



EDUCATION AND SOCIAL SERVICES SCRUTINY COMMITTEE – 12TH MARCH 2024

SUBJECT: WINTER PRESSURES

REPORT BY: INTERIM CORPORATE DIRECTOR OF SOCIAL SERVICES

1. PURPOSE OF REPORT

- 1.1 To advise members of annual preparations made for winter planning as required by Welsh Government.

2. SUMMARY

- 2.1 The report provides information to members on the plans in place to address the pressures experienced across the health and social care system. Previously funding and plans have covered a 6-month period from October through to the end of March. Learning from previous years it was agreed to plan for 2 years so that all schemes could be fully operational and evaluated properly over a longer period of time to ascertain if they had any impact on individuals and the whole system.

3. RECOMMENDATIONS

- 3.1 Members note the use of Regional Integration Fund (RIF) to underpin a 2-year regional System Resilience Plan to address potential winter pressures experienced across the health and social care system.

4. REASONS FOR THE RECOMMENDATIONS

- 4.1 The production of a winter plan now known as the system resilience plan is a requirement placed on the Regional Partnership Board (RPB), implementation of the plan is monitored through the Gwent Adult Strategic Partnership Board (GASP)

5. THE REPORT

- 5.1 The regional system resilience plan is detailed in appendix 1 in terms of initiative being supported and progress made on implementation.

- 5.2 In addition to the regional plan, Caerphilly makes its own preparation as part of our business continuity planning to ensure services can be maintained primarily during period of inclement weather.
- 5.3 Preparations include the hiring of 4x4 vehicles to ensure that essential staff can both get to and from their work place and enable domiciliary carers to access remote locations.
- 5.4 Rotas are amended in terms of start and finish times across care homes to facilitate assisted transport when required.
- 5.5 Contingency plans are agreed with families in domiciliary care, number of calls maybe reduced or combined. Walking rotas maybe introduced.
- 5.6 Alternative locations and /or delivery methods are considered for some services such as Emergency Duty Team and Telecare.
- 5.7 Promotion of the flu vaccination for staff to try to reduce sickness absence and prevent the spread of infectious diseases.
- 5.8 Redeployment of staff can also be undertaken, if necessary, this covers catering, cleaning and care.

5.9. **Conclusion**

The health and social care system is under considerable pressure, the decision to fund a 2-year system resilience plan will enable time for new initiatives to bed in and be evaluated in terms of their impact on the whole system.

6. **ASSUMPTIONS**

- 6.1 It is assumed winter pressures are now actually all year around pressures and the system needs to be able to respond accordingly to increased demand.

7. **SUMMARY OF INTEGRATED IMPACT ASSESSMENT**

- 7.1 This report is for information only hence an IIA is not required currently.

8. **FINANCIAL IMPLICATIONS**

- 8.1 Aneurin Bevan university Health Board (ABUHB) are responsible for managing the budget associated with the system resilience plan.

8.2 **Financial Update at Month 8**

To support the delivery of the system resilience plan, £2.654m of funding was delegated to the Gwent Adult Strategic Partnership Board (GASP) for 2023-24 and £2.294m in 2024-25.

Table 1 below shows the schemes awarded within the plan along with the latest forecasts. The month 8 position is forecasting a slippage of £254k, which is a £22k increase from £232k slippage reported in month 7.

Furthermore, there were movements within the Minor Capital programme which released funding of £322k to support part of the capital elements of the SRP. Therefore, from the initiatives that have been approved but are awaiting

funding availability, GASP has agreed to award the following and the projects have been informed:

- **Care & Repair-Hospital to a Healthier Home:** Equipment – £45k awarded.
- **GWICES:** Equipment – £277k awarded from Minor Capital funding and £223k from SRP slippage (£500k in total).
- **Same Day Emergency Care (SDEC) @ YYF:** Funding shortfall – No more funding to be agreed for this scheme.

