



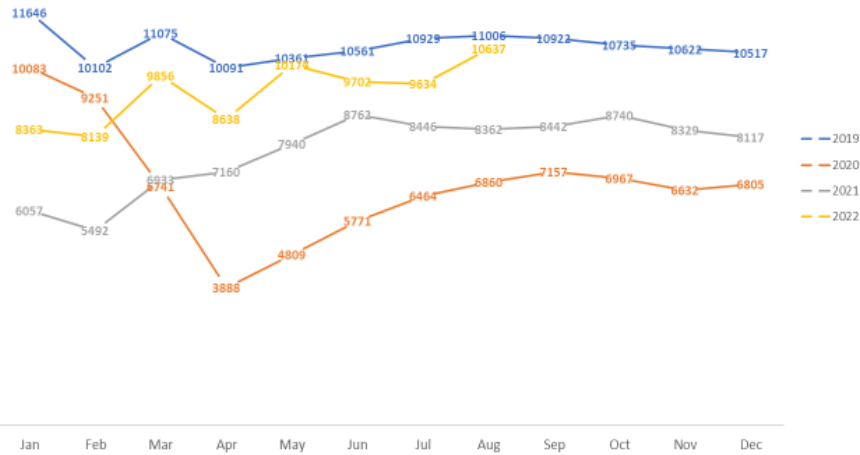
WINTER PLANNING 22/23

Setting the Scene

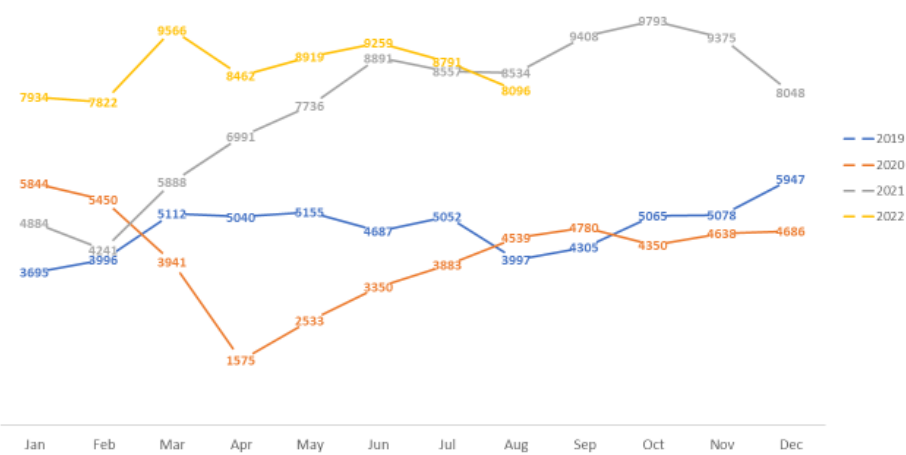
September 2022

ED Attendances - 2019-2022

TYPE 1 ATTENDANCE



TYPE 3 ATTENDANCE

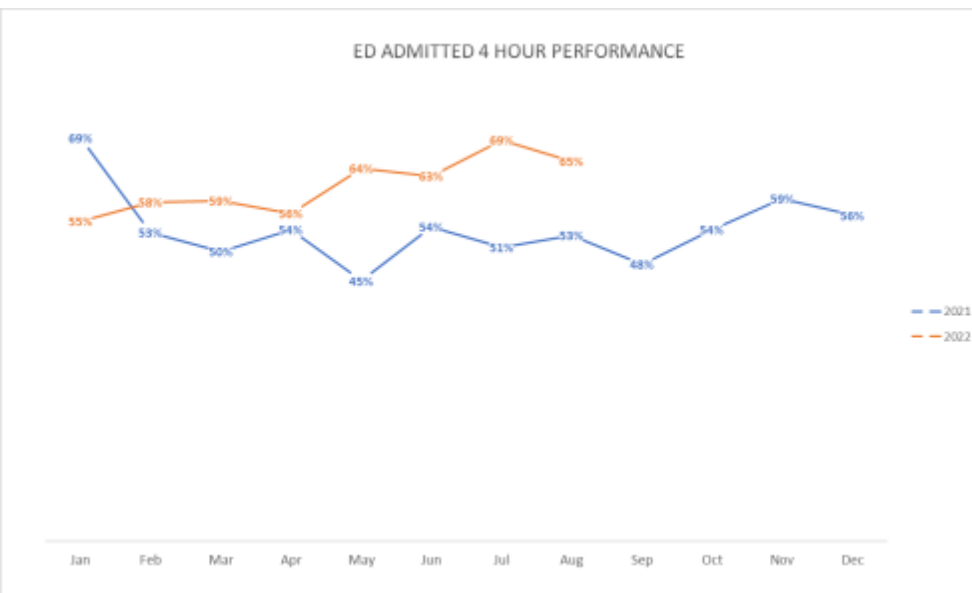
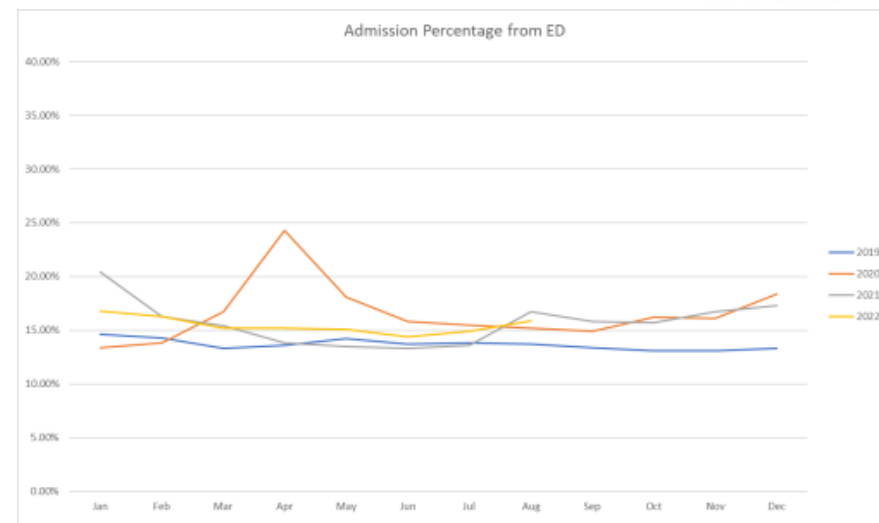
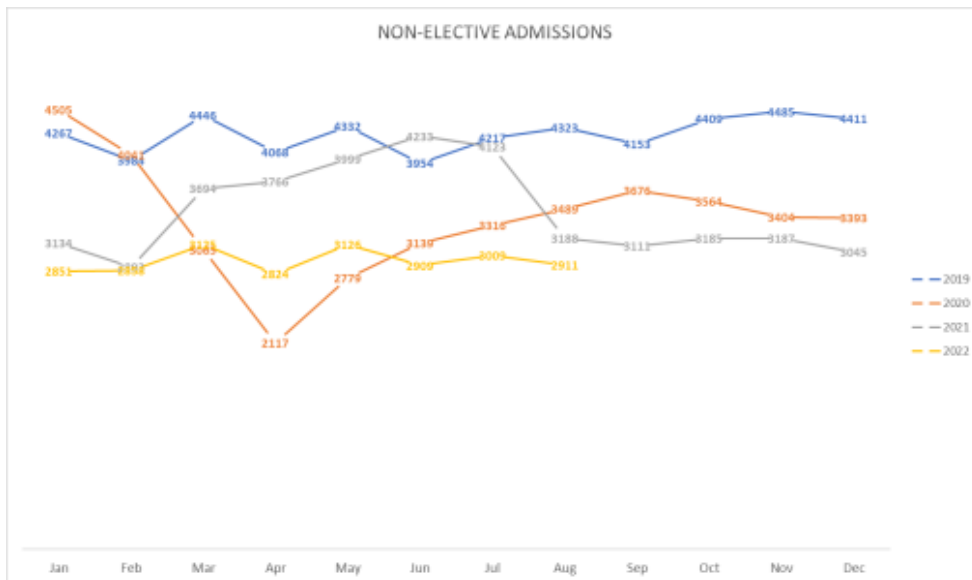


Type 1 attendances can be seen to still be below pre-pandemic levels but however despite variation being seen month to month the number of attendances is trending upwards. An approximate 10% increase seen in Aug compared to July this year.

Type 3 attendances has been increasing since Feb 2021 and has remained significantly higher that levels seen pre Covid-19. There has been a slight decrease in attendances since June however as can be seen from previous years the data suggests that there is likely to be a further increase in attendances heading into and through Winter.



