



AGENDA ITEM NO 11

REPORT NO IJB 65/24

ANGUS INTEGRATION JOINT BOARD

30 OCTOBER 2024

WINTER PLANNING 2024/25

REPORT BY JILLIAN GALLOWAY, CHIEF OFFICER

1 ABSTRACT

This report is to update the Integration Joint Board on the Winter Planning arrangements for 2024/25.

2 ALIGNMENT TO THE STRATEGIC PLAN

This report aligns to the following priorities of the Angus IJB Strategic Commissioning Plan 2023-2026:

- Priority 1 - Prevention and Proactive Care
- Priority 2 - Care Closer to Home
- Priority 3 - Mental health and wellbeing and substance use recovery

3 RECOMMENDATIONS

It is recommended that the Angus Integration Joint Board: -

- (i) Acknowledge the arrangements in place to support the challenges anticipated across the health and social care system during the winter period;
- (ii) Note that winter plans have been received, refreshed and updated in line with Scottish Governance priorities for winter 2024/25;
- (iii) Approve Angus HSCP actions to support winter as detailed in section 6 of this report;
- (iv) Endorse a reasonable level of assurance regards Angus HSCP preparedness for winter 24/25;
- (v) Supports the whole system working in preparation for anticipated winter challenges; and
- (vi) Agree to endorse the NHS Tayside Winter Plan 24024/25 following circulation of the full document.

4 BACKGROUND

Guidance has been issued by Scottish Government to all Health Boards, IJB Chairs and Local Authorities setting out their expectations for winter planning for 2024/25. Angus Health and Social Care Partnership (AHSCP) has contributed to the development of the NHS Tayside Winter Resilience Plan along with colleagues from Acute Services, Dundee and Perth & Kinross Health and Social Care Partnerships and Scottish Ambulance Service.

5 CURRENT POSITION

The approach adopted by Scottish Government for winter 2024/2025 builds upon those previous with regards to whole system working. NHS Tayside, the Health and Social Care Partnerships of Angus, Dundee and Perth & Kinross, Scottish Ambulance and other key stakeholders have worked together collaboratively to produce NHS Tayside's Winter Resilience Plan 2024/25.

Whilst Scottish Government has during 2024 articulated the need to move towards an all-year-round response to surge planning, it is accepted nevertheless that the winter period brings with it specific challenges which require further consideration due to their impact on health and social care services. Seasonal illnesses such as influenza increase along with other respiratory illnesses impact on the health of the population particularly for older and the more vulnerable in our communities which in turn impacts on the help and care required. At the same time the workforce experiences increased staff absence due to sickness. In addition, inclement weather conditions may impact negatively on service delivery such as during heavy snowfall or the severe storm (Babet) as experienced last year necessitating the need for robust and up to date business continuity plans. Inclement weather conditions also increase the likelihood of injury from slips and falls.

The overarching aim of the plan is to prepare health and social care services for these eventualities and to ensure that by doing so, those that require care and support receive it.

The plan sets out to mitigate winter pressures, improve performance and ease pressures this winter by continuing to use a whole system framework for predicting, responding to and managing peak periods of unscheduled activity.

To enable this and for consistency in approach, Scottish Government have set out a framework (September 2024) for Health Boards to follow highlighting the winter plan priorities for 2024/25 as outlined below:

- Priority One: Prioritising care for all people in our communities, enabling people to live well with the support they choose and utilise effective prevention to keep people well, avoiding them needing hospital care.
- Priority Two: Ensure people receive the right care, in the right place at the right time, this includes prioritising care at home, or as close to home as possible, where clinically appropriate.
- Priority Three: Maximise capacity and capability to meet demand and maintain integrated health, social care and social work services, protecting planned and established care to reduce long waits and unmet need.
- Priority Four: Focus on supporting the wellbeing of our health and social care workforce as well as valuing and supporting unpaid carers.

6 PROPOSALS

As Chief Officer for AHSCP, I would suggest that the level of assurance provided is **Reasonable** due to the following factors:

Planning for this busy winter period commenced during the summer with regular whole system meetings taking place to discuss anticipated challenges, mitigations and proposals.

