

Lewisham Urgent and Emergency Care Board

Winter Plan 2024/25

October 2024, Version FINAL

Approved: 4/11/24 BGL UEC Board

Version Control

Version	Date	Author	Title	Key changes
1.0	21/08/24	Jack Upton	System Development Manager	<p>First draft – input provided by system partners for the following:</p> <ul style="list-style-type: none"> Ashley O’Shaughnessy (ICB, Primary Care) Amanda Lloyd (ICB/LBL, Same Day Urgent Care) Rebecca Mills; Rebekah Sales; & Sue Robinson (LGT/LBL, Community-Based and Acute Care) Simon Whitlock (LBL, Children and Young People’s Services) Corinne Moocarme (ICB/LBL, Care Homes) Trevor Long (LGT, Urgent Community Response service) Mervlyn Clarke (ICB, Vaccinations) Mary Farinha (LBL, Local Authority Plans) Helen Eldridge (ICB, Comms and Engagement)
1.1	27/08/24	Amanda Lloyd	AD UEC	Section added on Same Day Urgent Care and other comments
1.2	18/09/24	Jack Upton	System Development Manager, SEL ICB	<p>Additional input sought from partners for the following:</p> <ul style="list-style-type: none"> Jen Cassettari & Andrew Cook (LGT, Community-Based and Acute Care) Matea Deliu & Ross Wickens (LGT, NHS@Home) Aslam Baig (LBL, Local Authority Plans) Gemma King (LBL, Warm Hubs) ICB Organisational Development team (Staff Wellbeing initiatives) ICB EPRR team (Emergency Planning Governance)
1.3	10/10/24	Amanda Lloyd	AD UEC	comments from Ceri Jacob PEL, Tom Brown DASS, Denise Radley interim DASS, Catherine Mbema Dir PH.
2.0	22/10/24	Amanda Lloyd	AD UEC	Final version for distribution

Distribution

Version	Date	Sent to	Organisation
1.0	21/08/24	Input requested from colleagues outlined above. Sections of 23/24 plans shared for context. Document shared with Amanda Lloyd for approval and comment.	Representatives from ICB teams and system partners (Slam, LGT, LBL) asked for comment – full document not shared.
1.1	27/08/24	Same Day Urgent Care section added by Amanda Lloyd, along with additional comments. Shared back with Jack Upton.	ICB internal use only.
1.2	18/09/24	Additional input and clarification sought from colleagues outlined above, and changes made based on Amand Lloyd feedback. Document shared with Amanda Lloyd for approval and comment.	Representatives from ICB teams and system partners (Slam, LGT, LBL) asked for comment – full document not shared.
2.0	22/10/24	Final for distribution	

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1. Lewisham Overview

The 2024/25 Lewisham Winter Plan sets out the arrangements that are to be put in place to safeguard the quality of health and care services for Lewisham residents during the winter, including the Christmas and New Year holiday period.

The work is overseen by the Bexley, Greenwich and Lewisham Urgent and Emergency Care Board to ensure that all parties across the system are sighted on pressures and are able to support each other appropriately to ensure the safety, health and wellbeing of the local population.

