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Agenda

Health and Social Care Scrutiny Board (5)

Time and Date

10.00 am on Wednesday, 21st November, 2018

Place

Committee Room 3 - Council House

Public Business

- 1. Apologies and Substitutions
- 2. Declarations of Interest
- 3. **Minutes** (Pages 3 8)
 - (a) To agree the minutes of the meeting held on 17th October, 2018
 - (b) Matters Arising
- 4. **A and E Four Hour Performance** (Pages 9 14)

Report of Lisa Kelly, University Hospitals Coventry and Warwickshire (UHCW) who has been invited to the meeting for the consideration of this item

5. Winter Planning (Pages 15 - 26)

Briefing Note of the Coventry Accident and Emergency Local Delivery Group

An update on A and E Performance will be provided at the meeting

Representatives from University Hospitals Coventry and Warwickshire (UHCW), Coventry and Rugby Clinical Commissioning Group (CCG) and Coventry and Warwickshire Partnership Trust (CWPT) have been invited to the meeting for the consideration of this item

6. Work Programme and Outstanding Issues 2018-19 (Pages 27 - 32)

Report of the Scrutiny Co-ordinator

7. Any other items of Public Business

Any other items of public business which the Chair decides to take as matters of urgency because of the special circumstances involved

Private Business

Nil

Martin Yardley, Deputy Chief Executive (Place), Council House Coventry

Tuesday, 13 November 2018

- 2) Council Members who are not able to attend the meeting should notify Liz Knight as soon as possible and no later than 9.00 a.m. on Wednesday 21st November giving their reasons for absence and the name of the Council Member (if any) who will be attending the meeting as their substitute.
- 3) Scrutiny Board Members who have an interest in any report to this meeting, but who are not Members of this Scrutiny Board, have been invited to notify the Chair by 12 noon on the day before the meeting that they wish to speak on a particular item. The Member must indicate to the Chair their reason for wishing to speak and the issue(s) they wish to raise.

Membership: Councillors J Clifford, D Gannon (Chair), P Hetherton, D Kershaw, R Lakha, R Lancaster, T Mayer, C Miks, D Skinner and D Spurgeon (Co-opted Member)

By Invitation: Councillors F Abbott, R Ali and K Caan

Please note: a hearing loop is available in the committee rooms

If you require a British Sign Language interpreter for this meeting OR it you would like this information in another format or language please contact us.

Liz Knight

Telephone: (024) 7683 3073

e-mail: liz.knight@coventry.gov.uk

Agenda Item 3

Coventry City Council Minutes of the Meeting of Health and Social Care Scrutiny Board (5) held at 10.00 am on Wednesday, 17 October 2018

Present:

Members: Councillor D Gannon (Chair)

Councillor J Clifford Councillor P Hetherton Councillor D Kershaw Councillor R Lakha Councillor R Lancaster Councillor T Sawdon Councillor D Skinner

Co-Opted Members: David Spurgeon

Other Members: Councillor F Abbott, Cabinet Member for Adult Services

Employees (by Directorate)

V Castree, Place Directorate P Fahy, People Directorate L Gaulton, People Directorate L Knight, Place Directorate K Lees, People Directorate

Apologies: Councillor T Mayer and C Miks

Public Business

17. Declarations of Interest

There were no declarations of interest.

18. Minutes

The minutes of the meetings held on 12th and 19th September, 2018 were signed as true records. There were no matters arising.

19. Care Quality Commission (CQC) Local System Review - Improvement Plan Progress

The Board considered a report of the Director of Adult Services which summarised the progress against the improvement plan arising from the Care Quality Commission (CQC) Local System Review undertaken between December 2017 and March 2018. The system wide review had looked at the health and care for people aged 65 and over in Coventry. A copy of the Improvement Plan Progress Update was set out at an appendix to the report. Councillor Abbott, Cabinet Member for Adult Services, attended the meeting for the consideration of this item.

The report indicated that the Improvement Plan was owned by the Health and Wellbeing Board, who received routine monitoring reports on progress against the plan. The Board noted that progress against the plan was monitored by the DHSC through monthly telephone calls and a number of these calls had been postponed or cancelled at the request of the DHSC and no concerns had been raised to date.

The Board were informed that work on the improvement plan was due to be completed by March 2019 and system improvements would be embedded in programmes and activities thereafter. Good progress was being made on many of the actions, however some actions had slipped due to resourcing factors and capacity.

The report provided a brief summary of progress against the following themes: Vision and strategy
Engagement and involvement
Performance, pace and drive
Flow and use of capacity
Market development
Workforce
Information sharing and system navigation.

Although good progress had been made, it was important that the completion of the improvement plan continued to enable the Health and Wellbeing Board to sign off the plan in March 2019.

The Board questioned the officer on a number of issues relating to the report and responses were provided, matters raised included:

- The relationship between staff in Adult Social Care and UHCW employees
- A request for practical examples of new initiatives or where improvements have been introduced by Council staff and partner employees that was having a positive impact for the system
- Was promised funding being released by the partner organisations
- Were the system leaders in Coventry fully engaged with the development of the Better Health Better Care Better Value programme and with partnership working including the relationship between Coventry and Rugby CCG and local GPs
- How successful were the multi-disciplinary team meetings and the relationships between partner employees at the lower levels
- Additional information about the Red Bag scheme
- How good was the patient hand over from hospital staff to employees in Adult Social Care
- Additional information about the progress being made and where the impact of actions put in place could already be seen
- Was the information being given just the good news without mentioning areas of concern
- A request for information about the current position regarding the companies who provide home care support for Coventry residents
- The importance of promoting dementia awareness to ensure people are provided with the necessary support
- If the CQC were likely to revisit Coventry

 Further information about what was happening in relation to social prescribing.

RESOLVED that:

- (1) The progress made and the areas still to be addressed against actions in the improvement plan arising from the CQC local system review be noted.
- (2) A progress report on the outcomes of the CQC light touch review be submitted to a future Board meeting.
- (3) A progress report on the social prescribing programme be submitted to a future meeting of the Board in March/April, 2019.

