OPERATIONAL PLAN

FOR CONTINUED SERVICE PROVISION DURING SEVERE WEATHER

WINTER 2018/19

June 2018
1. INTRODUCTION

In response to the System Wide Operational Readiness Plan for Winter 2018/19, the following document outlines Bradford District Care Foundation Trust’s actions in response to the increasing anticipated demand that severe weather brings. Often there is an increased demand on community nursing services, connected to a significant increase in attendances at Accident and Emergency (A&E), non-elective admissions and length of stay in acute hospital settings.

A whole system response is required to mitigate these pressures and this Plan should be read in conjunction with the wider Bradford and Airedale Plan, as authored by the CCGs and agreed by the Local A&E Delivery Board.

2. CURRENT OPERATIONAL READINESS

The day to day operational delivery of services will be managed in line with the current operational policies and staff will be deployed in relation to demand for services. BDCFT provide services to support patients within their own home and where possible avoid unnecessary admissions. The Trust will respond to escalations within neighbouring emergency departments, both within and out of regular working hours. On a daily basis, the senior management team assess capacity and demand on community and mental health services and deploy staff and resources accordingly. The Trust will respond to escalations in emergency demand both in and out of hours, this may include the establishment of a Silver Command function, in accordance with the Operational Pressures Escalation Levels (OPEL) Framework, as introduced by NHS England in 2016.

The Trust provide a range of services that support the wider health and social care system and consequently contribute to operational pressures resulting from adverse weather conditions.

- Community Nursing delivered 24 hours a day 7 days a week to support and sustain patients within their own homes
- First Response Service (FRS) provides an all hours access and response service for anybody (all ages) experiencing mental health issues and requiring support
- Accident and Emergency Liaison is provided between the hours of 9am-3am (Bradford) and 9am – 2am(Airedale) within the hospital trusts and supported by FRS out of these hours
- Intensive Home Treatment Team (IHTT) services, providing home care for people with acute mental health issues 24 hours a day, 7 days a week
• Partnership services in conjunction with The Cellar Trust, Creative Support and MIND, providing an alternative service to A&E for people (all ages) in mental health crisis (safer spaces)
• During working hours a mental health care home liaison service is provided for older people to support the management of clients within nursing homes and thus avoid hospital admission
• Adult Community Mental Health services (9-5 Mon-Fri) FRS support access out of hours
• Child and Adolescent Mental Health Services (9-5 daily) also providing in reach to hospitals. Out of hours support is provided by FRS
• Older Peoples Community Mental Health Service (9-5 Mon-Fri) FRS support access out of hours
• Complex Care Team supporting patients within the communities with GP primary care to manage patients with escalating health needs and reduce the need for hospital admission
• Community involvement in the integrated discharge hub (Bradford Teaching Hospitals Foundation Trust) – work is currently ongoing with Airedale NHS Trust
• Current engagement work with the hospital trusts and local authority to reduce routine attendance at A&E departments through CQUIN plans (mental health)

3. PLANNED OPERATIONAL READINESS

The aim is to maintain continuity of service provision wherever possible. However, as an incident escalates and impact and pressure rises, escalation by phase will result in cessation of some non-critical functions and services.

To support vulnerable staff and service users, audit tools have been developed to assist in the modelling, protecting and managing the delivery of services. Contact will be maintained with vulnerable community service users through a central community services team.

During increased demand on acute services, the community nursing team (all hours) will support care homes with a particular focus in supporting clients with sustained dehydration (in partnership with social care services). In-reach is also provided into acute services following liaison with both Bradford and Airedale acute hospitals.

During periods of high demand within Accident and Emergency departments, the A&E liaison service would be supported by existing IHTT services to ensure capacity meets demand for mental health services in acute settings. Staff from IHTT services will be re-deployed out of hours to ensure A&E liaison service provision and FRS will provide increased support within working hours.
Current engagement with senior managers within hospital trusts’ A&E departments allow for resolution of issues and planning services and pathways. In periods of high demand and service pressure, engagement and communication between the Trusts will be increased to ensure continuity of service provision within mental health and community services.

