

HD 09

Rôl awdurdodau lleol o ran cefnogi'r broses o ryddhau cleifion o'r Ysbyty

The role of local authorities in supporting hospital discharges

Ymateb gan: Llais

Response from: Llais

# The role of local authorities in supporting hospital discharges and addressing delayed transfers of care

## Llais' evidence to the Welsh Parliament's Local Government and Housing Committee inquiry on the role of local authorities in supporting hospital discharges and addressing delayed transfers of care

### About Llais

Llais is the independent body that reflects the views and represents the interests of people living in Wales in their National Health Service (NHS) and social care services.

We operate locally, regionally, and nationally. We work with people and communities in all parts of Wales so that everyone's voice can be heard, and used, to drive the planning, design, development and delivery of health and social care services for everyone. We:

- reach out to hear from people within our local communities through an ongoing programme of engagement activities. We do this so that people know about and understand what we do, and to gather their views and experiences of NHS and social care services. We do this in lots of ways, face to face and digitally, including visiting places where people are receiving health and social care services

- use what we hear to help health and social care services better understand how those of us who may need, and use services think services are meeting their needs, in the way that matters most to them. We help make sure the NHS and social care services take action to make things better where this is needed.

This includes working with health and social care services leaders when they are thinking about making changes to the way services are delivered, so that people and communities have their say from the start

- provide a complaints advocacy service that is free, independent and confidential to help people to raise their concerns about health and social services.

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We have operated in Wales since 1 April 2023. Our response reflects what we have heard directly and through others, particularly from people:

- who have raised concerns through our complaints advocacy service, and
- who have had recent experiences of hospital discharge processes from across Wales.

### Background

In Wales, local authorities play an important role in helping people to leave hospital. Their responsibilities include coordinating with health services, assessing care needs, and arranging the right support to ensure timely and safe moves for people from hospital to home or other care settings.

In the Health and Social Care Committee's 2022 report on *Hospital discharge and its impact on patient flow through hospitals*<sup>1</sup> a number of key challenges were highlighted, with waiting for social care assessments given as one of the main reasons for delays in getting people home.

The *Discharge to Recover then Assess (D2RA)*<sup>2</sup> model aims to prioritise early discharge and home-based recovery before making long-term care decisions. How well this works varies by region. Some areas have well-developed D2RA pathways with strong community services and health board and local authority systems working better together. Others struggle due to limited staff and funding, leading to longer hospital stays for people who are otherwise well enough to go home.

This means that depending on where someone lives, they may get the care they need quickly or face long delays before they can leave the hospital.

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<sup>1</sup> [Hospital discharge and its impact on patient flow through hospitals, Welsh Parliament Health and Social Care Committee, June 2022](#)

<sup>2</sup> [nhs.wales/sa/six-goals-for-urgent-emergency-care/goal-6/goal-6-resources/discharge-to-recover-then-assess-report-pdf/](https://nhs.wales/sa/six-goals-for-urgent-emergency-care/goal-6/goal-6-resources/discharge-to-recover-then-assess-report-pdf/)

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NHS Wales' *Hospital Discharge Guidance*<sup>3</sup> makes clear that close partnership working between health boards and local authorities is key to the delivery of Hospital Discharge Minimum Standards, but people are telling us that this often isn't the case.

The *NHS Wales 50-Day Integrated Care Winter Challenge*<sup>4</sup> was launched in November of last year, aiming to speed up hospital discharges and improve community care to alleviate winter pressures on the health and social care system. This initiative required health boards and local authorities to work together on a 10-point action plan designed to reduce delays in getting people home with the right community support.

It showed how important the role of local authorities is in helping people leave the hospital smoothly and without delay by working with health services, checking what support they need, and making sure care is in place at home or in the community.

People have told us that the initiative worked well in some areas like West Wales. People have been supported by home visits from nurses to keep them out of hospital, and the opening of a nursing practitioner led minor injuries unit for walk in appointments on weekends to ease pressure on accident and emergency units.

However, we have also heard that, in at least one region, it has been challenging to use the 50 day challenge funding due to difficulties meeting the fund criteria.

Welsh Government has said that the results of the initiative have been promising, with less delays in discharging people from hospital during November 2024 and they expect to see this continue.

We know that the longer an older person or someone in a more vulnerable situation stays in the hospital, the higher their risk of infection and losing independence at home.

Delays in moving people from hospital when they are ready to leave not only adversely affect the person staying there but also affect the ability

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<sup>3</sup> [Hospital Discharge Guidance, NHS Wales, December 2023](#)

<sup>4</sup> [NHS Wales 50-Day Integrated Care Winter Challenge, 11 November 2024](#)

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of the wider NHS to respond to demand. We have seen the challenges in emergency departments, for example, where patients are stuck for long periods in waiting rooms or on trolleys until a hospital bed is available.

### **Social care capacity and workforce shortages**

Whilst the Social Care Workforce Delivery Plan 2024-27<sup>5</sup> has been introduced by Welsh Government to address workforce shortages, with actions to improve getting and keeping social care staff, many people we have spoken to feel that change isn't happening quickly enough.

People are either staying in hospital longer than they need to, or family members and unpaid carers are having to fill the gaps in care provision due to lack of capacity in social care services.

Many have told us that they feel pressured to do so, or as if they have no choice, and that this impacts on their own physical or mental health.