ED Admissions and Performance - 2019-2022

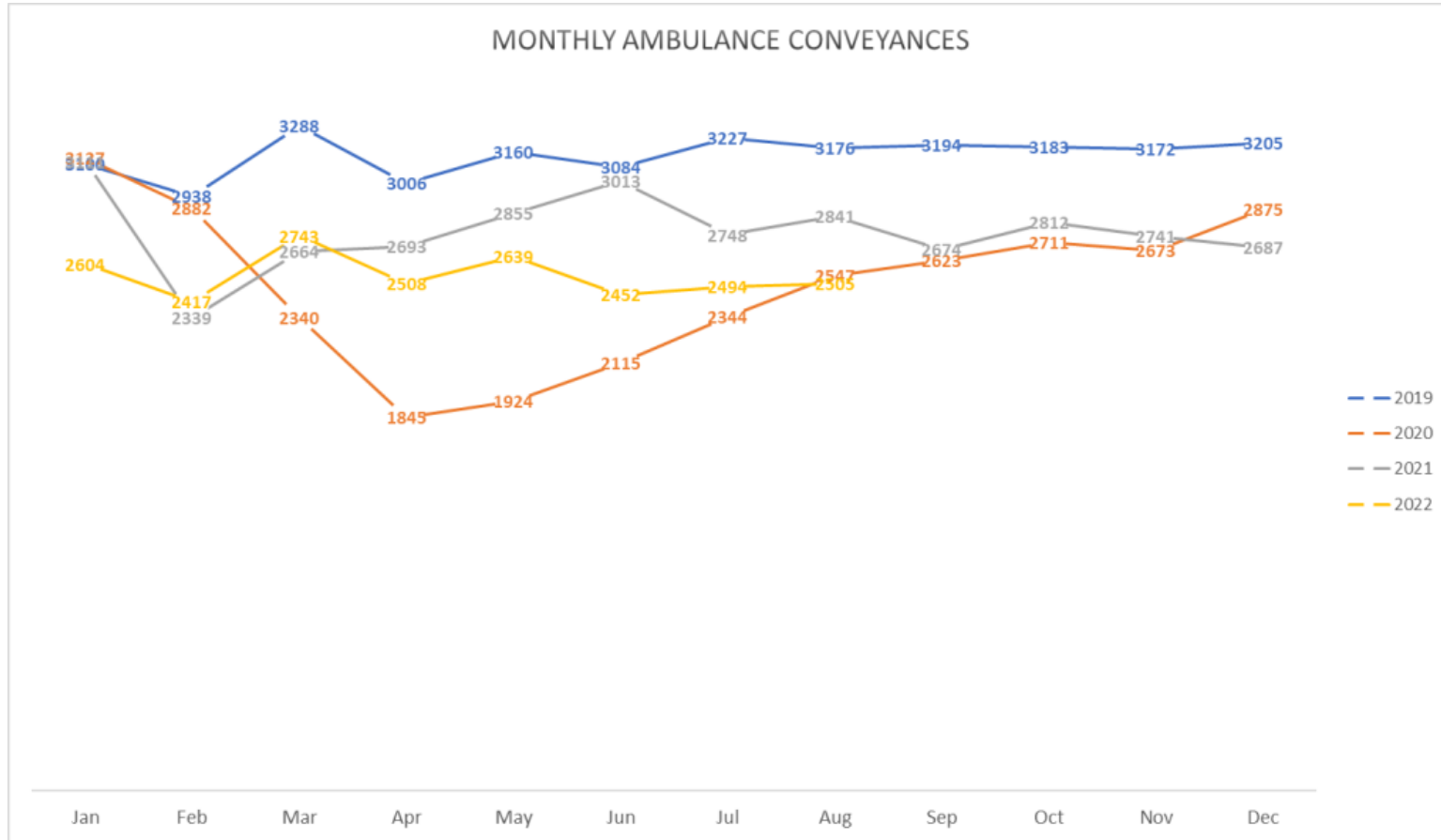


Non elective admissions fell in the Aug 2021 (which coincided with the introduction of Type 5 Attendances being recorded and not marked as 'Admitted'). The numbers since then have remained fairly stable but have been reducing.

