

Question:

I've read the presentation on 'Current Waiting Times and their Drivers at the RUH' with concerns shared by many in Bath&NES.

The report states that 40 patients are waiting for domiciliary care so that they can 'step down' from HCRG reablement services due to a shortfall of 1,600 domiciliary care hours.

In turn, 40 RUH patients are waiting for reablement care (so unable to be discharged from hospital beds).

This situation has a background of a shortage of community care workers, nursing staff, social workers and care assessors.

How is the new BSW Integrated Care System contributing to solutions of this critical problem (which adds to the pressure on A&E and ambulance services) in terms of staffing, care pathways and funding decisions?'

Answer

The BSW Integrated Care System is working together to improve the flow of patients through our hospitals and improve pathways. Our coordinated approach to bringing partners together ensures we can respond to the pressures we are currently experiencing and will face over the coming months.

As a system, we are continuing to work with our partners to deliver existing demand management and capacity improvement plans.

We are monitoring the impact of these plans at both a system and place level and will take the learning into the development of our plans for the coming winter.

We are drawing on the lessons learned from a number of initiatives put in place last winter which included the provision of additional beds at community hospitals across Bath and North East Somerset (BaNES) and through a temporary care facility at a hotel in central Bath. We are evaluating the outcomes of these schemes and will decide over the coming months whether or not to put them in place again this winter.

We are also looking at new initiatives such as virtual wards, which support patients who would otherwise be in hospital to receive the acute care, monitoring and treatment they need in their own home. This includes either preventing avoidable admissions into hospital, or supporting early discharge out of hospital.

Additionally, the RUH and BaNES Council have been working to address these issues through establishing "United Care Bath and North East Somerset", a homecare service to recruit, train and deploy social care staff for home care to help people home from hospital.

In terms of funding, working as a system allows us to bring together our financial positions to generate additional funding to help address these issues and save money where we can.

The general public can also play their part over the coming months by being vaccinated against flu and covid, helping loved ones return home from hospital, using A&E and GP services appropriately and using the 111 service.

Health and care services across BaNES, Swindon and Wiltshire are under intense pressure at the moment and will face an extremely challenging winter period, but this is something we are actively working to mitigate through a truly joined up and partnership based approach as one health and care system.