### 3.1 Additional Bed Capacity

A robust bed management protocol is in place to manage demand on inpatient psychiatric units. High demand on such inpatient wards is managed by utilising the intensive home treatment services and the safer spaces partnership to ensure bed availability.

The Trust will work in partnership to ensure focus on maintaining effective patient Close liaison will be maintained with Social Care and acute providers over the severe weather period.

### 4. SUPPORTING PLANS AND ARRANGEMENTS

This plan complements existing emergency planning and business continuity arrangements, as outlined in the BDCFT Significant & Major Incident Plan, Trust-Wide Business Continuity Plan and Severe Weather Plan.

#### 4.1 Command, Control and Co-ordination

**BDCFT.** Standard command, control and co-ordination arrangements as detailed in the Significant & Major Incident Plan would be established for adverse weather incidents.

**Multi-Agency.** Standard multi-agency command, control and co-ordination arrangements as detailed in the Significant & Major Incident Plan would be established for adverse weather incidents.

**Internal Situation Report (Sitrep) recording system**

The electronic Sitrep template held on Connect (the Trust intranet site) will be used internally to collate data from services for incidents.

During Moderate Pressure (OPEL 2), Sitrep data may be required from some services or even Trust-wide, dependant on the specific incident.

At Severe Pressure (OPEL 3) and above, a partial or full Sitrep may be required and some departments will report daily as directed. Additional reporting will be decided by the Incident Control Team (ICT) as necessary, or in response to national requirements.
**External Reporting framework**

BDCFT will provide external Sitreps as required. Sitreps will be co-ordinated by the ICT and Emergency Planning & Resilience Officer.

**Workforce Impact**

There may be serious rate of staff absence at the peak of certain types of scenarios, and unless specific/extreme circumstances prevail then current HR policies must be adhered to. Staff numbers will be monitored through the Electronic Staff Register and E-rostering internal reporting system.

Effects on staff, services or decisions arising as a result of staff shortages will be considered by senior management and, in collaboration with services, will identify action required.

**5. KEY DUTIES AND RESPONSIBILITIES**

To enable the BDCFT and CCG severe weather plan 2018/19 to work effectively, staff must be clear about their specific roles and responsibilities, these are outlined below:

**Chief Executive**

The role of the Chief Executive is to ensure that there are robust planning arrangements in place, that there is delegated responsibility to a Director for the delivery and monitoring of the plan and to ensure adequate resources are made available to implement it.

**Director of Operations & Nursing (Accountable Emergency Officer)**

The Director of Operations & Nursing has delegated authority from the Chief Executive for the development, implementation and monitoring of the effectiveness of the response. The Accountable Emergency Officer will escalate any issues to the Executive Team to ensure that the quality of care and patient safety is maintained during times of increased patient activity and acuity throughout the severe weather incident.

**Deputy Directors**

The Deputy Directors will support the operational delivery of the Plan within their respective Business Units and liaise with acute care providers and the local authority.

**On-call Manager**

The on-call Manager will oversee and manage out of hours issues and escalation procedures as required. The on-call Manager will escalate to the on-call Director as
appropriate (this level of contact will continue during weekends and over bank holidays).

**On-call Director**
The on-call Director will support the on-call Manager as required and be responsible for dealing with external communications e.g. press, other providers, Clinical Commissioning Groups, NHS England or other independent providers.

6. **CONSULTATION AND APPROVAL**

This plan has been reviewed by the Resilience Group and is part of the overall delivery of the Trust’s operational services. The Plan will approved by the Chief Executive and Executive Directors and will be submitted as part of the Bradford and Airedale local A&E Delivery Board as a composite element of wider system assurance.

7. **SUPPORTING DOCUMENTS**

The following are available to support winter planning and delivery of services
- Severe Weather Plan
- Trust Wide BCP
- Significant & Major Incident Plan