20. Director of Public Health's Annual Report 2017/18

The Board considered a report and presentation of the Director of Public Health and Wellbeing concerning her Annual Report for 2017/8 'Healthier for Longer, Securing Healthy Futures for our Communities', a copy of which was set out at an appendix to the report. The report included recommendations for health and wellbeing partners across Coventry. The annual report had also been submitted to the Health and Well-being Board at their meeting on 8th October. Councillor Abbott, Cabinet Member for Adult Services attended the meeting for the consideration of this item.

The report was a statutory report produced each year. This year the report focused on healthy aging and the health of older people. It had been produced in partnership with Adult Social Care.

Information was provided on the health of Coventry's older population, with the city having an estimated 50,400 residents aged 65 and over. The population of those over the age of 75 was projected to increase by nearly 50% over the next 20 years. Reference was made to the gap between healthy life expectancy and life expectancy. In Coventry men could expect to live just over a fifth of their lives in poor health whilst women could expect to live almost a quarter of their lives in poor health.

The annual report took the opportunity to highlight the importance of prevention and early intervention in promoting good health in later years, and managing the demand for health and social care services. The Board noted that Coventry was still behind the England average on many healthy behaviours and risk factors.

The report highlighted activities across the city to promote good health and prevent ill-health across all age groups to support increases in healthy life expectancy which included:

- a) Tackling loneliness and social isolation
- b) The new Healthy Lifestyles Coventry services commissioned by the Public Health team
- c) Supporting those at risk of fuel poverty
- d) Interventions from the Adult Social Care team to promote early help and maintain independence
- e) Reducing delayed transfers from hospital

The report also highlighted the progress and commitment across health and wellbeing providers to make sure that residents received the right care when they needed it and in a way that met their needs and achieved their outcomes. Throughout the report there was a focus on an individual family and other members of the community to provide examples at living longer in good health.

The presentation provided information on aging in good health; what influenced healthy life expectancy; taking care of your body and mind; and the health and care services for the older population of Coventry. Attention was drawn to the recommendations of the Annual Report which were as follows:

Identify older people community assets

Promote community-based groups to combat social isolation

Encourage the further reduction of health inequalities including Marmot City

Increase the profile of ill health prevention

Improve immunisation rates through partnership working

Encourage co-design of services with older people

Design health and care pathways to deliver high quality care for older people.

The presentation concluded with an update on the recommendations from the 2016/17 Annual Report 'Shape Up Coventry, The Urgency of Promoting Healthy Weight Among Children and Young People'.

Members raised a number of issues arising from the report and presentation and responses were provided, matters raised included:

- A request for the information to be provided on a ward basis so Members were aware of particular issues relevant to their wards
- Why were their differences in the 'window of need' between males and females
- Support for the helpful and clear document
- A concern that the family hubs hadn't been located in local schools and the importance of using schools to provide support for families
- The importance of publicity to promote ways of preventing dementia
- The importance of a healthy diet and hydration for older people to avoid the complications associated with constipation
- The impact that genetics play in determining a person's health in later life
- Further information about the immunisation programme
- Further information about follow up support when people attend a and e and the fracture clinic after a fall, to prevent further falls
- Clarification about the impact of the Marmot partnership work and any improvements that were now known
- The importance in involving the over 65s in the development of the proposed programme of activities for City of Culture 2021
- What work was being undertaken in the areas of highest deprivation to combat social isolation

RESOLVED that:

(1) The content of the Director of Public Health's Annual Report be noted.

- (2) The dissemination of the report be supported.
- (3) The actions proposed be endorsed.
- (4) Information on the follow up work with older people who attend A and E and the fracture clinic to prevent further falls be circulated to members.

21. Update on Recommendations from the Task and Finish Group on Improving the Quality of Housing and the Health and Wellbeing of Coventry Residents

The Board considered a briefing note of the Director of Public Health and Wellbeing which provided an update on the progression of the six recommendations which had been identified through the evidence submitted to the Task and Finish Group on Improving the Quality of Housing and the Health and Wellbeing of Coventry Residents. Councillor Abbott, Cabinet Member for Adult Services attended the meeting for the consideration of this item.

The first recommendation concerned authorising discussions with Coventry and Rugby CCG to look at hosting advice outreach in GP surgeries. The Board noted that it was not possible to implement this proposal due to budgetary constraints, however work was being piloted for a Coventry Social Prescribing Service which offered short term, one to one support to engage with the patient to improve their mental and physical wellbeing. The option of including support around poor quality housing was being explored. The second option concerned endorsing the work of the Citizens Advice Frontline Network in supporting tenants and other relevant organisations had now signed up as members of this Network. The third recommendation concerned the work of the West Midlands Fire Service on the Health Agenda. The Board were informed that the Fire Service were no longer able to provide support since the work they had been undertaking was outside their service delivery model.

The fourth recommendation concerned information sharing between partners leading to the identification of vulnerable people who may benefit from services or support through community resources. A series of workshops and meetings had been held with partners who worked with vulnerable people in the city. This identified links that were working well and where links could be made. The fifth recommendation was to undertake the necessary work required to define and promote Healthy Homes. The Public Health Team were supporting Public Health England in the development of a Housing and Health resource for the West Midlands. The final recommendation was to note the proposal to continue to develop Selective Licensing in the city and work was ongoing.

Members questioned the officer on a number of issues and responses were provided, matters raised included:

- Further information about the social prescribing service
- A concern that the CCG were not supporting hosting advice outreach in GP surgeries
- A disappointment that the West Midlands Fire Service had ceased providing the Back Home Safe and Well initiative
- A concern about the lack of progress with the development of selective licensing in the city.

RESOLVED that:

- (1) The work carried out to date on the recommendations identified through the Task and Finish Group be noted.
- (2) The progression of the actions carried out to date and the further work to meet the six recommendations be approved.
- (3) The Board's concerns regarding the CCG not supporting hosting advice outreach in GP surgeries and the lack of progress with Selective Licensing in the city to be raised as appropriate.

