**Title:** Systems Resilience Group Update

**Report of the Systems Resilience Group**

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<th>Open Report</th>
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<td><strong>Wards Affected:</strong> ALL</td>
<td><strong>Key Decision:</strong> NO</td>
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| **Sponsor:** Conor Burke, Accountable Officer, Barking and Dagenham Clinical Commissioning Group |

**Summary:**

This purpose of this report is to update the Health and Wellbeing Board on the work of the Systems Resilience Group. This report provides updates on the Systems Resilience Group meetings held on the 19 December 2014 (Appendix 1).

Operational Resilience planning and delivery, primarily through the Joint Assessment and Discharge Service and community services have been key in supporting system capacity over the key winter months where pressure upon the hospital, presentation and admission rates are at their peak. Monies drawn down from NHS England via the CCG have supported additional activity which has included increased provision of Crisis Response, interim bed based placements and take home and settle services provided with a voluntary sector partner, alongside increasing 7 day working enhancing capacity at points of key pressure and at the front end of the hospital. Social care have seen a doubling of activity in key areas such as those of crisis response which rose from 280 packages in August to 580 in December, such increased activity would ordinarily have been unsustainable without additional funding being in place.

**Recommendation(s)**

The Health and Wellbeing Board is recommended to:

- Consider the updates and their impact on Barking and Dagenham and provide comments or feedback to Conor Burke, Accountable Officer to be passed on to the Systems Resilience Group.

**Reason(s):**

There was an identified need to bring together senior leaders in health and social care to drive improvement in urgent care at a pace across the system.
1 Mandatory Implications

1.1 Joint Strategic Needs Assessment
The priorities of the group is consistent with the Joint Strategic Needs Assessment.

1.2 Health and Wellbeing Strategy
The priorities of the group is consistent with the Health and Wellbeing Strategy.

1.3 Integration
The priorities of the group is consistent with the integration agenda.

1.4 Financial Implications
The Systems Resilience Group will make recommendations for the use of the A&E threshold and winter pressures monies.

1.5 Legal Implications
There are no legal implications arising directly from the Systems Resilience Group.

1.6 Risk Management
Urgent and emergency care risks are already reported in the risk register and group assurance framework.

2 Non-mandatory Implications

2.1 Customer Impact
There are no equalities implications arising from this report.

2.2 Contractual Issues
The Terms of Reference have been written to ensure that the work of the group does not impact on the integrity of the formal contracted arrangements in place for urgent care services.

2.3 Staffing issues
Any staffing implications arising will be taken back through the statutory organisations own processes for decision.

Public Background Papers Used in the Preparation of the Report:
None

List of Appendices

Appendix 1: System Resilience Group Briefings, 19 December 2014