In addition to this, time for reflection on last year's winter experience (2023/24) is an important part of the pre-planning cycle. A whole system winter debrief took place on 26 April 2024 to capture lessons learnt including what worked well as well as where improvements can still be made.

Managers and leaders from across health and social care services in Angus have agreed the following actions to underpin the priorities for winter 2024/25 as outlined by Scottish Government.

Priority One: Prioritising Care for All People in Our Communities

The aim of Angus HSCP is to enable people to live well and remain healthy within their communities, using effective prevention and early intervention strategies. We will:

- **Strengthen Community-Based Support:** Enhance access to community health and social care services to prevent unnecessary hospital admissions and support individuals at home.
- **Enhance Chronic Disease Management:** Proactively manage long-term conditions with regular reviews and personalised care plans, reducing the risk of complications during winter. Our primary care networks will proactively identify and reach out to patients with chronic illnesses, ensuring early intervention, specifically the Respiratory Liaison Service who are reviewing patients including those at risk of readmission with future care planning offered to all and tailored care plans to prevent complications during the winter months.
- **Health Promotion and Prevention Initiatives:** Increase outreach and education on vaccinations, cold weather preparedness, and self-care, targeting vulnerable populations.
- **To manage potential surges in respiratory illnesses,** capacity will be increased at respiratory clinics and hold stock of essential supplies, including portable oxygen and PPE, in anticipation of heightened winter demand.

Priority Two: Ensuring People Receive the Right Care, in the Right Place, at the Right Time

AHSCP strive to ensure that care is delivered as close to home as possible, with the right support available when and where it is needed with the Enhance Care Service model being the foundation of this priority. This includes:

- **Home Care Services:** Strengthen and expand the contracted home care support to enable people to remain in their own homes, reducing the need for unnecessary hospital-based care through ensuring Resource Allocation process uses Eligibility Criteria effectively so care is contracted, or signposting referrals are made timeously. To strengthen the home care workforce, AHSCP will focus on workforce strategies, and training programs to support a sustainable and well-prepared team throughout the winter period.
- **Effective Triage and Care Navigation:** Utilise robust triage systems to direct people to the most appropriate services, including, telehealth, community pharmacies, and primary care. Receptionists within Angus General Practices are skilled Care Navigators ensuring that patients are directed (first time) to the most appropriate service, teams or professional to best support their needs. AHSCP utilise a variety of national and locally developed communication and messaging materials to support Right Care, Right Time, Right Place to ensure patients “know where who turn to” this specifically ensures people know when to visit the Emergency Department (ED), Minor Injury and Illness Units (MIUs), GP practices, Community Pharmacies etc.
- **Rapid Response and Reablement Teams:** There is the ability to flex staff including Allied Health Professionals (AHPs) across the Partnership and prioritise as required provide urgent support in the community and reablement services to facilitate timely hospital discharges and prevent admissions.

Priority Three: Maximising Capacity to Meet Demand and Maintaining Integrated Health and Social Care Services

To ensure an effectively response to increased demand, AHSCP will:

- **Maximise Workforce Capacity:** Utilise additional staffing opportunities, to meet surge demands in critical areas. A robust recruitment pipeline will be built for essential roles and a focus on professional development to ensure that temporary staffing solutions are used sparingly.
- **Protect Planned and Scheduled Care:** Maintain the delivery of routine and planned care wherever possible to prevent a backlog of unmet need.
- **Integrated Care Pathways:** Strengthen collaboration between hospital, Primary Care,

and community services to ensure smooth transitions and continuity of care with a clear focus on discharge from hospital to ensure future care planning for all patients discharged from community hospital to care home and improved communication on discharge from all hospital wards.

