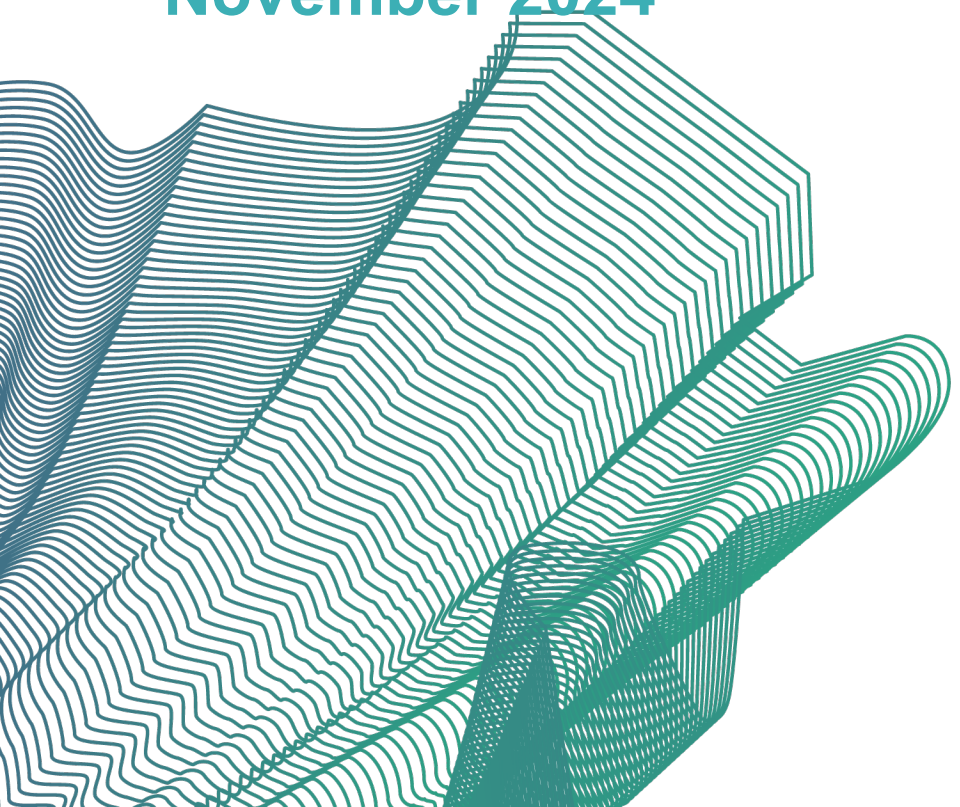


# Health Select Committee Rotherham Winter Plan

November 2024



**South Yorkshire**  
Integrated Care Board

**Rotherham, Doncaster  
and South Humber**  
NHS Foundation Trust

**The Rotherham**  
NHS Foundation Trust

**Rotherham**  
Metropolitan  
Borough Council 



## What worked well last winter

- BCF discharge monies including £500k investment schemes plus organisational investments
- 2407 additional appointments in primary care including ARI hub. 1856 attendees/77%
- Positive working with YAS, including community in-reach and 3 PUSH pathways and on scene referral to the Community Respiratory Exacerbation Service
- Acute front door, extended SDEC hours, flexible shifts to support cover, overnight portering
- B5 converted to nurse led discharge ward
- Community ready unit with dedicated support for TTOs
- Introduction of Therapy Discharge to Assess model with 403 patients supported October – April
- Closer working between IDT and community teams through the Transfer of Care Hub for admission avoidance and discharge
- Virtual ward frailty/respiratory step up & step down pathways for those who would otherwise be in an acute bed. Aligned with urgent community response for greater flexibility of resource
- Additional community resource Home from Hospital 20 hours per day 7 am – 11pm 7 days a week Nov- March. 259 shifts/1810 hours enablement resource released through service improvement. Additional therapy locum/community nurse resource
- Cohorted community beds on spot purchase basis with improved bed management
- 3 VCS pathways with 88% and 72% patient wellbeing ratings for social prescribing and personal health budgets respectively
- Reduced mental health out of area placements (0 at start of the year)

## Challenges

- High incidences of acute respiratory infections, flu peaked in January, alongside D&V (impacting on acute beds and care home closures). Covid not a significant factor last year (end of testing)
- Increased demand for primary care appointments
- Unprecedented growth in attendances at UECC (reflecting national trend)
- Additional escalation beds opened resulted in SDEC/B5 being bedded creating pressure on ED plus increased demand on discharge team & community discharge pathways
- Increased complexity, acuity, end of life & out of area placements
- Workforce challenges across health, social care and independent providers
- Impact of workforce/cost of living pressures in care homes, reducing the options for managing surge
- Placement of mental health patients out of area

### External

- Industrial action impacting on planning time /staffing and recovery lag with over 20 incidences in 2023-4
- Potential impact of GP collective action 2024-5
- Re-introduction of 4 hour standard – significant change to working practice
- Increased admissions to Rotherham hospital from out of area residents

