

**Health & Wellbeing Board – Winter
Planning
to support the Health and Care
system**

Introduction

- Planning for the winter period is a national requirement for local preparation for additional demands and pressure on the health and social care system expected during the winter period (01 December 2019 to 31 March 2020).
- The plan covers the whole health and social care system from preventing unnecessary admission to hospital through to supporting timely discharge home ensuring that access to services and patient safety is maintained.
- The plan provides system assurance that service capacity across the health and social care system will be sufficient to meet forecast levels of demand and is able to respond quickly and effectively when there are exceptional surges in demand that require a rapid system response.
- The plan is being developed by the local system Local A&E delivery board (LAEDB), which has representation from all local system health and social care providers and commissioners (see Appendix 1 LAEDB Terms of Reference).
- The plan for winter builds on learning from previous years as part of a continual improvement process
- The final version of plan will be approved by the LAEDB at the end of September following assurance review by NHS England. The plan will also be considered for assurance by the B&H CCG Governing Body in September and individual providers will assure their own plans through their respective boards.
- Whilst the winter plan covers the broader system that Brighton and Sussex University Hospitals NHS Trust serve the focus of this report is specifically on the Brighton and Hove element of the plan.
- We are bringing this update to Health & Wellbeing Board for information

Winter Plan 2019/20 Objectives

- To maintain patient and staff safety and service quality at all times;
- To ensure that acute hospital bed occupancy is maintained at a level that ensures that patients who require admission to a hospital bed are able to be admitted in a timely way, thereby avoiding the risk of overcrowding in A&E and delays to ambulances being able to handover patients and respond to 999 calls;
- To ensure that community health services are maximised, e.g. improving length of stay and utilisation and increasing the number of patients who can be safely discharged home in a timely manner with care support. Effective use of community services during the winter period will support timely discharge from hospital and avoidance of unnecessary admission to an acute hospital bed;
- To ensure the delivery of agreed improvement plans in respect of national NHS access standards including the 4 hour A&E standard, the 18 week referral to treatment standard and cancer waiting times standards;
- To deliver the national ambition to reduce the number of patients in an acute hospital bed with a long length of stay by 40% by March 2020 – It is well evidenced that patients with a long length of stay in acute hospital settings are at high risk of de-conditioning.
- To ensure system Delayed Transfer of Care are no greater than 3.5% of acute hospital beds.
- To proactively prevent and manage infection control outbreaks issues such as influenza and norovirus.



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Winter Plan 2019/20 key elements

- ✓ System capacity and demand plan to address the expected increased demand
- ✓ Primary Care
- ✓ Community Services
- ✓ Acute Hospital plans
- ✓ Social Care
- ✓ Mental Health
- ✓ 999 and 111
- ✓ Infection Control and influenza vaccination
- ✓ Business Continuity
- ✓ Severe weather planning
- ✓ Winter Communications and Engagement
- ✓ Enhanced capacity requirements to meet the Christmas and New Year period 24th December - 7th January 2020
- ✓ System Pressure monitoring and escalation response
- ✓ Risks to delivery and mitigating actions



Learning from Last Winter

What went well:

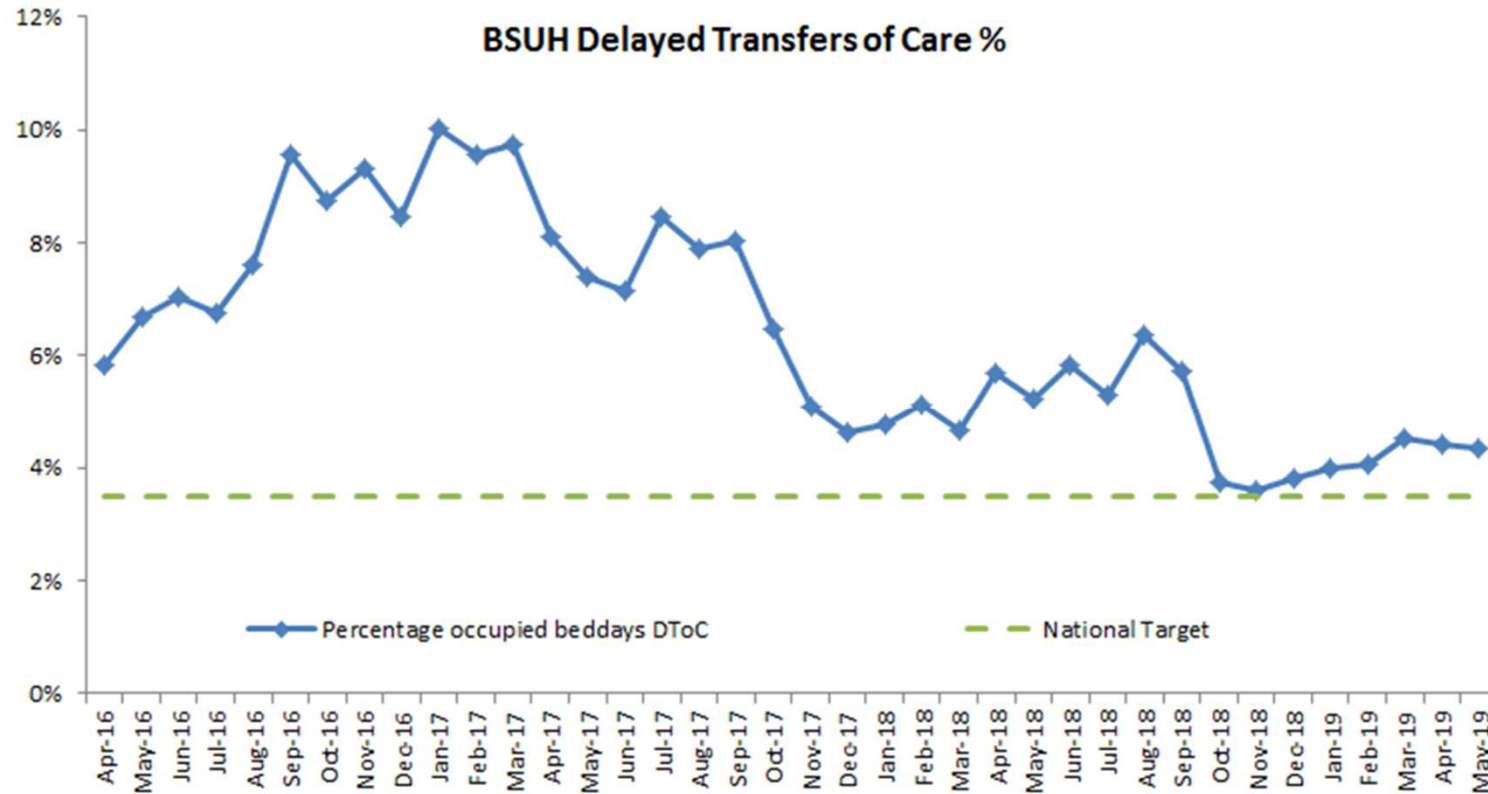
- Following action taken collectively by health and social care partners delayed transfers of care from Brighton & Sussex University Hospital decreased from 6.4% to 3.5% ahead of the winter period and were sustained between 3.5% and 4.1% after winter.
- Support from other local health and social care systems in response to pressure in the local system.
- Maintenance of patient safety in A&E during periods of sustained demand pressure.
- Ability of system partners to rapidly support additional capacity in response to system pressure.
- Mobilisation of additional care home clinical support ward rounds across the city.
- Introduction of mental health street triage services in Brighton and Hove from early December.
- Increase in the number of paramedics following a recruitment drive by SECamb.
- Single winter communications plan across Sussex and East Surrey aligned to the national NHS campaign.
- Increased provision of rehabilitation beds and home care hours over the winter period.



