### County Durham and Darlington Winter Strategy 2013/14

#### **Incorporating:**

NHS Darlington CCG NHS North Durham CCG NHS Durham Dales, Easington and Sedgefield CCG

#### Background

In response to NHS England: Improving A&E Performance Gateway Ref. 00062, NHS Darlington CCG, NHS North Durham CCG, NHS Durham Dales, Easington and Sedgefield CCG and NHS County Durham and Darlington Foundation Trust have collaborated with Darlington Borough Council and Durham County Council to produce a recovery and improvement plan developed to ensure that a rapid and sustainable improvement in emergency and urgent care delivery is achieved.

The plan has been considered in 3 phases and demonstrates actions for immediate recovery of A&E performance, winter planning measures and sustainable improvements including:

- i. An urgent recovery programme with attention given to all factors which can help recover the standards and includes clear performance management
- ii. A medium term approach to ensure delivery over the next winter period.
- iii. A long term plan setting out how the implementation of the urgent care strategy will ensure safe and sustainable services.

NHS England have outlined their process for assurance of winter plans and this is being co-ordinated by the Urgent Care Board in accordance with the following timeline:

| 31 May 2013       | Local recovery and improvement plans signed off by Urgent Care Boards  |
|-------------------|--|
| 13 June 2013      | Urgent care event – identify key initiatives to improve<br>the local urgent care system with dedicated support |
|                   | from ECIST   |
| 30 June 2013      | Urgent Care Boards sign off financial plans  |
| 13 July 2013      | Joint development of winter planning checklist / template for local use  |
| 16 August 2013    | Draft Winter Plans shared with Urgent Care Board   |
| 31 August 2013    | Joint review of regional NEEP plans  |
| 2 September 2013  | NHS England Area Team/CCG assurance assessment of Winter Plans   |
| 3 September 2013  | NEAS Urgent Care Summit  |
| September 2013    | Update to Health and Wellbeing Boards  |
| 30 September 2013 | Winter capacity and escalation plans signed off by Urgent Care Board   |
| 15 October 2013   | Joint desk top review of local NEEP plans to highlight any cross cutting issues                                |

#### Timeline – key milestones

| 31 October 2013  | Winter capacity and escalation plans signed off NHS            |
|------------------|--|
|                  | England Area Teams   |
| 30 November 2013 | Winter Capacity and escalation plans signed off by NHS England |

## Purpose

The purpose of this document is to provide an evolving strategy which captures the actions that the three CCGs will undertake to monitor and manage the increased service pressures which occur during the 2013/14 winter period and assurance of the whole health economy to fulfil our duties as commissioners to the Area Team for NHS England. The document also captures any initiatives identified by partner organisations, where this information is known at this stage.

The strategy outlines:

- The Winter Planning Process including work with the Urgent Care Board and partner organisations
- The initiatives being considered in preparation for winter
- Monitoring and management arrangements

### Local Context

The winter strategy developed by the three CCGs will integrate with those of partner organisations, including Darlington BC, Durham County Council, NEAS, CDDFT and TEWV.

The strategy focuses on:

- Expanding access to primary care services
- Primary Care Preparedness (Vulnerable Patient Plans, management of GP home visiting arrangements)
- Links with secondary care, community health care services and social care
- Admission avoidance and supporting early discharge from hospital
- Prevention measures, including Flu campaigns, immunisation programmes for patients and staff
- Communications, including patient education e.g. Choose Well

The winter strategy clearly links to:

- The NHS England Outcomes Framework and the five domains:
  - Preventing people from dying prematurely
  - Enhancing quality of life for people with long-term conditions
  - Helping people recover from episodes of ill health or following injury
  - Ensuring people have a positive experience of care
  - Treating and caring for people in a safe environment and protecting them from avoidable harm
- The NHS England Operating Framework Everyone Counts: Planning For Patients 2013/14
- The NHS England Winter Planning Assurance Checklist

This document should be read in conjunction with:

- County Durham and Darlington A&E Recovery and Improvement Plan
- NHS England Durham, Darlington and Teesside Area Team Winter Plan 2013/2014
- Winter plans of partner organisations (as they become available)

## Objectives

The objectives of the three CCGs over the winter months are to:

- Enable patients to access the right care, in the right place at the right time
- Support the care and treatment of patients in community settings
- Reduce avoidable admissions to hospital
- Support timely discharge of patients from hospital to effectively manage patient flow in secondary care

To achieve these objectives the CCGs will work actively with partners to support and collaborate in tackling challenges, adopting an integrated approach. This will include ensuring effective and clear internal and multi-agency communication and escalation processes and accountabilities.

# Winter Pressures Monitoring and Management Arrangements

The three CCGs will work with partner organisations, including Darlington BC, Durham County Council, NEAS, CDDFT and TEWV through the County Durham and Darlington Urgent Care Board to ensure a co-ordinated approach to monitoring and managing winter pressures.

