# AGENDA ITEM 9

# HEALTH AND WELLBEING BOARD



TO:	Health and Wellbeing Board
FROM:	Debbie Nixon, Chief Operating Officer, Blackburn with Darwen CCG
DATE:	20 <sup>th</sup> January 2014

SUBJECT: Pennine Lancashire Annual Resilience Planning 2013/14 - Winter Update

#### 1. PURPOSE

The purpose of this paper is to provide the Health and Wellbeing Board with an update in relation to developments, finances and planning undertaken to support Winter 2013/14.

#### 2. RECOMMENDATIONS

The Health and Wellbeing Board is requested to:

- Note the contents of this report and actions to date
- Agree future reporting requirements

#### 3. BACKGROUND

- 3.1 The Pennine Lancashire Health Economy undertakes planning meetings to review and develop the Annual Resilience Plan throughout the year to review the previous winter and bank holidays to ensure lessons are learned and that robust plans are implemented in preparation for winter. The Annual Resilience Plan and related documents are continually reviewed and updated throughout the year by the CCG on behalf of the health and social care economy. These plans are then tested and reviewed by the Unscheduled Care Access and Flow Delivery Group, NHS East Lancashire Local Delivery Group and Blackburn with Darwen Commissioning Business Group. The requirement to undertake this level of resilience planning follows National guidance.
- 3.2 For planning purposes the winter element of the Annual Resilience Plan covers the period of 1<sup>st</sup> November 2013 through to 4<sup>th</sup> April 2014. During this period historically, there has always been a greater demand for health and social care services. Last year's winter activity generally followed the seasonal trend but pressure on the system has remained consistent throughout this year, with particular pressure in March and April 2013.
- 3.3 Given the constant pressure and demand on the Health and Social Care Economy throughout 2013, it is proposed that the Annual Resilience Plan 2013/14 is utilized throughout the year across the whole health and social care economy to ensure effective delivery of services and systems.

### 4. RATIONALE

- 4.1. In order to provide robust Annual Resilience Plans across health and social care the Board needs to be aware and contribute to the development of Annual Resilience Plans which are in line with national guidance and reporting expectations for managing winter.
- 4.2 Provide guidance in terms of wider population needs in order to manage demand.

#### 5. KEY ISSUES

Over the current winter period there is increased demand on already stretched services at the same time as maintaining high quality along with achieving national and local standards. A key focus for delivery is partnership working. This has been achieved this year through the following:-

# 5.1 Health and social care economy Trigger and Escalation Policy

This new Policy has been cascaded and agreed by all health and social care organisations across Pennine Lancashire who has now agreed and authorized adherence to the delivery and adoption of the plan within their organisations. A final version will be circulated to ensure that all on-call staff are briefed and have copies of the Policy across the organisations. Training for all CCG on – call staff has been provided at Blackburn with Darwen CCG and for East Lancs CCG to ensure that they are briefed on the policy and related processes.

# 5.2 Christmas and New Year 3 weeks specific plan & Winter Core Action Plan

The Christmas and New Year plan highlights the key 3 weeks Christmas and New Year period (23<sup>rd</sup> December 2013 to 10<sup>th</sup> January 2014) and captures the opening hours and services available during this period. The plan has been reviewed across the health and social care economies to ensure that there is sufficient capacity within services over this critical time period. We are awaiting feedback from partners and will ensure that the document is reviewed and updated as appropriate. The Core Winter Action Plan captures the additional resource and capacity that has enabled 7 day working and winter specific interventions and provides an outline of impact and progress per service. This work will be monitored via the Pennine Lancashire Unscheduled Care Access and Flow Group.

# 5.3 Winter Table Top Exercise

A table top exercise meeting was held on 25<sup>th</sup> November and well attend by all key health and social care organisations. A number of scenario's were presented to the group and the Trigger and Escalation Plan was utilised to facilitate solutions to the scenario's. The outcome and discussion during the table top exercise provided sound reassurance that organisations had plans and processes in place to respond to likely situations of trigger and escalation and that the joint working and plans and investment implemented were responsive and appropriate.

### 5.4 Perfect Week Team

The Perfect Week Team and exercise (centred around supporting earlier discharge) has continued to take place throughout November and it has been agreed that throughout the winter period a shadow team will continually be available. From mid-November the Perfect Week Team, which has included social care, have only been taking place in the mornings due to the effectiveness of the outcomes of the work by the team. The CCG will continue to support and monitor this team approach. The Perfect Week team is also being utilized by North Lancs CCG.

In addition to the above areas of focus, further work has taken place in relation to the development of a Pennine Lancashire Annual Communication and Engagement Strategy to ensure a combined approach to delivering key messages. Also daily Pennine Lancashire teleconferences have been initiated to monitor performance across the health economy and to ensure a partnership approach to escalating and actioning issues. In addition Pennine Lancashire are part of the wider Lancashire level teleconferences which aim to ensure management across the system.

#### 6. POLICY IMPLICATIONS

 ECIST. The Pennine Lancashire Health Economy has been identified as being at high risk of failing to achieve the 4 hour Accident and Emergency Standard – the Emergency Care Intensive Support Team (ECIST) have been undertaking a review within ELHT and a recovery plan has been

- developed with support from the ECIST team. The aim of the action plan is to improve quality and performance which builds on the Keogh recommendations.
- Evaluation. A detailed evaluation will take place after winter to review delivery and to develop action plans to support planning for winter 2014/15.

### 7. FINANCIAL IMPLICATIONS

- 7.1 Additional non-recurrent resource has been provided nationally for those areas struggling to meet the 4 hour target. This national funding has been used to:
  - Increase primary care access
  - Enable 7 day working within social care to support discharge
  - Enhance Continuing Health Care assessment and discharges
  - Deliver an Ambulatory care pilot.
- 7.2 In addition to the national funds both CCGs within Pennine Lancashire have also provided additional funding for a number of schemes including:
  - Additional Mental Health Liaison within A&E
  - Purchase of additional community beds
  - · Additional hours within treatment rooms.

All of the above investment will be monitored and updates provided via the Unscheduled care Access and Flow Group on a monthly basis and reported to the Area Team via the monthly A & E investment tracking template.

# 8. LEGAL IMPLICATIONS

#### 9. RESOURCE IMPLICATIONS

- Officer time to participate in:
  - o Resilience meetings
  - Teleconferences
  - Table top exercises
  - Evaluation

# 10. EQUALITY AND HEALTH IMPLICATIONS

#### 11. CONSULTATIONS

Consultations undertaken with resilience group members from across Health and Social Care, including key providers.

**VERSION:** 

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DATE:	January 2014
BACKGROUND PAPER:	ANNUAL RESILIENCE PLAN 2013/14