9. PERSONNEL IMPLICATIONS

9.1 There are no personal implications associated with this report.

10. CONSULTATIONS

10.1 All comments have been included within this report.

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Appendices:

Appendix 1 System Resilience Plan update

Gwent RPB System Resilience Plan

Appendix 1

| | | | |
|------------------------|--|---------------------------|--|
| Report Title: | System Resilience Plan (SRP) – Projects Update | Date: | Gwent Adults Strategic Partnership – 25 th January 2024 |
| RPB Report Lead | | Update written by: | , Programme Manager, PMO, ABUHB |

| Project | Provider | Project Description | Anticipated System Benefits | Project Mobilisation Status | Project Operating | RAG Status |
|--|--------------|--|---|--|-------------------|--|
| Step Closer to Home Early Facilitator Discharge | ABUHB - CHC | Project to facilitate an early discharge that would provide home-based care with a dedicated team of Healthcare Support. | <ul style="list-style-type: none"> Length of Stay Reduction Prevent deconditioning / maintain independence Acute hospital bed capacity | Project Update Mobilised as intended, the team is partially in place and operational. | Yes | Amber Although the project is operating successfully a conversation is required on priorities and focus. |
| Step Closer to Home | ABUHB - CHC | The SCTH scheme offers a range of alternative pathways to facilitate discharge from the hospital for patients waiting for the next step of their recovery. It aims to support patients who are waiting for 3-4 domiciliary care calls per day to enable discharge from the hospital. | <ul style="list-style-type: none"> Length of Stay Reduction Prevent deconditioning / maintain independence Acute hospital bed capacity | Project Update Continuation of the scheme as intended; financial position reflective of pathway/care home bed utilisation. | Partially | Amber Conversation is required to ensure all local authorities are engaging. |
| Mental Health Practitioner and WAST Response | ABUHB - Corp | Testing a new project. Mental health calls represent around 10% of total ambulance service demand and these calls are often more complex, take longer to resolve and are a significant challenge to the workforce. WAST's data shows that when an | <ul style="list-style-type: none"> Reduced conveyance and hospital admission. More appropriate and improved support for patients. | Project Update MHRV is planned to go live on 2 February 2024. Staffed by a Mental Health Practitioner from WAST. | No | Amber Delayed, due to start on 2 February 2024. |

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|--------------------------------------|------------------|--|--|---|-------------------|--|
| | | ambulance is dispatched to a mental health call, the majority (circa two-thirds) of these patients will be conveyed to an emergency department. | | | | |
| Same Day Emergency Care @ YYF | ABUHB - Medicine | The SDEC service provides a streamlined service to patients who would otherwise wait to be seen and treated in a busy and congested AMU at YYF. Support provides for a sustained SDEC service at YYF between the hours of 8am to 8pm Monday to Friday (including Bank holidays) with an uplift to cover 52 weeks per year. | <ul style="list-style-type: none"> • Patient is seen at the right time, in the right place by the right person • Optimised patient experience • Reduction in waiting times • Avoiding unnecessary overnight admission • Improved patient flow • Reducing congestion in the Acute Medicine Unit • Reduced bed occupancy. | Project Update Continuation of service as established at YYF. | Yes | Green Continuation of existing service. |
| CRT Pharmacy | ABUHB - PCCS | The project provides medicine reviews, medicine deprescribing, home visits and discharge planning. This project will expand the service to the whole of Gwent and develop the service to take on responsibility for providing pharmacy services on wards in County and Chepstow Hospital sites which will positively affect patient flow and discharge. It will also deliver home visits to frail elderly patients | <ul style="list-style-type: none"> • Gwent wide service • Reduced care calls • Reduced falls • Improved discharge processes • At home IV service • Improved efficiencies • Freed up consultation time | Project Update Recruitment activities are underway, though there have been difficulties due to increased scrutiny of posts being advertised within ABUHB – particularly as these are new posts. One post started on 15.01.24 and interviews for others taking place in January. All posts are to be in place by the | Partially | Amber Delayed but started and fully operational in April 2024. |

