



OneWolverhampton

Working together for better health and care

Summary Winter Plan

Current Position

- Royal Wolverhampton NHS Trust's modelling predicts a deficit of 52 beds in January 2023. This is without any mitigation or additional capacity
- The following assumptions have been made:
 - 4% growth in non-elective activity
 - Medically fit for discharge (MFFD) reduces by 30% from an average of 100 to 70 patients
 - Surgical capacity includes the need for additional 10 beds as a result of the Walsall partnership for Urology
 - Elective and Cancer activity continues throughout the winter
 - Forecast rate of beds that could not be available for use due to infection prevention (Covid, Norovirus, Flu)



Reducing ambulance handover delays and admission avoidance



Primary Care

- **Funded:**
 - Reviewing the Enhanced Health in Care Homes approach to minimise avoidable conveyances to hospital
 - Pro-active care planning around frailty
 - Increasing referrals to the Community Pharmacist Consultation Services (CPCS)
 - Increasing access to routine appointments and releasing clinical time through alternative delivery of the Covid-19 vaccination programme (e.g. community pharmacies) and additional roles and reimbursement scheme (ARRS) roles
- **Funding required:**
 - Enhanced and extended access to provide an additional 96 slots (pre-booked and same-day) across Wolverhampton on a Sunday – providing a 7-day service
 - The development of a primary care-led paediatric Wolverhampton respiratory hub
 - Exploring initiatives to support the care for respiratory illnesses in a community setting (e.g. the provision of pulse oximeters and communications resources) and a Primary Care Virtual Ward



Community Services

- Funded:
 - Increase of 82 beds across Virtual Ward pathways, including: respiratory, frailty, paediatrics, palliative care and those awaiting diagnostics
 - 24-hour Urgent Care Response (UCR) is already operational and delivered by the Rapid Intervention Team (RITs)
 - Continue current commissioning arrangement with St John Ambulance for falls service
- Funding required:
 - Expansion of the Rapid Access to Social Care (RASC) team to support patients who would otherwise be admitted for social concerns and expedited discharge of patients. A trial is planned to allow the team to deliver medications.
 - Expansion of the Care Co-ordination team as a Single Point of Access (SPA) for primary care, care homes and other services across Wolverhampton to provide a 24-hour first line of response (additional funding required to support telephony requirements and additional call-handling staff)



Acute Services

- Funded:
 - The Children and Young People's service are scoping a GP access HOT advice pathway to support the management of children and young people in the community without the need to attend the Emergency Department
- Funding required:
 - Ambulance Receiving Centre (ARC) will become fully operational on the 28th November. This will create an additional eleven ambulance offload spaces, increasing the total to 28 (Capital funding assured, additional revenue funding required for staffing)



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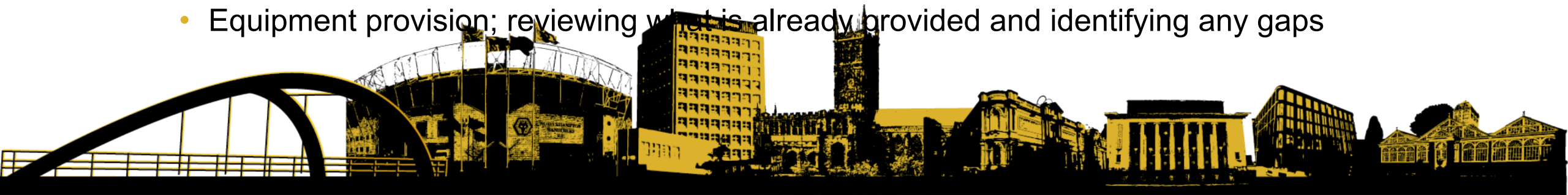


- Funded:
 - Maintain the hospital avoidance beds to prevent unnecessary hospital admissions. This service can also support patients who require additional support following a Community review, but do not require an inpatient hospital stay
- Funding required:
 - Increasing the capacity of the Telecare Responder Service to enable, help or support individuals to remain at home where appropriate
 - Expansion of the hospital avoidance beds provision



Place Partners

- Compton Hospice:
 - Funding required:
 - A trial has taken place with a number of care homes to support advance care planning. Early data suggests that across the 9 care homes involved, the number of patients conveyed to hospital has reduced by 895 attendances and the number of admissions by 54 compared to baseline.
 - Plans are in place to support further care homes
- Wider multi-agency work:
 - Funded
 - Multi-agency delirium pathways to enable everyone to be clear about the role they play in identifying treating and managing delirium within their setting, preventing an avoidable hospital admission
 - Funding required:
 - Additional support services for unpaid carers, particularly to avoid burnout and crisis
 - Falls prevention; reviewing and building on existing services and ensuring better integration with wider partners such as the Fire Service
 - Equipment provision; reviewing what is already provided and identifying any gaps



