

**Meeting of
NHS Lanarkshire Board
28 October 2020**

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SUBJECT: Winter Planning Arrangements 2020/21

1. PURPOSE

This paper is coming to the Board:

For approval	<input checked="" type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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To provide an update of, and seek approval for, the planning arrangements being put in place to ensure services are prepared for the coming winter months – with particular recognition of planning alongside the impact of Covid 19 and the other strategic priorities operating this year.

2. ROUTE TO THE PPRC

The report attached has been:

Prepared	<input checked="" type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input type="checkbox"/>
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Prepared following discussion and agreement within the winter planning group as well as the NHS Corporate Management Team and the Senior Management Teams of North and South H&SCPs. It will also be shared with the North and South Lanarkshire IJBs.

It should be noted that at time of writing, further guidance is still awaited from Scottish Government on the planning and self-assessment for preparedness for winter. Similarly, discussion is still ongoing at national and local level as to how Covid Hub(s) and Covid Assessment Centres are going to be organised and managed across the peak winter months, recognising the difficulties in differentiating between Covid and other commonly occurring winter viral diseases and respiratory conditions.

The initial meeting with Scottish Government officials in relation to winter planning to date as part of the wider understanding of Health Board mobilisation plans was well received.

3. SUMMARY OF KEY ISSUES

Planning for Winter 2020/21 has commenced and, as in previous years, is a multi-agency approach across NHS Lanarkshire, North and South Lanarkshire Councils together with the respective supports, e.g. SAS, NHS 24 etc. Whilst the 'plan' is in a relatively completed state, the level of unpredictability in the wider NHS – and wider public – system is such that this should be seen as a dynamic plan and highly likely to be subject to change over the coming months. There is a range of specific workstreams which have subsequently been established to take forward the respective work areas as below.

a) Flu Vaccine Programme – Public

It has been estimated that approximately 340k people will be eligible for a flu vaccine in 2020. Work has been undertaken to assess the time and associated staffing required to undertake this number of vaccines as well as the physical accommodation requirements to undertake same. As well as the community nursing staff who would be expected to provide this programme, GP colleagues and their staff are also providing some assistance. Other staff groups who have experience in vaccination/injections are also being mobilised to assist in the overall programme, e.g. GDPs, Optometrists etc.

b) Flu Vaccine Programme – Health and Social Care Staff

Approximately 8,000 social care staff from both Council and independent and voluntary sectors in Lanarkshire will be eligible for a flu vaccine. Salus – the NHSL occupational health service – will coordinate this, alongside the NHS staff vaccine flu campaign, working with staff and representatives of all sectors. The programme is well underway.

c) COVID Hub and Assessment Centre (Re-designing Unscheduled Care)

It is not known at this stage the exact make up of what COVID (or respiratory/unplanned urgent care) hubs and assessment centres will be and indeed, the extent of what they will be asked to manage. This will require further work at national, regional and local level and will also be dependent on some of the agreements with other Boards, e.g. NHS 24. Whilst the detail is not known at this stage, early work has commenced in discussion with GPs/other clinical staff as to what such a response might look like and how maintaining ‘red and green’ flows for COVID /non COVID patients will be maintained throughout the winter period. Guidance received from Scottish Government has stressed that

‘In light of the recent increase in Covid-19 and anticipated increase in seasonal presentations, Boards should prioritise the resourcing of the Covid pathway in advance of the wider redesign of urgent care in ED departments.’

Work has commenced in the appointment of medical staff who could work as ‘clinical fellows’ and assist in covering staffing requirements across both acute care settings and Covid Assessment Centres.

d) Provision of Urgent Care Flow Hub

As part of the planning for winter, it is intended to have an Urgent Care Flow Hub in each Board area to allow a number of people who would previously have gone directly to A&E to be managed in a different way. This will also be extended to GPs who rather than refer patients to ERC to arrange admission, will also have the opportunity to discuss cases with an appropriate secondary care clinician with a view to ensuring patients are managed in as ‘planned’ a way as possible, whether that be to access diagnostics, further assessment or indeed admission. Work is in hand in describing what the service will look like and appointing staff to same.

e) GP and Pharmacy Opening

Given there is going to be the Covid Assessment Centre(s) and new Urgent Care flow hub, it is not proposed at this stage to have a specific NHS Lanarkshire LES to support GPs opening on public holidays this year. There will however be an extended public holiday pharmacy service available to ensure that people can both access prescriptions as well as being available for re-direction from NHS24/Urgent Care Flow Hub.

f) Planning for Winter and COVID (Preparing for a Challenging Winter – Academy of Medical Sciences)

The Winter Planning group had received the paper from the Academy of Medical Sciences (AMS) and using this to model a number of eventualities and associated planning of mitigating actions as part of the winter plan for 2020/21.

g) Planning for Additional Deaths

The resilience planning officers of North and South Lanarkshire are working alongside local undertakers to ensure there is sufficient ‘pace’ of funeral services – both burials and cremations – to support the eventuality of a significant excess of deaths over the winter period. The additional mortuary capacity identified for Covid is still in place and will continue to be available over the winter period.

