

Worcestershire System Wide Winter Plan

2018/19

Purpose of winter planning

The theme of plan for the Worcestershire Health and Care System from 1st December 2018 to 31st March 2019 is to ensure:

- The Health and Care system increases its resilience throughout the winter period and provides safe and effective care and experience for the local population
- Sufficient capacity is available to meet likely demands over winter
- Direction of patients/clients to most appropriate setting for care and treatment
- Safe and effective transfer of patients/clients within the system
- Learning from previous winter pressures

Detailed winter plan requirements

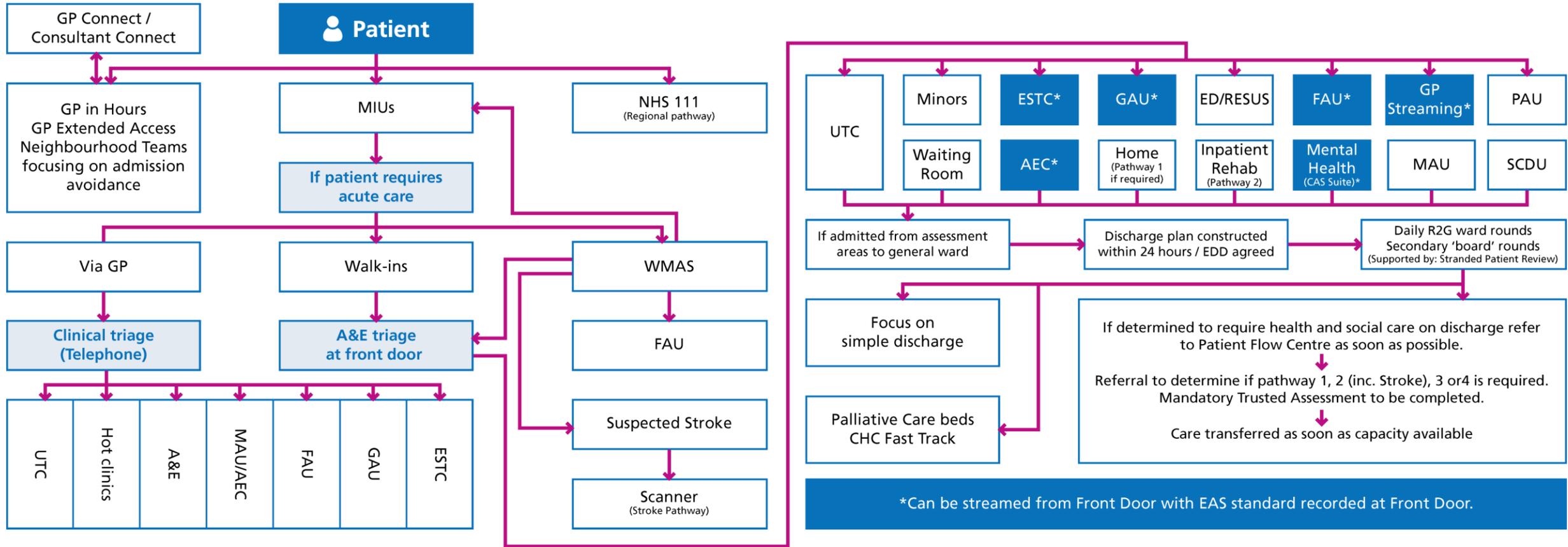
- All local level A&E Delivery Boards are required to submit comprehensive winter plans (covering from 01 December up to Easter) – planning commenced in May 2018
- In addition to any local initiatives already planned or underway, this should cover key themes ensuring that good practice in patient flow is embedded across all parts of the emergency patient pathway, not just in isolated departments or wards as described in the [Keogh Review's Safer, Faster, Better \(2015\)](#) and [The Good Practice Guide: Focus on patient Flow \(2017\)](#).
- As part of the Worcestershire winter planning cycle an assessment of all of these priority areas has already been undertaken and included in the AEDB/Winter plan .

Focus for winter planning in Worcestershire 18/19

AEDB agreed the focus should be to:

- Embed learning from previous winters
- Prevention of ill health and unnecessary increased demand
- Develop a full demand and capacity analysis for the system to identify where to prioritise capacity within the Worcestershire System over the winter period
- Fast track and further embed the priority aspects of the AEDB plan ensure delivery of our urgent care and patient flow system as it has been designed – **see slide 5** – with a focus on reducing the key concern of high bed occupancy within the acute trust
- Identify any further specific winter initiatives, based on best practice designed to reduce demand or enhance capacity
- Undertake a detailed analysis of workforce across the system and agree an approach to workforce utilisation for the Winter 2018/19 period
- Ensure robust daily system management and monitoring of success of winter plan

What should it look like?



