

**Open Report on behalf of Glen Garrod,
Executive Director Adult Care and Community Wellbeing**

Report to:	Adults and Community Wellbeing Scrutiny Committee
Date:	5 September 2018
Subject:	Lincolnshire County Council Adult Care Winter Plan

Summary:

Lincolnshire County Council works with colleagues from across the health and care system throughout the year to ensure the flow of people through the hospitals and community is maintained. The pressure on the system over the winter period very often increases and as a result additional focus is placed on bolstering our support over this period. Winter monies and additional funding are normally made available via the Department of Health and Social Care which are targeted towards supporting the system during this period. This year, in consultation and partnership with colleagues and organisations from across the health and care system, Lincolnshire County Council will further explore, support and deliver:

- A Rapid Response service to support admission avoidance and timely discharge from hospital.
- Implement specific support for care homes, including the deployment of telemedicine and direct access to other urgent care services via clinical assessment
- The County Council will work with our reablement and home care providers to increase capacity across the County in line with demand.

This focus is aimed at continued work with health providers and commissioners to develop the High Impact Change Model. This is the "best practice model" which has been gathered from various systems across the country where impact and improvements have been evidenced. (See Appendix A)

Actions Required:

The Adults and Community Wellbeing Scrutiny Committee is asked to consider the proposed approach to winter pressures as set out in this report and offer its comments.

1. Background

As advised in the summary, Adult Care and other colleagues produce organisational Winter Plans as well as System Winter Plans on a yearly basis to ensure patient flow through the hospitals. The focus of the plan is to ensure that the system in Lincolnshire is able to respond and manage the increased demand and pressure which the winter period historically brings. Through the learning from previous years, the evidence base of the High Impact Model regional and national learning, Lincolnshire will be providing additional focus to several key areas as well as continuing with the good work already in situ.

Early Discharge Planning

We will work with our colleagues across the system to promote and support early discharge notification. This will ensure that discharge planning is a priority for all people admitted to hospital and that we are building a personalised approach as opposed to the traditional linear process. The aim of this is to provide robust, early planning for people wanting to return back to their local community/home as soon as possible. In order for this to be successful system wide ownership for people is needed with community services pulling people out and acute services focusing on discharge planning from the point of admission.

Adult Care will begin discharge planning as soon as we are aware a person requires Adult Care assessment / advice / support for discharge. Our partners need to refer people as soon as possible to enable a timely return home. Barriers to discharge will be discussed at the daily hub meetings (referred to as red to green meetings) which are supported by Adult Care. There is an escalation process within each organisation to enable barriers to be addressed and overcome in a timely way so any impact to the person will be minimised.

Joint working and communication are key to providing a positive experience for people and their families as well as supporting people to return home. Due to the complexity of lifestyles, health and disability we need to ensure that we are concurrently planning whilst the person is receiving their treatment to make sure they can be discharged as soon as they are fit for transfer.

Multi-Agency Discharge Hubs and Integrated Neighbourhood Working

Adult Care will jointly lead the multi-agency discharge hubs to ensure a joint and integrated assessment leading to an agreed discharge pathway. Any complex cases will be discussed to ensure that a timely solution is found and the patient is discharged in a safe way. This planning will happen in conjunction and parallel to any treatment plans where Adult Care are notified early that this support is needed.

The hubs are based on each of the acute sites in Lincolnshire as well as Peterborough Hospital. The hubs comprise of Acute Nursing Staff, Adult Care Staff, Lincolnshire Community Health Services NHS Trust (LCHS) staff and

Lincolnshire Partnership NHS Foundation Trust (LPFT) support. In addition to this Carers First Care Home Trusted Assessors and Allied Reablement are part of the core team with other organisations using the hub to support people as and when needed e.g. Women's Aid/St Barnabas etc.