Priority Four: Supporting the Wellbeing and Capacity of Health and Social Care Workforce

- A resilient and supported workforce is essential for delivering high-quality care. To support staff, AHSCP will:
- Staff Wellbeing: Provide mental health support, stress management resources, and wellbeing initiatives to help staff cope with increased pressure during the winter months.
- Flexible Working Arrangements: Where possible, offer flexible shifts and working conditions to support staff work-life balance and reduce burnout.
- Recognition and Support for Unpaid Carers: Acknowledge the crucial role of unpaid carers and provide resources, training, and respite options to support them in their roles.
- AHSCP will leverage predictive analytics to anticipate patient surges and utilise real-time dashboards to monitor resource allocation, ensuring a data-driven response to fluctuating demand.
- A robust data-sharing agreement between health and social care services will enable seamless communication and rapid information flow, ensuring timely interventions for those who need them most.
- Planned contingency arrangements across all services to support prioritisation of key aspects of care where required e.g. adverse weather, workforce shortages due to seasonal illness.
- Collaboration with Third Sector and Voluntary Organisations.
- AHSCP will work closely with third sector and voluntary organisations to expand non-clinical support capacity, including community outreach, patient transport services, and social care support for vulnerable individuals.

General

- Daily Situation Reports: Implement a daily monitoring system to track service capacity, demand, and emerging issues, allowing for rapid response and resource allocation. Daily situation reports will track key metrics such as hospital bed availability, staff sickness levels, flu incidence rates, and care home occupancy, enabling rapid responses to emerging issues.
- Maintain monthly unmet need reporting to Scottish Government and share relevant local data on levels of unmet need aligned to our Eligibility Criteria to ensure resources are aligned to need.
- Participate in meetings with partners across health, social care, and third-sector services to ensure coordinated planning and response. To ensure transparency and adaptability, a feedback loop will be created where data and insights from daily reports and real-time monitoring will be shared with both staff and the public to improve service delivery.
- Continuous Evaluation and Adaptation: Monitor the impact of the Angus Winter Plan through key performance indicators (KPIs) and adapt strategies as necessary based on real-time data and feedback.
- Robust business continuity arrangements in place to ensure we continue to provide health and social care services throughout the winter period.

Work is now in hand to operationalise and implement the actions outlined.

The Angus Winter Planning Group has been re-established and will meet weekly to monitor progress. In addition to the planning requirements self-assessment checklists will be completed and be returned to Scottish Government by 31 October 2024.

7 FINANCIAL IMPLICATIONS

As previously reported, AIJB received circa £4.213m of additional funds from the Scottish Government from 2021/22 to support the expansion of care at home services and investment in Multi-disciplinary Teams. This recurring funding stream has been the main vehicle for AIJB

continuing to support services to meet increased demands throughout the year including during winter.

8 RISK MANAGEMENT

This work aligns to the following priorities of the Angus Strategic Commissioning Plan 2023-2026:

Priority 1 - Prevention and Proactive Care

Priority 2 – Care Closer to Home

Priority 3 – Mental Health and Wellbeing

There are numerous recurring contextual challenges that are out with the control of AIJB or Health Board however these will be mitigated where possible through prudent preventative measures.

Risk Description	SR28 Strategic Commissioning Plan (SCP) As a result of significant financial and workforce pressures there is a risk that Angus Integration Joint Board (AIJB) will fail to meet the ambitions outlined within the Strategic Commissioning Plan 2023 - 2026 and deliver on the priorities outlined in the SCP. This would result in a failure to improve the health and wellbeing outcomes of the population of Angus.
Risk Category	Quality of care
Inherent Risk Level	Level Likelihood 5 x Impact 5 = Risk Scoring 25 (Extreme risk level) .
Mitigating Actions	<ul style="list-style-type: none"> • Ongoing dialogue with NHS Tayside, Angus Council, Scottish Government and via national forums. Identify and progress actions within the Strategic Delivery Plan to ensure services improve the experience for service users, improve the experience for staff, lead to better health outcomes and lower the cost of care. • Strategic Planning Group - overseeing the delivery of the Strategic Commissioning Plan. • Workforce Steering Group - identifying mitigating strategies and actions relating to workforce. • Strategic Delivery Group and Strategic Performance Group - overseeing the delivery of all priorities ensuring they are on target and make a positive impact on national indicators and local performance indicators.
Residual Risk Level	Likelihood 5 x Impact 4 = Risk Scoring 20 (Major risk level)
Planned Risk Level	Likelihood 3 x Impact 4 = Risk Scoring 12 (Major risk level)
Approval recommendation	Even with the progression of all agreed actions, this risk remains high. Scheduled reporting and monitoring will continue alongside the further development of risk mitigation actions.