2018/19 Worcester Winter Plan Progress and Preparations

Learning from last winter

Improvements noted

- Strong “winter room” information and command and control noted by regulators
- Improved system and working relationships noted by regulators
- Extra wards focussed on “discharge to assess” led to improvements in complex discharge process
- AEC performance, although not contributing to improving the ‘4 hour clock’ did help relieve some pressure at the front door of the ED Departments

Areas for improvement identified were

- Too many reactive actions with little benefit in response to a crisis
- The full benefits of the initiatives developed were not delivered or maximised.
- System wide capacity and high bed occupancy was flagged as problematic and required analysis.
- Insufficient system leadership capacity to manage business as usual resulting in almost daily senior escalation to drive ‘business as usual’

Prevention of ill health and unnecessary increased demand

- The Worcestershire system as agreed a 90% target for workforce flu immunisation and a 90% target for residents in Care Homes
- Health and Social Care staff will be eligible for a free flu immunisation this season.
- There is a flu vaccine for aged over 65 and a different vaccine for aged under 65 aimed at greater resistance in the older age group.
- The national campaign is 'Help Us Help you', a new single unifying campaign brand that builds upon the success of last year's 'Stay Well' campaign. The local plan will be in line with the integrated national marketing campaign.
- The overall aim of the winter communication plan is to:
Ensure that people who are most at-risk of preventable emergency admission to hospital are aware of and, wherever possible, are motivated to take those actions that may avoid admission this winter.

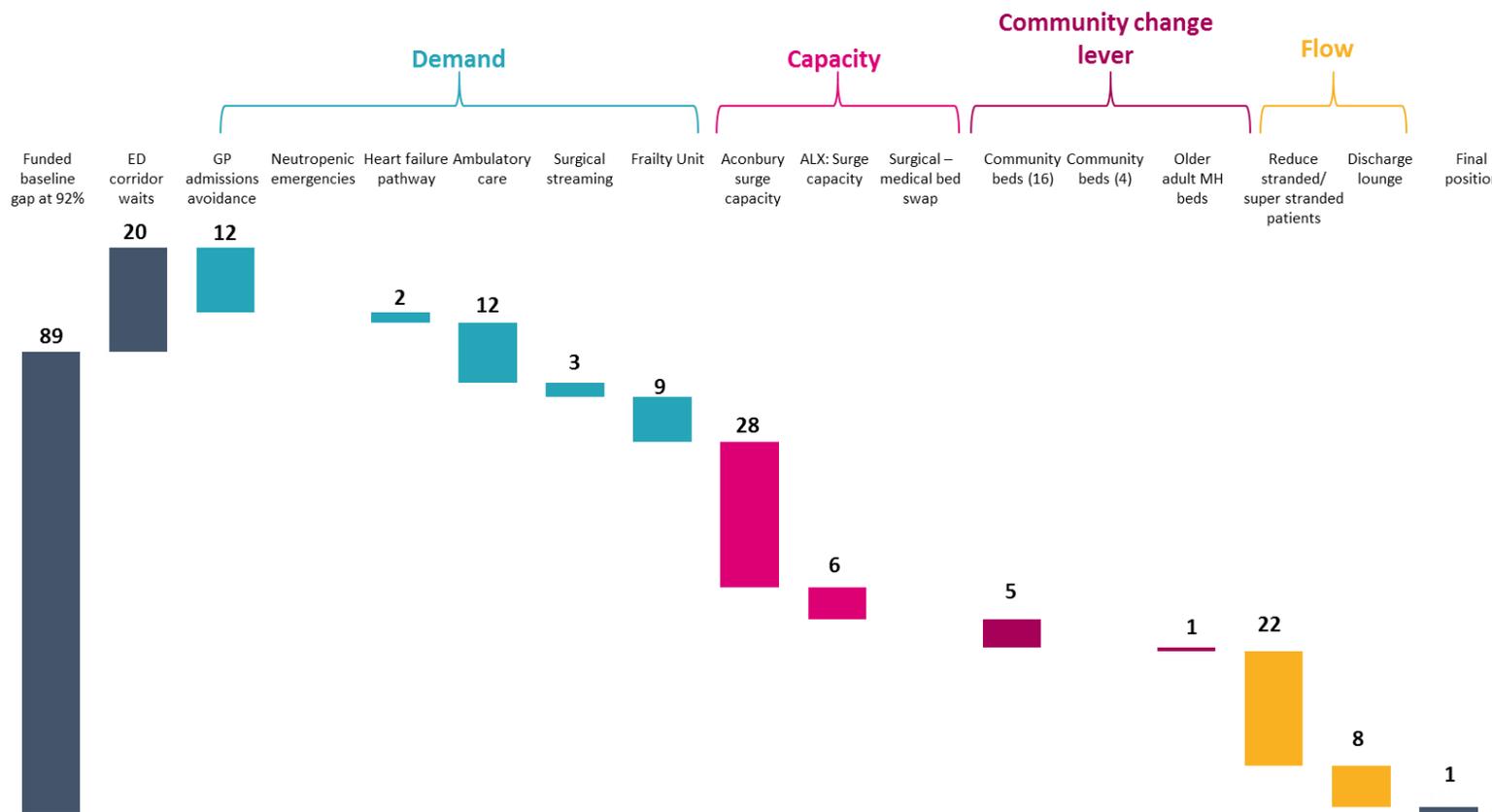
Develop a full demand and capacity analysis for the system to identify where to prioritise capacity within the Worcestershire System over the winter period

