

Stay Well @ Home Service

Presented by:

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STRONG HERITAGE | STRONG FUTURE
RHONDDA CYNON TAF
TREFTADAETH GADARN | DYFODOL SICR





3rd Sector
Equipment

7 days a week
8am – 8pm
4hr Response

Nursing @home

7 days a week
8am – 8pm
4hr Response

**Local Authority
Support @home/
Initial Response**

4hr
Response

5 days a week
9am – 5pm
NO 4 hr response

**Your Medicines
@home**

14 Day Review period

**District
Nurses/GP's** **Independent -
No further
support**

**Long Term
Care** **Independent -
No further
support**

**Medicines
Support @home** **Independent -
No further
support**

Stay Well @ Home Team - Who are we:

- A multidisciplinary hospital based team of:
 - Occupational Therapists
 - Physiotherapists
 - Assistant Therapy Technicians
 - Social Workers
- Teams operating across both DGH's (Royal Glamorgan Hospital, Llantrisant & Prince Charles Hospital, Merthyr Tydfil)
- 7 day service – working between the hours of 08:00 – 20:00

What do we do:

Primary Focus

The primary roles of SW@H are:

- To identify individuals at risk of admission who can be returned home sooner with the appropriate community support.
- Where an admission takes place, the SW@HT aim to support an earlier discharge

A&E Response -

- SW@HT aim to respond to A&E referrals within one hour
- SW@HT look to prevent admission to AMU at the point of A&E by working alongside medical and nursing colleagues
- Triggers for SW@HT involvement:
 - Falls (past/present)
 - Acute changes to mobility (as a result of an acute injury or illness)
 - Concerns with coping at home
 - Difficulties managing everyday activities (as a result of an acute injury or illness)

AMU/CDU Response –

- SW@HT attend bed management & Daily AMU board rounds with seniors nurses
- SW@HT aim to support people in returning home to reduce length of stay and unnecessary transfer to an acute ward

SW@HT Ward Response –

- Work alongside MDT on the wards to support people in returning home in a timely fashion who require packages of care

Why do we do it:

- To provide a joined up/integrated way of working across health, social care and third sector to improve service users experience and outcomes
- To ensure that there is a rapid response infrastructure built around the hospital based team to provide the required level of support in the community in a timely manner
- The service was developed around the needs of the older person to avoid unnecessary admissions to hospital and delays in transfers of care
- To provide an alternative option to a hospital bed

& most important of all....

Improve the quality of care
provided by Health, Social Care
and Third Sector services by
working together



How do we do it:

Case Examples

What is the difference:

- A person can now have an assessment outside of core hours – 365 days a year, 8am – 8pm
- SW@HT use agile working devices to conduct assessments anywhere in the hospital
- Information is shared across health & social care, using one assessment, shared by all professionals/trusted assessors in the team
- Care and support packages are agreed and arranged within the agreed 4 hour response – 7 days a week, including bank holidays
- Discharge to assess model
- Community review undertaken within the first 14 days to establish any ongoing needs
- An enabling approach is implemented to increase independence levels and reduce dependence on long term service provision

What this means to our service users:

- Support provided in the right place at the right time
- People do not have unnecessary hospital stays
- Voice & Control – people at the centre of the assessment and are actively involved in the discharge planning



Measures of success:

“What a fantastic service, especially as my Mother came home on a bank holiday, which we never thought would happen.”

“Thank you for taking the time to listen, I now feel that my Mother will get the support she needs and my Father will start accepting support at home. The experience has turned from a negative, from coming into hospital after my Mother fell, to actually having a positive impact on my Mother and Father’s care and support.”

“Thank you for getting me home, I can sleep in my own bed tonight.”

Thank you for listening

Any questions

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