discharged from the hospital within the next 7 days; 4 patients are waiting assessment for specialist dementia beds in the community, the 2 nursing homes who provide this specialist care are currently full, which is the reason for the delay, and 6 patients are waiting for reassessment by another provider or are waiting to start their domiciliary care package.

[10:15]

In terms of alleviating delayed transfers of care, the discharge team are in daily contact with care providers to ascertain the availability of both packages of care and residential and nursing home placements. For domiciliary care providers, the delay in accepting patients, is primarily due to their inability to support packages of care because they have insufficient carers to meet demand. For nursing and residential care home managers, the reason is normally because they either have no bed availability or their staffing levels are low. Once patients have been assessed and accepted for domiciliary care or to a residential or care home placement, hospital discharge is normally prompt. No patients are experiencing a delayed hospital discharge due to lack of equipment in the community.

**4.5.1 Deputy M.R. Scott:**

I thank the Minister for her answer. I would just like to point out the final part of my question and ask what measures, if any, are currently being taken to alleviate any such bed-blocking situations? Also, perhaps she could give us an idea of the average time that is being taken to enable these patients to either go into domiciliary care or dementia care?

**Deputy K. Wilson:**

There are a whole range of measures which are involved in trying to help people make the transition from hospital to either home or a nursing or a residential home placement. One of the things I have already talked about is the discharge co-ordination team who are, in the main, the team who facilitate that with patients and families and the care providers. One of the things that we are looking at in the future is to look at the market assessment, undertake a market assessment to understand whether we have the right provision across the Island. At the moment one of the key features is trying to attract the workforce into the sector. So another measure is trying to make the sector attractive. I know we have been in conversations with colleagues in the sector to see what it

is they are doing to try and encourage people both locally and overseas to come and work in the sector. In addition, to that, we have also got the review of long-term care, which will certainly be a feature that we will be talking about in the future. But, as I say, most of these measures all pull together to provide a comprehensive approach to the way in which delayed discharges are managed from the hospital.

#### **4.5.2 Deputy G.P. Southern:**

In an attempt to make this sector more attractive in terms of working in it, has the Minister reviewed the terms of the ethical care charter first voted for in this Assembly 5 years ago and say what progress has been made in making homecare better paid with better conditions in order to attract those necessary workers?

#### **Deputy K. Wilson:**

I can advise that we have not made much progress around the ethical care charter. But we have, and I will say again, been in discussions with the independent nursing home and domiciliary care sector to understand the position, which is why we want to take stock of the conditions overall in terms of what factors are impacting on their ability to provide, as well as to recruit staff, and also how we build that into the future model of care in terms of what workforce development we need to prepare for the future.

#### **4.5.3 Deputy G.P. Southern:**

That statement “we have not made much progress”, can I take that as we have made no progress? Either that, or it has not been discussed yet when it ought to be because we are talking about attracting people back into a sector which used to be full?

#### **Deputy K. Wilson:**

I think that the Deputy will appreciate that this sector has always been fraught with issues around employing people on a sustainable basis due to the variety of options that now are in the workplace. One of the things that we have to do is we have got to provide some focus on the sustainability of the market. I can confirm that we have made progress with regards the ethical care charter, and I do make my apologies for that.

#### **4.5.4 Deputy M.R. Scott:**

I note in the Minister’s answer she mentioned 2 reviews; one being of long-term care and the other being a market assessment. I just wondered when the market assessment was going to start and when she expected some report to be made?

#### **Deputy K. Wilson:**

I cannot give any timescales at the moment. We have just recently been discussing this but I can provide to the Assembly with more detail in due course.

#### **The Bailiff:**

Before we move on to the next question, could I just remind those answering questions that there is a convention by which no answer takes more than one minute 30 seconds, so 90 seconds is the answer? One or 2 individuals have crossed that line, sometimes fairly significantly. I will be policing that a little bit more assiduously in the future.