Many of the concerns we hear from people and their families tell us of the distress and frustration caused by lack of support, and feelings of being *"left to get on with it"*.

### **Waits for care assessments**

People have told us that delays in care assessments have kept them or their loved ones in the hospital longer than they should have been.

Some who have raised concerns felt that, when they were assessed, the care assessments did not fully consider all the person's needs before leaving the hospital, making the move from hospital to home more difficult.

Issues can also arise where assessments are undertaken in a language that is not the person's first language or if the person has additional communication needs.

Whilst official numbers for delays due to assessment in language of choice are very low, what we have heard from people suggests some

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<sup>5</sup> <https://socialcare.wales/about-us/workforce-strategy/social-care-delivery-plan-2024-to-2027>

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people may be accepting whatever is available to try and get an assessment done more quickly.

Making their circumstances known and understood as part of an assessment can be much harder if people are unable to express themselves in their preferred language. This can be particularly hard for people who have additional communication needs, e.g., people with dementia.

Many families, worried about complications from long hospital stays, have taken their family members home rather than wait. This has led to the process having to start again. People have told us of having been left “in limbo” for months.

## **Challenges in arranging care home placements or home care packages**

People have told us that getting care home placements or home care packages is a major challenge, not only for those leaving the hospital but for many people in need of care across Wales. We are hearing that this is particularly the case for those living in rural areas.

Further issues arise if the placements found are far from where people or their families live, or if there are no staff available who can support people in their preferred language. This can lead to people feeling isolated and impact on their wellbeing and recovery.

We know that care home closures in Rhondda Cynon Taf have been impacting hospital discharge in the Cwm Taf Morgannwg Health Board area. With one home closure recently announced and another potentially at risk of closure, no-one was discharged to a care placement there whilst the consultation around closure was live.

We have heard that home care packages are usually focused mainly on personal and intimate care, often appearing to ignore the other things people want and need, for example, there is often no help with cleaning, tidying, or shopping.

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People also share concerns that services run on the provider's schedule rather than a schedule that works for them, eg., putting people to bed too early, getting them up too late. Some people have shared their concerns that profit can feel more important to some service providers than providing proper care. It doesn't always feel that staff have enough time to give them the help they need to stay well at home.

## **Disagreements or legislative barriers affecting discharge decisions**

We are aware that there is often confusion over whether health boards or local authorities should finance ongoing care for patients ready to leave hospital.

This can be particularly troublesome on the border between Wales and England where it is unclear which teams were responsible for the patient's care.

These disagreements can lead to patients staying in hospital longer than they need to.

In January 2025, 127 people in Wales were ready to go home, or move to their next stage of care, but were delayed due to disagreements or legislation.

## **Variations in hospital discharge practices throughout Wales and the impact on local authority delivery**

Where people are receiving their care outside of their home county or cross border in England, there are added challenges with communication between health and social care.

## **Partnership working between the NHS and local authorities**

Concerns have been raised with us across Wales about poor communication between hospitals, patients, families, and social care teams. This includes confusion over discharge plans, lack of information

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about follow-up care, or inconsistent messaging about treatment or care plans.

Many have difficulties finding their way through the process. For this reason, several resources have been produced in Wales to help people understand their rights and the support available during the hospital discharge process by Welsh Government<sup>6</sup>, the Older People's Commissioner for Wales<sup>7</sup> and Age Cymru<sup>8</sup>.

Where social workers are based with hospital staff this seems to support better co-ordination and speed things up to get people home

The Regional Partnership Boards have a valuable role to play in helping to drive the strategic regional delivery of social services, working closely with health services.

We have seen a genuine appetite for local authorities and health boards to work together. A good example of this is the integrated care pilots Cwm Taf Morgannwg University Health Board and the local authorities are trialling.

They are using a 'hospital at home' model; home based care to avoid people having to go into hospital when they don't need to, and to address delayed transfers of care when leaving hospital.

The health board is partnering with local housing associations to offer doorstep health check-ins through housing teams and community connectors. This helps communities understand how to access health services and enables the health board to test prevention strategies.

**In summary**, staff shortages, delayed care assessments, and limited social care capacity are leaving people stuck in hospitals longer than necessary, placing strain on families and the NHS. Many patients wait

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<sup>6</sup> [Hospital Discharge Guidance, NHS Wales, December 2023](#)

<sup>7</sup> <https://olderpeople.wales/resource/a-guide-to-hospital-discharge/>

<sup>8</sup> [Leaving hospital!](#) Age Cymru

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months for care packages, with assessments often overlooking their full needs.

A lack of available care home placements, particularly in rural areas, isolates people and slows recovery. Poor communication between hospitals, social care teams, and families adds further stress. Meanwhile, bed shortages create knock-on delays across the healthcare system, from Emergency Department overcrowding to postponed treatments.

Local authorities play a key role in addressing these challenges. They need to work closely with health boards to speed up care assessments, expand home-based support, and improve communication with families.

Now is the time for action to prevent further strain on both services and communities.

Strengthening social care capacity is essential to easing hospital discharge delays and wider pressures.

Successful models, like integrated care pilots and 'hospital at home' schemes, should be scaled up and adopted more widely. Regional Partnership Boards also have a critical role in driving collaboration between health and social care to ensure timely, person-centred support.

**February 2025**