



**Oifig an Stiúirthóra Náisiúnta  
Géaroibríochtaí**

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**19<sup>th</sup> September 2022**

**Deputy Roisin Shortall  
Dáil Éireann  
Leinster House  
Dublin 2.**

**PQ 44274/22 - To ask the Minister for Health the current number of delayed discharge per hospital in tabular form; the actions being taken to reduce this number; and if he will make a statement on the matter**

Dear Deputy Shortall,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary question, which you submitted to the Minister for Health for response.

The monitoring of Delayed Transfers of Care (DTOC) is a priority for the HSE and this is achieved through Acute and Community Operations taking an integrated approach to the management of all DTOCs in our system.

The attached excel spreadsheet sets out the current number of delayed discharges as of the 6<sup>th</sup> September 2022, by hospital, in tabular format as requested.

The level of Delayed Discharges within the Acute Hospital setting is examined very closely in terms of numbers and impact by Acute Hospitals and Community Health Organisations through daily, weekly and monthly reporting of DTOC's which facilitates the monitoring and management of the number of DTOCs in the system on an immediate and overall basis.

Management of patient flow is vital to reducing the number of delays within the hospital and is a key element of daily management of the number of patients in the hospital. Once the needs of a patient are identified, integrated teams of staff work together to establish pathways and supports to enable soonest recovery and discharge of patients from the acute setting. Patients who require community supports or a place in an alternative setting (rehabilitation, long stay, transitional care etc) are identified with a view towards expediting the appropriate placement.

It should be noted that the covid-19 pandemic has posed additional challenges both within the acute setting and also with regard to community services and residential care capacity, thereby impacting on the number of DTOCs within the acute hospitals. Demand for services in general is greater than normal at this point and both acute hospitals and community services continue to address capacity.

The HSE, as part of its National Service Plan and Winter Plans maintain an enhanced focus on egress and development of the appropriate capacity in this regard. This includes

- Working in an integrated way to increase home support.



- An enhanced focus on maintaining persons in their own homes with key supports is a fundamental reform priority for the HSE. New community network and specialist teams, supported by joint governance arrangements across community and acute services, working together to deliver enhanced person-centred end-to-end care. This approach will enable a 'home first' approach and ensure timely discharge from hospital, and these include
  - Community Intervention Teams
  - Increased supports for aids and appliances to facilitate patient discharge
  - Additional capacity for earlier discharge of complex cases.
- Enabling and building capacity in rehabilitation, nursing home and community nursing units, both publically and privately.

You should note the data contained in the attached report is preliminary and may be subject to updating.

I hope this is of assistance to you.

Yours sincerely,

*Jacqueline McNulty*

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Jacqueline McNulty  
General Manager Unscheduled Care  
Acute Operations