Learning from Last Winter

What went well:

- Overall reductions in DToCs





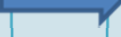




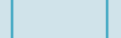


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Learning from Last Winter

Area/Opportunity for Improvement		Action taken
The need for a whole system approach capacity and demand plan for winter		A whole system Capacity & Demand model is being developed
Improved utilisation of primary care, improved access		Direct booking digitally enabled via NHS 111 by Nov 19
Ambulance response times		Additional investment in SECAmb for 19-20
Ambulance handovers delays at RSCH		Agreed system ambulance handover improvement plan
Improvements to acute hospital flow		Increase in ambulatory same day emergency care and BSUH internal flow improvement programme
High number of patients in an acute bed with long length of stay (21 days+)		Long length of stay improvement programme
Limited community rehabilitation capacity		Commissioning additional capacity for 19-20 – Lindridge, Newhaven Downs
Levels of long term care home admission		Discharge to Assess (D2A) Improvement Programme
Care Home responsiveness in assessing new residents		Increased engagement with residential and nursing providers Care Matching task and finish group to maximise brokerage efficiency
Mental Health Capacity		SES STP MH Programme – Investment in Core 24, Crisis Response and Home Treatment Teams, Opening of new 24/7 Psychiatric Decision Unit.



Winter plan key risks and mitigations

Risk	Mitigations
System Flow	<ul style="list-style-type: none"> • Additional community and Newhaven confirmed to come online Sept/Oct 19 • Establish multi agency agreement on standard operating procedure and escalation process and triggers for all community pathways • LLOS action plan in place, multi system engagement secured, regularly reviewed
Challenge with timely access to domiciliary care	<ul style="list-style-type: none"> • Local authority engagement with homecare provider market • Care Matching task and finish group to maximise brokerage efficiency
Workforce challenges across the system	<ul style="list-style-type: none"> • Prebooking block contracts with agency and bank staff • STP wide and local winter communications plan • Flu vaccine uptake by staff • Upskilling workforce to ensure flexibility across multiple areas • Preplanning rota fill across providers
Mental Health patient flow pressures	<ul style="list-style-type: none"> • STP Mental Health Programme Investments 19-20 • STP Executive escalation related to housing and accommodation risk identified. • Development of SES Mental Health escalation plan, triggers and related actions.
Low uptake of flu vaccine	<ul style="list-style-type: none"> • National and local campaigns • CQUINs in place to support uptake locally
Increased attendances / admissions from at risk cohorts i.e. frail elderly, respiratory, homeless	<ul style="list-style-type: none"> • Multi system core care plan access • Forum to discuss and plan for high intensity users • Robust community planning for same day service access e.g. respiratory • Streaming away from A&E to ambulatory and frailty units where appropriate • Robust admission avoidance pathways and full access/utilisation of available pathways
Brexit	<ul style="list-style-type: none"> • Coordinated no deal Brexit contingency planning through Sussex Resilience Forum

LGA/NHS peer review recommendations/actions

Overarching objective 'Put the patient and the wider population needs first'

Recommendation/Finding	Action
There is a lack of trust, respect and confidence between partners	New weekly face to face system operational executive meeting focused on leading improved system collaboration and delivery
Staff need the collective vision of the Home First philosophy to work to	Discharge to Assess improvement programme
The system needs a Demand and Capacity Plan which is dynamic and future proofed	Underway and coordinated by senior Operational Executive Group
Managers and staff need to be empowered to lead and act - too many system calls	Review of system escalation, triggers and actions
The focus on complex DToCs is distracting focus from the real cause of poor patient flow	Long Length of stay improvement programme, simplified out of hospital pathways, improved front door service model for rapid assessment and discharge and an integrated approach to discharge
An agreed model of care was not articulated or shared	Simplification of discharge pathways



Next Steps



	Action
Aug/Sep	NHS Review and Assurance process
September	Winter Plan covering entire BSUH Footprint to Local Accident and Emergency Delivery Board (LAEDB)
September	Process of stress testing plan
September	Final Plan submitted to LAEDB for approval
September	CCG governing body review and approval
Throughout Winter	Close monitoring of winter plan throughout the winter by all partners (via LAEDB Monthly and Operational Executive Group weekly)

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Conclusion

- Last Winter was very challenging for Brighton and Hove system but the system was able to maintain a focus on patient safety
- There are a number of lessons that have been identified that informed the development of the plan for this winter.
- The LGA/NHS peer review has identified a number of opportunities to strengthen partnership working, all system partners are committed to this
- The development of a whole system approach to capacity and demand planning for winter will significantly strengthen our plans
- However it is recognised that the system remains a challenged system and there is an improvement journey that needs to be continued to deliver the best possible services to the residents of Brighton & Hove
- It is also important that as a system we effectively support our staff during the challenging winter period

