

CENTRAL BEDFORDSHIRE HEALTH AND WELLBEING BOARD

Date of Meeting

25 January 2017

Winter Planning for Health and Social Care Delivery into 2017

Responsible Officers:

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Public

Purpose of this report

1. To update the Board on the winter planning preparations.

RECOMMENDATIONS

The Health and Wellbeing Board is asked to:

1. note the contents of this report.

Issues

2. The Health and Social Care system is working under growing pressure regarding demand for services, whilst resources are increasingly tight. This pressure can be particularly evident during the winter months and the impact of seasonal demand on services. This necessitates partnership working and the ability to deliver in new and innovative ways.

Background Context

3. The winter months are challenging for the whole system. The demand for services during the winter months inevitably means that there is additional pressure on both health and care services, including ambulance and hospital services. It is therefore essential from a health and care perspective that there is ongoing emphasis on ensuring people are actively supported within the community in the first instance and that those admitted to hospital can be discharged promptly once they are medically stable directly back home.
4. For some people this could be with additional intermediate care support at home, reablement, package of care, step up/step down and in some cases into a long term care placement. There is an increasing difficulty in sourcing sufficient domiciliary care providers, an issue that is acknowledged locally, regionally and nationally as a supply problem, not just for Central Bedfordshire, although the rurality of the area poses additional problems for providers.
5. To mitigate some of the pressures national campaigns such as Stay Well this winter are promoted locally to minimise reliance on A&E services and to encourage people to seek help and advice community based services such as local pharmacists.
6. In November 2016, Department of Health and Department for Communities and Local Government issued a joint letter acknowledging the joint planning for winter and set out some practical actions and avenues of support that the local authorities could consider to foster resilience over the winter period. (Appendix 1)

Accident and Emergency Delivery Boards

7. In July 2016 the NHS required that A&E Delivery Boards be established (to replace previous System Resilience Group arrangements) to improve A&E delivery and performance and focus solely on Urgent and Emergency Care. The Delivery Groups are chaired by the local Acute Trusts.
8. A&E Delivery Boards are required to coordinate and oversee five mandated areas of focus:
 - Streaming at the front door of A&E– to ambulatory and primary care.
 - NHS 111 – increasing clinical call handler capacity in advance of winter.
 - Ambulances – Disposition on Dispatch and code review pilots.

- Improved flow – ‘must do’s that each Trust should implement to enhance patient flow.
 - Discharge – mandating ‘Discharge to Assess’ (D2A) and ‘trusted assessor’ type models.
9. Central Bedfordshire’s residents currently use up to seven hospitals none of which is within Central Bedfordshire boundary. Currently the Council is represented at the Bedford Hospital and the Luton and Dunstable Hospital A&E Delivery Boards. Residents also attend other Hospitals including those in Stevenage (Lister), Cambridgeshire (Addenbrookes and Hinchingsbrooke), Buckinghamshire (Stoke Mandeville) and Milton Keynes. Further arrangements will be needed to ensure adequate representation at the other relevant Delivery Boards.
10. From a joint perspective the Discharge to Assess intervention requires health and social care to work effectively together and there is considerable joint work in both the Bedford and Luton and Dunstable A&E boards to develop effective plans. Discharge to Assess (D2A) demonstrates the following benefits:
- Patients who are discharged home sooner recover better with increased wellbeing
 - Patients with dementia are returned to more familiar settings sooner
 - Assessments can be carried out in the home environment leading to more realistic needs
 - Care Home placements should reduce
 - Demand for domiciliary care should reduce
 - People will be supported to live independently in their own homes
11. Discharge to assess arrangements will need to be considered for Central Bedfordshire residents accessing other hospitals.
12. Seasonal increase in hospital admissions can lead to repeated and sustained breaches of the urgent and emergency care standard, which is that 95% of patients should be seen, treated, admitted or discharged within 4 hours of arrival at A&E. This is an NHS England improvement target of 95% in A&E.
13. It is now well understood that unless patients ‘flow’ through the hospitals are supported by timely and effective discharge processes, performance in A&E drops and the system fails to meet the 95% target.