22. Work Programme and Outstanding Issues 2018-19

The Board noted their work programme for the current municipal year, noting that the programme would be updated taking into account the two additional requests for reports detailed in the recommendations to Minute 19 above headed 'Care Quality Commission (CQC) Local System Review – Improvement Plan Progress'.

23. Any other items of Public Business

There were no additional items of public business.

(Meeting closed at 12.05 pm)

UHCW 4 Hour Performance Summary

Background and Introduction

Summary of UHCW 4 hour performance summary, trend and winter planning

Current State

Current Performance at a trust level (Adult ED, Childrens ED, Emergency Gynae Unit, Eye Casualty, Rugby Urgent Care and Walk in Centre) is 89.1% year to date. However recent performance has lifted achievement with monthly recordings of 91.0% September, 90.2% October and November to date at 90.7%

Site	October	November	Rolling 28 Days	This Qtr	Last Qtr	Last Year	This Year
University Hospital	86.6%	87.4%	88.8%	86.8%	84.9%	77.0%	84.7%
Rugby	99.5%	99.7%	99.8%	99.5%	99.7%	99.2%	99.4%
Walk in Centre	98.3%	98.3%	98.3%	98.3%	99.6%	96.5%	99.0%
Local Health Economy	90.2%	90.7%	91.7%	90.3%	89.3%	81.9%	89.1%

The trusts type 1 facilities (Adults and Childrens ED) minors stream has achieved 93.1% year to date, however recent achievement has been in excess of this with November to date posting 95.2%.

Stream	Oct-18	Nov-18	2017/18	2018/19
Type 1 Minors	94.2%	95.2%	87.7%	93.1%
Type 1 Majors	75.3%	76.9%	51.2%	70.7%
Type 1 Resus	69.2%	72.3%	53.8%	67.8%
Type 1 Paediatrics	94.6%	93.5%	93.6%	95,4%

Recent performance at a more granular weekly level has seen vast gains with the last week of October and the first week of November achieving 94.3% and 97.7% respectively. The collective type 1 facility also achieved over the 95% standard at 96.4% the first week of November (99.7% in Childrens and 95.2% in Adults).

				Ending											
Measure	National Target	Local Target	2017/18 Weekly Baseline	26 Aug 2018	2 Sep 2018	9 Sep 2018	16 Sep 2018	23 Sep 2018	30 Sep 2018	7 Oct 2018	14 Oct 2018	21 Oct 2016	28 Oct 2018	4 Nov 2018	11 Nov 2018
UHCW8WIC 4hr %	95%		81.9%	86.4%	90.2%	89.6%	94.1%	91.0%	91.8%	87.6%	87.6%	88.1%	94.3%	97.7%	87.2%
ED/CED 4hr %	95%		73.7%	78.1%	84.1%	83.4%	90.5%	85.7%	86.9%	80.7%	80.2%	81.4%	91.3%	96.4%	80.0%
CED 4hr %			93.9%	98.0%	99,4%	98.1%	99,4%	91.1%	95.5%	97.5%	92.9%	88.6%	97.7%	99.7%	90.3%
ED 4hr %	95%		67.0%	73.9%	80.3%	79.3%	87.4%	83.8%	84.1%	75.1%	76.0%	78.7%	89.1%	95.2%	76.2%
ED Conversion %			35.6%	36.1%	39.8%	38.3%	38.0%	36.2%	34.9%	35.3%	34.9%	37.3%	39.8%	38.4%	37.3%
ED Minors 4hr % (RAG vs Trajectory)	95%	99%	87.7%	90.8%	89.8%	93.2%	96.1%	95.5%	97.6%	92,9%	94.4%	91.6%	95.9%	98.7%	93,9%
ED Minors 4hr % Trajectory										93.3%	93.7%	94.1%	94.6%	95.1%	95.6%
ED Major 4hr %	95%		51.2%	65,2%	76.3%	72.4%	83.8%	78.8%	77.8%	66.7%	67.6%	73.3%	86.7%	94,6%	67,0%

Minor's achievement was approaching the 99% standard at 98.7% and was in excess of our trajectory to move towards this mark.

Trajectory





The trust has achieved its four hour improvement trajectory for each of the last six months.

Trend across Years



Monthly delivery of the four hour standard across years is improved year on year for each of the last six months.

Adult ED 4 Hour Achievement						
Month	2016/17	2017/18	2018/19	Var %		
Apr	66.4%	74.7%	69.5%	5.2%		
May	66.5%	65.3%	81.8%	-16.6%		
Jun	67.3%	70.0%	78.4%	-8.4%		
Jul	70.0%	68.9%	81.7%	-12.7%		
Aug	82.4%	73.9%	72.4%	1.6%		
Sep	82.4%	63.2%	82.3%	-19.1%		
Oct	74.6%	70.7%	81.1%	-10.4%		
Nov	67.2%	68.6%				
Dec	64.5%	66.9%				
Jan	60.8%	62.8%				
Feb	63.8%	57.2%				
Mar	64.9%	61.4%				
Apr-Oct	72.7%	69.5%	78.2%	-8.7%		

Focusing more specifically on the adult ED department, four hour achievement is improved by 8.7% year to date with attendances up 4.9% year to date and across each month this year.

Adult ED Attendance Volumes



Benchmarking

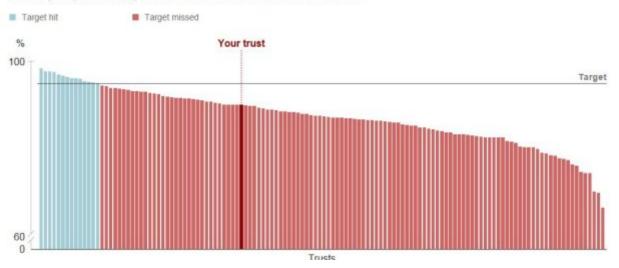
Patients treated or admitted within four hours of arrival at A&E

October 2018 figures

TARGET YOUR TRUST ENGLAND

95.0% 90.2% 89.1%

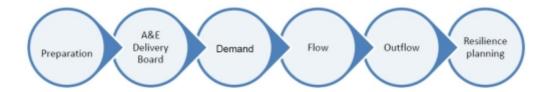
University Hospitals Coventry & Warwickshire NHS Trust ranked 47 of 130 trusts



The most recent reportable data shows October performance benchmarked at 47 of 130 general and acute trusts, in the second quartile but down from 39th in September where the trust achieved 91.0%.

