

REPORT TO THE TRUST BOARD: IN PUBLIC
25 November 2021

Title	Winter Planning 2021/22
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Purpose of the report

To provide an update to the Board on the approach and progress towards the development of our winter plans in North East London and Bedfordshire, Luton and Milton Keynes Integrated Care Systems (ICS).

Key messages

- Our winter plans have been developed in collaboration with health and social care system partners.
- The plans reflect national priorities and viable schemes to improve capacity over the winter.
- It is vital that there is co-ordination of workforce plans to avoid duplication of effort and minimise any gaps, making the best use of our valuable human resources.
- We will make our plans resilient by continuing to encourage vaccine uptakes for both Flu and Covid and clear consistent communication on the need for strict adherence to Infection Prevention and Control (IPC) guidance.

Committees/meetings where this item has been considered

Date	Committee/Meeting

Strategic priorities this paper supports

Improved population health outcomes	<input checked="" type="checkbox"/>	The information in this report supports the four strategic objectives of improving patient experience, improving population health outcomes, improving staff experience and improving value. Information presented describes how we are understanding, assuring against and improving aspects related to these four objectives across the Trust and within the local and national systems.
Improved experience of care	<input checked="" type="checkbox"/>	
Improved staff experience	<input checked="" type="checkbox"/>	
Improved value	<input checked="" type="checkbox"/>	

Implications

Equality Analysis	This report has no direct impact on equalities.
Risk and Assurance	This report provides an update of on the trust response to winter planning in the context of the ongoing Covid-19 challenges.
Service User/ Carer/Staff	This paper provides an update on activities that are taking place across the Trust involving staff, patients and carers.
Financial	There are no financial implications attached to this report.
Quality	Applying Quality Improvement methodology to our winter planning response will help drive quality improvements further.

1.0 Background/Introduction

1.1 We are in the process of system wide review, drawing up and agreeing detailed placed based/ directorate level winter contingency plans. This is in the context of the continued impact of Covid-19, recovery of services and the return to usual activity and restricted capacity as a result. Chart 1&2 which give an overview of the increase in activity across service for Mental Health. We are working closely with Integrated System partners. The plans are building on what we've learned from the Covid pandemic as much as possible namely:

- What has worked well
- What are the challenges and gaps?
- What have we learnt that can inform the plans for 2021/22

1.2 The plans have been tested for deliverability, safety and equity but there is more we need to do in the short term to ensure delivery potential and prioritise the proposals fully. We are aware and mindful of our workforce constraints and have not brought forward proposals that are reliant on significant recruitment.

1.3 Our plans include and are supported by number of mitigations, including:

- Business continuity and adverse weather plans.
- Use of system escalation channels and Operational Pressures Escalation Level (OPEL) reporting for mutual aid and support.
- Outbreak management plans.
- Communication plans to affirm local and national messages.

1.4 We are aware that although we have had good partner engagement across the two Integrated Care systems in pulling together the plans there needs to be some system reflection and the opportunity for example to spread good ideas across all areas and so we have proposed to do that in the next few days and as we go through the winter season.

1.5 There are system planning and oversight meetings that will ensure that the plans are being monitored in relation to delivery. Senior ELFT place based representation is engaged in these meetings in North East London (NEL) and Bedfordshire, Luton and Milton Keynes Integrated Care System (BLMK ICS). Each system has clear escalation channels to help unblock issues. We will keep the board sighted on progress of plans through updates to the Quality Assurance Committee subsequent Board meetings as requested.

1.6 We will continue to deliver services in the context of our trust values and strategy:

We care, We Respect and We Are Inclusive utilising our organisational strengths as set out in our strategy.

It also important to note that there are many positive outcomes happening that put our services in a stable position to respond to the challenges winter season may bring.

- We continue to report zero out of area admissions.
- We are reporting low numbers 12-hour breaches.
- Our primary care services continue to provide timely access.
- Our Community Mental Health Teams are containing and managing the waiting lists with a positive shift in some back logs now being realised.
- The Integrated Discharge Hubs report strong performance.
- We have refreshed our recruitment and retention programme to support our winter planning and ongoing recruitment activity.

