

<b>HEALTH SCRUTINY COMMITTEE</b>	<b>AGENDA ITEM No. 5</b>
<b>7 JANUARY 2020</b>	<b>PUBLIC REPORT</b>

Report of:	North West Anglia NHS Foundation Trust	
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**NORTH WEST ANGLIA NHS FOUNDATION TRUST – PREPARATIONS FOR WINTER 2019/20**

<b>R E C O M M E N D A T I O N S</b>
<p>It is recommended that the Health Scrutiny Committee note the preparations made and subsequent actions taken at Peterborough City Hospital in readiness for Winter 2019-20. These actions are undertaken in conjunction with local system partners primary care, mental health, community services and adult social care services.</p>

**1. ORIGIN OF REPORT**

1.1 This report was requested by the Health Scrutiny Committee at its planning meeting in September 2019.

**2. PURPOSE AND REASON FOR REPORT**

2.1 This briefing paper provides an update on the preparations made and subsequent actions taken at Peterborough City Hospital in readiness for Winter 2019-20.

2.2 This report is for the Health Scrutiny Committee to consider under its Terms of Reference Part 3, Section 4 - Overview and Scrutiny Functions, paragraph No. 2.1 Functions determined by Council - Public Health and Scrutiny of the NHS and NHS providers.

**3. BACKGROUND AND KEY ISSUES**

**3.1 Winter Plan 2019-20**

North West Anglia NHS Foundation Trust continues to work with its partners across the health system on delivering the Winter Plan 2019-20. Actions within the plan are focussed upon keeping delays in care experienced by patients using emergency care services across our sites to a minimum during periods of additional pressure. This has included:

- *Anticipating demand surges* – such as after Bank Holidays and weekends. Ensuring appropriate levels of staffing to manage these periods is crucial to help maintain a flow of patients through our hospitals. In addition, we have learned from previous winters that we need to be better prepared for extreme cold events and the associated peaks in respiratory illnesses occurring in the weeks after the event. The Trust has a Full Capacity Protocol which it will put in place where there is a prolonged surge in attendances.
- *Appropriate care* – communications teams across all partner organisations are working together to share timely messages that serve as reminders to the public on where they should seek the health care most appropriate for their need. This includes advice on suitable alternatives such as the Urgent Treatment Centre (UTC) in Peterborough, GP out of hours services and pharmacies. It is hoped that this messaging will help prevent the Emergency Department from becoming overcrowded with patients that could have been

treated faster elsewhere.

In Huntingdon, where there is no UTC facility close by, we are working with our commissioners and Herts Urgent Care to pilot a new service at Hinchingsbrooke Hospital that will see patients assessed by an NHS 111 Clinical Advisor (a registered nurse of paramedic) at the front door of the Emergency Department. This may mean patients are redirected to a GP (the appointment is to be booked while the patient is in the department) or a pharmacist. This initiative began in December 2019. If it proves to be as successful as we hope it will be, we will roll it out at Peterborough City Hospital in 2020.

- *Maintaining a flow of patients through our hospitals* – We want to avoid delivering ‘Corridor Care’ wherever possible. At times of extra-ordinary demand, as seen last winter, there will be occasions where this is unavoidable. However we are focussing upon a number of key areas that will assist in maintaining a flow of patients through our hospitals which, in turn, should improve the waiting times for patients in our Emergency Department. This includes working with our health care system partners to reduce the number of long-stay patients (in hospital for 21+ days) and those whose transfer to another care facility is delayed. We are increasing our use of the Discharge Lounge at Peterborough City Hospital to help free ward beds in a more timely manner.

We will also maximise the use of our Ambulatory Care Unit at PCH, to help some patients avoid an inpatient stay.

Between November 2018 and April 2019 we have added 42 extra beds at Peterborough City Hospital in readiness for winter. This has been achieved by creating more 3-bedded bays by joining two single rooms together, and adding an extra bed into our 4-bedded bays. All these beds are currently in use. There is no capacity to add any additional beds into our bed base at PCH.

We have recently redesigned and improved the ambulance bay at Peterborough City Hospital to assist in facilitating faster ambulance handovers. This is designed to reduce ambulance queues at times of increased attendances, and will assist the ambulance crews by being free to answer their next call in a more timely manner.

- *Educating the public* – as well as reminding the public on where they should access health care appropriate for them, our collective system-wide communications teams have delivered campaigns to encourage self-care among patients to help prevent illnesses escalating by stocking up on medicines in advance, getting vaccinated against the flu and how to treat common ailments, such as stomach bugs, at home.

### **Staff Flu vaccinations**

As of 16 December 2019, 60% of staff across our Trust (approx. 3,720) had received their vaccinations against the flu. We are aiming to vaccinate at least 75% of staff and have a dedicated campaign in progress to encourage all clinical staff to take up the free vaccination to protect them, their patients and their families. We are using a peer vaccinator system, where nursing and medical staff have been trained to administer the injections alongside our occupational health team. This gives us a greater chance to ensure clinical staff can be vaccinated within their department to save them needing to leave their area to have a vaccination.

Our vaccination programme was impacted by a shortage in vaccinations for a few weeks in October. We issued Trust-wide messages to ensure staff were aware of the issue and would be ready to take up the vaccination as soon as the new batch was delivered. We will continue to work hard with our vaccination teams to increase the numbers of staff receiving the flu jab.

### **Current performance**

At the time of writing, the latest validated figures for our performance against the 4-hour waiting time standard for patients attending the Emergency Department at Peterborough City Hospital was 64.2% against the 95% standard. These figures relate to October 2019. We continue to see significant increases in demand on both our acute sites. However our teams at Hinchingsbrooke Hospital are having more success in meeting the standard, recording 93.3% in October 2019, despite seeing attendances increase by 14% year on year.

The Trust-wide performance against the 4-hour waiting time standard (which comprises the Emergency Departments at Peterborough City and Hinchingsbrooke Hospitals, plus the

Stamford Minor Injuries Unit) was 75.8% in October 2019. A verbal update on latest figures will be provided at the meeting of the Health Scrutiny Committee on 7 January 2020.

Activity at Peterborough City Hospital is up 8% year on year with 4.5% increase in ambulance conveyances and a similar percentage increase (4.3%) in emergency admissions. Challenges in achieving the four hour standard are site wide, with poor flow and untimely discharges currently impacting on performance. We are working to a performance improvement plan for emergency care which is closely monitored and reported monthly to our board of directors.

#### **4. CONSULTATION**

4.1 This report is for update purposes only

#### **5. ANTICIPATED OUTCOMES OR IMPACT**

5.1 This report is for update purposes only

#### **6. REASON FOR THE RECOMMENDATION**

6.1 n/a

#### **7. ALTERNATIVE OPTIONS CONSIDERED**

7.1 n/a

#### **8. IMPLICATIONS**

##### **Financial Implications**

8.1 There are none.

##### **Legal Implications**

8.2 none

##### **Equalities Implications**

8.3 none

##### **Rural Implications**

8.4 none

#### **9. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

9.1 none

#### **10. APPENDICES**

10.1 none

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