Winter Planning Page 11

This UHCW winter plan sets out operational delivery arrangements for winter 2018/19. The plan is structured as such



UHCW will continue to collaborate and engage to ensure we understand the demand on all areas and the dependency on one another. This is an ongoing piece of work achieved through a number of internal work streams;

- -Emergency Care Improvement Board
- -Patient Flow Project Group
- -Operational Team meetings

Effective winter preparedness cannot be achieved in isolation therefore UHCW will continue to work in partnership at the Coventry & Warwickshire A&E Delivery Board to ensure plans are aligned and the system provides the necessary capacity to support delivery of the national 4 hour standard.

The winter plan encapsulates

- Daily sit rep reporting & aligning UHCWs response to operational pressures to OPEL mitigation actions
- Focused activities weeks: Winter Perfect Weeks, Multi Agency Discharge Events and Frailty -'MADE'
- Full Capacity Protocol & Escalation Triggers with actions well embedded
- Capacity & Site Management: Development & Implementation of revised Bed Management Policy, and Escalation Policy with action cards created to support actions required by On Call Management Team, including when presence is required on site
- Utilisation of Patient Transit Lounge
- Protection of assessment beds
- Additional beds for heightened escalation: Bathroom conversion and decant ward
- Rugby Transfers: Work completed to streamline transfers of rehab & repat patients and increase effective utilisation of Rugby beds
- Winter Comms Strategy: UHCW communications and engagement strategy aims to support national and local communications work about winter.
- Increase hot clinics
- Visibility at ward/department level who MOD is
- Red 2 Green
- Streaming
- Prevent and reduce hospital admissions using alternative pathways of care
- Develop and maintain highly performing minors stream within ED
- Develop and maintain highly performing majors stream
- Front door clinical escalations to Silver 0830 meeting
- Surgical assessment area able to consume work load by utilising new assessment beds available
- Embed Criteria Led Discharge
- Front door outreach service from Gerontology to 'front door' to improve identification and early turn around of frail patients to be agreed
- Review planned theatre downtime, elective/emergency case plan to manage demand over festive period & winter. Elective/emergency case plan to manage demand.
- Virology 7 day service for flu testing
- Engaging consultants, matrons & ward managers to drive the board rounds & own the processes
- Ensure sufficient physical beds & trollies

Pageunfacilities partner ISS response to winter

- Snow Clearing/Gritting
- During winter the levels of community acquired infections (predominantly Norovirus) are higher. Infection Control measures will be reinforced following trust policy. Early identification and isolation of patients symptomatic with diarrhoea and/ or vomiting or respiratory symptoms on admission will be enforced.
- The Trust Corporate Business Continuity Plans will be used to escalate and plan for service disruption recovery relating to reduced staffing
- Cold Weather Plan
- Occupational Health Seasonal Flu plan
- Flu pandemic plan





Briefing note

To

Scrutiny Board 5

From

Coventry Accident and Emergency Local Delivery Group

Date

21 November 2018

Subject

Winter Planning

1 Purpose of briefing note

To provide Scrutiny Board 5 with an update on preparations for winter 2018/19 in order to manage pressures across health and social care.

2 Recommendations

Health and Social Care Scrutiny Board (5) are recommended to note the update provided on preparations for winter and provide any comments and feedback in relation to the plans in place to prepare for winter.

3 Information/Background

Coventry and Warwickshire STP area is required to submit a winter assurance template to NHS England and NHS Improvement to meet the following objectives:

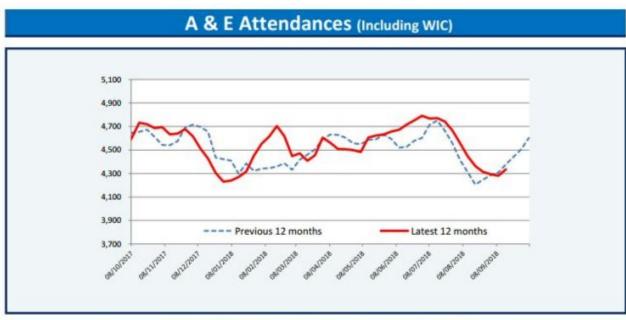
- To provide a single document with a system wide approach to urgent and emergency care over winter 2018/19.
- The provision of daily operational oversight to understand details of provider planning, identify areas of concern and also understand variation throughout winter.
- Development of a repository of trust policies and processes with regards to flow that can be reviewed for good practice sharing examples and areas of concern addressed.
- Have in place assurance documentation which builds on learning from winter 2017/18
- To provide an understanding of support requirements to facilitate targeted improvement offers

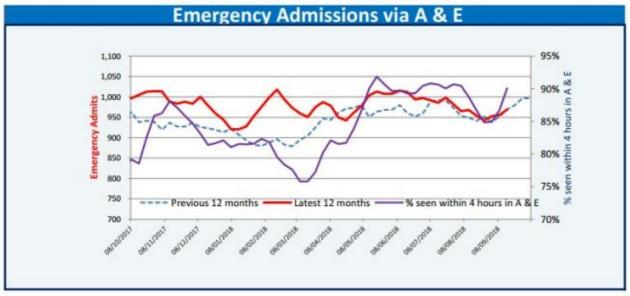
This template is owned, monitored and managed by the Coventry and Warwickshire A&E Delivery Board. This board oversees and area covering over 900,000 residents, working across six NHS providers, with 1,830 general and acute beds, over 3,000 nursing and residential homes beds, two local Authorities, over 130 GP practices and three NHS CCGs.

The Coventry and Warwickshire winter assurance template was submitted to NHS England on 26 October 2018 on behalf of the A&E delivery board.