9 PUBLIC HEALTH IMPLICATIONS

The public health implications of this report highlight several important aspects of managing health and social care services during the winter months. Here's a summary of the key public health considerations based on the report:

Prevention and Proactive Care:

- A significant emphasis is placed on **preventing hospital admissions** through community-based health support and management of chronic diseases. This proactive approach is intended to support people to age well, remain more physically active and to live longer with a lower level of need for services. Part of this will be to respond to frailty earlier with supportive interventions, helps reduce the strain on hospital services, allowing resources to focus on more acute cases.
- **Vaccination programme**, health education, and outreach efforts, especially targeting vulnerable populations, aim to prevent seasonal illnesses like influenza and other respiratory conditions. These public health initiatives help manage the expected rise in respiratory infections during the winter season.

Healthcare Access and Equity:

- The plan prioritises **care closer to home**, ensuring that individuals, especially the elderly and those with chronic illnesses, receive timely support in their local communities. This not only reduces the burden on hospitals but also improves health outcomes by minimising disruption in care continuity.
- Enhancing **triage and care navigation systems** ensures that individuals access the right services, promoting more efficient healthcare delivery and avoiding unnecessary hospitalisations.

System Capacity and Resilience:

- The plan acknowledges that winter increases demand for health and social care services. Therefore, it focuses on **maximising workforce capacity**, including temporary staffing, to address surge periods. This involves preparing a resilient workforce and ensuring there is adequate staffing during critical periods, which is vital for maintaining service quality.
- The report also highlights the importance of **business continuity plans** to maintain healthcare services during extreme weather conditions, which could otherwise disrupt access to care.

Workforce and Carer Wellbeing:

- Public health depends not only on the care provided to patients but also on the well-being of healthcare workers. The report stresses **support for healthcare staff and unpaid carers**, offering mental health resources and flexible working conditions. This approach aims to prevent burnout and ensure that the workforce remains strong and capable throughout the winter.

Data and Monitoring for Public Health:

- The use of **predictive analytics** and real-time monitoring systems, such as daily situation reports, enables health authorities to respond quickly to emerging issues like increasing flu rates or hospital bed shortages. This data-driven approach is crucial for anticipating public health needs and improving resource allocation during peak periods.

Vulnerable Populations:

- A key public health focus is protecting the most vulnerable groups, such as the elderly and those with long-term conditions. By improving **community-based services and outreach**, the plan addresses both the direct and indirect health risks that winter poses to these populations.

In summary, the public health implications of the report are centred on a proactive, community-focused strategy to manage increased health service demand during winter. It focuses on prevention, ensuring access to care, supporting the workforce, and leveraging data to improve responsiveness to health challenges.

10 CLIMATE SUSTAINABILITY IMPLICATIONS

The **climate sustainability implications** of the winter planning report are primarily related to the approach in managing healthcare services in a way that is resilient to both the impacts of climate change and environmentally responsible. Here are the key areas with potential climate sustainability impacts:

Impact of Inclement Weather on Healthcare Services:

- The report highlights that **severe weather conditions**, such as heavy snowfalls or storms (like Storm Babet), can disrupt service delivery. This underscores the importance of **climate resilience** in health and social care services. Preparing for more frequent and extreme weather events (which are exacerbated by climate change) is crucial to ensuring uninterrupted care.
- By having **robust business continuity plans** in place, the health and social care system can mitigate the risks posed by climate-induced events. This could include ensuring that transportation and infrastructure are resilient to extreme weather, preventing disruption to patient care and staff mobility.

Energy and Resource Efficiency in Service Delivery:

- The emphasis on **care closer to home** can have sustainability benefits by reducing the need for travel, particularly hospital admissions. This reduces the carbon footprint associated with patient transportation (ambulances, patient transfers) and staff commuting to centralised hospital services. By shifting care to community settings and using telehealth, the health system can reduce its environmental impact.
- Expanding **telehealth** and **digital health services** not only improves access to care but also contributes to lower carbon emissions by reducing the need for physical infrastructure and in-person visits.

