

Waltham Forest Health and Care Partnership Board & Integrated Care Board Sub Committee meeting in common

Monday 02 October 2023, 1130-1330 at Board Room, Junction 6, Whipps Cross Hospital London E11 1NR

Joint Chairs: Heather Flinders / Amanjit Jhund

AGENDA

	Item	Time	Lead	Attached / verbal	Action required		
Waltham Forest Integrated Care Board Sub Committee Business							
1.	Waltham Forest Winter Plan	1310 (15 mins)	Kelvin Hankins / Pat Smith	attached	Approval		
2.	Any Other Business	1325 (5 mins)	Chairs	Verbal	Note		

Date of next meeting: Monday 06 November 2023, 1130-1330 at Melsetter Suite, (East Wing, 1st floor) Waltham Forest Town Hall; Forest Road, Walthamstow, E17 4JF





Waltham Forest Winter Plan

Monday 7 November 2022 Waltham Forest Health and Care Partnership Board

 Executive Summary / Summary of Key Issues: The 2023/24 Winter Plan covers:- 	Purpose of Paper / Ask of the Board: To approve the WF winter plan
 Actions being taken to support residents The governance of the plan The funding agreed The potential funding request Performance metrics for delivery, demand and capacity Risk log 	To note this is a live document and will be developed accordingly To approve the priority areas of focus for the partnership To approve the funding allocations for the ICB demand and capacity grant and the Council's Urgent Care grant
Engagement:	Specific Risks:
 The place based Winter Plan has been developed through collaboration across the Waltham Forest Place Based Partnership In early September a system workshop took place to identify: What we had in place to support residents during winter What else did we need to do Identify actions and support required To note the Winter Plan is a live document 	 Winter pressures i.e. extreme weather, flu, Covid, major incidents, transport disruption Industrial Action Resource due to staff sickness over winter Recruitment of staff into roles for winter

Top Priorities

- 1. Development of local communication plan on winter support services for Waltham Forest Residents and front line staff
- 2. Decreasing the length of time that people are waiting for discharge on Pathway 2 and Pathway 0
- 3. Improving support for residents (CYP and Adults) in mental health crisis.
- 4. Covid and flu vaccination programme

Priorities Priorities	Expected Impact
Development of local communication plan on winter support services for Waltham Forest Residents and front line staff	Increased awareness of services and reduction in UEC attendees
What else do we need to do to support residents for Winter?	Actions Identified
Provide support and education to local parents through raising the management of common childhood illness within the children and family hubs.	CYP Commissioning team meet with Family Hub leads to discuss opportunities for sessions CYP Commissioning to scope what is possible within existing resource, and any additional costs
Optimise communication with Providers and Residents of WF. Strategy to aim at increase awareness about service offerings, operational hours, capacity, and referral methods	
Comprehensive directory of community services, covering all relevant aspects. This directory would serve as an invaluable resource for providers seeking assistance during the winter months.	Development of key services communicated to residents and front line staff.
Improving information on available services and access points for our residents and workforce	Enhancing signposting by refining webpage information to better guide individuals toward relevant resources
	Ensure clear comms for: Staff/health care professionals – know what is available over winter and ensure understanding of pathways - Patients – how and when to access services

Priorities Priorities Priorities Priorities	Expected Impact
2. Decreasing the length of time that people are waiting for discharge on Pathway 2 and Pathway 0	Decrease in LOS
What else do we need to do to support residents for Winter?	Actions Identified
Reduction in length of stay for people on pathway 2	Acute staff using the Home first principle fully, including access visits, telecare, before recommending P2 interim placements
	Dedicated Social care and therapy resource to support patient to transfer from interim placement against an agreed exit plan to support flow in care homes.
Inpatient flow and length of stay (acute): reducing variation in inpatient care and length of stay for key pathways/conditions/cohorts by implementing in-hospital efficiencies and bringing forward discharge processes for pathway 0 patients.	Medicine - Various QI projects are being implemented across the hospital. Focus on one of our medical wards on MDT led discharge planning has resulted in achieving 35% of patients being discharged pre-11am.
	Surgery - In Surgery work is being done on the orthopaedic trauma ward with them trialing an electronic whiteboard, and pre-11am discharges have increased to 33%. These schemes are being rolled out to the rest of the hospital wards.
	Discharge Lounge - The discharge lounge is being embedded as business as usual. Work is being done to promote this as an integral part of the patients discharge pathway. Work has been done to collocate pharmacy and making this a welcoming and comfortable environment for patients awaiting medication or transport before discharge. At a Trust level Discharge lounge utilisation is being discussed at our daily Operational calls and any barriers being identified and solutions being sort.