- The CCGs have commissioned a system wide Demand and Capacity analysis from Carnall Farrar that provides an immediate view across the system of capacity requirements and the ability for the local system to on- goingly use the tool to understand the impact of any change
- AEDB have used the predicted impact of the AEDB and winter specific initiatives against predicted demand and current capacity and the tool has provided the following analysis of the benefit based on a target of 92% bed occupancy – an ideal % for effective patient flow

Table of Demand and Capacity analysis and Predicted Benefits of winter initiatives 18/19 (Carnall Farrar)

In February, at 92% occupancy, there is estimated to be a 1 bed shortfall between capacity and demand trust wide

Forecast the do something position



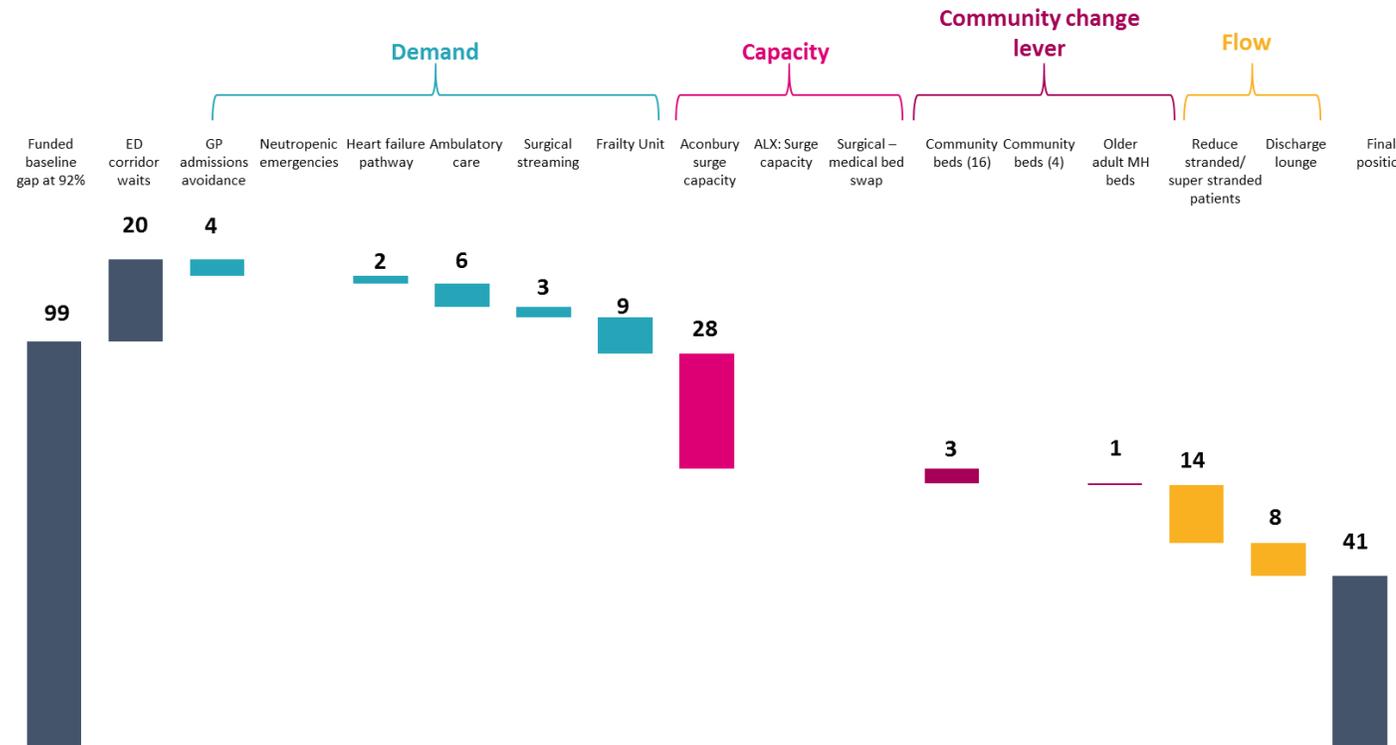
This is a snapshot of one month and does not take into account any increases in elective capacity required to meet contract levels.