Further to this the % of patients admitted has remained approximately 15% of attendances. Into winter, if attendances continues to rise and the % admitted remains the same this would suggest that increased pressure would be put onto the site with a higher volume of admissions. Furthermore the last 2 years have shown that into winter the percentage of patients admitted increases.



Monthly Ambulance Conveyances



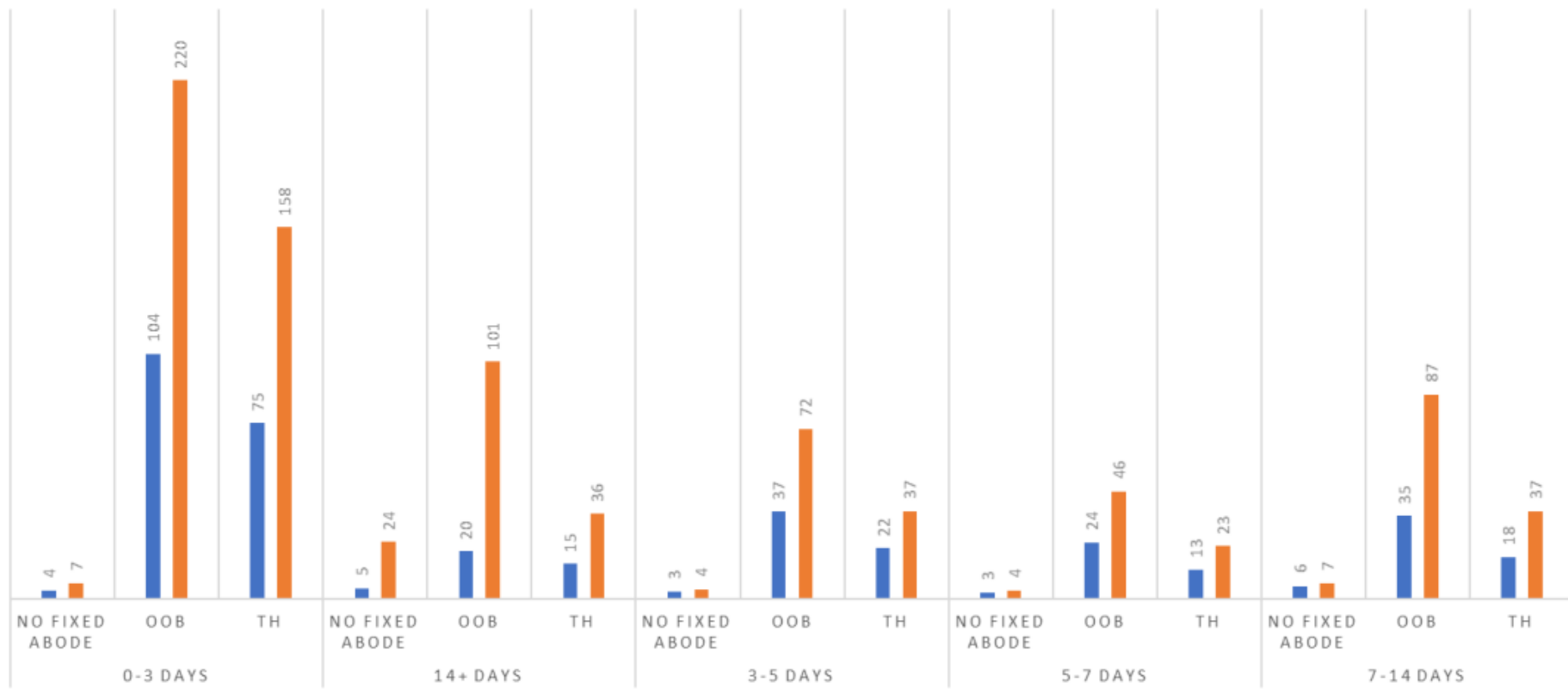
Throughout 2022 Ambulance conveyances has remained consistent with a peak seen in March. However pressure on ambulance handovers has increased and has become a focus of NHSE. The number of ambulance handover breaches has been variable throughout the year but RLH still seeing the lowest number Across the group. However the lower of number of conveyances seen has not reflected the pressure felt within the department due to a number of factors.



