

East Sussex Winter Plan Update 2021-22

East Sussex HOSC 02/12/21

Summary of Winter Plan

Winter Plan 2021-22

- We continue to work collaboratively across health and social care partners to manage our response to the Covid-19 pandemic including making particular plans to support the population of East Sussex during the winter period
- We undertake winter planning annually as a local system to ensure we have sufficient plans in place to manage the anticipated increased activity during the winter period and plans
- The overall purpose of the Winter Plan is to ensure that the system is able to effectively meet the needs of local people during the Winter period which this year runs from the beginning of November to 31 March 2022
- Our plans ensure that local systems are able to respond to increased needs of local people effectively and maintain patient safety and quality during this period
- For 21/22, the planning process considers the impact and learning from last winter, as well as learning from the summer period and the system response to Covid-19 to date. Plans have developed on the basis of robust demand and capacity modelling and mitigations to address system risk
- The initial Winter Plan was submitted to NHS England/Improvement (NHSE/I) on 20 September 2021 following a revision to the winter planning timeline following the worsening urgent and emergency care performance both regionally and nationally, combined with growing pressures in relation to Covid-19 and Respiratory Syncytial Virus (RSV) Infection. The final plan was shared with the Local A&E Delivery Board (LAEDB) for approval
- The plan takes account of Covid-19 management and response in the system, including capacity required to respond to increased needs

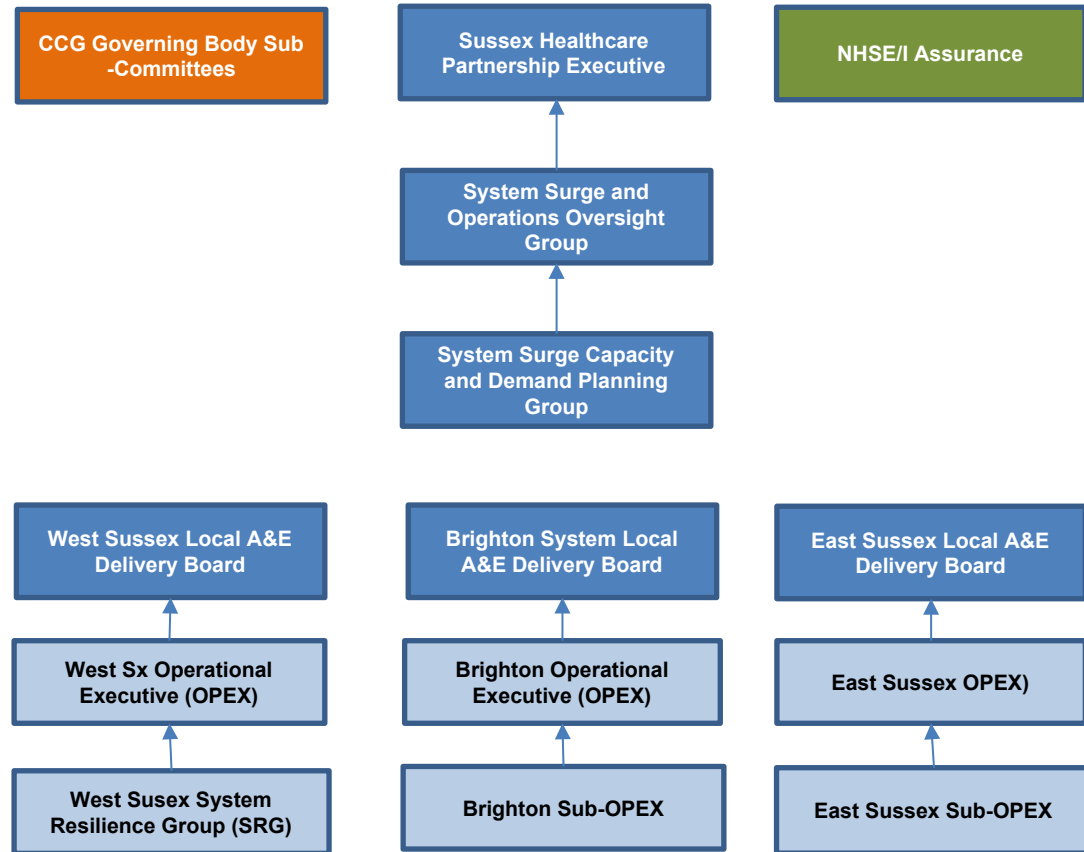
Summary of Winter Plan

The objectives of the Winter Plan are:

- To maintain patient safety at all times
- To prepare for and respond to periods of increased need, including any future increases in Covid-19 infections
- To ensure that acute hospital bed occupancy is maintained at a level that ensures that patients who require admission to a hospital bed are able to be admitted in a timely way, thereby avoiding the risk of overcrowding in A&E and delays to ambulances being able to handover patients and respond to 999 calls
- To ensure that community health services are maximised, e.g. improving length of stay and utilisation and increasing the number of patients who can be safely discharged home in a timely manner with care support. Effective use of community services during the winter period will support timely discharge from hospital and avoid unnecessary admission to an acute hospital bed
- To avoid ambulance handover delays of over 30 minutes
- To ensure delivery of the elective care recovery and restoration trajectory
- Strengthen Same Day Emergency Care (SDEC), Ambulatory Emergency Care (AEC) model and the Acute Frailty model
- Ensure capacity is in place to manage any Covid-19 demands including critical care capacity
- Manage any flu or other infection control challenges safely and effectively

Governance and Oversight

- Winter plans are reviewed through the Integrated Care System (ICS) governance framework
- Assurance of place-based winter plans are undertaken by the East Sussex LAEDB, supported by OPEX (that manages the local system operational response) and in line with NHSE/I expectations, provider-level plans will be signed off by relevant internal Trust boards
- Following sign-off the system plan is presented to Local Authority Health Oversight and Scrutiny Committees and Health and Wellbeing Boards for scrutiny
- Monitoring of plan delivery, risks and activity will be undertaken by East Sussex LAEDB, with Sussex oversight by the System Surge and Operations Oversight Group (SOSG)



Lessons Learnt - Winter 20/21

The Winter 20/21 debrief identified the following key learning and feedback:

Key Feedback	Action Plan
There should be greater emphasis on training and stress testing of surge plans	<ul style="list-style-type: none"> • A table-top stress testing exercise of the Winter Plan and escalation framework took place in October 2021 • Following the stress testing exercise, the plan was refreshed to incorporate learning and any additional actions required • Debrief exercises and lessons learned reviews will be undertaken routinely – this will include debrief post Christmas and New Year
Governance and decision-making structures should be in place to support rapid decision-making	<ul style="list-style-type: none"> • A stocktake review of governance and decision-making in relation to system resilience has been undertaken and tested as part of the stress testing exercise
Wider sharing of surge plans with operational teams, noting that surge plans should be operationally useful and relevant	<ul style="list-style-type: none"> • Surge plans (including the weekend plans) are now routinely shared with ICS partners • Operationally relevant winter plan support and guidance documents are developed for each system
Streamlined reporting and reduced volume of touchpoints	<ul style="list-style-type: none"> • The resilience operating model and escalation framework has been updated for 21/22 with increased flexibility for touchpoint calls • Resilience daily reporting arrangements are now embedded into regular dashboards and briefing packs • Use of Shrewd IT platform by all partners will be promoted during winter to reduce the reporting burden on operational and resilience teams
Business Continuity arrangements to be linked to surge plans	<ul style="list-style-type: none"> • The CCG major incident plan and business continuity plan have been reviewed in conjunction with the annual EPRR Core Competency assessment

Lessons Learned - Covid 20/21

Covid-19 incident debrief exercises identified the following key learning and feedback

Key Feedback / Lessons Learned	Action plan and update
To have an increased cadre of staff trained and able to quickly support incident response roles during an emergency	<ul style="list-style-type: none"> ICS Covid-19 Debrief Report reviewed at resilience meetings in September 21 Additional staff are being trained in their emergency response roles as part of the EPRR training and exercise programme
To support agile working across healthcare organisations to develop robust mutual aid arrangements for staff and resources that support staff wellbeing	<ul style="list-style-type: none"> ICS Covid-19 Debrief Report reviewed at resilience meetings in September 21 Agreement will be required across ICS HR for this to become a reality.
To review and update business continuity and major incident plans with the learning from the Covid-19 response	<ul style="list-style-type: none"> Currently the CCG major incident plan (Incident Response Plan) and business continuity plan has been reviewed in conjunction with the annual EPRR Core Competency assessment
To ensure plans include arrangements for sustaining a long-term protracted response and remote working	<ul style="list-style-type: none"> Incident Response Plan (IRP) has now been updated.
To review the inventory of PPE and critical equipment to facilitate mutual aid	<ul style="list-style-type: none"> ICS Covid-19 Debrief Report reviewed at resilience meetings in September 21
To develop a centralised repository for all guidance and policy changes	<ul style="list-style-type: none"> This has been requested to be coordinated across SE-Incident Coordination Team at NHSEI.
To minimise the requests for SitReps and ensure realistic deadlines	<ul style="list-style-type: none"> This has been requested to be coordinated across SE-Incident Coordination Team at NHSEI.
The Local Health Resilience Partnership to ensure the Actions identified in the debrief are embedded in future plans, training and exercising across the ICS	<ul style="list-style-type: none"> Debrief has been discussed and ratified at the next SHRG and LHRP meetings and progress regularly reviewed

