









Oxfordshire System Winter Plan 2019/20

Working in Partnership



in Adult Social Care



Oxfordshire System Winter Plan Aim

To ensure the Oxfordshire health and care system:

- ➤ Is able to deliver Care for Patients/service user in the most appropriate setting to improve experience and outcomes
- Ensures Safe and Effective transfer of patients/service user across the system
- Ensure sufficient Capacity within our services to meet patient need
- ➤ Is **Resilient** throughout, whilst providing safe, effective and sustainable care for the local population
- Is able to Achieve national and local access targets and trajectories across the system















Oxfordshire Winter Plan On A Page

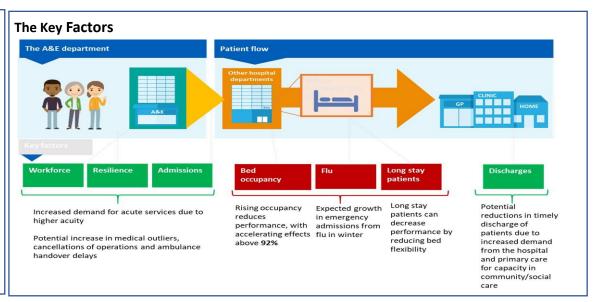
Our Approach:

Alongside our system urgent care plan we are seeking specific assurances to manage the challenges of the winter period which include:

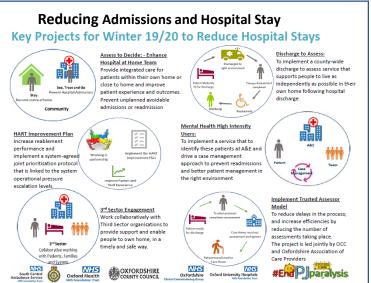
- Management of flu
- Increased demand and acuity

Ву

- Taking a whole system team with executive leadership
- Ensuring systems are in place to manage demand to minimise the impact of winter
- Staffing assurance to ensure that high quality care is maintained during winter















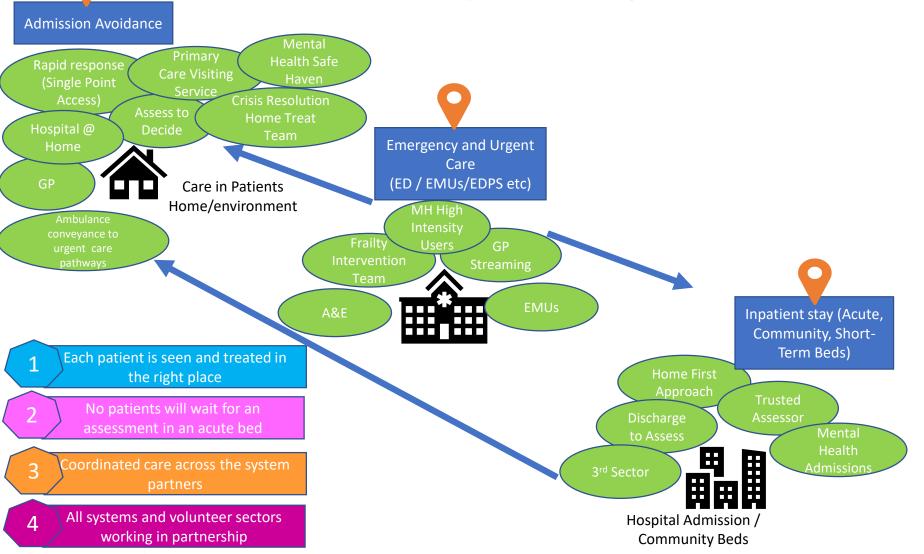








Working In Partnership Throughout the Patients / Service User Journey — Putting Patient First

















Urgent Care 2019-2020 Key Priorities

NORTH OXFORDSHIRE

HOME FIRST

ESCALATION

AIM

Understanding our patient demand and ensuring that we have capacity and offer our patients / service user the right pathways at the right time