Medically Optimised LOS –Borough

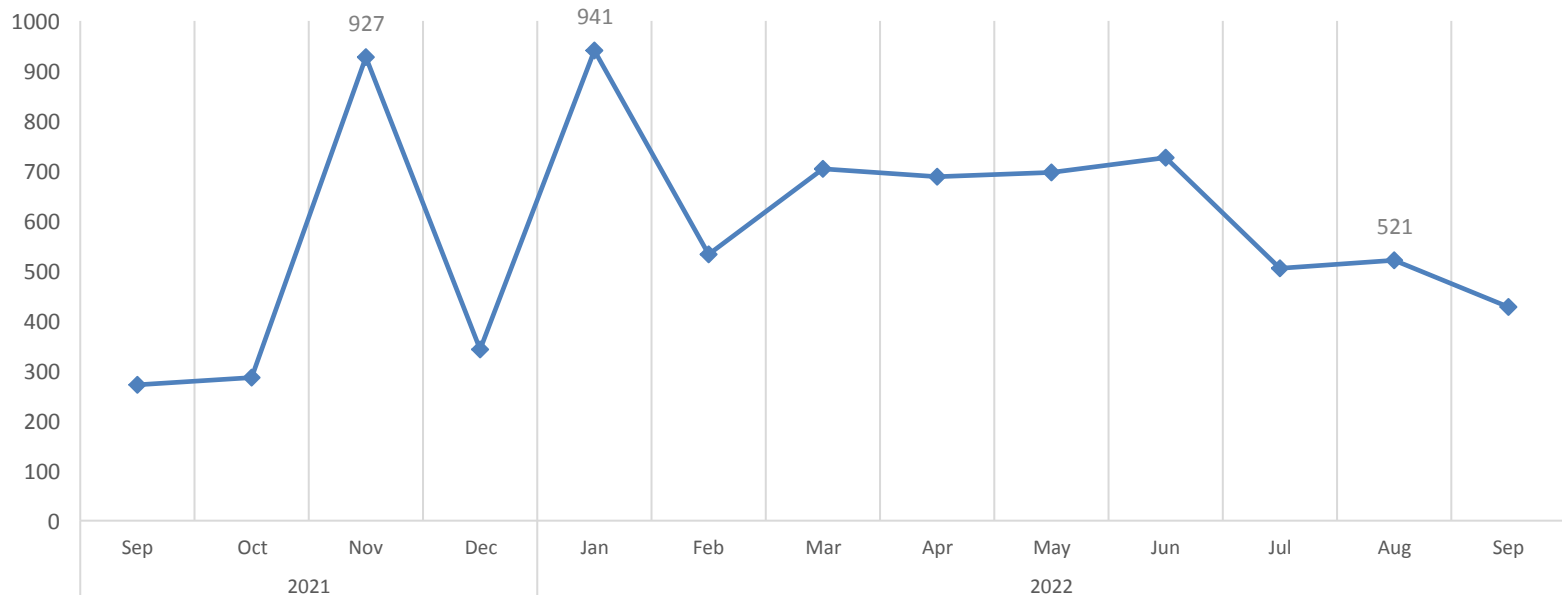
AVERAGE PATIENTS LOS ON MEDICALLY OPTIMISED LIST FROM REFERRAL

■ Average per week Sep-Dec 2021 ■ Average per week May-Aug 2022



Average Bed Days Opportunity

LOS-AVERAGE OF POSSIBLE BED DAYS SAVED VIA MO PATIENTS



Possible bed days we could have saved during winter pressure 2021 totalled an average of 927 days in NOV, with a significant decline during Christmas. However we saw a rapid increase again in Jan 2022 with 941 days. A near 10% of total bed occupied which could have possibly saved if discharged when identified as Medically fit. Data Excludes pathway 0.



RLH Winter Planning initiatives 2022/23

Patient safety through a busy winter ensuring ambulances can unload in timely manner.

Equitable access for our patients and communities.