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|--|----------|---|---|---|-------------------|--|
| | | identified through HRAC criteria in collaboration with GP practices. | | end of April, pending notice periods. | | |
| Rebalancing Rights and Responsibilities | Central | To build on the success of the pilot initiative and expand the rebalancing rights and responsibilities training and engagement programmes across the system. The project enables a cultural shift across health and social care, ensuring the right conversations are held and barriers are removed. | <ul style="list-style-type: none"> Removing barriers to support seamless working, ensuring the right individuals have the right conversation with individuals. | Project Update Mobilisation activity is underway, meeting was held 20.12.23 to discuss the project and the next steps required with a follow-up meeting due in early February. The project is not due to start until 2024/25. | No | Amber Protected time at each GASP meeting who are acting as leadership group for this project. |
| Additional System Capacity (including Home First) | LA | Social Care staff are trained to have the right conversation to identify what matters to people to ensure they are not kept in the hospital any longer than necessary. They work with individuals and their families to enable them to meet their outcomes rather than be dependent on services. | <ul style="list-style-type: none"> Additional capacity for assessment, in community, front door and hospitals by a variety of staff. Increase capacity in community re-assessments to discharge people from services e.g. reablement Increase capacity at the front door to prevent admissions. Implementation of D2RA pathways Increased opportunity to meet with families/carers to plan discharge. Can be linked to Home First, staff who work the additional hours in the hospital are dependent on medical staff | Project Update Additional capacity to be sourced on an opportunity basis, overtime etc. Financial utilisation will be reflective of actual capacity sourced on a monthly basis. Planned to commence from December onwards. | Yes | Amber The status of project is currently unknown. |

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|--|----------|--|--|---|-------------------|--|
| | | | being available to arrange the discharge. | | | |
| Trusted Assessor Stroke Pathway Discharge YYF | LA | This builds on the long-standing well-established Home First model of trusted assessor. This model of operating was used during covid where LA's saw everyone in their local hospital on behalf of other LA's. As this application is based on the Health Board's focus to centralise stroke services, a new operating model has been developed. Failure to revise the discharge model would mean that there are likely to be delays in the 4 other LA's starting and completing an assessment. | <ul style="list-style-type: none"> • Accurate sharing of information between local authorities. • Compliance with stroke pathway. | Project Update Staffing in place and operational. | Yes | Amber Operational but no reporting received to date. |
| GWICES - Staff Support | LA | The Gwent Wide Integrated Community Equipment Service (GWICES) is a partnership of ABUHB and the five local authorities within the region. | <ul style="list-style-type: none"> • Supports discharge through the provision of equipment stored locally. • Supports people to remain independent at home. • Reduces the risk of falls and admission or readmission. | Project Update Specialist equipment is being offered through the GWICES services. Staff recruitment is underway for additional resources. | Yes | Amber Funding for the equipment/capital element of the project was only recently confirmed (Jan 24). |
| Falls Response Service | WAST | Increased WAST falls response service - an additional vehicle to the current one in operation across Gwent. Plus, the | <ul style="list-style-type: none"> • Reduced conveyance and hospital admission. • Timely referrals to local teams including Community | Project Update Night support started on the 5 th of December 2023 through commissioned | Partially | Red Although night support is operational there is a risk to the |

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| | | addition of night support provided by St Johns Ambulance | <p>Resource Teams (CRT) and Rapid Medical to continue supporting people at home and improving independence.</p> <ul style="list-style-type: none"> Reduction in long-lay deconditioning. n | arrangements via St John Ambulance. A task and finish group to meet in early February to discuss | | viability of the second vehicle supported by the SRP. |
| BRC - ED Resettlement | British Red Cross | Enhancing ED experience and post-discharge transitions, offering emotional support, optimising patient flow, and connecting to community services. Expanding capacity and integrating ambulance transport with stretcher capacity for improved care and flexibility. | <ul style="list-style-type: none"> Improvements in patient flow Higher discharge rates Enhanced resource allocation Lower readmission rates Stronger community connections | Project Update Additional resources are in place but not yet up to full capacity, this is planned for the start of February 2024. Additional vehicle and onsite space and charging requirements in operation. | Partially | Green Good progress has been made on getting the project up and running, slight delay in getting up to full capacity. |
| Hospital to a Healthier Home | Care and Repair | The project offers rapid home adaptations for elderly patients leaving the hospital due to housing issues. It seeks to expand support and secure flexible funding for complex cases, aiming to enhance patient independence and reduce readmissions. | <ul style="list-style-type: none"> Improves discharge delays Reduces re-admissions Reduces potential falls | Project Update The project is up and running in two of three agencies, and recruitment is ongoing in the third. Internal Care and Repair discussions have taken place and an agreement reached with Agencies to establish baselines and data capture. | Partially | Green Funding for the equipment/capital element of project was only recently confirmed (Jan 24). Good progress made on getting the project up and running. |

RAG Status Key

Red – Project is off track with some risks or concerns that need resolving.

Amber – Project is not currently on track, or the status is unknown currently.

Green – Project is on track with positive progress in line with milestones.