2.0 Covid – 19

- 2.1 The number of Covid cases in our inpatient wards has remained at a relatively low level over the last three months. However, part of the planning for winter has been based on a rise in COVID activity, both in our own facilities and within community services as a consequence of increases in activity in the acute sector.
- 2.2 Vaccinations and use of PPE remain the main interventions to slow down and stop the incidence of transmission of Covid- 19, hospitalisation and death. Currently 83% of staff are fully vaccinated. Unvaccinated staff are being engaged in a supportive way to address any hesitancy concerns and encourage them to take both the Covid and Flu vaccines.

3.0 Mental Health Services

- 3.1 Winter months aside, referrals over the spring and summer have been above average levels and of a much higher acuity. This has led to increased referrals to treatment waiting times with crisis services and bed capacity under pressure. Our crisis service across all age groups continue to experience a busy time. The current level of activity has been consistently high since the last lock down and what we are seeing is a trend toward this activity stabilising at this rate.
- 3.2 Our winter plans include:
- For Child and Adolescent Mental Health Services (CAMHS), additional input to paediatric wards and Social care capacity as well as extending existing capacity projects.
 - Continue to work as a collaborative with North East London Foundation Trust (NELF) in managing our bed base together.
 - Strengthening the infection prevention and control and personal protective equipment (PPE) processes.
 - Strengthen our 24/7 Liaison services to support acute trusts in managing ED activity and prevent admissions.
 - Enhancing dedicated additional winter patient facing communication resources to work system wide developing a strong and coherent set of messages for the public to help reduce reliance on 999 and reduce ambulance call outs and provide clear sign posting to services.
 - Work with the voluntary and charity sector to complement what they offer as alternatives to admission.

4.0 Workforce challenges

- 4.1 Not only are our staff feeling the impact of the unrelenting activity they have had to respond to (and in many cases been personally affected by), there are also pressures on other linked services such domiciliary care and social care which add to the delays in how we can provide care to people at home and which affect the flow from hospital into the community. We are actively working on several initiatives to improve resilience and recruitment and retention actions. Health and wellbeing support for all staff is a priority and is available through the network of hubs, including access to psychology advice. The Trust is also working on how we can further support team leaders to support staff effectively.
- 4.2 Specifically in relation to winter, the Trust plan aims to:

- Monitor staff sickness and flu related absences
- Provide focused staff well-being and support initiatives.
- Only stand-up schemes for additional capacity where there is minimal recruitment required
- Increase capacity to respond to changes in weather and reduce the risk of staff absence associated with adverse weather.
- Continue to encourage Covid and Flu Vaccine uptake.

5.0 Primary Care

5.1 Demand in primary care has been rising significantly over the last few months. Though the peak rise has reduced the service demand is operating at approximately 150% of its baseline. In response, the service has implemented weekly huddles and demand and capacity monitoring to review the situation and take action. Additional temporary staffing agencies have been placed on the books to enable teams to access staff at short notice whilst active recruitment to vacancies is continuing. Specific Quality Improvement processes on demand and capacity management are being initiated with external specialist support to initiate safe care for residents. Additionally, care navigator training is being sourced from Connex UK a leading provider to support members of the wider primary care team to support patients.

6.0 Community Care Services

6.1 Community Health Services have been busy throughout the pandemic. This continues with an increase in more complex patients being treated at home. Over the summer months, there have been some significant increases in activity, with a doubling of social care activity since 2019 and demand for community services from both primary and acute care significantly higher than pre Covid 19 levels. Multi-agency arrangements are in place to address system resilience during winter surge periods such as the Integrated Discharge Hubs. These have been developed reflecting on our pandemic experience and system wide learning events and continue to be strengthened.