h) Staffing

All departments are planning to ensure sufficient staffing to respond to the potential needs over the period – again, borrowing on some of the eventualities laid out in the AMS paper described at e) above.

i) Surge/Bed Capacity

Additional surge capacity identified for management of Covid is again being made available/retained as part of the planning for winter surge. A key component of the planning going forward is the modelling work being undertaken by a range of agencies in predicting inpatient/ITU/other capacity requirements depending on the numbers of patients and length of time associated with a 2nd wave of Covid. This is in addition to any additional winter deaths. In this respect, it is envisaged that a good take up of flu vaccine across all relevant individuals will assist in reducing incidence of flu in the community and associated strain in hospital/ITU beds.

Notwithstanding this, there are plans developed to have surge beds available in UHM, UHH and in Udston to be available for UHW.

j) Supporting Flow

Each of the hospitals is planning on having a range of staff to support flow across the hospital, maximising use of beds, identifying patients suitable for discharge and ensuring full utilisation of ‘Planned Date of Discharge’.

k) Adverse Weather

A series of actions is open to the Board in managing adverse weather and these have been refined over many years of winter planning.

l) Overall Resilience Planning

A review of the plan will be undertaken by the NHSL/NLC/SLC resilience planners to give objective opinion as to the range and extent of the mitigating factors introduced to reduce the impact of winter on the overall system. An Executive Director level version of ‘Winter Breach’ will be held virtually on 23 October 2020 as part of planning for winter 2020/21. A series of meetings with Scottish Government colleagues are also planned for the coming weeks and the plan could be subject to change on basis of same. First of these will be held on 29 October 2020.

m) Communications

Work is underway at both local and national levels on the public message in relation to each of the different pathways the public are being asked to follow during this year's winter months. As will be appreciated from the foregoing range of initiatives, there are many areas where the public will be asked to assist in managing the combined impact of winter and Covid and the Board/H&SCPs are actively involved in seeking to ensure the messages are appropriate, shared widely and understood.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate Objectives	<input checked="" type="checkbox"/>	LDP	<input checked="" type="checkbox"/>	Government Policy	<input type="checkbox"/>
Government Directive	<input checked="" type="checkbox"/>	Statutory Requirement	<input type="checkbox"/>	AHF/Local Policy	<input type="checkbox"/>
Urgent Operational Issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

Mitigating against the pressures associated with additional demand and activity in winter is key to maintaining year round performance against all the respective strategic goals of both the Health Board and H&SCPs. In this particular year, it will also be essential to the wider sustainability of NHSL and its partners in managing the impact of Covid 19.

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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Maintaining effective services at a time of high need.

Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input checked="" type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

6. MEASURES FOR IMPROVEMENT

Monitoring of performance against the plan and its impact on the range of performance targets and wider Covid 19 information will be undertaken throughout the peak winter period.

7. FINANCIAL IMPLICATIONS

Thus far, advice from Scottish Government is that the content of the winter plan and associated costs have to be included as part of the wider mobilisation plan.

Undernoted is a breakdown of the costs associated with each of the attendant parts of the plan as currently exists, however depending on numbers and duration of stay for Covid inpatients, this could impact significantly on the range of services which will be introduced and how they will be implemented across the extended winter period.

Source and Application of Funds		£000s
Bids Accepted		
Access		206
Hairmyres		1051
Monklands		1168
Wishaw		1562
North HSCP		627
South HSCP		1396
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The funding to support the £6,010k will come from NHS Lanarkshire's financial plan, the Scottish Government's financial plan and funding related to the local mobilisation plan.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

Availability of staffing over the peak winter period has been identified as the major risk. This is obviously heightened by the fact that there is the scope for a series of major issues all to coincide concurrently.

Depending on further advice from Scottish Government as well as local 'command' arrangements, it may be necessary to re-prioritise some services, standing down some services which have recently started to recover such that other services can be provided, e.g. CAC/covid pathway, flu vaccines, test and protect and so on. The respective areas are all included in the overall risk register and reviewed regularly.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>	
Use of resources	<input checked="" type="checkbox"/>	Performance management	<input checked="" type="checkbox"/>	Equality		<input type="checkbox"/>
Sustainability	<input checked="" type="checkbox"/>					

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

Yes.
No

11. CONSULTATION AND ENGAGEMENT

A range of partners have been involved in the development of the arrangements.

12. ACTIONS FOR THE BOARD

The Board is asked to:

Approval	<input checked="" type="checkbox"/>		Endorsement	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>		Accept the risk identified	<input type="checkbox"/>	Ask for a further report	<input type="checkbox"/>

1. Approve the planning arrangements being put in place to ensure services are prepared for the coming winter months – with particular recognition of planning alongside the impact of Covid 19 and the other strategic priorities operating this year;
2. Note the associated costs associated with same; and
3. Note that work is ongoing with Scottish Government to confirm the financial arrangements.

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact

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