AIM

Treating people at home and Helping people return safely home earlier once they no longer need medical support in hospital Improve our reablement pathway (HART)

AIM

Better understanding our demand and capacity and working together to improve our response as a system to enable us to continue to provide high quality safe care to our patients at times of pressure













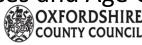


- Key Successes from Winter 18/19 −

 Patients who had to wait more than 4 hours reduced by 4.2% compared to on 2017/18
 - An average of 26 fewer patients incurred a length of stay greater than 21 days in December compared to the previous year
 - We supported an additional 9% more timely discharges compared to previous winters
 - Patients waited for less time in ED
 - Despite increased demand less patients were conveyed by ambulance to ED over winter – 48.1% in 17/18 vs 46.5%
 - Our winter schemes looked to reduce time spent in hospital by an average of 637 bed day equivalents and we achieved 511
 - We improved communication across the system through transparency, integrated and multi-disciplinary working
 - We improved our collaborative working across the patient pathway through our closer system working through the Winter Team and working with mental health services and Age UK.













What We Delivered Against Winter 18/19 Plan

To create flow through our system and minimise harm to our patients, we needed to make sure patients spent less days in hospital.





Performance	Target	Actual	% Delivered Against Plan
Increasing our medical acute capacity to support flow	350	287	82%
Increasing Community Hospital capacity to facilitate the flow through the system and reduce potential delays	1904	1190	63%
Providing a same day response service to our respiratory patients in the community (patients in their own home)	28	10	36%
Reduce the Length of Stay of respiratory patients in Community Hospitals	21	15	71%
Support Same Day Responses by the GPs for urgent patient calls	30	86	287%
Increase our Primary Care Visiting Services Capacity	336	294	88%
Provide a streamlined Single Hospital at Home service (8 beds per month)	32	57	178%
Pilot an Advanced Nurse Practitioner Outreach Service targeting acutely ill patients whilst keeping them at home	84	122	145%
Deploy additional flexible beds over 14 weeks	980	980	100%
Expansion of the Frail Intervention Team	315	849	270%
Provide Intensive Therapy in the community to enable patients to get home quicker safely	26	27	104%















What We Delivered Against Winter 18/19 Plan:

Other reported patient pathways improvement benefits

PERFORMANCE	Target	Actual	% Delivered Against Plan
Reduce waiting delays for home care packages (HART Contingency Hours) from 1124.5 per week	600 hours	447	60.2% (surpassed the target)
Collaborative working with Age UK to support discharges and patient experience (number of patent encounters) (Fo	1560 (New)	1664	106.7%
	515 (Follow-Up)	1062	206.2%
Provide additional transport services to facilitate A&E and Emergency Admission Unit Discharges	Not applicable	153 patients used the service	Not applicable
Create additional urgent care response capacity to keep patients at home in emergencies	2 additional patients per week	84.6 hours	Not applicable
Reducing Mental Health Attendances at Emergency Services through the development of a Safehaven in Oxford City	Not applicable	Reduction of 168 visits to emergency services	Not applicable

Schemes Discontinued / Removed from Plan

Following a robust impact review process, it meant that some schemes were discontinued where they did not demonstrate any tangible benefits.















Winter communications evaluation 18/19

What went well?

- Campaigns, NHS Advice Care and Signposting App have been delivered for flu, staying well and personal winter plan, raising awareness of local services as alternative to A&E. Use of social media to support system winter messages.
- GP Toolkit developed with easy to use information to support winter communications
- Coordinated working with the local media with system spokespeople and proactive timetable to focus stories which gained considerable coverage.
- NHS and OCC worked well together with Age UK Oxfordshire to support initiatives and media activity.

What went less well?

- Audit of GP practice websites showed 20 practices had no information about winter; of the 50 that had information only 10 of those had information on their homepage about sign-posting and using services appropriately.
- GP Access funding not made available from NHSE until mid to late November so campaign design and delivery was hampered.
- No significant change in Minor Injury Unit attendances for targeted postcode areas.

