

Audit Committee

AC(3)-08-08 : Paper 3 : Advice from the Auditor General for Wales



WALES AUDIT OFFICE
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Wales Audit Office / Swyddfa Archwilio Cymru

Date: 9th July 2008
Our ref: JC/0685/fgb
Your ref:
Pages: 1 of 5

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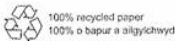
Dear Chair

**WELSH ASSEMBLY GOVERNMENT RESPONSE TO THE AUDIT COMMITTEE
REPORT: *TACKLING DELAYED TRANSFERS OF CARE ACROSS THE
WHOLE SYSTEM***

The Clerk's letter of 25 June requested my advice on the Welsh Assembly Government's response to the recommendations made by the Audit Committee in its report *Tackling delayed transfers of care across the whole system*. This response sets out my advice to the Committee on the Government response, including an explanation of my follow-through work on this important topic, before providing advice on some specific points.

The response provides a clear commitment to addressing the Committee's recommendations but does not provide a clear overall approach to tackling the problem in a whole systems way

The Assembly Government indicates that it has accepted all of the Committee's fourteen recommendations. The response clearly articulates the Minister's commitment to tackling and reducing the extent of delayed transfers of care. The response correctly recognises the multi-factorial nature of the problem and the influence of varying local circumstances. The Assembly Government's analysis identifies that there is no 'one size fits all' solution.



Jeremy Colman Auditor General for Wales / Archwilydd Cyffwrdd Cymru

Nevertheless, the response lacks a clear overall direction to tackling the whole systems problem of delayed transfers of care. In accepting all of the recommendations, the response does not set out how they will be implemented and emphasises health more strongly than social care. This lack of a clear overall direction may be explained by the fact that the Assembly Government still has work to do to progress the issues identified in the Committee's report and by the independent review of delayed transfers of care, which published its findings in April. At various points the response refers to the potentially significant impact of NHS reorganisation on the arrangements for planning and delivering services.

Recognising the complexity of the issues involved in tackling delayed transfers of care across the whole system, I am currently undertaking a piece of follow through work on delayed transfers of care in the Cardiff and Vale and Gwent health and social care communities.

The project will include a shared learning seminar at which participants from the communities will share learning and good practice with a view to identifying ways to tackle some of the whole systems causes of delayed transfers of care. It is my intention to provide the Committee with a brief report on progress, which will cover further developments in the Assembly Government's approach, taking account of the Audit Committee and independent review reports.

Specific advice on individual recommendations

The first eight recommendations relate to developing a shared vision of services that will promote independence.

The ongoing consultation about the planned reconfiguration of the NHS will significantly influence the mechanisms through which the shared vision of services is designed and delivered at local level, and will also influence strongly the central managerial framework. The changes represent clear opportunities to design a managerial framework that facilitates a stronger whole systems approach.

The Government response suggests that the changes are likely to support a more integrated approach across the whole system, but could also reduce some of the benefits of a local approach to commissioning. The response to your tenth recommendation, about addressing the under-development of commissioning, lacks detail which may reflect the state of flux in commissioning. Consequently, I think it sensible for the WAO follow-through project to assess and report on the

opportunities and risks to tackling delayed transfers of care as they emerge from the consultation about NHS structures.

In respect of developing a clear and shared vision of services, the response relies heavily on Local Service Boards (LSBs) and the revised Health, Social Care and Well-Being Strategies (HSCWB). NHS Trusts are not statutory signatories to HSCWB strategies, which may compromise the delivery of whole systems solutions because of the lack of integrated requirements for strategic planning and operational delivery.

LSBs are not statutory decision-making bodies and are there to identify problems and barriers. They do not control resources and have no legal powers. Their ability to lead change in operational delivery across organisational boundaries may be limited. Indeed, it is yet unclear as to how the LSBs will reorganise along with the new health structure.

The response makes a number of references to the objectives of the Assembly Government's ten year social services strategy, launched in February 2007, *Fulfilled Lives, Supportive Communities* without explaining how its objectives will be delivered. The role of social care is absolutely vital to maximising independence. Our work on delayed transfers of care, joint reviews and elsewhere in social services suggests that a very traditional care model persists in which intermediate care and rehabilitation are often seen as specialist 'bolt-ons' rather than an integral part of the system. The tightening of eligibility criteria for social care services is leading to fewer people receiving more intensive institutional support, often at the expense of earlier interventions to promote independence. This could reduce the scope for earlier intervention to promote independence.

The response (recommendation vi) helpfully indicates that following the consultation on NHS structures there will be a review of the structure of the Assembly Government's Department for Health and Social Services. It is likely that this review will identify opportunities to encourage a more integrated approach to health and social care within the Department itself. There are likely to be wider structural issues within the Assembly Government in joining up health and social care that may go beyond the Department for Health and Social Services. The Committee may therefore find it useful to ask the Assembly Government to report on the results of the proposed structural review.

The Committee's third and fourth recommendations refer to the need to improve the current measurement system to support the systemic problems of delayed transfers of care. The response indicates that the Minister intends to call for communities that are performing poorly on delayed transfers of care to set joint delayed transfers of care targets. It is welcome that the response recognises the importance of using information of delayed transfers of care at executive level, as such a focus should support the leaders of local bodies in better understanding the system of health and social care and in working together to improve that system.

The way that such targets are created, used and managed will be critical to their effectiveness. There is substantial evidence that simplistic use of targets in complex situations can lead to counter-productive behaviour that chases the target rather than solving the problem/improving outcomes. It is important that the targets facilitate the development and use of whole systems measures that reflect the overall purpose of the system, which is to maximise independence by providing the best possible care at the right time and in the right place. It is vital that any new targets or measures support rather than work against co-operation. As well as measuring the impact of delayed transfers of care in terms of hospital bed days, partners may also benefit from developing wider measures of the effectiveness of the whole system. The focus, centrally and locally, should be on understanding and improving the system, by reflecting on its purpose and understanding demand and capacity, rather than simply chasing numerical targets expressed in terms of delayed transfers of care which are a symptom of problems in the system.

The response to your eighth recommendation indicates that CSSIW is supporting a pilot project to develop an outcome-based approach to planning and delivering services. It is vital that this work should genuinely bring together measurement systems for health and social care.

As to process issues at the various stages of the care pathway, the Government refers to the development of '*Passing the Baton*' by the National Leadership and Innovation Agency for Healthcare (recommendation xii). The response refers to ongoing work to partially revise guidance on Unified Assessment. There is a widespread recognition that the current Unified Assessment documentation is too cumbersome both for health and social care professionals involved. However, the response does not explain how it will become easier for health and social care professionals to share information about the people they are caring for.

While the Government response provides a welcome commitment to tackling delayed transfers of care and highlights a number of useful individual actions, there is still work to do to identify a genuinely coherent approach across the whole system of health and social care. My follow through work provides a good opportunity to support communities and the Assembly Government in tackling delayed transfers of care across the whole system and I will report to the Committee on progress.

Yours sincerely



 **JEREMY COLMAN**
AUDITOR GENERAL FOR WALES