4 Winter Pressures

In many ways pressures traditionally experienced at winter continue to be felt beyond the winter period itself with parts of the system remaining under sustained pressure throughout the year. The graphs below demonstrate this point through data relating to A&E attendances, admissions, and walk in Centre attendances as shared at the Coventry Accident and Emergency Delivery Group:

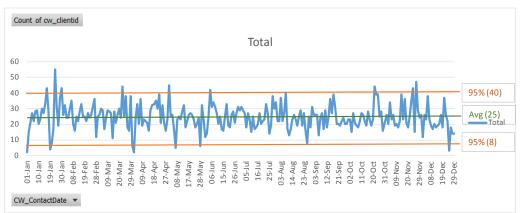




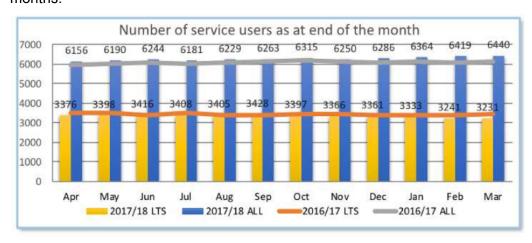


Equally demand for Adult Social Care measured in respect of referrals for support through our community front door do not demonstrate any noticeable peaks over the winter period.

Social care community referrals over 12 month period



In terms of people supported over a twelve-month period there is also noticeable impact over winter months:



5. Winter Planning

Therefore, although winter remains a key focus in the annual health and care cycle the focus is very much on ensuring that the system maintains the capacity and flow required to continue to operate effectively with the additional challenges that the winter period presents, not least due to bad weather and the risk of staff absence due to ill health. For 2018/19 £347k was received through STP monies, all of which was allocated to CWPT to help support community and mental health services.

As winter planning takes place year on year the objectives and measure put in place also are very similar from year to year and focus on:

- Ensuring that there is enough capacity across health and social care to meet the pressures
 of winter
- Ensuring the system delivers care at the most appropriate level for the needs of patients and supporting more people within the community
- Ensuring the system is prepared for dealing with common expected winter illnesses and severe weather events
- Having an operational resilience network that enacts actions plans at peak times through a robust escalation reporting and management process

6. Key activities to support winter resilience

There are a set of existing plans in place with regard to system resilience, these relate to the delivery of nationally mandated actions there are also a series of additional local system level actions are in place to support resilience over the winter period.

Key elements that will be focussed on in respect of ensuring resilience are as follows:

6.1 Profiling of Elective Work and Reducing Bed Occupancy

Provider elective plans are based on reducing routine inpatient elective work in the week before Christmas, Christmas itself and into the New Year, freeing up both theatre capacity and available beds over that holiday period.

Reducing elective work reduces the demand for beds overall across providers by approximately 5% over this period this allows for medical patients to be placed overnight as necessary in capacity not normally opened overnight.

In addition, the system will work to reduce bed occupancy in the week before Christmas as in previous years to below 85% at least, through targeting of additional discharges. This impacts on the

profile of work for Community and Social Care both before the holiday period as well as afterwards to deal with the number of patients that are forecast to require flow into the community after the New Year.

6.2 Primary Care Provision

The majority of practices already offer additional weekend and evening appointments, and this will continue during the winter period.

There is new scheme in Coventry & Rugby in relation to GP support to care homes, CHES (Care Home Enhanced Support) focused on GP practices supporting defined nursing / residential homes with a catchment of approximately 300 beds. This support is provided to care homes across the City to avoid unnecessary admissions through proactive engagement and advice.

6.3 Community Health Services

Coventry and Warwickshire Partnership Trust provide community services in Coventry and have a range of actions to contribute to winter resilience in the system;

- Daily staffing reviews, matched with caseload demand and referral demand to support effective flow into the community
- Maintaining re-ablement activity into Discharge to Assess beds
- Participating in daily community/discharge hub arrangements
- The appointment of 2 locum physiotherapists for winter as approved in the Urgent and Emergency Care (UEC) transformation bids to increase capacity and to reduce Delayed Transfers of Care (DTOC)
- Focus on increasing staff flu vaccination rates
- Robust and proactive management of staff sickness

In addition, the Trust is mobilising it's Out of Hospital model, including the development of placed based teams aligned to GP clusters to support the proactive multi-disciplinary management of patients in the community.

6.4 Local Authority

The iBCF grant announced in the spring budget 2017 has made extra funding available to the local authority between 2017 and 2020 and this has been put in place with the aim of providing additional stability and capacity in local care systems. This resource continues to be a main element of ensuring that adult social care reduces pressures on the NHS.

The additional winter monies for Adult Social Care of approx. £1.5m for 2018/19 will be used across a range of programmes, agreed through the A&E delivery group and summarised as follows:

Description	Amount
Funding short term beds to sustain capacity to discharge people for a period of assessment	£500k
Additional social care purchasing across home support, residential and nursing as a result of increased activity over winter	£250k
Incentive scheme for providers of social care to maintain capacity and facilitate same day and weekend discharges	£240k
Additional staffing including Social Workers and Occupational Therapists to provide additional assessment capacity and move people through short term services	£180k
Additional capacity in 'step up' services to reduce ongoing care and support needs and reduce risk of people entering hospital system	£240k
Increasing capacity in street triage service extending hospital to home transport into evenings and weekends	£100k
Capacity specific to support people with mental ill health including specialist staff, housing advice and crisis cafe	£80k
TOTAL	£1,590k

6.5 University Hospital Coventry and Warwickshire (UHCW)

UHCW have delivered a range of actions to ensure resilience across a range of activity which includes:

- Daily operation of cross organisation patient flow hub to support the acute hospital wards with their discharge planning
- Streaming to GPs in the ED unit to reduce pressure on minors and majors
- Rapid Triage in A&E ensuring that minors are being seen with 4 hours.
- SAFER fully implemented across the Trust:
 - S Senior review. All patients will have a senior review before midday by a clinician able to make management and discharge decisions.
 - A All patients will have an expected discharge date and clinical criteria for discharge. This is set assuming ideal recovery and assuming no unnecessary waiting.
 - F Flow of patients will commence at the earliest opportunity from assessment units to inpatient wards. Wards that routinely receive patients from assessment units will ensure the first patient arrives on the ward by 10 am.
 - E Early discharge. 33% of patients will be discharged from base inpatient wards before midday.

