



Winter pressures update

Barking and Dagenham Health Scrutiny Committee

14 November 2022

Challenges

It is expected that health and social care will face a significantly more difficult winter than usual due to a number of factors including:

- Flu, the potential for additional waves of Covid-19 and a rise in other respiratory illnesses
- Additional pressures caused by the cost-of-living crisis and rising energy prices which could have a significant impact on cold and poverty-related illness, particularly for vulnerable residents and those on low incomes
- Workforce challenges across health and social care and care provider sustainability

With effective system-wide planning and collaboration, we are well placed to ensure effective services and support for our residents.

NHS North East London Approach to Winter Planning 2022-23



Objectives

- To help people stay well, independent and healthy, preventing them needing acute levels of care as far as possible;
- To ensure that we are planning for and delivering the capacity we need for those who do need it;
- To ensure that people can access the right care at the right time, and which prevents them from becoming more unwell whilst they are waiting;
- When a resident has been admitted to hospital, ensuring that we have the right plans and support in place that they can move to a less acute setting and regain their independence as quickly as possible.

NHSE winter priorities

1. Prepare for variants of COVID-19 and respiratory challenges, including an integrated COVID-19 and flu vaccination programme.
2. Increase capacity outside acute trusts, including the scaling up of additional roles in primary care and releasing annual funding to support mental health through the winter.
3. Increase resilience in NHS 111 and 999 services, through increasing the number of call handlers.
4. Target Category 2 response times and ambulance handover delays, including improved utilisation of urgent community response and rapid response services.
5. Reduce crowding in A&E departments and target the longest waits in ED, through improving use of the NHS directory of services, and increasing provision of same day emergency care and acute frailty services.
6. Reduce hospital occupancy, through increasing capacity by the equivalent of at least 7,000 general and acute beds, through a mix of new physical beds, virtual wards, and improvements elsewhere in the pathway.
7. Ensure timely discharge, across acute, mental health, and community settings, by working with social care partners and implementing the 10 best practice interventions through the '100 day challenge'.
8. Provide better support for people at home, including the scaling up of virtual wards and additional support for High Intensity Users with complex needs.

ICS Governance



The ICS executive has a coordination and oversight role, supporting system partners in developing their own winter plans, including a joined-up place-based response, sharing best practice, monitoring the delivery of services and working collaboratively with system partners to manage performance, support mutual aid and ensure delivery.

The ICS Executive will act as the central point of escalation during periods of challenge, enabling all partners to collectively agree to actions to support the system and, where necessary, take decisions regarding service prioritisation and support.

The Barking and Dagenham Partnership Board will have a co-ordination and oversight role of place-based winter plans.

The BHR System Command Control Group will act as a point of escalation for the BHR system.

