



**To**  
Scrutiny Board 5

**Date**  
11 October 2017

**From**  
Coventry Accident and Emergency Local  
Delivery Group

**Subject**  
Winter Planning

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**1 Purpose of briefing note**

To provide Scrutiny Board 5 with:

- 1) an update on preparations for winter 2017/18 in order to manage pressures against health and social care
- 2) an identification of the key issues that may impact on health and social care over winter 2017/18

This briefing note will be accompanied by a presentation.

**2 Recommendations**

Health and Social Care Scrutiny Board (5) 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 and other system issues covered.

**3 Information/Background**

Each year Coventry and Warwickshire is required to submit a winter plan to NHS England identifying how the system intends to remain stable and resilient through the winter period which presents additional risk factors including Flu, Norovirus, poor weather conditions/colder temperatures and extended Bank Holidays.

This plan is owned, monitored and managed by the Coventry and Warwickshire A&E Delivery Board, 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.

This plan is currently in draft form and will be developed through the Coventry and Warwickshire A&E delivery board during October and November prior to submission to NHSE by 1 December 2017.

## **4 Preparing for winter**

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. For example and on average there are over 1,000 attendances at A&Es across Coventry and Warwickshire each day, and 270-300 patients admitted to hospital each day as emergency patients, requiring the same number to be discharged each day to make room for new patients.

These are of course average figures which peak by the day of the week and at holiday times, appointments at the 130 plus GP practices far outweigh even these figures.

For social care although the overall numbers of people being supported remain relatively static the costs of providing this support is increasing as a result of both market pressures and the levels of need that people are presenting with. As well as managing hospital discharge a significant social care pressure continues to be felt in the community (from people not going through the hospital system).

In order to manage these challenges a number of key priorities are sought to be addressed in winter planning for 2017/18 as follows:

- Working to ensure 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
- Redesigning the wider Urgent and Emergency Care system
- 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

## **5 Learning from 2016/17**

Winter 2016/17 was a very challenging period for the NHS in Coventry & Warwickshire as well as nationally. Following this period an urgent care winter debrief was held with the aim of capturing learning and what went well along with what could be further improved.

Key areas of learning arising from this exercise were:

- There are opportunities for greater collaboration across the whole Local Health Economy that could improve effectiveness
- Good work is being completed across the Coventry and Warwickshire footprint but this is not always shared hence opportunities for broadening good practice can be lost
- Processes vary across the whole Local Health Economy and benefits could be gained from standardising
- The potential contribution of key operational groups to resolving issues are not always realised i.e. Coventry & Warwickshire Urgent Care Forum (CWUCF)
- The focus on acute settings means the contribution of wider external and community based services are not always considered for the contribution that could be made to winter resilience

## **6 Key winter plan developments**

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.

Tables detailing each item in both the existing and additional action plans alongside delivery dates are included in Appendix One

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 stopping 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.

Stopping 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 appointment, and this will continue during the winter period. At practice level practices are already reviewing as part of the Primary Care Five Year Forward View the use of alternative approaches to delivering core services including telephone and online consultations, the use of Advanced Nurse Practitioners & Clinical Pharmacists.

There is new scheme in Coventry & Rugby in relation to GP support to care homes, focused on GP practices supporting defined nursing / residential homes with a catchment of approximately 300 beds.

### **6.3 Ambulance Response**

West Midlands Ambulance Service (WMAS) are part of the national pilot for the Ambulance Response Programme (ARP) which is a programme that enable to categorise the people that need urgent as opposed to being driven by the 15 minute national target. As a result of this See and Treat activity was up by 1.8% and See and Convey was down by 1.3%. Further improvement will be sought in respect of these measures.

WMAS will further ensure that 100% of all resources are Paramedic crewed (currently 96%), and ensure all patients are assessed and treated by a Paramedic

### **6.4 Local Authority**

The iBCF grant announced in the spring budget 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.

The plan for the spend of the iBCF has been agreed by the City Council and CRCCG. Particular elements of this plan supporting winter pressures are:

CRCCG currently commissions residential capacity to support the Discharge to Assess pathway, the iBCF resource will be used to support the CCG in maintaining this.

Part of the resource will be used to support an increase in short term home support capacity to facilitate discharge. Additional capacity will be commissioned for the period covering November to March for both years of the plan (peak seasonal pressures) to help ensure that system flow is maintained over this period.

The iBCF resource will also be used to ensure that social care capacity can be maintained and that the provider market remains sustainable.

The BCF plan (which includes original Better Care Fund and Improved Better Care Fund) was submitted to NHSE on 11 September 2017 and is currently going through an assurance process.

## **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
- Primary Care streaming to make use of the GPs in ED to maximise the number of patients being streamed to primary care, and the GP Frailty team.
- Rapid Triage in A&E ensuring that minors are being seen with 4 hours.
- SAFER fully implemented across the Trust.
- Red to Green (R2G) embedded across all wards.
- Integrated offer between Walk in Centre and ED, through joint Clinical Oversight
- Additional beds over the Winter
- Increased ED Staffing
- Focus on better management of patients attending ED with Mental Health Issues
- Focus on reducing bed occupancy, reducing the number of patients who have been in hospital for more than 7 days, reducing number of patients occupying a bed who are medically fit for discharge, reducing DTOCs to 3.5%

## **6.6 Flu Campaign**

Public Health are working with and supporting NHS England priorities and local partners to deliver a proactive response to seasonal flu.

There will be a publicity campaign to raise awareness and encourage uptake of flu vaccines and a campaign to encourage uptake of the vaccine within eligible groups and frontline staff.

## **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 2017/18 campaign will be:

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, WICs, UCCs, NHS 111 and OOHs, and sign posting of these feeder organisations of alternatives in place within the community.

Effective and targeted Social Media coverage, based on target groups, i.e. Polish. Students Media reports

Video and animation views and engagement

## 6.8 System Escalation

Coventry & Warwickshire CCGs have invested in the Regional Capacity Management Team (RCMT) for a number of years as part of the work of the Arden Urgent Care Forum to support planning and capacity management across the system.

The RCMT hosts the Escalation Management System which offers a mechanism for providers to communicate the current level of escalation and particular pressure points quickly to all parts of the system. This comprises a set of triggers which give detail of particular pressure points and lead to the generation of an overall escalation level. Key urgent care services are utilising this functionality on a daily basis which is aiding a wider understanding of flows and pressure points.

The health system will implement the national escalation system (OPEL framework) again this winter and will maintain oversight of reporting to ensure speedy response where required, through operation of the on-call system, and system resilience teams.

## 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:

### Christmas & Bank Holiday Demand

The Arden Urgent Care Forum is working with partners to assess the demand that can be expected through NHS 111, Out of Hours and Primary Care to feed into revised plans by the end of October 2017. In particular focusing on the key dates throughout December 2017 and into January 2018.

### 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 weather warnings via the clinical commissioning group 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.

### Overall Risk Management

The Key risk to delivering this Winter Plan will be the ability to manage demand should this present above forecast due to the alignment of Christmas over a weekend period.

Senior managers will be available on site on each of the priority activity days to maintain a local consistent presence and to support organisations to maintain patient flow. We will also have access to IT & Clinical on Call throughout the period.

### Better Care Fund

Although local CCGs are very committed to supporting social care through transfers from the Better Care Fund there is a risk that this transfer of funding is not forthcoming on direction of NHSE dependant on the approval status of Better Care Fund plans and delivery of the DTOC targets contained therein. Should this position transpire this would significantly impact on the ability of Adult Social Care to provide sufficient capacity to support system resilience.