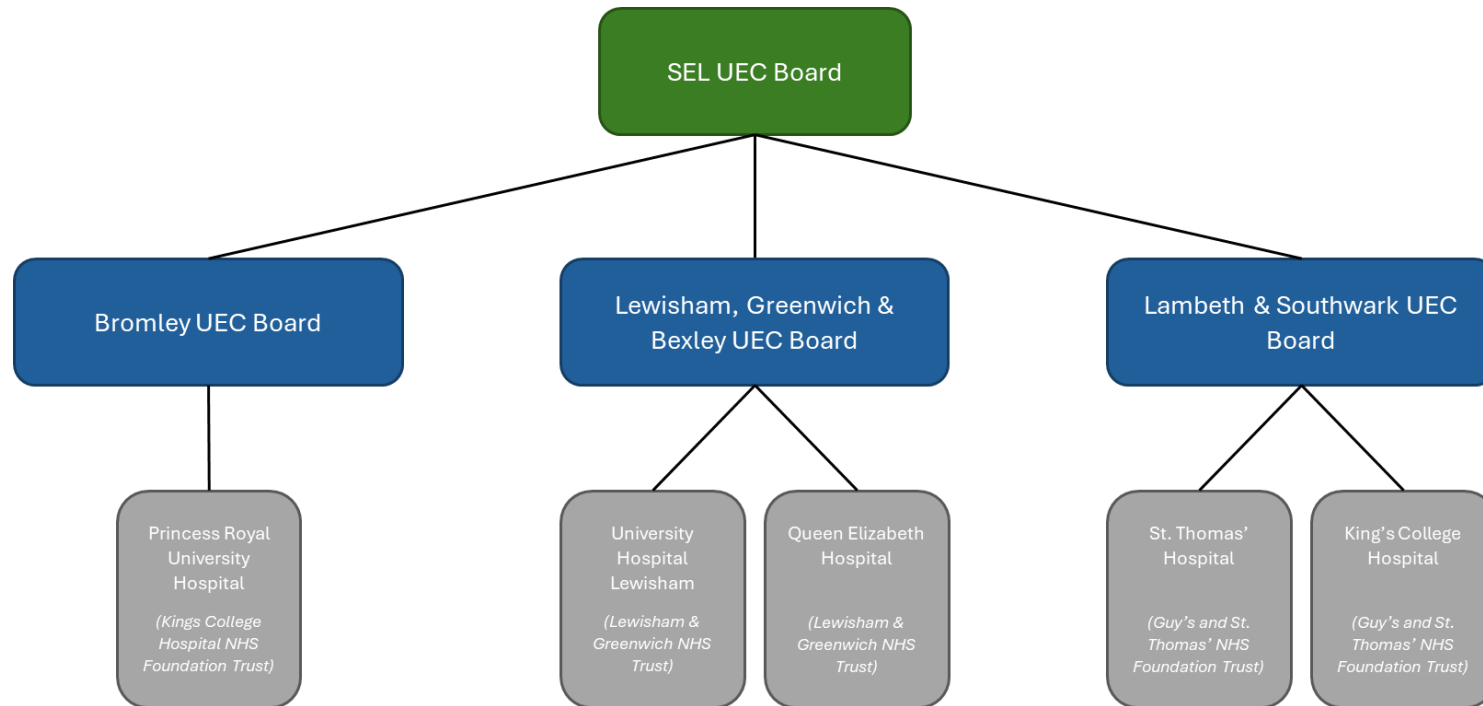
The 2024/25 Lewisham Winter Plan has been developed in partnership representation from all health and care delivery areas as set out in Graphic 1.

Graphic 1. Lewisham health and care system



Further support to local systems is provided through mutual aid arrangements with neighbouring providers and across South-East London, across Mental Health, Community Health services and Acute provision. Such mutual aid arrangements were key to supporting health and care delivery during the pandemic and continue to be part of wider surge and winter planning.

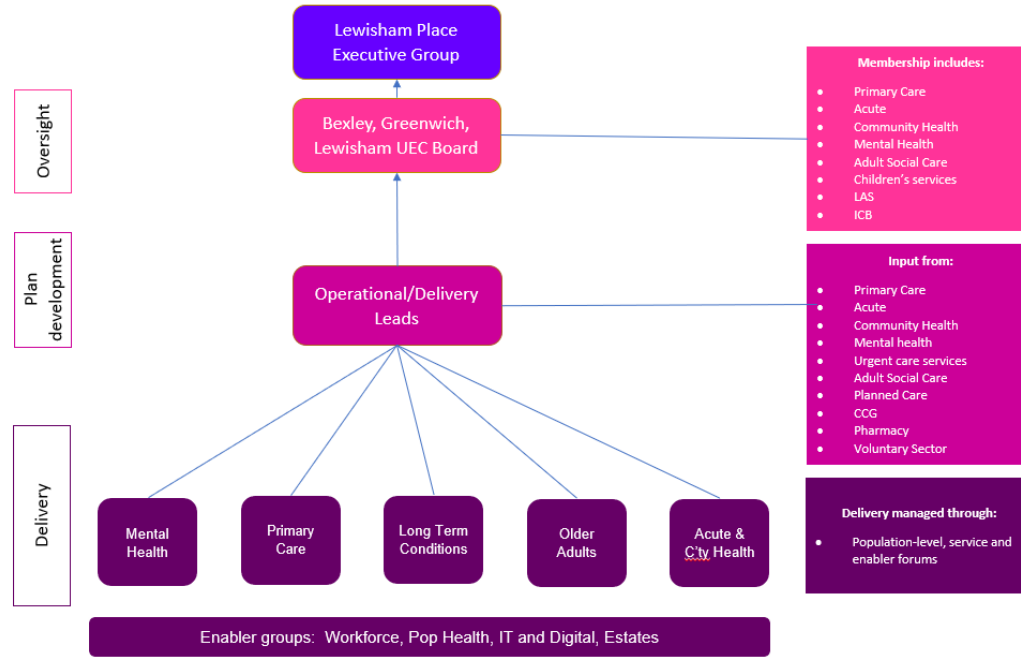
Graphic 2. SEL Acute system structure



2. Governance structure – Lewisham

The development of Winter Plans is overseen by the Bexley, Greenwich and Lewisham Urgent and Emergency Care Board. Delivery of the Winter Plan and wider service delivery is managed through operational and strategic boards as set out in the graphic below.