- R Review. A systematic multi-disciplinary team review of patients with extended lengths of stay with a clear 'home first' mindset.
- Red to Green (R2G) embedded across all wards. This is a system intended to reduce length
 of stay by removing unnecessary waits (red days) and ensuring each day is of value to
 patient treatment or recovery (green days)
- Integrated offer between Walk in Centre and Emergency Department, through joint clinical oversight
- Additional beds over the Winter
- Increased Emergency Department staffing
- Focus on better management of patients attending ED with Mental Health Issues
- Access to additional 'hot' clinic slots
- Opening of a surgical assessment unit for direct GP referrals

6.6 Seasonal Flu, Winter Infections and Cold Weather

Coventry City Council, Warwickshire County Council and wider NHS partners are co-ordinating a pro-active campaign and response to seasonal flu, other winter infections and cold weather. The campaign and work includes:

- A dedicated webpage regarding seasonal flu vaccination holding all the resources and information for professionals and the public: www.coventry.gov.uk/flujab. 1 in 3 people in Coventry and Warwickshire are entitled to a free NHS flu vaccination which can be provided by their GP, pharmacy or antenatal clinic.
- Call to action posters which have been sent out widely to frontline partners(1) for action and sharing to encourage uptake of vaccination for all eligible groups and frontline health and care staff
- Provision of seasonal flu vaccinations for directly employed staff who provide direct personal care at both Coventry City Council and Warwickshire County Council
- Promotion of the care worker vaccination scheme provided by community pharmacies and GPs to our care providers
- Developing robust responses to care home flu outbreaks with PHE, CCGs and NHSE as well as frontline services

Last year across Coventry and Rugby 71% of people aged 65 and over had a jab, but less than half of pregnant women and those in clinical risk groups under the age of 65 took up the offer. Coventry does however boast a successful children's programme with the school programme (Reception and Years 1-4) boasting an uptake of over 65% (upper target) overall.

This first vaccine uptake figures for this season will be available later in November 2018. Appendix One provides a locally developed infographic about local trends in uptake by risk groups for last year.

Reducing winter infections

 Organisation-wide awareness raising regarding handwashing and "Catch It Bin It Kill it" messages for Coventry City Council being run jointly with Occupational Health, who are also encouraging all directly employed care staff to be vaccinated

Supporting those most vulnerable to the cold

Awareness raising among frontline staff of the services available to those who may be living
in cold homes, or struggling with fuel bills this winter. The team have a number of schemes
running this year to support those most vulnerable with heating and insulation measures. In
addition we are continuing with our multi-agency health and care cold weather alerting
process.

6.7 Communication

All partners work across the various organisational communications teams to manage the media campaign associated with seasonal pressures on behalf of Coventry and Warwickshire.

The focus of the 2018/19 campaign is:

- Increase flu vaccination take-up in the target groups: i.e. Carers, Pregnant women and long term conditions.
- Reduce pressure on urgent care and A&E through promotion of self-care, Walk in Centres,
 Urgent Care Centres, NHS 111 and Out of Hours, and sign positing of these feeder organisations of alternatives in place within the community.

6.8 System Escalation and Co-ordination

Coventry & Warwickshire CCGs are required to report to NHS England on a system-wide basis declaring the level of escalation against key system indicators/triggers. The CCG have established a single point of contact available 24/7 to provide system coordination where required. Escalation calls can be requested by any organisation under pressure.

A daily report is also required to be submitted to NHSE identifying levels of risk across the system for which support may be provided if deemed necessary. All agencies report and the response is submitted daily by the CCG.

The 2 weekly Coventry Accident and Emergency Delivery Group and the Coventry and Warwickshire Accident and Emergency Board will provide the main local forums for managing and resolving operational and tactical issues. These forums are attended by senior managers across all organisations.

7 Key Issues impacting on resilience

There are a number of issues that are challenging to predict which, if materialise can have a detrimental impact on the ability to sustain a resilient system. These include:

Workforce capacity

As part of the completion of templates for on call and shift rotas over the December and January any gaps in provision will be identified and steps taken to fill these wherever practicable.

Weather and transport

Coventry & Warwickshire health and care providers receive weather warnings via commissioners, as well as weather alerts and forecasts from the Meteorological Office. This allows the system to put into operation the appropriate plans in a timely fashion. In the event of adverse weather such as snow, ice and flooding a control room can be activated at various sites across Coventry and Warwickshire. It should be noted that 'the best from the east' in 2018 did not cause abnormal spikes in demand or result in a situation where people were left without care although some minor disruption was experienced.

Appendix One:

Flu vaccine take up for 2017/18

Notes

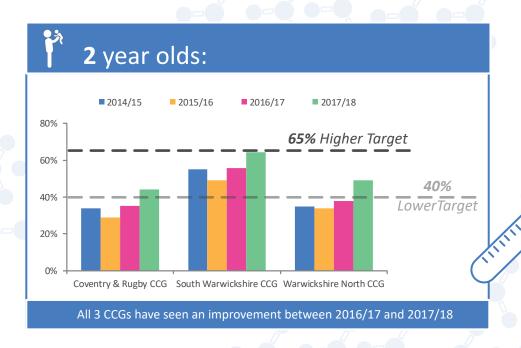
(1) Children facing services: Family Hubs, School Nurses, Childrens Care settings, Health Visitors, Nurseries, Schools, Paeds Departments. Adult facing services: Voluntary Sector Services, Antenatal Services, GPs, Pharmacies, Libraries, Medical Directors/CCG Accountable Officers, Public Health Commissioned Services and partners

