



**Northern, Eastern and
Western Devon
Clinical Commissioning Group**

Private & Confidential
Ms L Brown
Exeter and Greater Devon Coroner's Office
Room 226
Devon County Hall
Topsham Road
Exeter
EX2 4QD

The Annexe
County Hall
Topsham Road
Exeter
EX2 4QL

Date: 31/03/2017

Dear Ms Brown

**Re: Wendy Louise TELFER Deceased D.O.D. 20/03/2016
Inquest held on 11-12 January 2017 at Devon County Hall, Topsham Road,
Exeter
Regulation 28 Report**


I write with reference to your letter dated 15 January 2017, in which you ask health commissioners to consider the untenable situation of delayed discharges from acute mental health wards. Devon Partnership NHS Trust (DPT) had indicated to you as part of the inquest that delays in discharge were due to difficulty in ensuring sufficient acute mental health bed capacity.

NHS Northern, Eastern and Western Devon Clinical Commissioning Group (NEW Devon CCG) is aware that the rate of delayed discharges from all DPT acute mental health wards is higher than should be expected. This is influenced by a range of factors including for example, discharge planning from other Provider organisations, funding approval processes and the availability of suitable accommodation and onward care.

In order to address the issue of delayed discharges, the following approach has been taken by health commissioners:

Monitoring of timely discharge performance data

1. The local Northern and Eastern Devon A&E Delivery Board monitors delayed discharge data for all Trusts in the area including DPT;
2. The DPT contract review meeting also monitors the rates of delayed discharges from mental health wards through data reported to NEW Devon CCG by DPT;


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3. The Northern and Eastern Devon A&E Delivery Board also has oversight of improvement plans which aim to reduce delayed discharges. DPT has submitted a plan to this Board for the reduction in delayed discharges from older people's mental health wards and a plan for working aged adults is expected.

A number of actions have been agreed with the aim of reducing delayed discharges:

4. DPT has temporarily diverted unused capacity within its rehabilitation unit to utilise as short term step down bed capacity;
5. NEW Devon CCG, with Devon County Council representatives have participated in a series of workshops facilitated by DPT aimed at mapping current and future discharge and panel approval processes. NEW Devon CCG is awaiting the final report and recommendations for improvement in these processes from DPT;
6. NEW Devon CCG is already leading a process, working in partnership with Devon County Council to streamline current processes for the approval of joint funding of s117 aftercare and are working towards a simplified s117 aftercare funding agreement;
7. DPT have indicated a need for additional step down beds to be made available in the Exeter area and NEW Devon CCG is working with DPT to identify solutions for this need;
8. NEW Devon CCG has offered DPT additional management and consultative support from its urgent care commissioning team and who have had success in working with acute hospital providers to reduce delays in discharge;
9. NEW Devon CCG is working closely with Devon County Council with regard to care home commissioning and market sufficiency for older people.

Further work is also required with Devon County Council and DPT's Individual Patient Placement and Adult Social Care teams who commission a range of care and housing options for individuals leaving hospital in need of accommodation or specialised support, in order to fully assess need and match local supply to that need. DPT is shortly to commence a consultation on Mental Health recovery pathways which should also provide further intelligence about this need.

I trust that this response addresses the matters that you have raised in your report, however should you have any further queries please do not hesitate to contact me.

Yours sincerely



Chief Nursing Officer/Caldicott Guardian
NHS Northern, Eastern and Western Devon Clinical Commissioning Group

RECEIVED 04 APR 2017