Discharge Lounge benefit is derived by: 6 beds & 10 chairs x2 turnover p/day = 32 patients per day x0.25 LoS saving = 8 bed days p/day benefit

Table of Demand and Capacity analysis and Predicted Benefits of winter initiatives 18/19 (Carnall Farrar)

However, there is a capacity shortfall which is concentrated at WRH, where the estimated residual gap is 41 beds after change levers

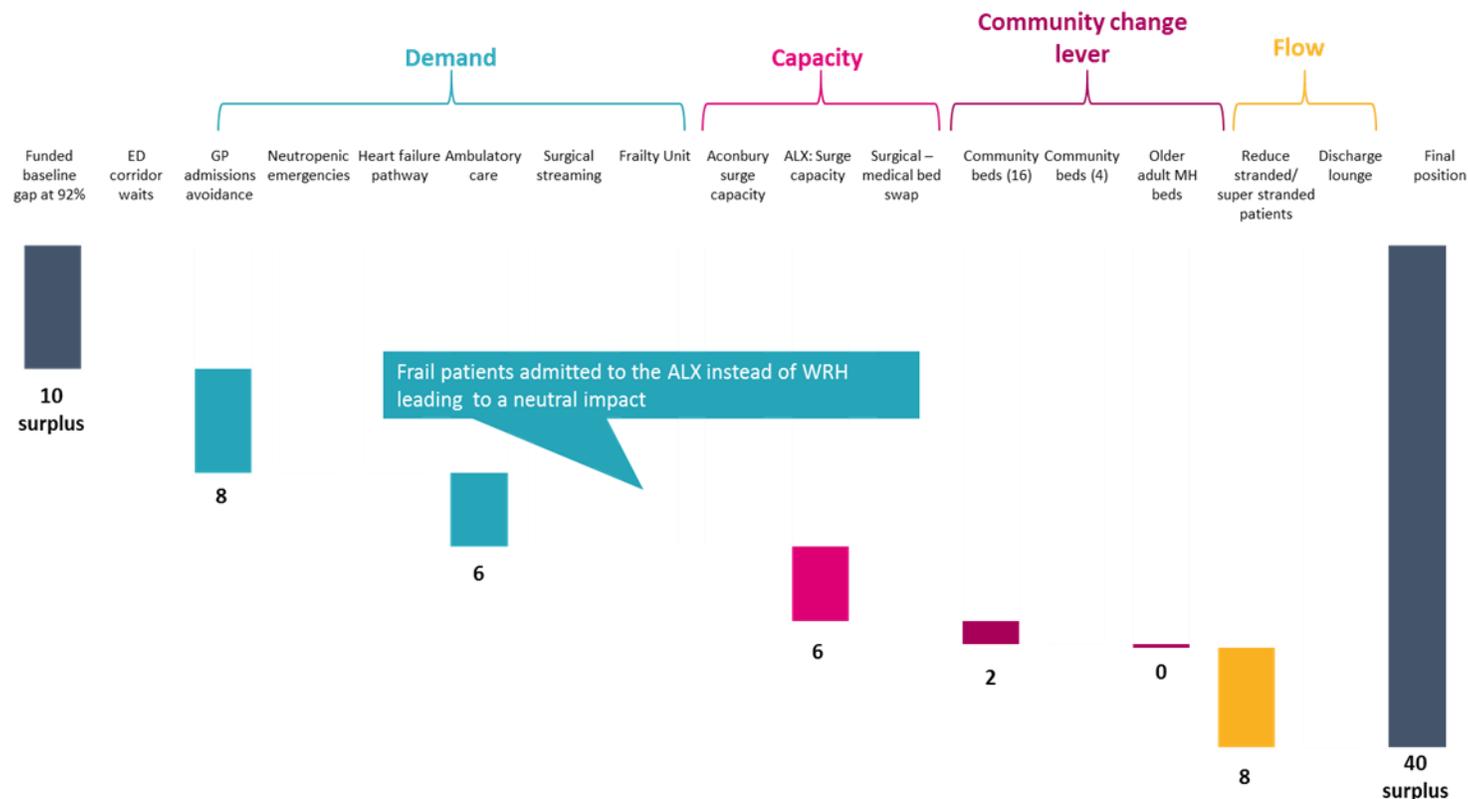
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Table of Demand and Capacity analysis and Predicted Benefits of winter initiatives 18/19 (Carnall Farrar)

