



Sussex and East Surrey
Clinical Commissioning Groups



West Sussex Health and Wellbeing Board Winter Planning

October 2019

Introduction

- The winter plans outlined in this presentation cover the health and social care systems across West Sussex including the Western Sussex Foundation NHS Trust and the Surrey & Sussex Healthcare NHS Trust. The planning also cover Princess Royal Hospital in Haywards Heath part of Brighton Sussex University Hospital due to patient flows but all plans are consistent across West Sussex.
- Planning for the winter period is a national requirement for local preparation for additional demands and pressure on the health and social care system expected during the winter period (01 December 2019 to 31 March 2020).
- The plan covers the whole health and social care system from preventing unnecessary admission to hospital through to supporting timely discharge home ensuring that access to services and patient safety is maintained.
- The plan provides system assurance that service capacity across the health and social care system will be sufficient to meet forecast levels of demand and is able to respond quickly and effectively when there are exceptional surges in demand that require a rapid system response.
- The plan is being developed by the local system Local A&E delivery board (LAEDB), which has representation from all local system health and social care providers and commissioners.
- The plan for winter builds on learning from previous years as part of a continual improvement process.
- The final version of plan will be approved by the LAEDB at the end of September following assurance review by NHS England. The plan will also be considered for assurance by the Governing Bodies across West Sussex in September and individual providers will assure their own plans through their respective boards. Work continues within the SASH system to agree and finalise the winter plan.
- We are bringing this update to Health & Wellbeing Board for information.

Winter Plan 2019/20 objectives

- To maintain patient and staff safety and service quality at all times;
- To ensure that acute hospital bed occupancy is maintained at a level that ensures that patients who require admission to a hospital bed are able to be admitted in a timely way, thereby avoiding the risk of overcrowding in A&E and delays to ambulances being able to handover patients and respond to 999 calls;
- To ensure that community health services are maximised, e.g. improving length of stay and utilisation and increasing the number of patients who can be safely discharged home in a timely manner with care support. Effective use of community services during the winter period will support timely discharge from hospital and avoidance of unnecessary admission to an acute hospital bed;
- To ensure the delivery of agreed improvement plans in respect of national NHS access standards including the 4 hour A&E standard, the 18 week referral to treatment standard and cancer waiting times standards;
- To deliver the national ambition to reduce the number of patients in an acute hospital bed with a long length of stay by 40% by March 2020 – It is well evidenced that patients with a long length of stay in acute hospital settings are at high risk of de-conditioning.
- To ensure system Delayed Transfer of Care are no greater than 3.5% of acute hospital beds.
- To proactively prevent and manage infection control outbreaks issues such as influenza and norovirus.

Winter plan 2019/20 key elements

- System capacity and demand plan to address the expected increased demand
- Primary Care
- Community Services
- Acute Hospital plans
- Social Care
- Mental Health
- 999 and 111
- Infection Control and influenza vaccination
- Business Continuity
- Severe weather planning
- Winter Communications and Engagement
- Enhanced capacity requirements to meet the Christmas and New Year period 24th December - 7th January 2020
- System Pressure monitoring and escalation response
- Risks to delivery and mitigating actions

Learning from last winter

What went well:

- Support from other local health and social care systems in response to pressure in the local system.
- Maintenance of patient safety in A&E during periods of sustained demand pressure.
- Ability of system partners to rapidly support additional capacity in response to system pressure.
- Single winter communications plan across Sussex and East Surrey aligned to the national NHS campaign.
- Development of discharge to assess pathways across health and social care to ensure people do not wait in acute hospitals when they can be supported at home.
- More live feeds are required into the real time data system Single Health Resilience Warning Database (SHREWD) including mental health and 136 capacity. The database provides up to date information about demand allowing the system to react in a timelier manner to surges in demand.
- Renewed focus on stranded/ super stranded patients to manage patient flow.
- There is still high levels of minors attending A&E and an increase in self presenters within the SASH and WSHFT systems. System wide collaboration is underway to deliver Integrated Urgent Care model (IUC) including Urgent Treatment Centers (UTC) roll out from December 2019.
- Sussex wide system capacity and demand planning for this winter has built further upon the successful planning model that use for last winter ensuring that mitigation actions are in place for forecast surges in demand over winter. Discussions are ongoing with both the SASH and WSHFT systems around the detail underpinning the demand and capacity plan for that system to ensure sufficient capacity is in place to support demand.

Winter plan key risks and mitigations

Risk	Mitigations
System Flow	<ul style="list-style-type: none"> • Multi agency agreements on standard operating procedure and escalation process and triggers for all community pathways • Long length of stay action plans in place across West Sussex, multi system engagement secured, regularly reviewed • Capacity and demand plans in place to identify gaps in capacity to ensure system actions in place to mitigate.
Challenge with timely access to domiciliary care	<ul style="list-style-type: none"> • Local authority engagement with homecare provider market • Care Matching task and finish group to maximise brokerage efficiency
Workforce challenges across the system	<ul style="list-style-type: none"> • Prebooking block contracts with agency and bank staff • STP wide and local winter communications plan • Flu vaccine uptake by staff • Upskilling workforce to ensure flexibility across multiple areas • Preplanning rota fill across providers
Mental Health patient flow pressures	<ul style="list-style-type: none"> • STP Mental Health Programme Investments 2019-20 • STP Executive escalation related to housing and accommodation risk identified. • Development of SES Mental Health escalation plan, triggers and related actions.
Uptake of flu vaccine	<ul style="list-style-type: none"> • National and local campaigns planned to increase uptake • CQUINs in place to support uptake locally
Increased attendances / admissions from at risk cohorts	<ul style="list-style-type: none"> • Quarter one deep dives have programmes in place to tackle increases. • Streaming away from A&E to ambulatory and frailty units where appropriate • Robust admission avoidance pathways and full access/utilisation of available pathways.
No deal EU exit planning	<ul style="list-style-type: none"> • Coordinated no deal EU exit contingency planning through Sussex Resilience Forum

Next Steps

Timescale	Action
September	NHS England review and assurance process
September	Process of stress testing plans across Sussex
September	Final Plan submitted to LAEDB for approval
September	CCG governing bodies review and approval
Throughout winter	Close monitoring of winter plan throughout the winter by all partners (via LAEDBs monthly and routinely via operational sub groups)

Conclusion

- A number of lessons that have been identified that have informed the development of the plans for this winter.
- The development of a whole system approach to capacity and demand planning for winter will significantly strengthen plans allowing system to identify gaps and mitigating actions.
- Key risks have been identified and mitigation is in place where possible. Workforce remains the single biggest risk across health and social care.
- It is also important that as a system we effectively support our staff during the challenging winter period.
- Work will continue to refine local plans including stress testing of plans at Sussex level.