# Summary of Key Plans 2024-5

| Area  | Impact  |
|---|---|
| <b>Investment</b>   |   |
| <p>Better Care Fund money to support Acute Respiratory Infection hub for more primary care appointments, additional support to care for people at home, additional winter beds with therapy support, social care resource to support discharge and extended hours for discharge transport and community ready lounge plus an increase in voluntary service bursaries to support discharge</p> | <p>Targeted additional support to known system pressure points to reduce discharge delays and improve flow through the system</p> |
| <b>Primary Care</b>   |   |
| <p>Enhanced access to primary care<br/>Vaccination programme</p>  | <p>Improve access to treatment, support for vulnerable patients, reduce avoidable attendances at ED</p>                           |
| <b>Alternative pathways to ED</b>   |   |
| <p>Introduce heart failure virtual ward pathway and remote tech</p>   | <p>Supporting more people at home to reduce admissions promote early discharge</p>  |
| <p>Support for care homes through re-launch of falls and deterioration pathway, pilot smart lights for falls detection and trusted assessor roles</p>   | <p>Reduced avoidable conveyances, less risk to residents, reduced demand</p>  |

# Summary of Key Plans 2024-5

| Acute Care  |   |
|---|---|
| Six transformation workstreams including working with Yorkshire Ambulance Service to reduce avoidable conveyances/access to SDEC; ambulatory care, internal pathways; patient flow; workforce and digital. Increased medical cover in ED and use of SDECs. Additional escalation beds. Increased portering at peak times. | Improve patient experience and patient flow enabling those requiring acute care to be seen in a timely way  |
| Discharge   |   |
| Develop and embed Transfer of Care Hub/Discharge to Assess Model. Increase enablement capacity<br>Spot purchase additional community winter bed capacity according to demand<br>Increase patient transport  | More accurate assessment of need as people are assessed in own home, reduced risk to patient through more timely discharge<br>Increase resource in discharge pathways to manage peaks in demand |
| Children's Services   |   |
| Vulnerable children and family oversight & assurance including fortnightly place meetings. Transformation and business continuity plans for all portfolios. Identified resource to be re-allocated to manage peaks  | Improved support for individuals and families. Re-allocation of resource to manage peaks  |
| Mental Health   |   |
| Additional roles to support high intensity needs and housing officer, short stay crisis beds and on-line support for advice and information<br>Re-launch of safe space  | Improve in-patient experience and patient flow. Improved patient experience and reduced length of stay. Support for most vulnerable   |



During winter high numbers of patients attend ED and primary care for general coughs and colds and vulnerable groups are at high risk of admission for flu/covid, placing additional pressure of the system.



It is essential that we provide the opportunity for patients to be vaccinated to:

- A) ensure patients are protected
- B) prevent avoidable hospital admissions and additional demands on the system.



In addition front line health and social care staff are at risk of catching flu and Covid, with the risk of staff shortages due to high sickness rates and the impact on service provision.



The ICB has responsibility for overseeing the vaccination programme and at a place level, we need to be assured that provider organisations have plans in place to deliver flu and covid vaccine programmes for eligible patients and staff.

Why is it important to vaccinate

What is the Rotherham Plan

- All PCNs and Practices signed up to the Covid and Flu programme
- Working closely with ICB comms team to promote vaccinations
- Proposed pop ups:
  - Breathing Space to increase respiratory patient uptake
  - Riverside for RMBC front line health and care staff
- Discussions taking place across the Rotherham system to address other at risk groups

Risks

- Last year we saw a reduction in patient uptake nationally
- Work to do to raise the importance of vaccinations across all cohorts with particular emphasis on:
  - Respiratory patients, SMI, Immunosuppressed & LD
  - Eligible staff across Health and Care

## Winter Vaccination Programme

- **COVID/Flu (Annual Vaccine)**
- You can get both the NHS flu and COVID-19 vaccines if you:
  - are aged 65 or over (including those who will be 65 by 31 March 2025)
  - have certain health conditions
  - are pregnant
  - live in a care home for older adult

### **FLU ONLY (Annual Vaccine)**

- children aged 2 or 3 years
  - school-aged children (Reception to Year 11)
  - children aged 6 months to 17 years with certain long-term health conditions
- **Pneumococcal (One off Vaccine not administered Annually)**
  - if you're aged 65 or over
  - Babies at 12 weeks and a booster at 1 year
- **RSV (Currently a One-off Vaccine not administered Annually but this is being reviewed)**
  - if you're pregnant or aged 75 to 79 – if you turned 80 on or after 1 September 2024, you're also eligible for the vaccine until 31 August 2025
- **Pertussis (One off Vaccine not administered Annually)**
  - administered all year round but GPs have been asked to invite all Pregnant Woman who have not had a vaccine due to recent outbreaks and decline in Uptake Nationally.

## Cost of Living Support

### Warm Welcome Campaign

- RMBC works together with partner organisations across Rotherham to ensure a Warm Welcome for residents across a range of spaces across the borough. Warm Welcome spaces provide an opportunity for people to come together, share and use resources, with many spaces, such as our libraries, putting on additional activity sessions through the winter. A list of warm spaces is available here [Warm Welcome Campaign](#)

### Money Matters

There is a range of local help, and national support available which is accessible by the RMBC website [Money matters – Rotherham Metropolitan Borough Council](#)

### Open Arms – Community Support Hubs

- In February 2023 the delivery of a new community-based support project - Open Arms – began.
- RotherFed, Citizens Advice, Laser Credit Union, and Voluntary Action Rotherham, have partnered to develop and deliver a coordinated response to support communities most affected by the cost-of-living crisis.
- This project will deploy our Community Engagement team and Advisers to deliver Information, Advice and Guidance ‘one stop shops’ across ten areas.
- The support delivered will have a strong focus on financial and social inclusion, empower communities with a foundation of support, and make better use of community assets.
- Each hub has a drop-in session in each location throughout the day every fortnight and will be there for local people when they need it. [Open Arms - Community Support Hubs - Rotherham Federation](#)