Resource Use and Management:

- The plan's focus on **efficient use of resources**, including stockpiling supplies such as oxygen and PPE (Personal Protective Equipment), suggests a heightened awareness of supply chain vulnerabilities, which are impacted by global climate shifts. Sustainable management of these resources, minimising waste, and ensuring the responsible use of materials are important for reducing environmental impacts.
- The Winter Plan also mentions maintaining a **data-sharing framework** between health and social care services. This real-time monitoring can contribute to climate sustainability by optimising resource use, avoiding waste, and ensuring that healthcare interventions are timely and resource efficient.

Resilience to Climate Change:

- The approach taken in the plan demonstrates a focus on **building a resilient healthcare system**. The increasing unpredictability of winter weather due to climate change necessitates a health system that can adapt to these changes. **Predictive analytics** and data monitoring tools could help anticipate climate-related disruptions and enable a quick response to mitigate their impact on public health.
- By preparing for future climate risks, such as floods, extreme cold, and storms, the health and social care system can ensure continuity of care while minimising the resource-intensive emergency responses that may arise from poorly planned systems.

Supporting a Sustainable Workforce:

- The focus on **staff well-being** and **flexible working arrangements** indirectly supports climate sustainability. By enabling remote or flexible working where possible, healthcare workers may reduce travel-related emissions, contributing to the organisation's overall carbon footprint reduction.
- By taking steps to **support unpaid carers** and increase collaboration with the **third sector**, the system may foster more community-led solutions, reducing the dependency on large, centralised care services that have higher energy demands.

Collaboration with the Third Sector:

- The plan emphasises the role of **third sector and voluntary organisations** in delivering non-clinical support, such as patient transport services. These organisations can adopt more sustainable practices, such as using electric vehicles for patient transport or leveraging local resources to reduce the need for extensive transportation.

Long-Term Sustainability of Health Infrastructure:

- Strengthening **home care services** and **rapid response teams** helps reduce the load on hospitals and emergency services. Over time, this decentralisation can contribute to a more sustainable use of healthcare infrastructure, reducing the energy demands of large, resource-intensive hospital facilities.

- **Community-based support services** also reduce the environmental pressure on healthcare infrastructure, as home-based care typically requires fewer resources (such as energy and materials) compared to institutional care.

Promoting Health to Reduce Climate Impact:

- The focus on **prevention and health promotion** indirectly aligns with climate sustainability. By improving health outcomes through proactive disease management, there is less strain on healthcare services, which in turn lowers the environmental footprint of healthcare delivery. **Healthier populations** also typically require fewer interventions, which reduces the overall demand on healthcare resources.

In summary, the climate sustainability implications of the winter planning report focus on building a health and social care system that is resilient to the impacts of climate change, reducing the carbon footprint through local and community-based care, minimising resource waste, and fostering collaboration with external organisations. The report takes into account the need for both a sustainable and responsive health and social care system in the face of climate-related challenges.

11 EQUALITY IMPACT ASSESSMENT, CHILDREN’S RIGHTS AND FAIRER SCOTLAND DUTY

The content within this report is aligned to the winter plan and any specific projects will have an individualised screening assessment and a full Impact Assessment if required.

12 COMMUNICATION AND ENGAGEMENT (IF APPLICABLE)

Senior Clinicians, Service Mangers and Leaders within Angus HSCP have been consulted on the development of the Angus winter plan and are represented on the Angus Winter Planning Group.

To ensure consistency of messaging, AHSCP regularly shares communication and engagement materials published by NHS Tayside in relation to stepping up for the winter pressures to ensure people can access the right care in the right place.

13 DIRECTIONS

Angus Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in Section 26 to 28 of the Public Bodies (Joint Working) (Scotland) Act 2014. This mechanism takes the form of binding directions from Angus Integration Joint Board to one or both of Angus Council and NHS Tayside.

Direction Required to Angus Council, NHS Tayside or Both:	
No Direction Required	X
Angus Council	
NHS Tayside	
Angus Council and NHS Tayside	

REPORT AUTHOR: Lisa Prudom, Service Manager, Primary Care
EMAIL DETAILS: tay.angushscp@nhs.scot