

Integration Joint Board (IJB)

Date of Meeting: 29 November 2023

Title of Report: Argyll and Bute Winter Plan

Presented by: Caroline Cherry, Head of Service, Health and Community Care and Karl McLeish, Unscheduled Care Programme Lead

The Board is asked to:

- Consider the winter plan for Argyll and Bute HSCP

1. EXECUTIVE SUMMARY

This report provides a summary of the overall winter plan for the Argyll and Bute Health and Social Care Partnership (HSCP). The plan spans the period from 30 November 2023 to 1 April 2024.

The report highlights specific elements of planning and is intended to both guide work-streams, provides assurance for relevant Boards and is consistent with the Scottish Government Winter Planning checklist.

The plan is a whole system approach, recognising the interdependencies of the system to meet the needs of the local population. It is an annual national planning requirement and provides assurance that the system and partners have the necessary measures in place to deliver health and care for the local population during winter months.

2. INTRODUCTION

Locally and nationally, health and care systems are experiencing significant operational pressure across many of their services. Some patients are experiencing delays in accessing both planned and unplanned healthcare. There has been little/no reduction in operational pressures over the summer months and providers are entering winter with significant capacity pressures in availability of workforce and service capacity across service delivery areas.

As noted within the Strategic Risk Register the partnership is experiencing higher levels of vacancy and staff absence in both NHS and Local Authority posts against a pre-COVID baseline. This is particularly challenging where vacancies impact on skillsets critical to whole system working such as District Nursing and Social Work (including Mental Health Officer) specialisms. Above expected vacancy levels across several pinch point roles continues to drive overspends in bank and agency staff usage that further pressurise depleted HSCP budgets.

In addition to the current pressures, we face a range of hard to quantify risks such as the potential for further Covid-19 pressures, high incidence of flu cases,

increases in respiratory illnesses and the impact of the cost of living on both our workforce and our patients.

Scottish Government has described the actions they expected all systems and providers to take to increase capacity and operational resilience in planned, urgent and emergency care ahead of winter.

A review of winter planning processes and priorities has been undertaken in early autumn 2023. Our winter plan is set out in a format which considers:

1. **Current Position:** An outline for services, describing the current position regarding system pressures and preparatory actions we will undertake to mitigate for these, and;
2. **Action Plan:** An action plan setting out the specific whole system actions we will undertake to support and manage winter pressures. The whole systems action plan sets out a description of the action, the intended impact of each action and how we propose to measure the successful delivery of each action.

3. DETAIL OF REPORT

Governance of The Winter Plan will be led by the Executive Lead for winter planning. A cycle of system wide meetings are to be implemented to ensure we have a mechanism for escalating issues and making decisions on critical issues, in a joined-up way, across system partners. Along with regular data insights, we plan to operationalise a bespoke weekly data file which facilitates the monitoring of/responding to emerging risks and trends and compliance against agreed actions. The progress of the plan, together with risks and challenges, will be reportable to the NHS Highland Urgent and Unscheduled Care Programme Board.

We recognise that there will be challenging decisions to be taken over the course of this winter and robust governance processes ensure a mechanism to do that in a way that considers the needs of our entire population and the needs of staff working across both health and care.

4. RELEVANT DATA AND INDICATORS

This plan is considered in line with the following key overarching principles, as defined by Scottish Government:

- **Enhancing Community Services** and Planned Care.
- **Optimising discharge** home as first choice, ensuring patients are discharged as soon as they are medically fit, wherever appropriate and enhancing care in the community to reduce unmet need and delays.
- **Avoiding admission** with services developed to provide care at home across 7 days, hospital at home, discharge to assess, rapid access to assessment and a single point of access for health and social care.
- **Reducing attendances** by managing care closer to home or at home wherever possible including community step up facilities for assessment, reablement and rehabilitation, prof to prof referral services, support OOH, managing long term conditions to avoid unnecessary exacerbation utilising digital and remote monitoring where possible.

- **Sufficient staffing** across acute, primary and social care settings including over the weekends and festive period with access to senior decision makers to prevent delays in discharge and ensure patient flow. This includes recruitment and wellbeing priorities.
- **Surge Capacity** with the ability to flex up capacity when required including a surge plan.

5. CONTRIBUTION TO STRATEGIC PRIORITIES

The plan is considered in line with the winter preparedness checklist, issued by Scottish Government in late autumn 2023. The plan also has clear links with established KPIs and Strategic Priorities for Urgent and Unscheduled Care.

6. GOVERNANCE IMPLICATIONS

6.1 Financial Impact

No financial impact to existing service delivery is anticipated. Designated funds are made available to support the period defined as “winter pressures”. Any such funding will be managed within the parameters of established financial governance as required.

6.2 Staff Governance

Key considerations as to staff health and wellbeing are noted within the document at section 7 “workforce”. The plan does not envisage any necessity for changes to existing terms and conditions for any colleague/any division. Any additional resources would be procured and recruited with full and appropriate deference to established staff governance protocols.

6.3 Clinical and Care Governance

All clinical and care governance standards and processes per service area are as per usual arrangements. Additionally the systems pressures group provides an oversight of any escalations.

7. PROFESSIONAL ADVISORY

The HSCP has developed its Winter Plan in conjunction with key stakeholders from across the system to ensure that we can maximise our shared knowledge, resilience and resources with a view to delivering safe and effective services for throughout the winter months. Initial engagement meetings were held in late autumn 2023. The plan has been developed taking into account feedback and learning following evaluation of the Winter Plan for 2022/23. The plan has been sighted and contributed towards by all relevant professional leadership.

8. EQUALITY & DIVERSITY IMPLICATIONS

None Noted.

9. GENERAL DATA PROTECTION PRINCIPLES COMPLIANCE

None noted.

10. RISK ASSESSMENT

Risks are managed as per described within the plan. The board is assured on wider risks e.g. workforce through the workforce plan.

11. PUBLIC & USER INVOLVEMENT & ENGAGEMENT

None noted.

12. CONCLUSIONS

Conclusions are per the action summaries detailed within each section of service delivery.

13. DIRECTIONS

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| Directions required to Council, NHS Board or both. | Directions to: | tick |
| | No Directions required | |
| | Argyll & Bute Council | |
| | NHS Highland Health Board | |
| | Argyll & Bute Council and NHS Highland Health Board | x |

REPORT AUTHOR AND CONTACT

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