STAY WELL THIS WINTER













Winter Plan 18/19: Actions Going Forward

We need to:

- Grow the System Home First Approach including 3rd Sector to improve our patient pathways, reduce avoidable admissions and reduce delays including the risk of deconditioning
- Ensure our system capacity and workforce can meet anticipated demand.
- Respond better at times of pressure and strengthen our management processes to manage unpredicted surges in demand
- Strengthen our system oversight, collaboration and problem solving culture through our system team and partnership working.







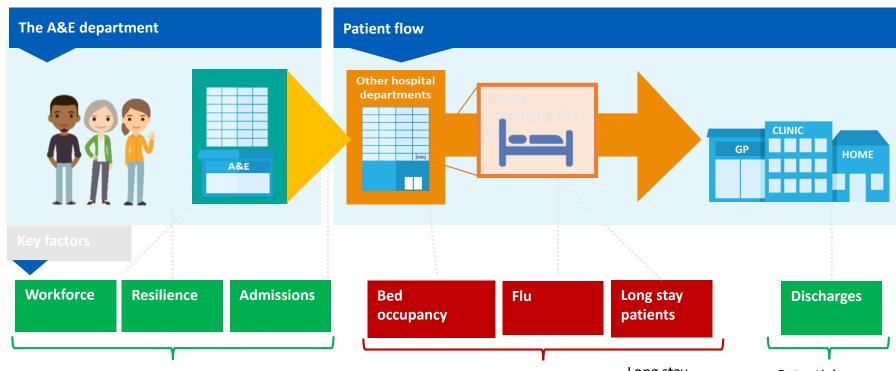








Summary of key factors affecting system performance



Increased demand for acute services due to higher acuity

Potential increase in medical outliers, cancellations of operations and ambulance handover delays

Conveyance to urgent care pathways

Rising occupancy reduces performance, with accelerating effects flu in winter above **92%**

Expected growth in emergency admissions from

Long stay patients can decrease performance by reducing bed flexibility

Potential reductions in timely discharge of patients due to increased demand from the hospital and primary care for capacity in community/social care















Winter Pressures 2019/20

FLU

Our local action plan includes:

- Targeted support to GP practices to increase uptake of vaccinations in high risk patients
- Sharing good practice and suggestions to increase uptake vaccination rates
- Media campaign to increase awareness for patients
- Working together on winter preparation in care homes and domiciliary care staff

Brief from OCCG EU Exit SRO

The Department of Health and Social Care issued Operational Guidance setting out local actions to be taken to prepare for EU exit without a deal;

- In line with this guidance we are working together with key stakeholders to ensure a coordinated approach
- We have carried out risk assessments and reported to Board no significant risks identified
- All relevant EU Exit SROs continue working with national/regional teams to address any outstanding issues.





























Understanding our Demand for Urgent Care Services

Predicted demand growth in 19/20 if it replicates Winter 18/19 (extract from 18/19 winter months CSU Urgent Care Reports October 18 to March19)

Performance	Actual Growth 18/19	Predicted Growth 19/20
OUH A&E Attendances (Type 1 & 2)	7.3%	7%
Out of Hours Services	- 4.7%	1%
South Central Ambulance Service (999)	4.7%	7%
South Central Ambulance Service (111)	6.5%	3%
Minor Injuries Unit	10%	15%
Emergency Medical Unit	- 3.3%	ТВС
Urgent Adult Mental Health	3.78%	1.99%
Urgent Out of Area Mental Health	-4.81%	2.14%
Emergency Dept Psychological Service	7.42%	6.02%
Section 136	17.49%	-3.44%
Primary Care (GPs)	8%*	8%

NHS Digital July 18 vs July 19















Winter Plan 2019/20 Approach
Alongside our system urgent care plan we are seeking specific assurances to manage the challenges of the winter period which include:

- Management of flu
- Increased demand and acuity

By:

- Taking a whole system team with executive leadership
- Ensuring systems are in place to manage demand to minimise the impact of winter
- Staffing assurance to ensure that high quality care is maintained during winter, and especially over the holiday period. Including plans to minimise the number of ambulance handover delays.
- System communications planning

















paralysis by Reducing Length of Stay for our Patients

- Our proactive system approach to patient management "Why not home, why not today?
- Coordinated multidisciplinary approach to discharge to improve patient flow and reduce delays
- Increasing our discharge to assess pathway to help people home earlier
- Delivery of the HART (Reablement Service) Improvement Plan
- A system approach to our bed base to help us work better in managing our resources and get patients to the right place.















System-wide Communication Plan

- The system wide plan will aim to support Oxfordshire's System Winter Plan objectives
 and to ensure that people living in Oxfordshire are aware of and take action to keep
 physically and mentally well and help avoid an admission to hospital this winter.
- Building of the good work last year OCCG, OCC, OUH & OH will have named winter comms leads from their organisations that will make up the winter comms team to deliver the plan.
- A number of campaigns and initiatives will be delivered as part of the winter communications plan including flu, self-care, appropriate use of services and proactive media.
- The local campaigns will consist of two sets messages:
 - Stay well by looking after yourself. The campaigns (incl. flu and self-care) aims to help those with long-term physical and mental health conditions, those over 65, pregnant women and parents of under-sevens stay well and keep their loved ones well this winter. The tone of the local message is to encourage and emphasise the importance of looking after yourself and others during the winter period.
 - What to expect if you do become unwell. The campaigns will help to manage expectations of staff and patients so that all understand the breadth of services available over winter that will aim at reducing the need for a stay in a hospital bed and if one is needed, reduce the length of stay.













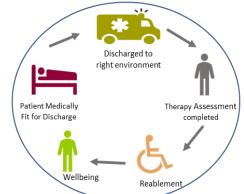


Key Projects for Winter 19/20 to Reduce Hospital Stays



Assess to Decide: - Enhance Hospital at Home Team

Provide integrated care for patients within their own home or close to home and improve patient experience and outcomes. Prevent unplanned avoidable admissions or readmission



Discharge to Assess:

To implement a county-wide discharge to assess service that supports people to live as independently as possible in their own home following hospital discharge.

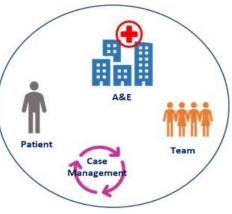
HART Improvement Plan

Increase reablement performance and implement a system-agreed joint prioritisation protocol that is linked to the system operational pressure escalation levels.



Mental Health High Intensity Users:

To implement a service that to identify these patients at A&E and drive a case management approach to prevent readmissions and better patient management in the right environment





3rd Sector Engagement

Work collaboratively with Third Sector organisations to provide support and enable people to own home, in a timely and safe way.



Implement Trusted Assessor Model

To reduce delays in the process; and increase efficiencies by reducing the number of assessments taking place.
The project is led jointly by OCC

The project is led jointly by OCC and Oxfordshire Association of Care Providers











Winter Investment for 2019/20

- Together we have identified £1.4million to further support winter within Oxfordshire
 County Council and CCG Pooled Budget. Additional investment has been prioritised to support delivery of key projects with impact for Winter 19/20
- Schemes approved so far for procurement for winter

Workstream	Cost
3 rd Sector Support	£300,000
Trusted Assessor	£180,000
Flexible fund for mitigation	£920,000

- We have also secure further investment from the BOB STP Transformation Fund :
 - £112,788 to support better management of High Intensity Users of the Oxfordshire urgent care system
 - £50,000 for STP-wide implementation of MiDOS to increase knowledge and use of community alternatives to A&E where clinically appropriate.
- We are also working together on our investment in step down beds to improve our short term bed pathway for patients and improve productivity and use of our system resources































Working In Partnership Throughout the Patients Journey – Putting Patients First

Thank You