

## Report to Rutland Health and Wellbeing Board

**Report No. 271-2013**

<b>Subject:</b>	<b>Adult Social Care Winter Pressures Funding and Health Urgent Care Panels (UCP)</b>
<b>Meeting Date:</b>	<b>26<sup>th</sup> November 2013</b>
<b>Report Author:</b>	<b>Anna Grainger – Head of Service Adult Social Care Reform</b>
<b>Presented by:</b>	<b>Jill Haigh, Senior Manager for Health, Wellbeing and Commissioning</b>
<b>Paper for:</b>	<b>Health and Wellbeing Board</b>

### **Context, including links to strategic objectives and/or strategic plans:**

#### **1. Background:**

1.1 This paper provides information on:

- The work of the Peterborough and Stamford Hospital Foundation Trust (PSHFT) Urgent Care Panel and the proposal for the expenditure of the RCC winter resilience funding.
- The work of the University Hospitals Leicester Urgent Care Panel
- Hospital discharge information, including delayed discharges.

#### **2. Membership of Urgent Care Panels**

2.1 RCC is a member of PSHFT and UHL Urgent Care Panel. The membership of the UCPs consists of Chief Executives of Health Trusts within the NHS community as well as the senior leads from speciality services.

2.2 The aim of the UCP is to have a collaborative approach to urgent care services to improve outcomes for patients and service users and reduce pressures on existing services. This will be through integrated working to avoid duplication and make the best of use of limited resources.

#### **3. Winter resilience Funding**

3.1 There is a national focus from NHS England on all acute hospital Trusts and their partner agencies in relation to hospital admissions and delayed discharges and money has been allocated nationally for 2013/14 to improve winter resilience. The key focus for the expenditure of this funding is as follows:

- Accident and Emergency (A & E) targets of not waiting any longer than four hours to be seen in A & E – the tolerance on this is that at least 95% of cases must be seen within this time or otherwise NHS England will closely scrutinise why this was not attained.
- There should be no Delayed Transfers of Care (people waiting in an acute hospital bed more than 24 hours after they are medically fit to be transferred).
- There should be no cancellations of elective surgery (due to shortages of beds or other concerns).

**3.2** Both Urgent Care Panels have received Winter Resilience funding and RCC have been involved in the plans for the expenditure of these allocations.

**3.3** Peterborough and Stamford Hospitals Foundation Trust (PSHFT) have received £5 million and have requested that organisations carry out an analysis of delays over the past year and submit proposals for funding to support predicted increases in admissions and delayed discharges. Rutland County Council submitted a funding request for £120K and the proposal for this is attached at appendix A.

**3.4** University Hospitals Leicester (UHL) have received £10 million of Winter resilience funding which is being used to address the same issues as detailed in 3.1 above. We are involved in work to address delayed discharges but have received no direct funding from the UHL UCP.

**Financial implications:**

This funding will provide some short term increase capacity to allow us to review our current arrangements for hospital discharges. The Council wishes to work in partnership in eradicating delays and the proposals for additional funding will assist with this. Of the money earmarked in the appendix only £26,000 for the social care assessor will be managed by Rutland County Council, the rest is earmarked for GEM and RMH to determine how to utilise most effectively and will not be managed by or touch the Council budgets.

**3. Recommendations:**

That this paper and the plan for the Winter resilience at Appendix One is noted.

**Strategic Lead:** Jill Haigh

<b>Time</b>	H	Money is available from 1/12/2013 until 31/3/2014 only
<b>Viability</b>	H	Additional capacity will assist in avoiding any future delays.
<b>Finance</b>	H	This is additional money, it should assist so that there are no delayed transfer fines in the future.
<b>Profile</b>	H	NHS England receive a report weekly on the current state of play regarding breaches and delays from all NHS units.
<b>Equality &amp; Diversity</b>	L	