Home First / Discharge to Assess

Adult Care will use the nationally recommended *Discharge to Assess* process to ensure maximisation of re-ablement capacity. Capacity will be flexed where possible to meet demand and alternatives explored in a timely way to ensure effective patient flow. There are a number of elements to this:

Allied Healthcare will work in collaboration with LCHS to provide short term re-ablement in people's homes to facilitate discharges and avoid hospital admissions. Allied Healthcare will work with LCHS to maximise their ability to support as many people as possible with their combined community based rehabilitation and re-ablement resources.

To avoid unnecessary bureaucracy hospital wards can make simple restarts of care directly with providers if there is no change in a person's need. Adult Care will work with community health providers to support the transitional care pathways ensuring early safe discharges. Adult Care will provide alternative interim placements in care homes if home care support is unavailable.

This approach means that people are able to access short term intensive support which promotes recovery and independence. At the end of this period of re-ablement and recovery care can be assessed for the long term and in many cases people are re-abled to independence.

Seven-Day Services

Adult Care staff working in acute hospitals are all on five in seven day working contracts. Staff are rota'd to work over seven days as required to meet the demands on each of the three United Lincolnshire Hospitals NHS Trust (ULHT) sites and support patient flow. Members of the Brokerage team work Saturdays and, at times of high pressure, on a Sunday. Lincolnshire County Council Emergency Duty Team will provide cover out of hours and have the Clinical Assessment Service to support in emergency situations.

To enable Lincolnshire County Council staff to do this successfully Home Care, re-ablement and Care Home providers all work over seven days prioritising hospital discharges and avoiding hospital admissions.

Trusted Assessors

Care Home Trusted Assessors are employed via Lincolnshire Care Association (LINCA) to bridge the relationship between hospital and care home. Their role is to

ensure a timely transfer from hospital to care home and ensure people are going to the right place at the right time. This project has been running for several years and has had a significant and positive impact for people. As a result there is both regional and national interest in this programme with other health and care systems following Lincolnshire's lead.

As a result of the success of this programme Lincolnshire County Council and the Better Care Fund have provided the resource for these posts to continue. They are delivering a better experience to the people who need residential/nursing support at the time they leave hospital, whilst reducing the number of bed days within the system.

Focus on Choice

The Transfer of Care policy is in the process of being agreed and it will be in place and implemented by September 2018. This is a policy used by the NHS within the hospitals (acute and non-acute) to ensure that people are supported to leave hospital in a timely way. This provides clear guidance on the options available to people if their place of choice is unavailable and supports staff and the people they are working with to explore interim or alternative options.

Enhancing Health in Care Homes

Adult Care will continue to work with health to support people living in care homes. There is joint work across the system to explore how we can make best use of our resources to ensure our Care Homes are delivering the highest quality of care possible. Nursing Care is a challenge nationally and locally and Lincolnshire County Council have been working with LINCA, health providers and Clinical Commissioning Groups to look at how we can make best use of our limited and valuable resource.

In addition work is ongoing to launch a medicines management policy which supports the access to the right medication at the right time and removes some of challenges in place e.g. paracetamol prescriptions etc.

A bid has been led and submitted by Lincolnshire County Council and LINCA along with health partners to access NHS Digital funds to support care homes with access to secure NHS mail to promote information sharing. The purpose of this is to include our providers, where appropriate, in the information sharing which is necessary to support people to be in their own homes. Our understanding is that we have been successful in this, but are waiting for the official agreement to get the work underway from NHS Digital.

Systems to Monitor Patient Flow

Adult Care will engage with ULHT, LCHS, LPFT and external partners to monitor how the hospital system is working. In addition to this there is the Urgent and

Emergency Care Board as well as various forums which explore, examine, consider and address performance within the system.

A patient tracker which lists all medically fit for discharge (MFFD) patients is updated by Adult Care several times a day with discharge planning details and shared with ULHT and LCHS. This tracker is used across the system to provide a single version of the data to ensure all organisations understand what is needed to support people to return home.