Approach to Demand and Capacity Planning

- Locally a **standardised 12 month system-wide capacity and demand planning tool** has been developed to track the expected impact of:
 - The recovery of planned care services
 - Changes in need and demand for services during the winter period
 - Specific anticipated increases (surges) in need and demand as a result of Covid-19, Respiratory Syncytial Virus (RSV), Norovirus and Flu
- **The key forms of modelled capacity are:**
 - Acute General and Acute (G & A) Beds;
 - Complex discharges by different pathways (0-3) and estimates on required capacity;
- The complex discharge outputs will be used to form the basis of planning for demand for Pathway 1, 2 and 3 services
- This local model makes use of recognised and agreed methods from previous year's winter demand and capacity modeling.
- The output provides information about any gaps between provider partner's planned capacity and the projected demand allowing for actions to be agreed and included to mitigate the gap
- The current situation is relatively fluid and as such the final approach will be a **dynamic tool, which will allow for adjustment through the Winter period**

East Sussex Place-based actions summary

In addition to Sussex-wide actions, the East Sussex system has developed place-specific actions covering Acute, Community, Adult Social Care, Voluntary Sector, Public Health - these actions should be noted as supplementary to Sussex-wide actions and a summary of key actions is below:

- Hospital escalation beds available to meet demand and reduce the winter bed gap
- Continue to reduce length of stay across all pathways with increased utilisation of Same Day Emergency Care capacity (SDEC) to support admission avoidance
- Continue introduction of Urgent Treatment Centre front door total triage call-back model to support admission avoidance
- Increasing capacity at Uckfield Minor Injuries Unit and Lewes Urgent Treatment Centre over the winter period by focusing staff and resources across these two sites. Due to space limitations within the Crowborough Minor Injuries Unit, this service is temporarily closed to ensure safe services and support across services in the western part of East Sussex.
- Discharge hubs implemented and coordinating discharge
- Daily action to review patients who are medically ready for discharge across the system in place to ensure timely discharge
- Continue to review and improve hospital discharge approaches across the system
- Ensure good communication is in place to support patients and families throughout the discharge process
- Continued availability of Discharge to Assess beds and homecare provision to support patients discharge from hospital for assessment of longer term needs in a community setting and arrangements to commission capacity as required to flexibly meet changing needs
- Use our services flexibly and safely to support discharge of Covid-19 positive patients
- Use of Voluntary Sector Assisted Discharge and Home from Hospital Services to facilitate safe and timely discharge and reduce re-admissions
- East Sussex Outbreak Control Plan in place
- Covid-19 and Flu vaccination plans in place
- Specific funding has been identified, agreed and included as part of the payments made to local system partners to meet the costs for winter pressures and the planned response. This funding will ensure that all system partners have the financial ability to meet the challenges that the system will face during this period

Vaccination Programme – Covid-19 and Flu

Across Sussex, the total number of Covid-19 and Flu vaccinations given as of 22 November is 3.5 million: 1.3 million Covid-19 first doses; 1.3 million Covid-19 second doses; 409,000 Covid-19 booster doses and 504,407 Flu vaccines.

What this means for East Sussex is that: 422,000 (84%) people have had their Covid-19 first dose; 391,000 (77.8%) people their Covid-19 second dose; 127,000 (60%) people their Covid-19 booster vaccinations; and 171,000 (42%) their Flu vaccine.

As transmission of viruses is most prevalent amongst children, it is important to look at vaccine update in 12-15 year olds. The school immunisation team (from Sussex Community NHS Foundation Trust) had visited 190 schools in Sussex by 22 November and a further 12 visits are scheduled this week. So far, 8,317 children have received their Covid-19 vaccine in East Sussex. Children can also receive their Covid-19 vaccine from the following sites in East Sussex: The Kings Church, Hastings and Princes Park Health Centre, Eastbourne.