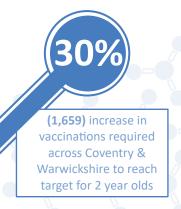
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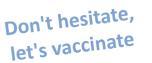
12.11.18

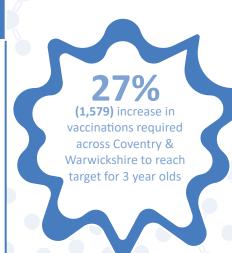
Seasonal Flu Vaccination Children's Programme

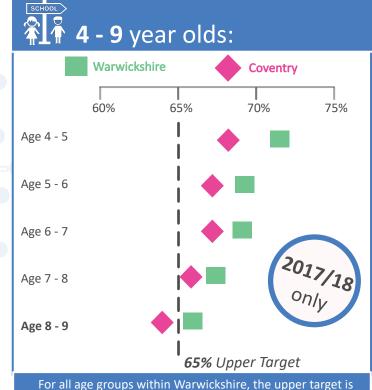


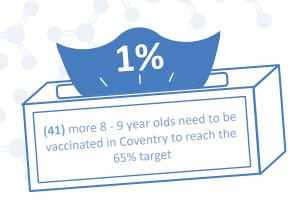




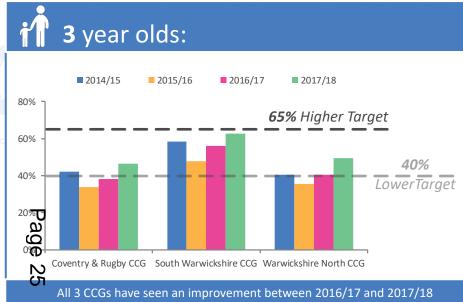








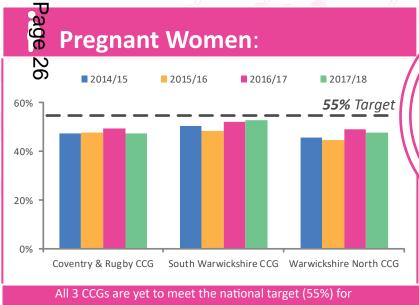
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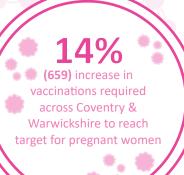
Seasonal Flu Vaccination Adult Risk Groups



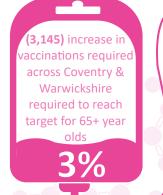
Trust

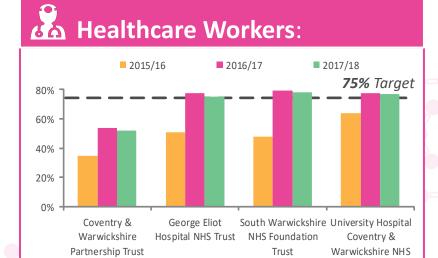


vaccinations in pregnant women

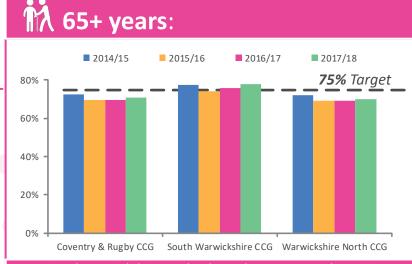


required across Coventry & Warwickshire to reach target for up to 65 year olds



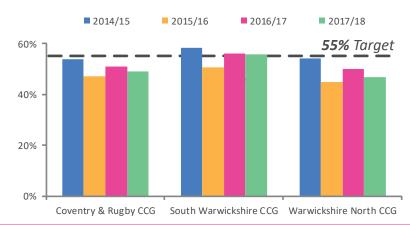


The majority of Trusts in Coventry and Warwickshire continue to exceed the target (75%) for healthcare worker vaccinations



South Warwickshire CCG has been close to or over the 75% target for the last 4 years

Up to 65 years (Clinical at risk):



In 2017/18 vaccinations for people up to 65 years who were at clinical risk fell compared to 2016/17

Health and Social Care Scrutiny Board Work Programme 2018/19

Updated 13/11/18

Please see page 2 onwards for background to items

25th July 2018

- Suicide Prevention

12th September 2018

- Better Care, Better Health, Better Value Programme update
- University Hospitals Coventry and Warwickshire (UHCW) Care Quality Commission (CQC) Inspection Report

19th September 2018

- An overview of Adult Social Care performance, achievements and challenges including the Adult Social Care Annual Report 2017-18 (Local Account)
- Adult Safeguarding Annual Report 2017/18

17th October 2018

- CQC Action Plan update
- Director of Public Health and Wellbeing Annual Report
- Update on Report back from the Task and Finish Group on improving the quality of Housing and the Health and Wellbeing of Coventry Residents

21st November 2018

- Accident and Emergency 4 Hour Performance
- Winter Planning

19th December 2018

- Year of Wellbeing
- Prescription Ordering Direct Service (POD)
- Serious Adult Review (Private Item)

30th January 2019 1.30pm to 4pm

- UHCW Visit

6th March 2019

- Social Prescribing

10th April 2019

- Outcome of the Task and Finish Group on Mental Health Support to University Students

2018/19

- Integrated Care Systems
- Child and Adolescent Mental Health Services
- Primary Care
- Female Genital Mutilation
- Employment and Mental Health
- Improving Support enablement approach for adults with disabilities
- Digital Strategy Improved Customer Service reviewing the customer journey and expanding use of digital technologies including Primary Care Digital Strategy
- Outcome of the CQC Local System Review Light Touch inspection
- Maternity, children and young people's services