6.2 Over the Winter, additional areas of work within Community Health Services include:

- Ensuring admission avoidance, Discharge to Assess and Rapid Response services are resourced and resilient to peaks in demand.
- Providing additional step down bed capacity.
- Increased community end of life support.
- Strengthening our health offer to care homes to enable care home residents to access specialist treatment instead of hospital admission.
- Maximising the contribution of voluntary sector.

7.0 Finance

7.1 In preparing and implementing the plans attention has been given to the financial resourcing of these plans in line with central NHS requirements and our local population/s needs. NHS England has given further funding to help meet the Winter demands and we have worked with system partners to ensure that the allocated funding is used in the most effective way possible in order to benefit the system through the place based planning groups that are overseeing the implementation of the plans and their delivery.

8.0 Communication and Engagement

8.1 A coordinated Integrated Care System programme of communication involving all system partners has commenced in NEL and BLMK Integrated Care Systems and this builds on the work done through the Covid 19 pandemic. The work is designed to promote informed awareness and access to the huge variety of NHS and community health and care services available. The work will focus on supporting people to get the care they need in the most efficient and effective way both for themselves and the health and care system.

8.2 Specifically, these plans will:

- Promote the NHS App
- Encourage use of NHS 111 service
- Divert activity from A&E where appropriate
- Ensure our communications feed into trust and system escalation meetings so that they are current and responsive to emerging activity trends.

9.0 Summary

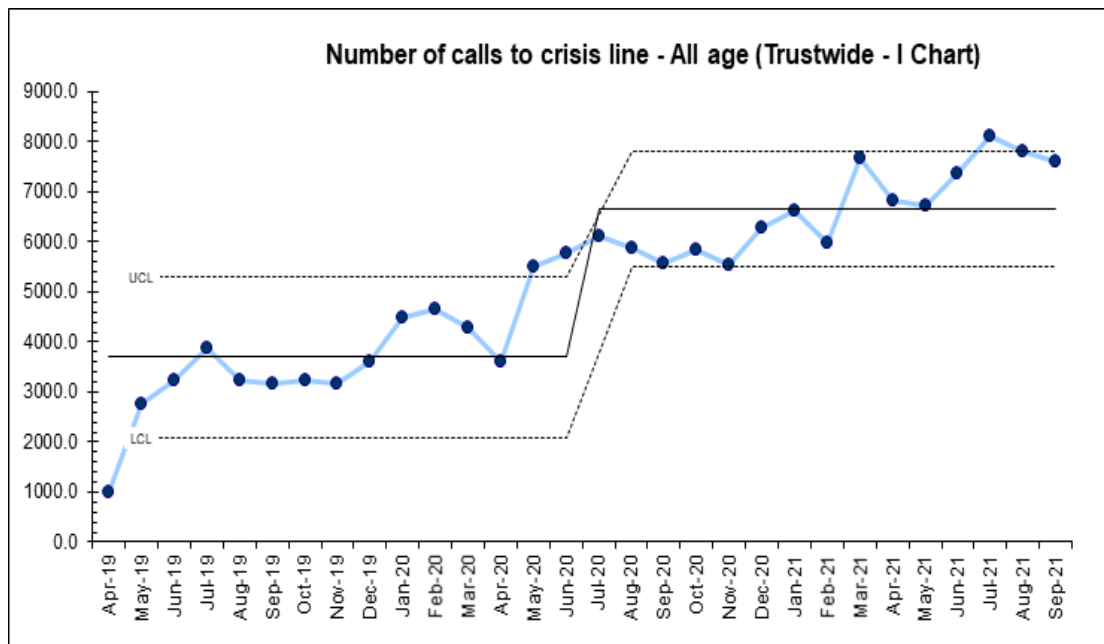
9.1 Whilst there is a clear need to manage the immediate pressures the system is facing, it remains important to collectively work on longer term solutions that will be critical to providing timely and effective care on an ongoing basis.

9.2 The Winter Plans for 2021/22 are iterative and will be updated as plans progress.

10.0 Action Being Requested

10.1 The Board is asked to **RECEIVE** and **NOTE** the report

Crisis line calls activity



A&E mental health referrals