At ALX, the change levers will likely create further capacity, leading to an estimated surplus of 40 beds



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Fast track and further embed the priority aspects of the AEDB plan ensure delivery of our urgent care and patient flow system as it has been designed

Reduced Demand

- 14 Neighbourhood teams focused on appropriate admission avoidance
- Enhanced falls response service
- COPD In-Reach and avoided admission
- WMAS *5 – direct access for WMAS crew to medical advice

Improving Patient Flow

- Patient Flow Program within acute services
- Front Door Streaming to assessment areas to reduce ambulance delays
- Discharge Lounge WRH
- Heart Failure Pathway to avoid long length of stay
- Frailty assessment area expansion at the Alexandra Hospital
- Ambulatory assessment units embedded
- Fast Track End of Life Improvements – reducing time taken for care home discharge

Identify any further specific winter initiatives, based on best practice designed to reduce demand or enhance capacity

- UTC centre – Alexandra Hospital – Dec 18
- WRH Surge Capacity – extra 28 beds
- ALEX Surge Capacity – extra 12 beds
- Community hospitals - extra 16 beds at Evesham Community Hospitals
- Complex mental health discharge to assess beds – ring fencing 4 beds
- Elective Activity to be maintained and to maximise Kidderminster site
- Hospital from Home – fire service supporting settling patients at home
- Pharmacy provision – 6 additional staff across the two sites
- Multi-Disciplinary Accelerated Discharge Event (MADE) aiming to reduce bed occupancy Nov , December and February

Undertake a detailed analysis of workforce across the system and agree an approach to workforce utilisation for the Winter 2018/19 period

- Workforce is identified as the key risk as a result of
 - recruitment and retention challenges
 - potential for escalation of sickness rates
 - impact of consistent pressure

The winter planning this year has included joint agreement to prioritise and utilise 20% of clinicians in non clinical posts at patient delivery level, to support front line clinical staff

Priority meetings only will occur and senior leaders are sharing the overall system leader role in times of escalation

Ensure robust daily system management and monitoring of success of winter plan

- **Worcestershire system wide winter room will be in place again this year**, with dedicated resource to support reporting functions and an agreed standard operating procedure in place, it will be responsible for coordinating system wide functions on a daily basis. This year it will support STP report jointly with Herefordshire
- The A&E Delivery Board have introduced a **weekly Urgent Care planning forum** for Directors of Operations of all A&E Delivery Board partners to ensure a collaborative approach to system management and to agree the system wide operational plan for the week ahead and to monitor the performance of each aspect of the AEDB/Winter plan and take corrective actions

Monitoring and Evaluation of Winter

- In addition to weekly monitoring of KPIs the AEDB will continue to use the Carnall Farrar demand and capacity tool to understand demand and capacity over the winter period and the impact of any further change levels that may be identified
- To support the system in evaluating the winter plan the Commissioning Support Unit will be undertaking a 'live' evaluation process monitoring all aspects of the winter plan, learning from patient stories, quality issues and achievement of performance aspects of each winter initiative.

Next Steps

- In recognition of the demand and capacity analysis and the bed demand the acute trust are planning to realign acute services across the two sites
- The proposals are being developed and will be subject to agreed processes for quality assurance, engagement and service change decision making processes