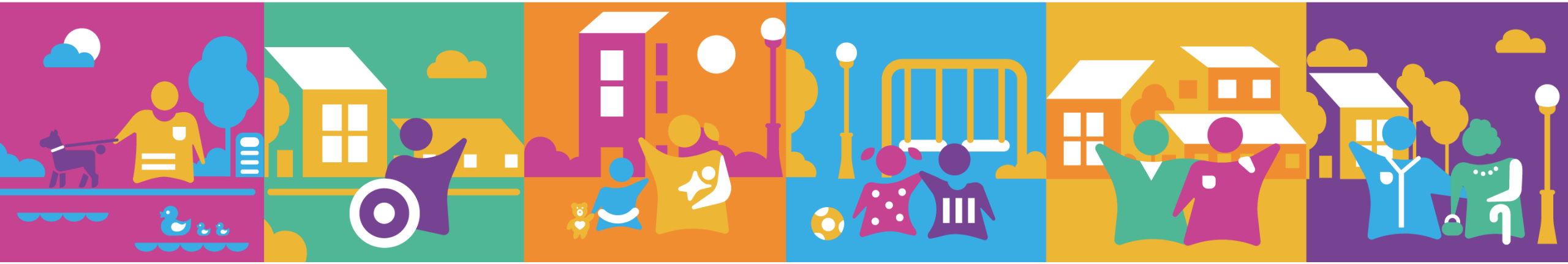
Walsall Together

Winter Planning Framework
Adult Social Care Health & Overview Scrutiny Committee
November 2020



Collaborating for happier communities

Planning Assumptions

Winter plan addresses:

- Seasonal impacts on morbidity & mortality, as well as resultant capacity demand
- Response to Covid-19: Learning from Wave 1 and preparation for Wave 2

WT Focus on 'adding value'

- Recognition that each organisation has to make its own winter plans
- Existing Winter Planning mechanism via the ED Delivery Board chaired by the WHT Chief Operating Officer
- WT coordinated approach seeks to identify actual & potential gaps in provision from a population / citizen perspective and facilitate partnership cooperation to address them

Adult Social Care Action Plan & Winter Plan

- On the 15 April 2020 the Government released a policy paper 'Coronavirus (COVID-19): adult social care action plan'
- In September 2020 the Government issued its Winter Planning Guidance for Local Authorities.
- Given that many of the themes and domains in the COVID 19 guidance and the Winter Planning guidance were the same a decision was made to create one combined COVID 19 and Winter Plan for all of Adult Social Care to monitor both areas
- Monitoring takes place across 14 specific Winter Planning domains and 35 combined Covid 19 and Winter Planning Domains.
- A bi-weekly assurance meeting takes place between the Interim Executive Director of Adult Social Care, the Director of Social Care, the Principal Social Worker, the Director of Public Health, Group Manager Assessment and Care Management and the Project Manager responsible for the coordination of the plan.

Preparing for Winter: ASC

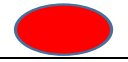
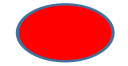
- Adult Social Care have a plan that aligns with Council and ADASS requirements
- This addresses the increased demand for bed-based and domiciliary support through a multitude of providers
- RAG status summary for COVID19 anD Winter Planning Domains are shown beloe in Table 1

Table 1 – RAG status Summary

Domain	Red	Amber	Green	Total
Winter Plan	2	3	9	14
Combined COVID19 and Winter Plan	3	7	25	35

Highest risk areas – Winter Plan and Covid 19 (1)

WINTER PLAN SPECIFIC ITEMS NOT ALIGNED TO COVID 19

Ref	Winter Plan or COVID 19	Lead	Title	RAG 31/10/2020
wp5abc	Winter Plan	Tracy Simcox	Domiciliary Care Capacity at a given point in time and understanding future capacity	
WP7	Winter Plan	Uma Viswanathan	Winter FLU Vaccine rollout for all people who receive Care and all staff who provide Care.	
WP9	Winter Plan	Jeanette Knapper and Paul Gordon	Social prescribing especially those impacted by health inequalities, and autistic people and people with learning disabilities.	
WP 11 CVD5 and 6	Winter Plan	Tracy Simcox	Working with CCG to ensure effective isolation capacity post Hospital Discharge if Home cannot provide isolation. Designated settings	
WP 14	Winter Plan	Karen Jackson	Xmas leave During the Christmas Period some Adult Social Care Teams may only be able to operate at 50% capacity. Capacity will be reviewed on a daily basis and contingency arrangements are in place to call back staff if necessary.	