Graphic 3: Lewisham Winter Plans governance



3. Key pillars of Winter Plan

3.1 2023/24 Winter Wash-up

The 23/24 winter wash-up workshop took place in March 2024, where system stakeholders set out what had worked well and what the challenges had been during winter 2022/23. Stakeholders discussed the areas with highest need for investment, to inform system prioritisation of Winter Pressures Funds and help shape the focus of system partner organisations as we approach Winter 24/25.

3.2 Themes for winter management

No particular area/s of focus were agreed formally; therefore, this Plan has as its basis the key aims of coping with increased demand and improving resilience in the winter months. In line with these aims, colleagues from within the ICB and across our system partners were asked to provide an outline of their winter plans, to gather a view of the planning taking place across the system.

4. Activity

The following tables set out the key areas of activity, work currently in hand, and further activity being planned. Sections in italics indicate where additional provision is still under discussion and is subject to funding allocations being identified.

4.1 Primary Care

Scheme ID	NAME OF WORKSTREAM	PRE-WINTER IN PLACE	WINTER ACTIVITY
4.1.1	PCN Enhanced Access	On top of Mon-Fri regular access, all PCNs must offer extra appointments on weekday evenings and Saturday daytime.	These measures are BAU but can be optimised to focus on specific populations/illnesses in order to support the most vulnerable and tackle any pressure points in the system during winter.
4.1.2	Monthly MDT Meetings	Targeted multiagency management of patients with complex needs; focussing on proactive care and avoiding unnecessary admissions.	As above.
4.1.3	Pharmacy First	Patients can be treated for 7 common conditions at pharmacy, freeing up primary care capacity. Practices and pharmacies advertise this to their patients.	Continue to embed initiatives like Pharmacy First and Enhanced Access within practices; targeted comms to promote the use of appropriate services to residents of Lewisham.
4.1.4	Promoting Digital Offer	Practices continue to promote use of NHS app and online GP referrals, rather than calling or walking in. Practices encouraged to use cloud-based telephony to increase call capacity.	These measures are BAU but can be optimised to focus on specific populations/illnesses in order to support the most vulnerable and tackle any pressure points in the system during winter.
4.1.5	Home Visiting service	Federation commissioned by PCNs to provide acute and long-term condition management appointments for housebound patients.	As above.

4.2 Community-Based Care

	NAME OF WORKSTREAM	PRE-WINTER IN PLACE	WINTER ACTIVITY
4.2.1	NHS@Home (Virtual Ward)	BAU work continues, helping with admission avoidance and acute discharges by managing patients in their homes. Holistic review of care home patients currently underway, to proactively identify and limit any deterioration.	<p>Virtual Ward will proactively seek out patients if numbers are lower than capacity and begin work with SDEC to screen for appropriate patients before hospital admission.</p> <p>Targeted piece of work supporting patients with heart failure will take place over winter following a successful bid for funding. A similar piece of work proactively identifying and supporting patients with COPD may also take place, subject to the outcome of a recent funding bid.</p>
4.2.2	Urgent Community Response (UCR) Winter Plan	<p>UCR team have a winter plan to optimise capacity and manage increased demand.</p> <p>This is supported by the recent recruitment of 1x Manager, 1x Administrator, 1x Advanced Clinical Practitioner (ACP) and the planned recruitment of a further 2 ACPs.</p> <p>Effectiveness of this plan to be monitored through regular UCR team meetings; establishing regular feedback loops with all other care providers (GP, hospital, social workers etc...); monitoring of KPIs; and regular reviews.</p>	<p>Care Home Engagement – Proactive outreach to care homes, offering rapid response for urgent incidents. Increase staff awareness of UCR to ensure timely intervention and prevent admissions. Training for care home staff on fall prevention and early identification of deterioration.</p> <p>Community Services Collaboration – Work with virtual ward team to monitor higher-risk patients remotely, reducing the need for UCR F2F visits. Coordinate with community nursing and therapy teams to ensure seamless care transitions and to provide care at home.</p> <p>Early Discharge Support – Work with UHL ED to identify patients who could be discharged – or not admitted at all – and treated at home with UCR support. Direct communication with ED to facilitate rapid referrals and interventions, reducing burden on emergency services.</p> <p>Strengthening Links with Primary Care – GP outreach to reinforce UCR inclusion and exclusion criteria. Refresher sessions with practice managers and staff about how and when to refer patients to UCR.</p> <p>Review of Follow-Up Visits – Review current follow-up visits to assess necessity and effectiveness. Consider reducing frequency or duration</p>