Priorities Priorities Priorities	Expected Impact
3. Improving support for residents (CYP and Adults) in mental health crisis.	Decrease in LOS
What else do we need to do to support residents for Winter?	Actions Identified
Introducing step-down beds similar to the successful model employed in Mental Health Beds at Goodmayes Hospital.	Joint working with acute mental health services - strict criteria for stay in beds (maximum 2 weeks) Identify a local provider for step done bed allocation MH community teams to support and oversee patients in step down beds
Establishing a link between Child and Youth Program (CYP) and social care to facilitate the seamless transition of 0-19 CAHMS patients into the community	Focus on promoting and improving existing escalation pathways to social care
Increased support to facilitate discharge for CYP presenting at ED in MH crisis - increase support for local provision eg in-house foster carers, to help facilitate discharge from ED and enable assessments and interventions to take place in a more appropriate setting	Scope possible emergency provision/providers Identify providers who can support in emergency/urgent situations Scope training for existing foster carers
Strengthening the Drug and Alcohol Pathway for Out-of-Hours Acute (OOA) presentations	Dual Diagnosis nurse required to access drug and alcohol presentations in ED departments out of hours to sign post patients to CGL
Promote MH direct lines	Share MH direct line with stakeholders Promote and extend the hours of the crisis alternative based in the Jane Atkinson Centre

Governance arrangements

- Waltham Forest Urgent Care Working Group
- Home First Exec

As appropriate any exceptions will be brought to the Partnership Board

Waltham Forest Discharge Funding Arrangements

Funding Available

	Waltham Forest	
Adult Social Care Discharge Grant	£1,330,000	As detailed within NHS E BCF email 14/03/2023
ICB Discharge Grant	£1,205,000	As signed off by DASC
Carry over discharge funding from 2022/23	£995,000	Exact figures to be confirmed
Waltham Forest Demand and Capacity	£460,650	One off pot
Total	£3,990,650	

Agreed spend

Schemes	Cost	Comment
First four weeks of care	£3,138,304	ASC Grant
Trusted Assessor	£80,000	Carry over & Demand and Capacity
NELFT Bridging	£382,346	ASC Grant
Local Authority IDH Staffing costs	£390,000	Carry over & Demand and Capacity
Total	£3,990,650	
Budget	£3,990,650	
Remain	£0	
Note: Funding for the IDH has transferred to the BCF.		· ·

Out of Hospital Demand and Capacity Funding

Detailed below is the proposed spend for the Out of Hospital element of the non-recurrent demand and capacity funding. This is split between Waltham Forest specific funding and shared funding across Tower Hamlets, Newham and Waltham Forest.

* Please note that the Winter Pot and how it will be spent has not been agreed yet.

Scheme	Borough	Amount	Provider	Period
			As detailed above in the	
Discharge Funding Support	Waltham Forest	£460,650	Adult Social Care Line	Full Year
Leggat Road	TNW	£167,000	LBN	Full Year
Mildmay Step Down Beds	TNW	£150,000	Mildmay	Spot purchase budget
Winter Funding Pot	Waltham Forest	£200,000	To be confirmed	
Waltham Forest GP In reach	Waltham Forest	£130,000	Fednet	April 2023 to November 2023
	Total	£1,107,650		

LBWF Urgent Care Grant

Tier 1 Funding bid submitted 29.9.23

- Allocation £510,786
- Identified schemes
- 1. Pathway 2 flow

Therapy and admin support for pathway 2 placement monitoring, review and move on and in-reach towards to divert from pathway 2

- 2. Increasing capacity and block booking pathway 2 placements for complex patients
- 3. Increasing capacity of bridging service to enable more complex pathway 1

Proposed Funding Area

The below list details the areas the partnership would like to invest in, if funding becomes available. The current list is comprised of areas in the action plan, costs need to be provided to proceed to prioritisation

Scheme	Lead Organisation	Amount	Impact	Sub Group	On Winter Priority Plan Action List
Hot Clinics - Supporting residents who need to access acute services but not same day	Barts Health	tbc	tbc	Front Door Group	Yes
Introducing step-down beds similar to the successful model employed in Mental Health Beds at Goodmayes Hospital.	NELFT	tbc	tbc	UCWG	Yes
Increase Intermediate Care Beds	NELFT	tbc	tbc	Home First Exec	Yes
Bridging Capacity	NELFT	tbc	tbc	Home First Exec	Yes
Strengthening the Drug and Alcohol Pathway for Out-of-Hours Acute (OOA) presentations	NELFT	tbc	tbc	Front Door Group	Yes
Navigator role in UTC/ED	NELFT	tbc	tbc	Front Door Group	Yes
Winter Respiratory Hubs	Tbc	tbc	tbc	Front Door Group	Yes
Paediatric Acute Hub in the community - with consultant	Tbc	tbc	tbc	Front Door Group/CYP	Yes