

Westminster Health
& Wellbeing Board

RBKC Health
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Title: 2020-2021 Winter Pressures Programme

Report of: Senel Arkut, Bi-Borough Director of Health Partnerships

Wards Involved: All

Report Author and Contact Details: Grant Aitken, Head of Health Partnerships
grant.aitken@rbkc.gov.uk

1. Executive Summary

- 1.1 On 18 September 2020 the Department for Health and Social Care (DHSC) published a national social care plan for winter 2020-21, focusing on managing the 'second wave' of the coronavirus pandemic. Although local health systems are already required to produce winter plans each year, this is the first time the Government has produced a national plan outlining actions that local authorities, NHS organisations and social care providers must take ahead of the winter
- 1.2 Winter presents numerous challenges on the health and care system through increased demand on front line services. COVID-19 will be also be circulating, alongside seasonal flu and other viruses, and transmission is predicted to increase over the winter period. These pressures will create risks to the health and wellbeing of both people who need care and support and the health and social care workforce.
- 1.3 The Bi Borough and West London and Central London CCG have worked in Partnership to develop a winter plan, along with other system partners to support the management of flow through Chelwest and Imperial.
- 1.4 This paper summarises the winter programme across the local health and social care system. It has, in draft, been presented at local AEDBs and will continue to be refined to respond to local surges in demand heading into the winter period. It also builds on the learning through the Covid 19 pandemic and from the 19/20 winter programme.
- 1.5 The winter programme has two broad priorities in supporting the local health and Care system:
 - manage demand pressures on the NHS with reference to seasonal winter pressures e.g. reduce admission to acute settings by supporting people to receive their care closer to home or in community settings

- support timely and safe discharges from hospital, with the appropriate support in place, to help promote people's independence and choice.

1.6 As part of the response to Covid19, NWL is also seeking to provide a more strategic approach to the development of the winter response and therefore many of the priorities will be supported through the coordination of primary and community care.

2. Key Matters for the Board

2.1 The Board is asked to note the draft winter plan. Further updates will be available on overall winter performance, if requested.

3. Winter Pressures Programme 20/21

3.1 The aim of the programme is to ensure services are aligned to support residents throughout the winter also to support acute providers with demands on their beds by supporting discharge and reducing unnecessary admissions. It is recognised that as the system heads into the winter period there is highly likely to be increased pressure on admissions and the bed base. With Covid-19 and normal winter flu season circulating there will also be pressures on community and care providers; therefore, the plan will be about ensuring the sustainability and resilience of these key services.

3.2 Early modelling of demand on acute beds by NWL CCG has identified key (peak) periods where demand may outstrip supply. Therefore, it is critical that there is a balance between the new schemes to support likely pressures versus flexing existing capacity in the system to respond to surges in demand – quickly and safely.

3.3 Understanding the changing pressures will be through the relevant A&E operational groups and regular system escalation calls with partners. Close monitoring of demand and the wider system capacity will then allow for schemes to be brought forward.

3.4 As part of the national winter plan the following summarises the key actions for local authorities and NHS organisations to take:

- co-production is at the heart of decision-making
- plans must be put in place, building on existing initiatives, including local outbreak plans
- local authorities and NHS organisations should continue to address inequalities locally,
- local authorities must distribute funding made available through the extension of the Infection Control Fund
- local authorities must continue to implement relevant guidance and promote the compliance of the guidance to all social care providers
- local systems should continue to take appropriate actions to treat and investigate cases of COVID-19. This includes hospitals continuing to test people on discharge to a care home

- local authorities and NHS organisations should work together, along with care providers and voluntary and community sector organisations, to encourage those who are eligible for a free flu vaccine to access one
- local authorities and NHS organisations should continue to work with providers to provide appropriate primary and community care at home and in care homes, to prevent avoidable admissions, support safe and timely discharge from hospitals, and to resume Continuing Healthcare (CHC) assessments at speed
- NHS organisations should continue to provide high-quality clinical and technical support to care providers through the Enhanced Health in Care Homes framework and other local agreements

3.5 The following areas have been identified as key to meeting the local priorities of winter and the national winter plan:

ACUTE	Same Day Emergency Care (SDEC)	<ul style="list-style-type: none"> • This will be fully operational from November
	Frailty Pathway	<ul style="list-style-type: none"> • Front door frailty service to be fully operational from November
	7 Day Working	<ul style="list-style-type: none"> • This will be across all services including hospital discharge teams
	Escalation beds	<ul style="list-style-type: none"> • No funding identified Fully operational
MENTAL HEALTH	Community based crisis alternative service, provided by Hestia	<ul style="list-style-type: none"> • The Coves a crisis haven for residents based at Paddington Arts (gatekept i.e. must be referred and triaged via CNWL). https://www.cnwl.nhs.uk/services/coves • Non-clinical alternative up to 3 sessions for service user, digital or face to face support 17:30-00:30, 7 days a week including bank holidays.
	First Response Face to face gatekeeping	<ul style="list-style-type: none"> • First Responders will be borough based and will carry out gate keeping assessment on all patients referred to the service to establish whether admission to an inpatient bed is required
	Home Treatment Team	<ul style="list-style-type: none"> • Increased capacity to enable 24/7 coverage, and provision of intensive home treatment and in reach to wards to facilitate early discharge.
	Inpatient Care	<ul style="list-style-type: none"> • CNWL are working to reduce those inpatients who have been on the wards for over 30 days and embed clear therapeutic interventions
	Enhanced SPA-NHS 111 link	<ul style="list-style-type: none"> • CNWL are looking to increase numbers of people calling a single point of access (SPA) number instead of presenting to A&E through the provision of enhanced phone, virtual /digital support and The Coves service.
	Increased staffing to support discharge	<ul style="list-style-type: none"> • Additional experienced staff to co-ordinate discharge • This will reduce DToCs and help reduce lengths of stay

	Increased capacity in liaison mental health teams in A&E	<ul style="list-style-type: none"> Additional 3 staff per shift will enable psychiatric liaison nurses to rapidly focus on emergency department presentations Expediting front-door triage and decision-making.
	Enhanced community evening and weekend clinics	<ul style="list-style-type: none"> To reduce potential for crises 6 additional nurses will be appointed to do evening clinics to 8pm and at weekends, and enhance the Home Treatment Team
	Step-down	<ul style="list-style-type: none"> Additional spot purchasing agreed to assist and enhance discharge
PRIMARY CARE	Shielded Patients	<ul style="list-style-type: none"> Primary Care - Shielded Patients - Operational in Sept
	Increased provision in Primary Care	<ul style="list-style-type: none"> Enhance Health and Care Home (EHCH) programme including flu vaccinations
	Extended Hours	<ul style="list-style-type: none"> Operational throughout winter
	Hot Hub / Escalated Care Clinic	<ul style="list-style-type: none"> Contracts in place
COMMUNITY	Homeless Pathways & Homeless Step-down	<ul style="list-style-type: none"> Homeless Step Down and Step Up Beds
	Escalation beds	<ul style="list-style-type: none"> Use of escalation beds (Pembroke) operational. This will include Covid-19 positive or Covid-19 unknown pathways
	Flu Strategy	<ul style="list-style-type: none"> In place
ASC	D2A/Home First	<ul style="list-style-type: none"> Discharge Hubs including D2A - operational September
	Care Home Project	<ul style="list-style-type: none"> Care Home Project - operational in October
	Reablement capacity	<ul style="list-style-type: none"> Additional capacity, including supporting providers to understand the changing needs of patients with higher acuity needs and having distinct pathways for Covid positive and Covid negative patients in place -

3.6 Below are some examples from last year that will be repeated this winter

- The provision of additional review officers allowed for increases in the number of home visits and interventions to enable residents to remain safely at home. Additional Occupational Therapists (OTs) and Independent Living Assessors (ILAs) also allowed for early assessments of increased reablement referrals.
- Two step-down flats commissioned in RBKC enabled people to gain skills and confidence to return home. Both flats were fully utilised and provided a real choice for patients who could not return home, but not suitable for care home placements.
- Additional step-down bed capacity was utilised to its full (including step down MH beds) and allowed for the management of flow of people out of hospital. The beds were very effective and successful in managing system pressures. Additional social worker capacity was also put in place to move these patients on.

If you have any queries about this Report or wish to inspect any of the Background papers please contact:

Grant Aitken, Kensington and Chelsea

Email: grant.aitken@rbkc.gov.uk

Telephone: 07814 174605