

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: HEALTH SCRUTINY SUB-COMMITTEE

Date: Wednesday 11th July 2018

Title: EVALUATION OF WINTER SERVICES

Contact Officer: Angela Bhan, Managing Director, Bromley CCG
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Ward: Borough-wide

1. Reason for Report

- 1.1 Bromley CCG fund £628k in additional capacity over the winter period to support managing increased seasonal demand. The report provides an evaluation of the impact of this resource and concludes with areas for consideration to influence future planning.
- 1.2 The CCG will continue to lead on the health winter preparedness, aligning to local authority and provider plans which is overseen by the A&E Delivery Board

2. **RECOMMENDATION**

- 2.1 **The Health Scrutiny Sub-Committee is requested to note the evaluation of Winter Services.**

Impact on Vulnerable Adults and Children

1. Summary of Impact: Winter Services support vulnerable adults to retain their health and independence.
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Corporate Policy

1. Policy Status: Not Applicable
 2. BBB Priority: Supporting Independence Healthy Bromley
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Financial

1. Cost of proposal: Not Applicable: Funds have already been utilised.
 2. Ongoing costs: Not Applicable
 3. Budget head/performance centre: Bromley Clinical Commissioning Group
 4. Total current budget for this head: £628k
 5. Source of funding: Bromley Clinical Commissioning Group
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Personnel

1. Number of staff (current and additional): Not Applicable
 2. If from existing staff resources, number of staff hours: Not Applicable
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Legal

1. Legal Requirement: Not Applicable
 2. Call-in: Not Applicable: No Executive decision.
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Procurement

1. Summary of Procurement Implications: Not Applicable
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected): All vulnerable Bromley residents.
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: Not Applicable

3. COMMENTARY

3.1 The attached report in Appendix A provides detail of the capacity that was commissioned by the CCG throughout winter to meet seasonal demand. The report also provides an evaluation of impact and suggested recommendations going forward.

3.2 The key learning and recommendations for future planning, as described in the report are:

3.2.1 Learning for Future Planning

- Increasing capacity within existing services worked better than previous winters when new provision has been introduced but not utilised;
- Although a significant increase in attendance was seen, performance remained better than previous years including improved A&E performance and considerable reduction in Delayed Transfers of Care (DToC);
- Significant numbers of attendances continued throughout the winter – further work to better understand the reason and prevent attendances is required; and,
- Although all services offered were utilised and showed positive impact, significant numbers of people still required hospital based care, especially those with complex health and social care situations. Due to the complexity and demographic of patients further work is required to provide a more integrated community response to admission and attendance avoidance that is able to be accessed by a range of community providers including domiciliary care services and placements as well as the Emergency Department.

3.2.2 Recommendations

- Earlier planning and mobilisation of schemes to allow for staff recruitment; and,
- Utilising existing service provision to develop an integrated urgent and emergency care system in the community providing a single point of access to a range of community services able to provide brief acute level interventions to support more people at home, preventing the need for hospital based care and support.

3.3 In addition to the attached report which focuses on health services specifically, the A&E Delivery Board undertook a system review of winter to identify how the whole of the partnership can utilise resources better together to support seasonal demand. The following recommendations were identified:

- LBB to consider Commissioning dedicated domiciliary care to 'bridge' where the existing framework or reablement is unable to commence at the point of a patient being medically safe for discharge. With a particular focus on January – March where this was a significant issue;
- Increase availability of Discharge to Assess beds/interim beds in the community to reduce the number of people remaining in hospital unnecessarily for the assessment of long term care and support needs;
- Improve reactive resources to reduce the amount of social admissions due to carer breakdown;

- Consider a more robust, aligned response to support care homes including residential and Extra Care Housing bringing together the range of resources in existence across the provision;
- Further develop the access to community crisis provision for people with mental illhealth including launching the crisis line, developing the role of the Home Treatment Team as well as considering the capacity of psych liaison; and,
- Historically winter preparedness has been undertaken separately by each organisation, it is recommended that this is brought together into a single winter preparedness strategy aligning resources from across the system which will also better support the systems ability to implement the recommendations provided.

4. IMPACT ON VULNERABLE PEOPLE AND CHILDREN

4.1 Ensuring access to timely health and social care services is essential to support all residents particularly those most vulnerable.

5. COMMENT FROM THE DIRECTOR OF AUTHOR ORGANISATION

5.1 The CCGs plans for winter 2017/18 made a positive impact and as a result even through demand has increased considerably, the resilience of the system overall meant that the recovery from significant pressure points was much faster then has previously been achieved. This is essential for a system to cope throughout the winter and ensure all Bromley residents are able to access safe and timely services.

Non-Applicable Sections:	Financial, Legal, Policy, Procurement and Personnel Implications
Background Documents: (Access via Contact Officer)	Not Applicable