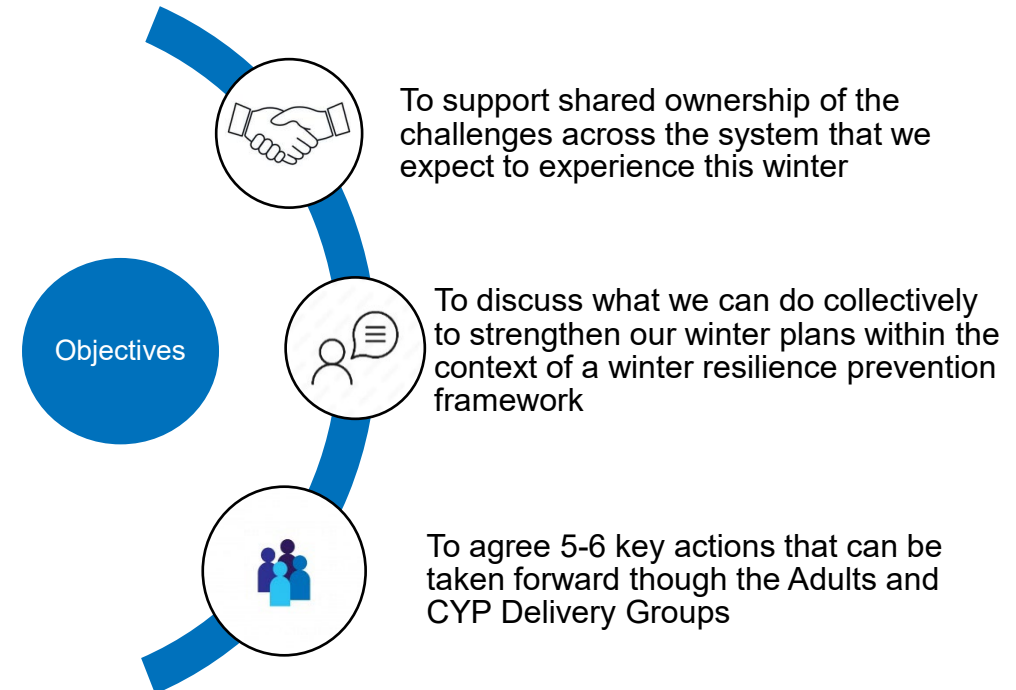
B&D partnership winter summit



The Barking & Dagenham Winter Summit took place on Thursday 20 October 2022 and was attended virtually by representatives from across the partnership.

Time		Lead
14:00pm	Introduction, agenda and objectives	Dr Rami Hara
14:10pm	Outlining the challenges of keeping people in their homes and out of hospital	Sharon Morrow
14:20pm	Developing a place-based approach to health and wellbeing this winter	Matthew Cole
Breakout room workshops		
14:35 - 14:40	Introduction to breakout rooms: 1) Prevention: promote “staying well in winter” campaigns and messaging 2) Proactive Care: Optimise case finding, diagnosis and management of long-term conditions 3) Workforce: How do we support the health wellbeing and resilience of the health and care workforce?	Giulia Ponza/ Lara Dobbie/ Kouroush Sharifi- BHRUT, QI
14:40- 15:10	Idea Generation on defined themes	
15:10- 15:30	Refining Ideas and Generating Quick Wins	
15:30- 15:45	Volunteers and Time Scales	
Return to main meeting		
15:45pm	Feedback from groups	Facilitators
15:55pm	Summary and next steps	Dr Rami Hara

Organisation	Representation
BHRUT	4
Care provider voice	2
Community Pharmacy	1
NEL ICB	13
B&D GP Federation	1
Healthwatch	1
LAS	2
LBBB	10
NELFT	4
PELC	1
Primary Care	6
Public Health	1
Red Cross	1
NHS Camden	1



OHID Winter Resilience Prevention Framework ('10 point plan')



Discussions were framed around 3 priorities of the 10 point actions plan:

Prevention and early intervention

1. Drive high and equitable uptake of COVID-19 and flu immunisations
2. Drive high and equitable recovery and increased take up of national cancer screening programmes
3. Improve the detection and management of CVD risk factors – blood pressure, cholesterol and AF
4. Promote “staying well in winter” campaigns and messaging, including health system ‘literacy’ and navigation

Long-term conditions

5. Optimise case finding, diagnosis and management of long-term conditions
6. Maintain a focus on public mental health, wellbeing and resilience
7. Develop and harness assets for community-centred approaches, community engagement and mobilisation
8. Make Every Contact Count by knowing how and where to signpost people to financial and other practical advice and support
9. Think about inclusion health and other vulnerable groups

Workforce

10. Support the health, wellbeing and resilience of the health and care workforce



Office for Health
Improvement
& Disparities

Summary and actions

It was widely recognised in breakout discussions that this winter will be extremely challenging due to a 'perfect storm' of factors, namely: covid/flu, the ongoing cost of living crisis and workforce and capacity issues.

Volunteers have been identified from each breakout session to pick up short term actions but task and finish groups may be needed to progress these with support from a working group.

Outputs from these discussions will be shared at the next B&D adults and children's delivery groups and the B&D Partnership Board.

Session	Actions
1) Prevention: promote "staying well in winter" campaigns and messaging	Need all partners to discuss how to coordinate a targeted campaign- will need more work to ensure all organisations give the same message to the population on health inequalities and promoting workforce wellbeing support in particular.
2) Proactive Care: Optimise case finding, diagnosis and management of long-term conditions	Adults Delivery Group to develop action plan around the key themes of targeted intervention and collaborative working, systematic approach powered by data sharing, and early intervention- the next meeting on 17/11/22 Childrens Delivery Group to develop action plan around priority areas at the planning session on 15/11/22.
3) Workforce: How do we support the health wellbeing and resilience of the health and care workforce?	Plan a formal launch of the partnership to promote values/organisational identity. Individual organisations to strengthen their comms messaging around vaccine availability for staff and staying well.

