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Ymchwiliad i'r Adolygiad Blaenoriaethau ar gyfer y Pwyllgor Iechyd, Gofal
Cymdeithasol a Chwaraeon

Inquiry into the Priorities for the Health, Social Care and Sport Committee

Ymateb gan: The Delivery Unit

Response from: The Delivery Unit

Health Social Care and Sports Committee Consultation

Priorities for the Health, Social Care and Sports Committee.

The Delivery Unit welcomes the opportunity to provide a response to the Committee's priorities for the Fifth Assembly and in particular its programmes during the next 12- 18 months.

The Delivery Unit (DU) is responsible for the functions of assurance, improvement of performance and supporting delivery within the NHS. In order to achieve this it works in partnership with statutory and non-statutory health and social care agencies.

The work and priorities of the Health Social Care and Sport Committee are therefore of significant interest to the DU.

The areas that the committee has identified from its informal discussions are all highly relevant to improving the quality and efficiency of health and social care services.

Of these the DU would see the following as particular priorities likely to have a broad impact on patients given the universal nature of the service areas involved:

- Integration of Health and Social Care services
 - Particular focus could be paid to joint commissioning arrangements and the development of intermediate care services and their potential to avoid unnecessary admissions and facilitate timely discharge. It would be helpful to focus not only on local developments but on the scale and pace of development in response to demand together with mechanisms to measure outcomes for individuals and communities.
 - Specific scrutiny could also be given to arrangements for the provision of care in other settings such as care homes and extra care schemes designed to promote independent living and care in non-hospital settings. The development of such resources is dependent on longer term planning between Health and local authority social services and housing departments.
- Efficiency within the NHS and modern management practices
 - This issue is related to that of integration between health and social care and the development of intermediate care approaches. These initiatives can assist efficiency, improving flow through hospitals in scheduled and unscheduled care reducing delays in transfer within the system, reducing cancellations in scheduled care and thus reducing waiting times.
- Waiting Times
 - As stated above the scrutiny of waiting times should not be viewed in isolation from the issues of integration and efficiency due to the interconnectedness of these challenges.
- Primary care
 - Primary care is also integral to improving efficiency. Scrutiny could include not only improving the manner in which primary care attends to its core business but to the role clusters can play in enhancing coordinated

multidisciplinary working in physical and mental health. This could include the development of virtual wards in community settings.

- The Ambulance Service
 - As in a number of the priority areas the scrutiny of the ambulance service needs to be addressed with other priorities in mind including the relationship of the management of ambulance services to unscheduled care and flow within hospital settings most notably within Emergency Departments and assessment units.
- Sport and Public Health
 - Consideration of access to sport, but perhaps more importantly encouraging and enabling people to be more active, is a vital part of improving both physical and mental health. The findings from studies such as the Caerphilly cohort study can inform the impact that physical activity and other related lifestyle changes can have on; improved health and quality of life, reduced health and social care demand and reductions in premature mortality.

A number of the committee priorities are more specific to particular sections of the population. These are also helpful priorities addressing the potential to provide the best start in life for children in Wales and focussing upon the challenges of Wales' ageing population. These have the potential to improving health at a population level and reduce the potential growth in demand for health and social care services in the future.

The following priorities are therefore also supported:

- Neonatal services
- Loneliness and isolation among older people
 - As with initiatives to enhance access to sport and broader physical activity tackling loneliness and isolation not only improves quality of life and mental and physical health but can also impact on premature death. Recent studies have demonstrated that loneliness and isolation can have an equal impact upon health to smoking 15 cigarettes per day (Holt-Lunstad, 2010). It is not therefore merely a social intervention but has significant health benefits.
- Use of antipsychotic medication in care homes
 - This is an important aspect of the management of people with cognitive impairment and dementia more specifically. A number of initiatives to reduce inappropriate prescribing in hospital and other care settings have been introduced in recent years. Maintaining scrutiny of the degree to which these initiatives are impacting upon clinical practice and the development of alternative strategies to manage behaviours that challenge is important particularly given the increasing prevalence of dementia as the population ages.

The DU supports the priorities already considered but would urge that scrutiny of the individual priorities is connected and that it considers the pace and scale of change.