In line with NHS England requirements, the CCGs will be involved in multi-agency conference calls and meetings (frequency to be confirmed) in accordance with a standard operating policy, to discuss the operational position across the whole health and social care system. The CCGs will direct any appropriate communications to primary care providers highlighting operational issues as required.

| Provider | Initiative  | Who    |
|----------|---|--------|
| Primary  |   |        |
| Care     |   |        |
|          | Work with NEAS/TEWV and other providers around              | All    |
|          | improving alternative dispositions                          |        |
|          | NHS 111 Directory of Services improvement                   | All    |
|          |   |        |
|          | GP websites/answer machine messages for OOH                 | CCGs   |
|          | Local patient education campaign e.g. Choose Well (NHS      | All    |
|          | England to confirm whether a regional or national campaign  |        |
|          | will take place)  |        |
|          | Extended opening hours at weekends in general practice      | North  |
|          | from October 2013 to end of March 2014. The Initiative will | Durham |
|          | include direct booking of GP appointments for patients      | CCG    |
|          | where appropriate by A&E staff and NHS 111 service.         |        |
|          | Expand access to primary care, including extended opening   | All    |

# Key Initiatives Being Considered

| Provider  | Initiative   | Who        |
|-----------|--|------------|
|           | hours (weekdays & weekends) and/or GP Hub Service / GP           |            |
|           | telephone triage service with ability to book next day           |            |
|           | appointments for patients  |            |
|           | Alternative schedules for GP home visits to avoid batching       | CCGs       |
|           | and smooth the flow of hospital admissions at key pinch          |            |
|           | points during the day.   |            |
|           | Vaccinations especially for the housebound                       | DDES CCG   |
|           | CCG & CDDFT working collaboratively to ensure that               | Darlington |
|           | Community Matrons are closely linked to GPs delivering the       | CCG        |
|           | Care Homes Initiative and explore how Community Matrons          |            |
|           | & other community nursing services could extend working          |            |
|           | hours to support winter pressures                                |            |
|           | GP Practices to produce a plan for each vulnerable patient       | All        |
|           | to manage their condition & avoid hospital admission             |            |
|           | CCGs to consider a targeted Choose Well style Campaign           | All        |
|           | to co-incide with Flu Vaccination Campaign                       |            |
| Secondary |  |            |
| Care      |  |            |
|           | Ambulance handover delays - recommendations from                 | CDDFT &    |
|           | Pease report   | NEAS       |
|           |  |            |
|           | CDDFT directory of community based services that could           | All        |
|           | provide an alternative pathway and avoid hospital                |            |
|           | admission.   |            |
|           | Potential £2m investment in CDDFT winter plan, with              | NDCCG      |
|           | initiatives to be agreed through clinician to clinician dialogue |            |
|           | - tbc 30 <sup>th</sup> September 2013.                           |            |
|           | – Ibc 30 September 2013.   |            |
|           | Increase the time Seaham urgent care centre is open.             | DDES CCG   |
|           | Could increase it to maybe 8-8 and weekends.                     |            |
|           |  |            |
|           | Increase the GP capacity in Peterlee and Seaham urgent           | DDES CCG   |
|           | care centres.  |            |
| Community |  |            |
| Services  |  |            |
|           | ANP/community nursing roll out in DDES, ANP discharge            | DDES CCG   |
|           | review (more staff time)   |            |
|           | A service whereby patients, on discharge from hospital, can      | DDES CCG   |
|           | get telephone support from a pharmacist for the first 4          |            |
|           | weeks after discharge to check if they are happy with their      |            |
|           | medication, there are no adverse side effects, they are still    |            |
|           | complying with dosage etc. and they have been to their GP.       |            |
|           | Supporting patients with COPD particularly in Horden where       | DDES CCG   |
|           |  |            |
|           | admissions for this are particularly high. Roseby Road           |            |
|           | community centre could look to increasing their capacity to      |            |
|           | provide both medical cover and social interaction for            |            |
|           | patients who become more isolated in the bad weather and         |            |
|           | dark nights.   |            |

| Provider    | Initiative   | Who              |
|-------------|--|------------------|
| Social Care |  |                  |
|             | Durham CC Developing a Severe Weather Plan including<br>winter preparedness leaflets to homes  | Durham CC        |
|             | Increase activity within RIACT – Single Point of Access (RIACT) Service to be provided 8 till 8 7 days a week during the winter period.  | Darlington<br>BC |
|             | Target prevention of admission/Readmission into hospital or<br>ongoing care through the RIACT Service for those needing<br>short intervention.   | Darlington<br>BC |
|             | Target facilitating earliest possible discharge from hospital -<br>the preparation for this is in place, however requires<br>consideration in order to continue as funding ended June<br>2013. | Darlington<br>BC |
|             | 14 Intermediate Care Nursing Beds with the ability to contract an additional 7 Residential Care beds -   | Darlington<br>BC |
| NEAS        |  |                  |
|             | NEAS paramedics to consider undertaking near patient<br>blood testing following a suspected heart attack to reduce<br>hospital admissions.   | NEAS             |
|             | NEAS crews to look at working with Nursing Homes to<br>prepare patient plans, particularly potential end of life<br>patients, to avoid unnecessary A&E admission (Teesside<br>Pilot)           | NEAS             |
|             | Update and improve Directory of Service for NHS 111  | NEAS             |
| Pharmacy    |  |                  |
|             | Community pharmacies to support emergency & urgent care e.g. minor ailments scheme   | CCGs             |