	AGENDA ITEM:
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OVERVIEW AND SCRUTINY BOARD DATE OF MEETING – 23RD SEPTEMBER 2010

TITLE OF THE REPORT: WINTER MAINTENANCE

HEAD OF SERVICE or CMT MEMBER: RUTH HICKS

SUMMARY

- 1. The purpose of this briefing is to examine the conditions and difficulties encountered during the winter of 2009 10, in respect of Social Care planning and policies for providing care for vulnerable people, for consideration by the Overview and Scrutiny Board.
- 2. It will detail the joint planning arrangements that health and social care organisations put in place each year to deal with winter pressures. It will also detail how preparations for dealing with pandemic flu helped to strengthen business continuity arrangements, enabling care providers to deal effectively with the severe weather of last winter.

INTRODUCTION

Middlesbrough Social Care Department has for many years worked in conjunction with colleagues in the health sector, to plan for the increase in demand for services that occurs during the winter months. Each year, a Tees-wide winter plan is produced to ensure that there are effective communication links between the acute sector and community services. This includes key contact details, out of hours cover provided by heads of service and an on-call rota for the holiday period for the Social Care top management team. This information is shared across the Primary Care Trusts, the Acute Trusts and the Mental Health Trust and coordinated by the Strategic Health Authority, to ensure that each area has robust winter plans in place.

To facilitate the winter planning process a checklist was drawn up to report such issues as A&E closures, cancellation of elective operations, increased waiting times and ambulance delays. By producing daily situation reports based on this checklist, any pressures can be reported throughout the system and appropriate actions taken. For example, the closure of a hospital ward could result in increased demands for community services and the pressures could be alleviated by utilising spare capacity in care homes,

using hospital staff to support community nurses, or purchasing more hours from independent care providers. These daily situation reports begin each November and continue into the following year, until it is considered that the winter pressures are over. These reports are made available to Social Care through the Duty Team, the Hospital Social Work Team and Middlesbrough Intermediate Care Centre. Regular multi agency meetings take place to discuss the winter plans and their effectiveness.

EVIDENCE/DISCUSSION

The winter of 2008-2009 saw unprecedented demands on the Acute Sector, which had tested the effectiveness and resilience of emergency care provision and had resulted in unacceptable dips in performance. Because of this, NHS chief executives across the region decided that there was a need to collectively refocus on winter pressures to ensure that plans were in place for the coming winter. This included an appraisal of local winter plans to ensure effective communications were put in place and that escalation plans and agreed trigger points were shared across organisations. As a result of this, a multi-agency South of Tees Winter Planning Group was established in July 2009.

The previous month, the World Health Organisation declared that the swine flu outbreak had become a pandemic. Middlesbrough Council has had business continuity and flu pandemic plans in place since March 2007 to deal with this type of threat to working arrangements. However, it was decided that the annual review of these plans, which was due to be completed in September 2009, would be undertaken with a particular focus on the flu pandemic to ensure that they continued to be fit for purpose. Social Care worked with the Corporate Strategy Unit to ensure business continuity plans could deal with pandemic flu and also with the Emergency Planning Unit to provide training for inhouse and contracted service providers.

On 30th June 2009, the Department of Health held a Social Care Planning for Pandemic Influenza Regional Workshop. This was run by Martin Wilson, the North East Director of NHS Flu Resilience, and dealt with topics such as managing absenteeism, provision of statutory duties and supporting providers. In order to deal with the threat of pandemic flu, the Strategic Health Authority established regional multi-agency groups. The Tees Operational Flu Resilience Leads Group was established in July 2009 and brought together representatives from Health acute and community services and Social Care across Teesside. As well as looking at issues such as the distribution of anti-viral medication and personal protective equipment for staff, this group looked at strengthening business continuity planning by looking at the effects of staff absences due to sickness of up to 50%.

In September 2009, Middlesbrough Adult Social Care held Business Continuity Workshops for domiciliary care, care home and supported housing providers. Using pandemic flu as a focus, two sessions were held during the day for external providers to go through business continuity issues of identifying critical functions, prioritising services, planning for loss of resources and mutual aid. Those present worked through a scenario in four stages, which followed the emergence of the swine flu virus in Mexico and the subsequent development of the epidemic in this country. At each stage of the outbreak, questions were asked about what they would do and how prepared they would be to deal

with the worsening situation. The event was used to promote business continuity planning and all delegates were provided with a template to produce their own plan.

Also in September, following involvement in a similar exercise at James Cook University Hospital, a Pandemic Flu Stress Test for Social Care workshop was held. This involved all the Middlesbrough Social Work teams in developing a critical service analysis, to determine which services would be maintained if there was a severe outbreak of flu and which services would be closed, so that staff could be redeployed to the essential services. This also linked with the review of Social Care business continuity plans, so that they could cope with this type of prolonged event.