COVID 19 - CONTROLLING THE SPREAD OF INFECTION

No	Winter Plan or COVID 19	Lead	Title	RAG 06102020
CVD1	Covid 19 and Winter Plan	Jeanette Knapper	Provision and use of PPE .	
CVD2	Covid 19 and Winter Plan	Uma Viswanathan	Managing Outbreaks and Infection Control	

Highest risk areas – Winter Plan and Covid 19 (2)

COVID 19 - SUPPORTING THE WORKFORCE AND TESTING

No	Winter Plan or COVID 19	Lead	Title	RAG 29102020
CVD7	Covid 19 and Winter Plan	Uma Viswanathan	Testing of key workers and residents within Care Homes	
CVD13	Covid 19 and Winter Plan	Sarah Taylor – One Walsall	National funding of Voluntary sector impacting Walsall	
CVD17b	Covid 19 and Winter Plan	Karen Jackson and Andrea Gronow	Use of Technology in Care sector	
CVD22	Covid 19 and Winter Plan	Ian Staples	Unpaid Carers support.	
CVD26b	Covid 19 and Winter Plan	Seanna Lassetter	Increased risk of safeguarding concerns (National risk)	

COVID 19 - SUPPORTING PROVIDERS

CVD28	Covid 19 and Winter Plan	Tracy Simcox	Funding to achieve Provider sustainability .	

Preparing for Winter: CCG

Primary Care

- During periods of high escalation there is communication from the CCG to General Practice seeking to reduce referrals to the Ambulance Service and to the Emergency Department and to seek additional urgent care appointments.
- Ensure that patients have access to week-day in hours primary care services at all times during the week
- Funding for additional primary care capacity in the evenings and week-ends has been made available to Walsall CCG from April 2018. There are two hubs providing appointments between 6.30and 9.00pm week-days and 10.00am to 3.00pm at week-ends.

GP Out Of Hours

- GP Out of Hours services in Walsall are provided from the UTC at Manor Hospital and access is by ringing NHS 111. The response may be telephone advice, an appointment at the Urgent Care Centre, or a home visit.
- This service is available 24 hours at week-ends and bank holidays and from 18.30pm to 8.00am on week-days i.e. outside of the normal week-day GP services.
- There is a full rota of staff available for the Christmas and New Year period and Bank Holidays.

Preparing for Winter: Primary Care (Standard Operating Procedure)

- Primary care operating telephone triage first – if patients require clinical face-to-face (F2F) examination they are invited in for an appointment
- Consultations are being completed via telephone, video consult, online and F2F
- Practices providing more access in comparison to last year following recent data submission
- Quality and Outcomes Framework (QOF) – large parts protected and currently working with CCG/Local Medical Council on risk stratifying reviews for patients with long term conditions

- Focus is on Managing COVID-19, Flu Vaccination and Cervical Screening
- Primary Care Restoration revisited following recent wave
- All GP Practices operating as AMBER sites and RED site still in operation

Preparing for Winter: Community Services

Supporting Discharge from Hospital
Avoiding Admissions

Service Enhancement for Winter
Additional ICS therapists to protect ability to support same day review of discharged patients - hence maintaining discharge rates from hospital
Intermediate Care - Funding for Band 5 manager at weekend (Saturday and Sunday)
DISCO/IDT Cover - Funding for x1 Band 4 ICS Facilitator (Saturday and Sunday)
Palliative Care - additional cover for specialist nurses to support increased domiciliary workload
Social worker cover particularly over the Christmas / New Year weeks - to support hospital discharge
OOH therapy and discharge team cover- to cover weekend capacity on site @ Manor to support discharges
Buffer stock of basic kit to support Trusted Assessor training & roll out - this will reduce waits for full therapy assessment & support discharges
Additional Therapies
Alcohol Nurse - to support community pathway as opposed to hospital admission
Medical cover - additional medical resource to support MDTs and review of care home residents thus increasing admission avoidance capacity
Agency CHC nurses (roughly £400 per day) to assist with clearing backlog of CHC / DST assessments
Funding pot for house cleans and minor repairs / installations

Additional Services / Capacity

- ***Integrated Front Door:*** community nurses (signposting); community IV & DVT management; social care support; focus on timely community interventions to support safe, same day discharge
- ***Care Coordination Centre:*** able to take more calls; greater range of community-based options to deal with referrals; potential to integrate social care into call centre
- ***Rapid Response:*** additional capacity meaning the service can be extended each day

Covid-19: Learning from Wave 1 being carried into Wave 2

ASC plan:

- Controlling the speed of the infection
- Supporting the Workforce & Testing
- Supporting Providers

Flu Vaccines:

- WT focus on all ensuring all care home residents are offered vaccines
- Work ongoing regarding strategies for 'hard to reach groups' & gaining access to supplies of vaccines to administer

Quality in Care Homes:

- Focus on assessing & supporting resilience of homes around Infection Control & staffing
- Work around personalised care plans for each resident in care homes

Covid-19: Wave 2

Post-Covid Management: Community Model

Area	Description
Identification of patients	Through [a] GP referrals; [b] hospital discharge lists where the patient was positive for Covid-19
Information pack to be sent to patients	Focus on self-care [eg Homerton guidance] with local contact details
MDTs & Personalised Care Planning: Focus is on self care as far as possible	Encourage any post-Covid patients displaying difficulties to be reviewed via existing MDT structure: • Eligible for self-care • Follow up physical review from therapy Agree a plan for each person involving: • OT • Physio • Psychology • Referral into social prescribers
Serious sequelae:	Dealing with people who may have more serious complications: • Resulting from MDT, this may result in referral to secondary care
Specialist Rehabilitation Needs	• In-patient care: Where there are patients with long term rehabilitation needs consider use of up to 2 Holly Bank beds to support this need • Domiciliary Care: use of the OT & Physio to provide more intensive rehabilitation for cohort of people with emergent needs

Enhanced Care in Care Homes

- All care home patients had an initial Advanced Care Plan (ACP) review in March/April
- ACPs and treatment escalation reviews have taken place over the last month to review the plan put in place early COVID-19
- Collaboration with all Walsall Together partners with patients being reviewed weekly and escalated for GP review as required in addition to structured medication reviews as per the PCN Directed Enhanced Services (DES) contract

Designated Settings

- Anyone with a Covid-19 positive test result being discharged into or back into a registered care home setting must be discharged into appropriate designated setting (i.e., that has the policies, procedures, equipment and training in place to maintain infection control and support the care needs of residents) and cared for there for the remainder of the required isolation period
- These designated accommodations will need to be inspected by CQC to meet the latest CQC infection prevention control standards
- No one will be discharged into or back into a registered care home setting with a COVID-19 test result outstanding or without having been tested within the 48 hours preceding their discharge
- Everyone being discharged into a care home must have a reported COVID test result and this must be communicated to the care home prior to the person being discharged from hospital. The care home's registered manager should continue to assure themselves that all its admissions or readmissions are consistent with this

Other COVID-19 support

- Flexible arrangements including an Additional expenses process
- Focused support from the Quality in Care Team
- Proactive trackers for care homes, Domiciliary Care, Support Living and Extra Care Housing providers and use of data intelligence to step up interventions as required
- Infection Prevention Control funding
  - Round 1 – received June Walsall Metropolitan Borough Council increased the amount of funding paid to social care providers in our area by £2,270,789
  - Round 2 - £2,342,514 received on 6th October

Provider market

- All providers required to update their business continuity plans supported with a peer review approach
- No provider failure
- No backlog or delayed start for packages of care
- Positive engagement and feedback on support offer
- Positive feedback from CQC provider collaboration review

Department of Health and Social Care self-assessment of 'Service Continuity and Care Market Review'

- 100% submission by 28th October, 2020
- The assessment presented the opportunity for each LA and collectively as a region to restate the risks and opportunities faced in the adult social care market, and to make the case for targeted support
- Not unique to Walsall the assessment highlighted a number of key concerns for the region exacerbated by Covid-19 including;
  - Long-standing workforce challenges across all forms of provision, exacerbated by Covid-19 absences, highlight a continued challenge to recruit and retain the staff needed, whilst national recruitment campaigns have largely failed to bring additional capacity to the sector

Department of Health and Social Care self-assessment of 'Service Continuity and Care Market Review' continued …

- Falling occupancy in care homes generally, with limited ability amongst providers to generate revenues, increases the risk of provider failure. Whilst there is some overcapacity in the care home market, multiple concurrent provider failures would quickly absorb this capacity and threaten councils' ability to ensure continuity of care
- A lack of alternative good quality provision to both facilitate the transition from care home to community-based care and mitigate failure in specific markets (notably Homecare and Day Opportunities), poses a consequent risk to specific (younger) service user groups

- Headlines are expected to be developed and it is anticipated that the review findings will be finalised by 19th November. Following this the initial steps of support and development to help respond to the identified challenges will be developed in partnership with ADASS and the LGA