Working collaboratively with ELFT colleagues to develop and a ward based discharge process (CDT & IDH)

Increase therapy and pharmacy workforce in key areas to ensure that we are reducing discharge delays

Enhancing our SDEC pathways to reduce unnecessary admissions but to also support early discharge pathways

Maximise the patients identified for virtual wards, particularly for the Care of Elderly and Respiratory pathways

System Partner Collaborative Winter Planning

1. ELFT – Community Adult Services
2. Social Care Services
3. ELFT – Mental Health Services



ELFT Adult Winter Priorities

Increasing OPAT (outpatient parenteral antimicrobial therapy) resource to support early discharge home:

- Nurse led and ward based, close working with microbiologists to manage out of hospital IV antibiotic therapy
- Provision of additional OPAT nurse – 7 day a week cover. Increase in ward based assessments
- Rapid response and out hours nursing supporting IV caseload (up to 23.00 hours)
- OPAT team to work with microbiologist and medical teams to convert prescriptions to PO where appropriate

Integrated Discharge Team

- Increasing ward based roles as part of the complex discharge team
- Gap analysis of the National Discharge policy for Acute and community (led by CHS healthcare)
- Refining the process or daily DMT to review the stranded and super-stranded patients to ensure patients are on the correct pathway
- Reduce duplications in referral process to streamline discharge
- Ward based IDH therapists to co-ordinate and parallel plan discharge together with teams and therapists
- Continue to be the point of coordination to facilitate discharge
- Work with RL to define R&R of a discharge co-ordinator role and therapists

Social Services Key Priorities

- Adult Social care will continue to operate the D2A approach with partners in IDH as per present model
- Options to redistribute non-urgent work to ASC community based teams to create capacity in existing staff resource
- Re-deployment of staff temporarily to team to respond to peaks where required from community based services
- A&E will have additional social work resource (with potential to increase) to help those patients who do not need to be admitted but have support needs
- Full review of workforce deployment approach required
- Explore options to further integrate ASC resource with IDH model

Mental Health Winter Priorities

- Out of hour cover in Liaison Services with consultant psychiatrist on a Rota to support decision making for alternate placements
- 1 band 4 to support DTA's in A&E
- Bed and Breakfast Provision – 4 step down beds block booked till march 23
- Band 7 Discharge coordinator to help with social care/ housing issues and private sector referrals
- Block purchase of private beds - 15 male and 5 Females till march 23
- Increase referrals to crisis house – informal patients
- Reviewing supported accommodation schemes
- Discharge and Flow meetings through the winter for all services in ELFT
- Cohorting covid patients across ELFT inpatient services

Workforce & Vaccination Planning



Vaccination plan

Overview

The 2022-23 staff seasonal flu vaccination and Covid booster campaign will launch on Monday 19th September 2022 in line with the availability of this years vaccines.

The Covid booster vaccine for this years campaign will be the Moderna vaccine. Quadra-valent and Tri-valent (for over 65's) flu vaccines are on order. Pharmacy colleagues are checking that these vaccines are egg free.

The vaccination hub for RLH will be located on 14D, as it was last year, and will be supplemented by local flu vaccination activity carried out by peer vaccinators.

The Corporate vaccination team will also support a five day service at RLH and an in-reach vaccination service to MEH once per week.

Both the flu and covid booster vaccines will be offered on a walk-in basis – there is no booking system this year.

The NIVS system will be used to record vaccination data. This data will also inform the national reporting requirement.

The Flu and Covid Trust-wide vaccination plan and supporting information will be available on WeShare in the next couple of weeks.

Flu training modules are available on the e-Learning for Health for peer vaccinators to update their training compliance if this has lapsed (you will need to have undertaken training within the last two years to maintain compliance). This is subject to updates in line with this years SOP's which are yet to be confirmed nationally.

There will be two wellbeing fares at RLH site in October to support the on site regular vaccination activity.

A £4 food voucher (and other freebies) will be given as a thank you to staff receiving vaccines, telling us they've had their vaccines elsewhere or informing us of their intention to decline either vaccine.

Consent forms for staff to complete in advance of attending a vaccination clinic will be available on WeShare in the coming weeks – there will also be forms for staff to complete if they wish to decline the vaccine or if they have received a vaccine outside of the Trust

For staff who have vaccine hesitancy, needle phobia and/or who wish to receive there vaccine in a more private environment, please contact our EWS team who will be offering vaccination s for these staff groups on a booked appointment basis.

Staffing Implications

- Workforce Planning underway for our site, need to understand partners workforce planning to compliment the acute winter plans.
- Mindful of impact of prioritised services (what services) in event of a further Covid wave.
- Cost of living impact may impact on both our own staff but also on the need to increase our staffing levels - impact yet to be determined
- Stat & Mand training during winter learning lessons from phase 1 with teaching being delivered virtually
- Continue to review our wellbeing provision for staff to maintain resilience throughout the winter