In October 2009, the Winter Planning and Tees Operational Flu Resilience Leads groups were merged to form the Tees Surge Management Group. This group developed standardised escalation plans for health and social care organisations and agreed escalation trigger points. This group also developed a performance dashboard that could be accessed by each organisation through a secure website. Out of hours cover for the Christmas holiday period by the Social Care Directorate and Heads of Service, along with contact telephone numbers, were shared with the Surge Management Group and put on the website.

In November, the Strategic Health Authority began producing regional daily situation reports covering both winter and swine flu, in order to monitor and coordinate any response required in accordance with the integrated North East Escalation Plan (NEEP) frameworks adopted by every local NHS organisation and Local Authority. Teeswide daily teleconferences started at the beginning of December, for all health services to give a situation report. Local authorities were only required to take part if they had any problems to report. Within Middlesbrough Social Care, the team managers reported sickness/absence levels on a weekly basis, although these were never high enough to affect service delivery. Pressures on day centres, the community mental health teams and Ayresome Community Transport could be gauged from the weekly absence reports. The Social Care Broker Team are in regular contact with care home and domiciliary care providers and so would quickly be made aware of any pressures that providers were experiencing. During the four months that the daily teleconferences were held, there were no occasions where Middlesbrough Social Care had to report that services were being affected by winter pressures.

At the beginning of December, the North East Ambulance Service reported sharp increases in demand, which impacted on their turnaround targets. Pressures eased for a while but then increased when the weather worsened in mid December. During this period, the Health leads on the Surge Management Group frequently asked Social Care representatives to give updates on salt supplies and gritting arrangements. Although lan Busby was included in the daily teleconference for December 31st, Social Care were still required to report on gritting issues to the Surge Management Group.

At the beginning of January, all the addresses of care homes and day centres in Middlesbrough, including Middlesbrough Intermediate Care Centre, were sent to the Council's Transport Department, so that they could be prioritised for gritting and snow clearance. The Winter Maintenance plan for Middlesbrough Council for 2009/2010, was also sent to the Surge Management Group, showing the routes that will be gritted in the event of heavy snow. At that time, because grit was in short supply and also as directed

by Government Office, only priority one routes were being gritted. This plan had already been shared with the emergency services, including the Chief Ambulance Officer, as part of normal winter preparations.

The in house home care, care link, rapid response and reablement services were fully operational throughout the cold weather period, as were the contracted home care services from the four domiciliary care providers. Although there were some delays, in these cases the service users were called and notified that there would be delays. In some cases, temporary variations were made to the scheduled call to allow carers to get emergency provisions. Because of the work that had been done in preparing for pandemic flu, the domiciliary care providers were well placed to prioritise service users and ensure that those with the greatest need had some kind of service. It would also have been possible for the care agencies to provide mutual support, if there were exceptional demands for services. However, this need did not arise and all service users who required visits were catered for.

On Friday 8th January, the community transport buses had not been able to operate safely and some clients had been unable to attend the day centres. People who required further support and the provision of meals were catered for under temporary variation of contracts. If day services had been stopped for a prolonged period, the business continuity plans for day services allow for the provision of alternative day services or support at home.

There had been problems with vehicles getting stuck due to heavy snow at Middlesbrough Intermediate Care Centre on Homerton Road. This was a particular problem for the care link vehicles and also for ambulance access to the centre. At one point, the Fire Brigade had been called in to free the vehicles. After this, the centre was put on the priority list for gritting and there were no further problems.

In February it was decided that the Surge Management Group would cease and that winter planning issues would be carried forward by an Unplanned Care Board (now the Urgent Care Systems Group), which would look at ways of improving system management, communication management and patient management throughout the system. The daily teleconferences stopped in March, when the situation had returned to normal.

CONCLUSIONS

The work that was carried out in 2009 to prepare for a possible severe pandemic flu outbreak was beneficial in that it strengthened business continuity planning across all health and social care organisations. This helped in dealing with the problems that arose last winter due to severe weather.

The only issue that occurred last year was due to having two planning groups dealing with what became one issue: how to cope with winter pressures. This resulted in some bypassing of established winter planning procedures, for example the confusion around the priority gritting routes.

Although the winter pressures of 2009-2010 were dealt with effectively by health and social care agencies, it is essential that multi-agency planning for winter pressures continues, in order to deal with the increased demands that always occur at this time of year, either due to seasonal influenza or severe weather. This work is currently undertaken by the Urgent Care System Group, which has representatives from health and social care organisations across Teesside. This group has been meeting since February and looks at issues such as reducing emergency admissions, early supported discharge and surge planning, in preparation for the coming winter.

BACKGROUND PAPERS

None

AUTHOR

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