Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	Tuesday 3 January 2023
Subject:	Winter Plan		
Report of:	Executive Director of Adult Social Care and Health	Wards Affected:	(All Wards);
Portfolio:	Adult Social Care Health and Wellbeing		
Is this a Key	No	Included in Forward	No
Decision:		Plan:	
Exempt / Confidential Report:	No		

Summary:

This report gives an overview to the Committee of the activity to plan additional services and prepare for Winter 2022/23 and the expected increased demand and challenge to service delivery this may bring. There has been a delay in allocating additional monies to Health and Social Care which has led to a delay in developing new services and bolstering existing ones.

Recommendation(s):

(1) The Committee are asked to receive and note the information contained within this report.

Reasons for the Recommendation(s):

To update the Committee on joint plans between the Cheshire and Merseyside ICB Sefton and Adult Social Care in Sefton for addressing winter pressures and to provide to the Committee with reassurance on the processes involved in formulating plans across the Sefton Health and Social Care system.

Alternative Options Considered and Rejected: (including any Risk Implications)

None.

What will it cost and how will it be financed?

(A) Revenue Costs

Costs associated with specific elements of the plan will be met from funding received from the Department of Health and Social Care to address winter / Health and Social Care system pressures. The report provides detail on an additional 2.8 Million (1.2 Million of this will be allocated directly to the Local Authority) allocation to the Sefton Health and Care System to support the Discharge process during winter.

(B) Capital Costs

There are no direct capital costs identified through the contents of this report.

Implications of the Proposals:

Legal Implications:	
Legal implications.	
Equality Implications:	
There are no equality implications	
Climate Emergency Implications:	
The recommendations within this report will	
Have a positive impact	No
Have a neutral impact	Yes
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Have a negative impact	No
The Author has undertaken the Climate Emergency training for report	Yes

Contribution to the Council's Core Purpose:

Protect the most vulnerable:

The winter plan proposals seek to ensure that patient experience is improved and that vulnerable people identified as being ready for discharge from Hospital are able to do so as soon as possible and receive support to enable them to regain their independence.

Facilitate confident and resilient communities:

To plan seeks to further put in place services which are enabling and support people to regain their independence.

Commission, broker and provide core services:

The plan seeks to ensure that services are put in place which provide the best outcomes for people and support them to regain their independence in the most appropriate environment.

Place – leadership and influencer:

The plan outlines how Health and Social Care partners are working together to address winter pressures and work with the wider sector to put in place services to addresses pressures and deliver services to better meet peoples needs.

Drivers of change and reform:

The plan is an example of how Sefton Place partners are working together to deliver an integrated approach to dealing with system pressures.
Facilitate sustainable economic prosperity:
Greater income for social investment:
Cleaner Greener

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD 7052/22) and the Chief Legal and Democratic Officer (LD 5252/22) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

The plan has been developed with Partners across the Sefton Health and Care System.

Implementation Date for the Decision

Immediately following the Committee meeting.

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Appendices:

There are no appendices to this report

Background Papers:

There are no background papers available for inspection.

1. Background

- 1.1. As outlined by NHS England it is envisaged that the winter period will be a very challenging time for the Health and Social Care System.
- 1.2. Services are under continued, significant pressure, with challenges including timely discharge of patients impacting on patient flow within hospitals, alongside ongoing pressures in mental health services.
- 1.3. Sefton, as with other areas, are required to formulate plans to address these pressures and to ensure that risks are effectively managed through the formulation of a Winter Plan.
- 1.4. The Winter Plan needs to ensure that the Sefton Health and Care system can meet the following NHS England 10 best practice initiatives.
 - 1. Identify patients needing complex discharge support early

- 2. Ensure multidisciplinary engagement in early discharge plan
- 3. Set expected date of discharge (EDD), and discharge within 48 hours of admission
- 4. Ensuring consistency of process, personnel and documentation in ward rounds
- 5. Apply seven-day working to enable discharge of patients during weekends
- 6. Treat delayed discharge as a potential harm event
- 7. Streamline operation of transfer of care hubs
- 8. Develop demand/capacity modelling for local and community systems
- 9. Manage workforce capacity in community and social care settings to better match predicted patterns in demand for care and any surges
- 10. Revise intermediate care strategies to optimise recovery and rehabilitation

2. Sefton Winter Planning Process

- 2.1. The Sefton Place winter plan has also been formulated to meet the following objectives
 - Support Sefton Place urgent care objectives in valuing patients time and improving patient experience.
 - To support system pressures across North and South Sefton in what is expected to be a very challenging winter.
 - To strive to meet capacity with demand and ensure resource allocation in the right areas to support patients to return to their own homes as quickly as possible.
 - Collectively ensure delivery of a safe winter

3. The Sefton Place Winter Plan, Intelligence, and Impacts

3.1. The following summaries the key elements of the plan against the strategic objectives outlined in section 2.2

Objectives	Plans	
Align demand & Capacity to optimise whole system patient flow 7 days per week & Improved discharge delays for patients who are ready for discharge	 Additional 14 beds at existing Intermediate Care facility in North Sefton – the aims of the additional beds are to. Provide care for patients who are medically well enough to leave hospital with no nursing needs whilst waiting package of care to go home. Release acute speciality beds that are currently being used to care for this patient cohort. Extension of existing community Intermediate Care and stepdown bed provision contracts to ensure community bed base for people that can be discharged Additional 7-day social worker capacity to prioritise discharges in the community bed base in both Southport & Formby and south Sefton until the end of March 2023. This will enable: More timely social care assessment Reduction in the number of surge beds currently in use Optimising flow through the community bed base and support whole system flow The valuing of patient time Work to strengthen support to recover at home for people who can return home with support Domiciliary Care provision to support people being discharged Remodelling of care home facility in South Sefton – to deliver more Intermediate Care / short-term bed provision 	