Date	Title	Detail	Cabinet Member/ Lead Officer	Context
25 th July 2018	- Suicide Prevention	Scrutiny have asked to look at Suicide Prevention and understand how services are provided across the City to support those who are vulnerable. They would like to focus on how information about the services gets out, particularly to young men.	Liz Gaulton/ Jane Fowles	Request from Scrutiny
12 th September 2018	- Better Care, Better Health, Better Value Programme update	To consider the work programme for the next 12 months and challenges and risks in achieving this.	Andy Hardy	Supports the Better Health, Better Care, Better Value Programme
	- University Hospitals Coventry and Warwickshire (UHCW) Care Quality Commission (CQC) Inspection Report	The CQC report was published on 31st August. UHCW have been asked to present the summary findings.	Andy Hardy	Request from Scrutiny
19 th September 2018	- An overview of Adult Social Care performance, achievements and challenges including the Adult Social Care Annual Report 2017-18 (Local Account)	An annual item to consider this report. To include feedback on new supervision regime as discussed at the meeting on 18 th October during the item on Workforce Development Strategy.	Pete Fahy	Organisational requirements - CCC
	- Adult Safeguarding Annual Report 2017/18	Annual Report received by the Board. In 2017/18, the Board requested the next report included information on the engagement strategy and contribution to the Board's work	Joan Beck/ Eira Hale	Organisational requirements - CCC

Date	Title	Detail	Cabinet Member/ Lead Officer	Context
		from Partners, for example probation and housing associations.		
17 th October 2018	- CQC Action Plan update	To include presenting the performance dashboard.	Pete Fahy	Request from Scrutiny @ meeting on 26.04.18
	Director of Public Health and Wellbeing Annual Report	To present information on the annual report for and feedback on progress from previous reports.	Liz Gaulton	Organisational requirements - CCC
	- Update on Report back from the Task and Finish Group on improving the quality of Housing and the Health and Wellbeing of Coventry Residents	To look at progress on the recommendations approved at the meeting on 31st January 2018. Going to Cabinet 6th March 2018 and review 6 months after that.	Liz Gaulton/ Karen Lees	Request from Scrutiny @ meeting on 31.01.18
21 st November 2018	- Accident and Emergency 4 Hour Performance	UHCW are providing the Board with an update on A&E performance at UHCW.	Lisa Kelly, UHCW	Request from Scrutiny
	- Winter Planning	To look at the approach being taken by relevant partners across the Coventry system to plan for seasonal pressures including the NHS Winter Plan including A&E Performance	CCC/UHCW/ CCG/ CWPT	Request from Scrutiny
19 th December 2018	- Year of Wellbeing	For Scrutiny to look at the proposals for the Year of Wellbeing.	Liz Gaulton/ Cllr Caan	Request from Scrutiny
	- Prescription Ordering Direct Service (POD)	To consider the POD which has been rolled out across the City, following feedback from Members and Healthwatch as to patient concerns.	Jenni Northcoate	Request from Scrutiny

Date	Title	Detail	Cabinet Member/ Lead Officer	Context
	- Serious Adult Review (Private Item)	To consider the outcome of a recent Serious Adult Review	Pete Fahy/ Rebekah Eaves	Request from Scrutiny
30 th January 2019 1.30pm to 4pm	- UHCW Visit	To visit UHCW for a tour and talk from the clinical staff who run some of the outstanding services and an overview of the innovative work being undertaken at UHCW.	Andy Hardy	Request from Scrutiny
6 th March 2019	- Social Prescribing	This item will explore the concept of social prescribing and feedback on the evaluation of the pilot which has taken place in the City.	Liz Gaulton	Request from Scrutiny
10 th April 2019	 Outcome of the Task and Finish Group on Mental Health Support to University Students 	Cllrs Gannon, Hetherton and Kershaw have been working with University and Health Partners to consider this issue. This report will feed back their findings and recommendations.	Jane Fowles/ Juliet Grainger/ Victoria Castree	Request from Scrutiny
2018/19	- Integrated Care Systems	To follow up on the item on Integrated Care Systems as discussed at the meeting on 7 th March 2018 at an appropriate time.	Gail Quinton/ Andrea Green	Request from Scrutiny @ meeting on 07.03.18
	- Child and Adolescent Mental Health Services	To receive an update on the transformation plan including waiting times for assessment and treatment, services for Looked After Children and transition between children's and Adults Services.	Matt Gilks/ Alan Butler	Supports the Better Health, Better Care, Better Value Programme
	- Primary Care	An item to look at Primary Care, including the recruitment and retention of GPs and Supporting Self Care	Andrea Green	Request from Scrutiny 21.11.17
	- Female Genital Mutilation	To receive an update at the appropriate time, on the partnership work being undertaken to address FGM.	Liz Gaulton Cllr Caan	Organisational requirements – CCC

Date	Title	Detail	Cabinet Member/ Lead Officer	Context
	- Employment and Mental Health	To consider the work being undertaken to improve the mental health of those living in the City to enable them to gain/maintain employment. This links to the work being undertaken by the WMCA Mental Health Commission.	Simon Gilby	Supports the Better Health, Better Care, Better Value Programme
	- Improving Support – enablement approach for adults with disabilities	Following discussion on the Adult Social Care Annual Report 2016-17 (Local Account) at the meeting on 13.09.17, this item was identified as a topic for scrutiny.		Request from Scrutiny @ meeting on 13.09.17
	- Digital Strategy - Improved Customer Service – reviewing the customer journey and expanding use of digital technologies including Primary Care Digital Strategy	Following discussion on the Adult Social Care Annual Report 2016-17 (Local Account) at the meeting on 13.09.17, this item was identified as a topic for scrutiny. To include opportunities to use digital platforms from across the health service and social care. Primary Care Digital	Marc Greenwood/ Health partners	Request from Scrutiny @ meeting on 13.09.17 & 21.11.17
	- Outcome of the CQC Local System Review Light Touch inspection	Following the CQC Local System Review, which has was discussed on 26.04.18 and the associated action plan on 17.10.18, the CQC have announced they will undertaking a light touch review to look at the progress which has been made on their reccomendations.	Pete Fahy	Supports the Better Health, Better Care, Better Value Programme
	- Maternity, children and young people's services		CCG	Request from CCG

)	Date	Title	Detail	Cabinet Member/ Lead Officer	Context
			experience maternity, children and young people's services. The key findings of the engagement, alongside the data produced as part of the smart start programme and JSNA highlight the key issues to collectively address to give children the best start in life.		