Improving patient flow and discharge



Acute Services

- **Funded:**
 - Additional 10 surge beds to be opened across A7 and A8
 - Push Pilot for ambulance recovery based on the North Bristol model
 - Expansion of the Same Day Emergency Care (SDEC) provision, to include surgical, head and neck and gynaecology functions
 - Frailty SDEC is operational and providing a 7-day service with capacity for 8 patients
 - Discharge lounge in operation 7-days a week
 - Ring-fenced ward to support the continuation of the Cancer and Elective Recovery Plan
- **Further funding required:**
 - There are ambitions to support the wider implementation of the HomeFirst approach in partnership with the City of Wolverhampton Council
 - Increased Rapid Access to Social Care (RASC) to support expedited discharge and social care of patients



Acute Services

- Reduction in Medically Fit For Discharge (MFFD) patients by 30% through:
 - Funded:
 - Increased UCR
 - Daily huddle rounds with a focus on multi-disciplinary team (MDT) working
 - Daily review of complex patients, including those who are long length of stay (LOS)
 - Implementing a process of weekend discharges to ensure parity with weekday discharges
 - Further funding required:
 - Enhanced Care co-ordination
 - Additional step-down beds



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- Funded:
 - Continuation (through additional funding in 2022/23) of the HomeFirst model for all pathway 1 and 2 discharges, based on DHSC guidance and additional social care and therapy support
- Adult Social Care Discharge Fund:
 - To help people get out of hospitals and into social care support, the government is launching a £500 million Adult Social Care Discharge Fund. The Wolverhampton allocation is not yet known. Work is underway to develop a series of initiatives and plans to use this money, to avoid delay when allocation is made.



Place Partners

- British Red Cross

- Funded:

- The funding from NHSE ended June 2022. The ICB has funded the gap from July to November and NHSE will continue to fund from November. This is a short-term service for pathway 0 patients, those who do not meet the minimum criteria for social care, but require a level of support to be resettled at home, aiming to reduce potential readmissions



Governance

- This presentation provides an overview of the winter planning work that is ongoing in Wolverhampton
- A comprehensive Winter Plan has been created, which provides a detailed list of the initiatives presented here, and a detailed delivery plan
- The progress, outcomes and effectiveness of this delivery plan will be monitored via the Urgent and Emergency Care Strategic Working Group, which is chaired by the COO of The Royal Wolverhampton NHS Trust – Gwen Nuttall
- Support has been identified from within OneWolverhampton, to support the monitoring and delivery of the Wolverhampton Winter Plan using a project management approach



Funding Arrangements and Risks

- Our detailed, written plan highlights schemes that are currently funded, and those that would be possible with additional funding
- Work is ongoing to identify additional funding required for the delivery of the plan
- There are a number of risks associated with the delivery of our winter plan
- These include:
 - Lack of funding
 - Short timescales for implementation and delivery
 - Recruitment of appropriate workforce
 - Workforce illness and absence – including potential Covid and Flu spikes
 - Legislative changes



Funding Gaps

Scheme	Funding Required	Potential Funding Stream
Extended Access in Primary Care	£264,000	National / ICB System Funding
Development and Implementation of a Primary Care Paediatric Respiratory Hub	£150,000	Winter Funding / ICB Funding
Respiratory Illnesses – Provision of Paediatric Pulse Oximeters	£3,600	Winter Funding
The Piloting of Primary Care Virtual Wards	TBD	Winter Funding
Responder Service Expansion	£70,000	Winter Funding
Compton Advance Care Planning work with Care Homes	£10,560	Winter Funding
Ambulance Receiving Centre	£275,000	Capital funding is in place. Revenue funding required to support staffing (12.5 WTE across bands 5 – 7). Winter Funding.
Rapid Access to Social Care Expansion	TBD	Winter Funding – revenue costs of staffing
Enhanced Care Co-ordination	£57,000	£57,000 for telephony and further funding for additional call handlers (TBD) Winter Funding.
HomeFirst	TBD	Social Care Discharge Fund
Adult Social Care Discharge Fund	TBD (Cost of nursing stepdown beds)	Potentially to be funded by Social Care Discharge Fund or Winter Funding
Rapid Access to Social Care (RASC)	£57,000 (plus costs of call handlers)	