Performance on Delayed Discharges (see Appendix B)

The impact of the actions highlighted in this report will be shown in the performance measure Delayed Transfers of Care, which shows those delays in total and then split by those caused by Health, Social Care or jointly. The overall figure is used to measure our success in the Better Care Fund plan. The validated performance data is published by NHS England every month – however the Council and its partners monitor local performance weekly. The latest published data is shown in Appendix B to this report. Highlights from this data are:

Lincolnshire Headline figures:

- This month's social care Delayed Transfers of Care figure (June 2018) was down to 217 compared to last months (May 2018 – 250). Health's was also down (June 2018 – 1316 and May 2018 – 1528)
- This month's overall Delayed Transfers of Care figure was down to 1942 (June 2018) compared to June 2017 (2351).
- The number of delayed days for social care was 217, which represents a 31.1% decrease over the last year (June 2017 –315).
- 11.2% of delays were attributable to social care, which is down from 13.4% in June 2017, and also down on last month (May 2018 – 11.7%).
- Joint delays have increased from 358 in May 2018 to 409 in June, with the majority (370) being due to awaiting care package in home. Further work is being led by Lincolnshire County Council to understand this and improve the position.

Flu Planning

- Flu vaccinations will be provided via a voucher system for care home, home care and Lincolnshire County Council front line staff.
- The programme will commence in September 2018

Lincolnshire County Council Internal Winter Overview

- Adult Care will review on a weekly basis or more frequently when the flow and pressures require, including:-
 - ◆ Hospital staffing

- ◆ Reablement capacity
- ◆ Home Care capacity
- ◆ Block bed capacity
- ◆ Flow into the community

Key Public Messages

Adult Care will assist in coordinating, via the Council's Communications Team, all essential public information and wellbeing key messages.

Contact Details

Re-ablement - Allied Healthcare Referral - 01775 760283 - 7am -10pm - seven days and Bank Holidays. Weekends and Bank Holidays contact if an immediate start is required.

Lincolnshire County Council Adult Care Customer Services Centre - 01522 782155
Lincolnshire County Council Emergency Duty Team (out of hours) - 01522 782333

Hospital Social Work Teams

Lincoln County Hospital - 01522 573109, seven days and Bank Holidays

Pilgrim Hospital - 01205 445341, seven days and Bank Holidays

Grantham Hospital - 01476 464353, Monday to Saturday and Bank Holidays

A hospital manager will be on call over weekends and Bank Holidays.

A senior management rota is in place to deal with urgent situations and offer support at weekends and Bank Holidays.

Contingency plans are in place to cover extreme weather, staff shortages and Black Alerts from the hospitals.

Emergency Planning - 01522 582220

Lincolnshire County Council Escalation Process

Area Manager: Michelle Colbourne Tel: 01522 550746
michelle.colbourne@lincolnshire.gov.uk

County Manager: Tracy Perrett Tel: 01522 554375
tracy.perrett@lincolnshire.gov.uk

County Manager (Operations Manager when Tracy is unavailable): Paul Bassett
Tel: 01522 552211 paul.bassett@lincolnshire.gov.uk

Assistant Director: Carolyn Nice Tel: 01522 553762
carolyn.nice@lincolnshire.gov.uk

2. Conclusion

The focus now is to plan as a system to be ready for winter ensuring that as a local authority and a health and social care system we have robust plans in place. The Lincolnshire system is working together to tackle the many challenges we face this winter and minimise the effects of winter on providing good Health and Care for the people of Lincolnshire.

3. Consultation

This is not subject to consultation.

a) Have Risks and Impact Analysis been carried out??

No

b) Risks and Impact Analysis

Not applicable.

4. Appendices

These are listed below and attached at the back of the report	
Appendix A	High Impact Change Model – Managing Transfers of Care Between Hospital and Home
Appendix B	Delayed Transfers of Care Figures

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Tracy Perrett, who can be contacted on 01522 554375 or Tracy.Perrett@lincolnshire.gov.uk.

This page is intentionally left blank