We also met the national milestone of delivering vaccines to all 284 care homes in East Sussex by 11 November; with five being visited by 24 December 2021 due to outbreaks.

To ensure we are on track to meet national targets for both programmes, a team of multi-sector individuals from East Sussex have developed and are mobilising the following over the coming weeks:

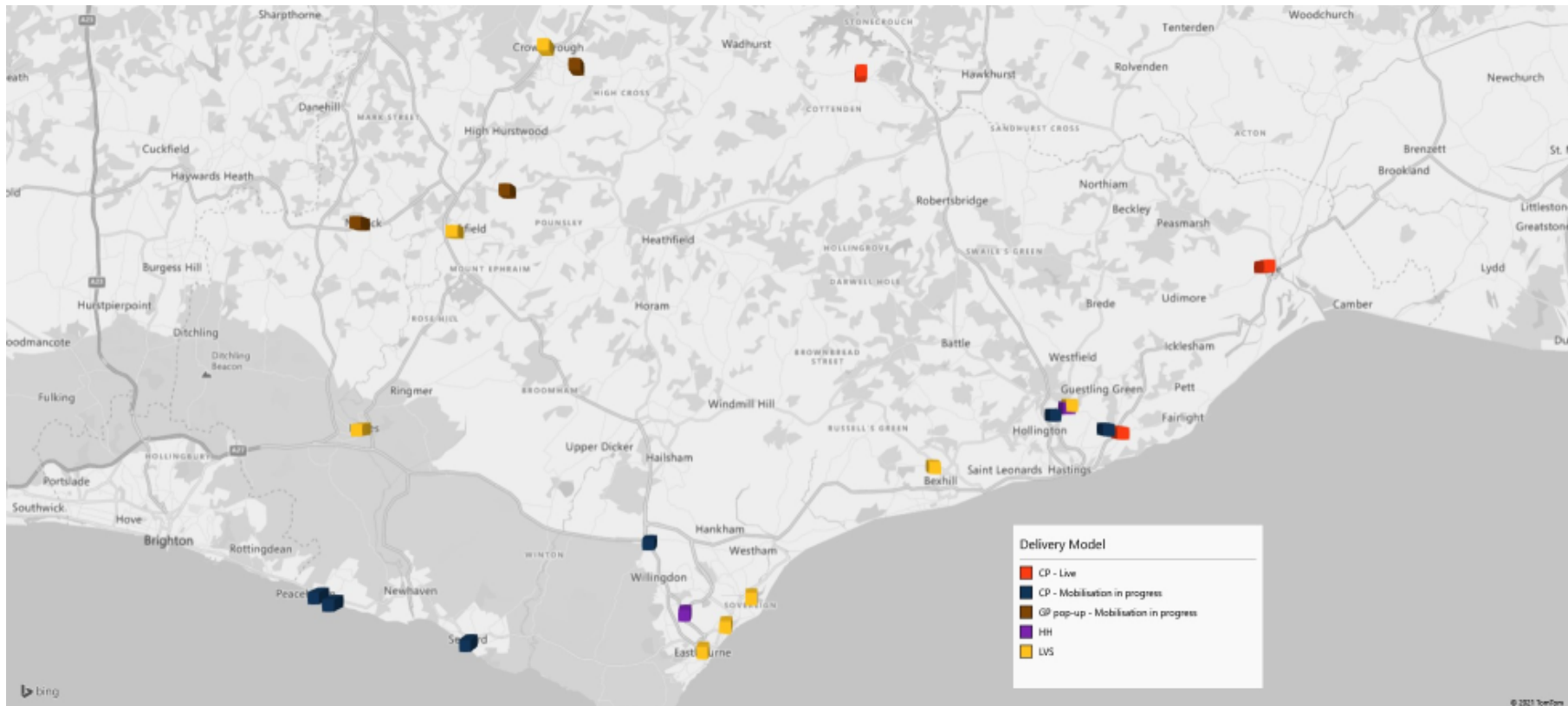
- Supplementary sessions in the evening to support those who cannot get a vaccine during work/school hours – there will be sessions from 3.30pm to 7.15pm weekdays and 9.30am to 4.15pm weekends.
- Additional capacity for outreach activity in Hastings, offering 1st, 2nd and booster doses and for the housebound.
- Increased capacity at three sites: (1) The Kings Church, Hastings (2) Hastings Town Hall and (3) The Beacon Shopping Centre site Eastbourne.
- A clearer localised messaging for patients regarding pop-ups at Vicarage Field in Hailsham, Sidley Surgery in Bexhill and Old School Surgery in Seaford.
- Continued walk-ins for 1st and 2nd doses at Harbour Community Centre Eastbourne, The Kings Church Hastings and Hastings Town Hall.