			where safe appropriate. This increases UCR team’s capacity to take new referrals.
4.2.3	Wider LGT Community Services	No specific additional workstreams – BAU work continues, supporting patients in the community through a variety of services.	

4.3 Local Authority (Public Health, Adult and Children’s Social Care)

	NAME OF WORKSTREAM	PRE-WINTER IN PLACE	WINTER ACTIVITY
	Currently no specific workstreams in place in adult social care services, outside of BAU measures, to manage winter pressures.		
4.3.1	Cost of living support	<p>Several food banks continue to operate across Lewisham – details can be found on Council website.</p> <p>Other pre-existing general wellbeing support programmes continue to operate, including:</p> <ul style="list-style-type: none"> • Local advice drop-ins • Support with money worries • SELCE support with household bills • Warm Homes support • Employment support • Support for families 	<p>Existing services will continue to operate throughout the coming winter. No indication of any additional services supplemented by additional funding.</p> <p>With the end of the Household Support Fund, the LBL cost-of-living delivery programme is also ending.</p>
4.3.2	Warm Hubs programme	Warm Hubs ran successfully throughout Lewisham in 23/24, supplemented by MH Alliance Winter Pressures funding.	Despite a lack of recurrent funding (see above), there would likely be an appetite from VCSE partners to renew this programme in 24/25 if additional funding was available.
4.3.3	Housing Protocol	Work to complete a protocol between Health, Social Care and Housing to improve process and timeliness of support for service users with housing issues.	Protocol expected to be in place and to reduce delays in discharge for reasons related to housing issues.

4.4 Children and Young Peoples' Services

	NAME OF WORKSTREAM	PRE-WINTER IN PLACE	WINTER ACTIVITY
	Currently no specific workstreams in place in CYP services, outside of BAU measures, to manage winter pressures. If funding were available:		
4.4.1	Social Worker Support in ED	Pilot scheme placing social workers and youth workers in ED to support those in crisis. Also relieves pressure on ED staff.	Subject to additional funding.
4.4.2	CYP Mental Health Crisis Personal Health Budgets	PHBs for children and young people in crisis, with mental health/wellbeing needs which could be more effectively addressed by purchasing small items/activities to support the patient holistically.	Subject to additional funding.

4.5 Mental Health

	NAME OF WORKSTREAM	PRE-WINTER IN PLACE	WINTER ACTIVITY
	Currently no specific workstreams or initiatives in place in MH services, outside of BAU measures to manage winter pressures such as regular flow meetings, discharge planning, housing officer support for acute discharge etc...		

4.6 Care Homes

	NAME OF WORKSTREAM	PRE-WINTER IN PLACE	WINTER ACTIVITY
4.6.1	IPC nurse	IPC nurse is in post, covering care homes in Lewisham and one other borough. Role offers advice and guidance during winter months and has previously helped prevent avoidable bed closures.	
4.6.2	Care Home Liaison Officer	In post from 16 th September 2024. Acts as a go-between for carers/families/hospital staff, and care homes. Helps facilitate safe, efficient discharge and build relationships between LGT and care homes.	Focus on improving discharges to care homes, reducing waits for placements.

4.6.3	Trusted Assessor forms	TA documentation recently redesigned to improve accuracy of information shared from hospital to care homes. Initial feedback is positive, with forms helping care home staff make informed decisions about the patients they are accepting – minimising the risk of discharging patients to a care home not suited to their needs and allowing discharge to happen clearly and quickly.	
4.6.4	Care Homes Primary Care contract	Contract recently awarded for Care Home-focussed primary care to One Health Lewisham. Helps to coordinate care between system partners and ensures uniformity for care home residents. Progress will continue to be monitored as more care homes in Lewisham are brought under this contract.	
4.7.5	Access to London Care Record, Universal Care Plan and shared care records	Ability for hospital and care home staff to read and share care plans helps to support safe and timely discharges back to care homes from an acute setting.	