	 Investment into the Community and Voluntary Sector Investment into Housing / homeless initiatives Investment in Primary Care and Respiratory Pathways
Attendance and Admission avoidance	 Virtual Wards – to care for people at home while having access to an acute hospital consultant ward round and interventions from either community or/and acute teams 2hr Urgent Community Response (UCR) Service – ongoing work to provide immediate care and support to avoid admission.
	 Rapid Response Service – expansion of this service to support delivery of the 2hr UCR service

3.2. It is hoped the implementation of the Winter Plan will also lead to a reduced length of stay in NHS trust and community beds and a reduction in demand for community bed base. We would also hope to be able to achieve an increased capacity within reablement and domiciliary care in Sefton by the end of October 2022.

4. Cheshire and Merseyside Integrated Care Board (ICB) Oversight / Risk Oversight

- 4.1. Cheshire and Merseyside (C&M) ICB Winter Planning Operational Group is now established and has in place a C&M Urgent and Emergency Care Assurance Framework and Sefton Place has submitted a baseline assessment of the Winter Plan objectives, and this identified the following risks.
 - Current significant challenge to recruit and retain Health and Social Care Workforce, although a national issue this is causing a significant level of individuals awaiting packages of care.
 - There is a lack of community bed capacity and a budget challenge to resource this.
 - The current Domiciliary care provision is not able to meet demand and there is a ongoing recommissioning process of this.
 - There has been a long-held ambition to expand the Reablement offer in Sefton although working to mobilise this now, there remains a risk to the system that Reablement does not have sufficient capacity to support all that would benefit from it.
 - In a post covid environment there is still significant risk and pressure to deliver the elective recovery programme required.

5. How the Winter Plan will be funded

- 5.1 The ICB had confirmed funding for the identified beds to support Liverpool University Hospitals NHs Trust (£2.4m to fund an additional 24 beds) and Southport & Ormskirk Hospitals NHS Trust (£960k has been provided to fund an additional 14 beds).
- 5.2 In addition, Mental Health investment of £539k has already been allocated directly to the NHS Provider.
- 5.3 On the 23rd September the Department of Health and Social Care announced additional Winter Monies of £500m, and on 18th November announced that £200 million will be distributed to local authorities, based on the Adult Social Care relative needs formula (RNF) and £300 million will be distributed to Integrated Care Boards (ICBs), targeted at those areas experiencing the greatest discharge delays.
- 5.4 Of this national £500m funding, the following has been allocated to Sefton Local Authority and Cheshire & Merseyside ICB;

- Sefton LA = £1.28m
- C&M ICB = £19.2m of which there will be £1.6m allocated to Sefton Place.
- It should be noted the extra £1.28m that is attributable to the LA only will need to comply with the council's financial procedure rules. As this funding is for £1.2m, this will need approval from both Cabinet and Council to be compliant with the Financial Procedure Rules. This will be included in the January finance report and then taken to Council to obtain this approval. The funding can then be included within the budget.
- 5.5.1 This funding is required to be pooled into the Better Care Fund (BCF). The funding will be provided in 2 tranches the first (40%) in December 2022, and the second (60%) by the end of January 2023 for areas that have provided a planned spending report and fortnightly activity data and have met the other conditions. This must also be enshrined in a Section 75 agreement.
- 5.5.2 The ICB funding is for local determination on how it is split to local Health & Wellbeing levels.
- 5.6 The fund can be used flexibly on the interventions that best enable the discharge of patients from hospital to the most appropriate location for their ongoing care. Funding should prioritise those approaches that are most effective in freeing up the maximum number of hospital beds and reducing bed days lost within the funding available, including from mental health inpatient settings. Discharge to Assess (D2A) and provision of homecare is recognised as an effective option for discharging more people in a safe and timely manner. The funding can also be used to boost general adult social care workforce capacity, through staff recruitment and retention, where that will contribute to reducing delayed discharges and where there are delays to discharge of patients with long hospital stays, for instance those with particularly complex care needs.
- 5.7 Final template returns are required to be submitted to through the Better Care Fund by the 16th December. This pooled budget arrangement is to be used to mange the fund nationally and fortnightly reporting will be required. This will be incorporated into an updated Section 75 arrangement early next year.
- 5.8 Schemes are being developed in Sefton and will include those listed above in paragraph 3.1 and the following:
 - Support to Market Management
 - Additional block-booked Domiciliary Care capacity to support with Hospital discharges
 - Creation of 'Discharge Hub' with greater Social Work and Occupational Therapy capacity
 - Expansion of Intermediate Care / Transitional care home bed capacity
 - Support thorough the Voluntary Sector to meet other Social Care and Housing needs

6 Next Steps

6.5 The Place Director is responsible for ensuring that the funding will target improvements in the flow out of hospital and the commissioning teams are in the performance dashboard to ensure that proposals on use of the £1.28m for Sefton Local Authority is targeted on those priorities identified.

- 6.6 Further work is also taking place with the wider Cheshire & Merseyside ICB to seek to agree possible further areas for short-term investment at the Sefton Place / Health & Wellbeing level, which will have a positive impact on patient flow and which will form part of the wider Cheshire & Merseyside system response to winter pressures.
- 6.7 The Committee is asked to note the contents of this report and that further reports will be provided to the Committee on agreed priorities and updates on the implementation and delivery of them.