



AGENDA ITEM NO 7

REPORT NO IJB 36/19

ANGUS HEALTH AND SOCIAL CARE

INTEGRATION JOINT BOARD – 26 JUNE 2019

HEALTH AND SOCIAL CARE: LOCAL REVIEW OF WINTER PLAN 2018/19

REPORT BY VICKY IRONS, CHIEF OFFICER

ABSTRACT

The purpose of this report is to provide Angus Integration Joint Board with an interim evaluation of the impact of the Local Review of Winter Planning arrangements for NHS Tayside and Health & Social Care Partnerships for 2018/19. As in previous years for us to continue to improve winter planning across Health & Social Care, we are required to lodge a draft of our winter review for 2018/19 with the Scottish Government to support winter planning preparations for 2019/20.

1. RECOMMENDATIONS

It is recommended that the Integration Joint Board:-

- (i) note the interim evaluation of the Winter Plan
- (ii) note the implementation, impact and key lessons from the Winter Plan.

2. BACKGROUND

The Local Review of Winter Plan 2018/19 (Appendix A) describes the collaborative approach which was in place for winter by NHS Tayside and the Health & Social Care Partnerships of Angus, Dundee and Perth & Kinross. The plan informed our local Unscheduled Care Action Plan, underpinned by the Six Essential Actions for Unscheduled Care and is aligned to NHS Tayside's Three Year Quality Improvement Programme Transforming Tayside.

This year NHS Tayside and the Partnerships took a collaborative approach and were determined to learn from the previous winter challenges. The resource was devolved to Tayside Unscheduled Care Board to proactively invest in initiatives underpinned by the 6 Essential Actions for unscheduled care.

The Winter Plan was developed based upon the key areas highlighted in the 'Preparing for Winter' guidance (2018/19) to ensure early prevention and response to minimise potential disruption to services and ensure that we continue to provide safe and effective care of our population and timely access to services. In particular, the focus was on continuous improvement work with our Emergency Departments, delayed discharge performance, inpatient/day case, cancer, mental health and outpatient services, to deliver against national standards and maintain progress over the winter period.

This winter period was defined as November 2018 to 31 March 2019.

3. CURRENT POSITION

The Winter Plan focused on how we maintained “business as usual” through periods where we may have had reduced services such as public holidays and how we responded to increased seasonal illness such as flu and adverse weather.

The scope was on the whole system with a particular focus on the following key areas in line with the Scottish Governments “Preparing for Winter” (2018/19) guidance:

- Resilience
- Unscheduled/ Elective care
- Out-Of-Hours (OOH)
- Norovirus
- Seasonal influenza/influenza like illness
- Respiratory Pathway
- Key partners/ Services
- Mental Health

A local Winter Wash-Up session was held on Monday 25 March 2019. The aim of the session was to review and reflect on 2018/19, using the learning to inform and plan for the year ahead’s system pressures, winter and all year round planning. The session included representation from across Health & Partner Organisations.

Throughout the winter period, the safety and flow framework daily huddles continued over seven days with multi-professional input. This made a significant impact on the ability to make clinically informed decisions and to manage care in the correct setting. In addition, a Tayside wide weekly winter planning huddle was held which was stepped up to daily during ‘pressure points’. Locally, twice weekly huddles were in place. This whole system integrated approach to solutions was evident throughout the winter period.

One particular area of impact was investing in staff to provide care at home. This supported discharge of people to the care of community teams, with the system being agile and responsive enough that when it was realised there was not enough home care packages there was the ability to reallocate some winter funding slippage to this to enable more people to go home when able

A further main source of investment was in the Acute Medicine for the Elderly Assessment Unit (AME). Although this model of care increased winter bed availability, this was not simply surge beds that ran in a traditional secondary care inpatient bed model that many other board areas have opened.

Winter planning monies in OOH were used to put additional GP shifts into the weekend rota throughout the months of December and January. This enabled OOH to have an additional GP in the base at the busiest times to deal with increased patient demand.

Local Angus Mental Health Community Services showed no variance, change in referral patterns or other pressures as a result of the winter season.

4. PROPOSALS

The Winter Plan set out how the activities and approach would respond with an escalation of our business as usual activities and continuation of capacity and flow improvements to minimise disruption to service provision. This was to enable improved outcomes for patients and staff across hospital, primary and social care services.

The Tayside Unscheduled Care Board developed a detailed implementation plan for resilience and flexibility in preparation for winter and ensured a robust assessment of bids and allocation of resources to:

- Increase the Medicine for the Elderly step down winter beds.

- Provide additional funding for care at home placements to avoid unnecessary hospital admission.
- Redesign the inpatient bed model.
- Support an 'Asses to Admit' model in the Community with the principal of realistic medicine at the core.
- Provide funding to improve service resilience for extra Out of Hours General Practice (GP) sessions.
- Invest in professional to other professional communication to share decision making.
- Improve the prevention and management of influenza like illness.
- Targeted campaign to significantly increase flu vaccine uptake.
- Investment for the first time at winter to increase the support available from the psychiatric liaison service.

5. KEY LESSONS

A summary of Key Lessons learned that will inform the actions going forward for 2019/20 are:

- Promoting all year round planning with a "business as usual approach".
- Focussing on prevention of illness through Early Communications Campaign to promote flu vaccination update, continue to support and promote peer vaccinations.
- Communications – media campaign internal and public campaign in the prevention of illness and adverse weather campaigns e.g. use of 'Smarty' the penguin to deliver key messages.
- Maintaining a whole system, multi-professional, multi-agency approach to planning as well as informing and responding to system pressures.
- A focus on home care planning at least six months prior to winter is essential. There is limited capacity to increase hours during winter. Next winter we must improve our delayed discharge position significantly to continue to support care in the right setting and an improved patient experience.
- Continuing with the development and investment of the infrastructure to support escalation and early resolution at weekends.
- Ensuring clear expectations, roles and responsibilities, system wide across all 'inform and respond' escalation processes.
- Empowering front line teams to reduce and manage delayed discharges, particular importance of social care and home care to prevent admission and facilitate timely discharges.
- Transport continues to be a key priority requiring further work around discharge planning and co-ordination to minimise delays.
- Focus on frailty across all applicable services.
- Recognised the pivotal role played by Scottish Ambulance Service and as such there was a commitment to fund extra weekend vehicles for the winter period.

6. FINANCIAL IMPLICATIONS

The Scottish Government's winter pressures allocation to Tayside £737,734. The allocation of funding was agreed through robust multi professional assessment by members of the Tayside Unscheduled Care Board. The process promoted careful consideration where any additional resources were required to meet locally identified risks that could have impacted on service delivery.

Reporting of the final year end position is currently being undertaken and monitoring to date has indicated appropriate expenditure. There will be a continued assessment of spending to monitor return on investment with the aim to deliver "business as usual" across the entire year.

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26 June 2019