Vaccination Programme – Covid-19 and Flu cont.

Since mid-September, when the third phase of the Covid-19 programme and Flu was also being delivered, approximately 23,000 vaccines are being given per week.

These are delivered across:

- 2 Hospital Hubs (Eastbourne District General Hospital and Conquest Hospital, Hastings)
- 7 GP led Local Vaccination Service with pop up sites in Hailsham, Bexhill, Seaford and Greater Wealden
- 7 Community Pharmacies, including sites in Rye, Ticehurst and Ore
- Additional 'mobile' / pop-up sites in Hastings and St Leonards to ensure access for people in areas of deprivation and low vaccine up take



System wide communication and engagement

- This year's Winter Communication Plan includes a number of elements to make sure there is a consistent and coherent approach. It includes:
- **System Demand (access to services):**
 - System wide activity taking a fortnightly theme (discharge, self care, MIU and UTCs, NHS 111)
 - Targeted areas – specific areas of focus based on data and insight
- **Primary Care:** sustained communications with a focus on explaining how GP practices are working and why they are working in this way
- **Covid-19 Vaccination:** focus on booster, 12 to 15 year olds, and primary doses
- **Seasonal Flu:** fortnightly approach to focus on key groups and encourage uptake

The plan is based on data to inform activity and will be based on insight and engagement with our communities, including from the Covid-19 Vaccination Programme to date.

This is a system wide communications and engagement plan, and has been developed across system partners.

It forms part of the system's Winter Plan 2021-22.

Challenges and mitigations

	Challenge	Mitigations
Workforce	<p>There is a risk that workforce capacity across health and care will be further challenged during the Winter period due to:</p> <ul style="list-style-type: none"> • Sickness absence and isolation requirements • Increase in retirements/return to retirement • Potential impact of mandatory vaccination for care staff <p>In addition, the continued resourcing of the vaccination programme places further pressure on workforce capacity.</p>	<ul style="list-style-type: none"> • Daily assessment of staffing levels and implementation of local response actions to meet shortfalls in capacity, including: internal redeployment of staff; utilisation of bank and agency staff in priority areas; • Ongoing provision of enhanced health and wellbeing, and resilience support • Continued implementation of workforce expansion plans • Careful and co-ordinated application of staff annual leave • Workforce Directors' weekly meetings, chaired by CCG Chief People Officer, acts as a forum in which workforce-related matters are discussed and issues escalated • Mutual Aid process established.
Care Market	<p>There is a current issue and further risk that due to workforce pressure, the independent sector provision of care home and home care packages of care cannot meet demand to support discharge of patients.</p>	<ul style="list-style-type: none"> • Work across the system to directly engage with the market as much as possible • Work with quality team to review risk of harm on case by case basis • Work locally and beyond to support recruitment of care sector staff
IPC, Flu, Covid and other – Demand, Performance, Quality and Safety	<p>There is a risk that there may be a further Covid-19 wave over and above current modelled predictions, in addition to the risk that the system may see a surge in Flu and other viral illnesses this Winter due to suppression in the previous year.</p>	<ul style="list-style-type: none"> • Ongoing implementation of infection prevention and control measures and guidance across the system, including testing (patients and staff) • Monitoring and reporting of NHS provider outbreaks with additional Infection Prevention specialist support across Sussex • Implementation of the Covid-19 booster campaign and annual Flu vaccination (staff and patients) • Continued monitoring of quality and performance standards across NHS Providers via monthly quality review and performance meetings.

Winter Plan – Next Steps

Action required	By When	Status
Demand and capacity modelling completed	August 2021	Completed
System development of the Winter Plan	August - September 2021	Completed
Updated OPEL Escalation Framework for 21/22	August 2021	Completed
Review and sign-off of Winter Plan	16 September 2021	Completed
NHSE submission	17 September 2021	Completed
Review and sign-off of final plan following NHSE review and submission to NHSEI	20 October 2021	Completed
Stress testing table-top exercise undertaken	5 October 2021	Completed
Monitoring of plans and actuals against planning assumptions	November 2021 – End March 2022	Underway
Detailed plan for Christmas and New Year confirmed	December 2021	Not yet due
Winter lessons learnt stock-take exercise	March 2022	Not yet due