14. Performance against this target is monitored weekly. In addition to this, Better Care Fund Plan has a key target to reduce non-elective admissions into hospital and delayed transfers of care. These metrics are monitored by the Health and Wellbeing Board.
15. Central Bedfordshire Council participates in weekly teleconferences for the Luton and Dunstable Hospital and colleagues from Bedford Borough participate in a similar for Bedford Hospital on behalf of Central Bedfordshire residents to support wider hospital discharge process. In addition to these, the Council also participates in the regular system resilience teleconference.

Market Shaping

16. **Residential and nursing homes** - there is a joint approach to source additional community beds for Central Bedfordshire residents. These will provide intermediate care nursing beds for people during their rehabilitation and reablement for the winter period. An adult social care process is in place to assess people in a timely way.
17. The Council regularly monitors vacancy and bed capacity rates in residential and nursing care. Currently there is more bed capacity in the south of Central Bedfordshire. For both north and south Central Bedfordshire there is less capacity in nursing beds. Information on bed capacity is shared regularly with the wider system.
18. **Domiciliary Care** - whilst there are some challenges sourcing care packages in the Ivel Valley and West Mid Beds localities, two providers are now active again after period of inactivity and the council is working with colleagues in Cambridgeshire to look at cross boundary arrangement for domiciliary care to ensure all areas covered. As well the issue of capacity, complexity of need often requiring double handed carer input remains a challenge. The situation is continually monitored.
19. The continued arrangements with the Social Work discharge team based on site at the Luton and Dunstable works well and helps expedite discharge. There is a similar ongoing arrangement with Bedford social work colleagues at Bedford Hospital. The Council has also rearranged its adult social care management team to create a role focused on discharge pathways for Central Bedfordshire across all the hospitals accessed by residents.

Winter Plan - National campaign for 16/17

20. Seasonal Flu Vaccination **launched 12 October**.

21. The Council and the CCG promoted the campaign to increase uptake of flu vaccination amongst the health and care workforce. The Campaign also targeted Carers, people with long term conditions such as Common Obstructive Pulmonary Disorders (COPD), bronchitis, heart disease etc. as well as children aged 2-4 years and pregnant women.
22. A secondary audience for the campaign was also parents of children in school years 1, 2 and 3, (age 5-7), to be aware and encouraged to give permission for children to receive the free nasal spray vaccination. Further campaigns are planned as follows:
 - **Flu and First Signs: 7 November- 12 December.**
To prompt all aged 65 and over or people with long-term health conditions and carers, family and friends to take specific actions to stay well over the winter, including advice from a pharmacist at the first signs of illness and having the flu jab. This phase will consist of TV, print, radio, online, digital, social media, PR, pharmacy partnerships and roadshow events.
 - **Stock up and First Signs: 12 December for two weeks prior to Christmas.**
Prompts key target audiences to prepare for winter by stocking-up ahead of the cold weather and holiday period closures with food and other essential supplies and getting their prescriptions filled. It will also advise to seek advice from a pharmacist at the first signs of illness.
 - **Support and SWTW - 26 December 2016 to 4 March 2017:**
This phase prompts all aged 65 and over or people with long-term health conditions and their carers, family and friends to take specific actions to stay well, including seeking advice from a pharmacist at the first signs of illness. TV, print, radio, online, digital, social media, PR, pharmacy partnerships and roadshow events.

Financial and Risk Implications

23. There are potential and significant financial and risk implications associated with winter pressures. The growing demand for services inevitably means that there is pressure on both health and care budgets. These include additional resources and packages of care to keep people at home; cost of meeting the seasonal demand in the Acute settings.

Governance and Delivery Implications

24. Delivery and performance will be monitored by the Accident and Emergency Delivery Board and other reporting governance structures for the CCG and the Council.

Equalities Implications

25. The Council and the CCG have a statutory duty to promote equality of opportunity, eliminate unlawful discrimination, harassment and victimisation and foster good relations in respect of nine protected characteristics; age disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

Implications for Work Programme

26. N/A

Conclusion and next Steps

27. A Central Bedfordshire Severe Weather Plan is being updated and will be used to support the initiatives described above. The Plan is aimed at health and social carer services and other public agencies and professions who interact with those most at risk from cold weather in winter.
28. Joint working is ongoing across the system to ensure that residents are being cared for in their own homes wherever possible.
29. Working is continuing with the 7 hospitals to ensure smooth discharges and transitions though this is proving to be challenging.

Appendix 1 - Winter Planning Letter