4.7 Vaccinations

	NAME OF WORKSTREAM	PRE-WINTER IN PLACE	WINTER ACTIVITY
4.7.1	Flu Plan		Flu Plan in place to coordinate this workstream and increase uptake across all providers and all eligible cohorts inc. acute settings; housebound; primary care; community pharmacy; care homes; and health inclusion groups such as homeless residents. COVID vaccination will follow a similar plan as Flu, for eligible cohorts.
4.7.2	RSV Programme		New vaccination offered to over 75s from this winter. This will also follow a similar plan as Flu, for eligible cohorts.

4.7.3	Tailored hot spotting (with Pop. Health support)		Using population health dashboards, identify areas of Lewisham with lower-than-average uptake and work with both pharmacy, outreach and GP practice providers to increase uptake.
4.7.4	Staff Immunisations		Healthcare workers no longer recommended as a COVID vaccination cohort. Flu vaccines should be offered to healthcare workers by the provider organisations they work for. Laurence House: Flu organised by LBL for Council and ICB staff.

4.8 Same Day Urgent Care

	NAME OF WORKSTREAM	PRE-WINTER IN PLACE	WINTER ACTIVITY
4.8.1	GP Out of Hours (SELDOC)	BAU service	Under discussion to provide additional support for unregistered patients to register with a GP practice, reducing reliance on UTC/ED.
4.8.2	Urgent Community Response		See section 4.2 above

4.9 Acute Hospital (including SDEC, ED; & Hospital Discharge)

	NAME OF WORKSTREAM	PRE-WINTER IN PLACE	WINTER ACTIVITY
4.9.1	HIU service	Proactive case management of 100 highest ED attendees; aims to reduce attendance and support patients out of a hospital setting.	This service is BAU but can be optimised to focus on specific populations/illnesses in order to support the most vulnerable and tackle any pressure points in the system during winter.
4.9.2	SDEC Expansion	Expanding pathways to get more people in. More nurses; working on getting more ACPs. Have been delivering 12 hours, 7 days per week SDEC service unfunded since September 2024.	Winter funds used to resource expanded SDEC hours. Piloting Trusted Assessor Model, with ambulances bringing some patients to SDEC directly where clinically appropriate.
4.9.3	Flexible AAU Model	Will continue to attempt overnight AAU closure, to help decongest ED by decanting into AAU in the morning. Can be kept open overnight if necessary.	

4.9.4	Redirect at ED front door		<p>Redirection nurse role being funded through Trust and ICB winter / discharge funds, to redirect patients at the front door to appropriate services in the community (primary care, pharmacy, community services etc...)</p> <p>Working with Primary Care to scope out specific appointments for these patients and redirecting into local pharmacies and other services where appropriate.</p>
4.9.5	Criteria-led discharge (AMU; Cherry; Mulberry)	Criteria-led discharge (AMU; Cherry; Mulberry) which means junior doctors and nurses can discharge early in the morning.	
4.9.6	Proactive Aging Well Service (PAWS)	Programme of work with existing community and acute services to increase and promote admission avoidance in community.	
4.9.7	Discharge Lounge		Expanding discharge lounge hours later into evenings, allowing more people to be assessed and discharged later into each day.
4.9.8	Increased Staffing		<ul style="list-style-type: none"> • Additional JD and senior consultant cover available. • Paediatric GP cover in place for ED. • Increased weekend workforce (inc. therapies, senior nurses, & medics). • Recruiting discharge admin roles alongside staff in enabling areas inc. porters; therapies; flow matron; discharge lounge
4.9.9	Care Home Liaison Officer	Starts 16 th September. Help with Pathway 3 discharges. Joint post, funded by ICB. More detail in 'Care Homes' section above.	Liaison Nurse working proactively with care homes to reduce delays for pathway 3 discharges
4.9.10	New Bed Management System		New electronic system for managing beds is being rolled out.
4.9.11	Home First	Therapies & enablement capacity and demand plans and review of service to improve delivery pathways and better match capacity with demand. Improved management of flow through step down beds, ensuring better access for hospital discharges.	<ul style="list-style-type: none"> • Under discussions to pilot inreach to Wards to reduce LOS and drive reduction in patient care needs pre-discharge • Change plan in place with focus on therapies/enablement capacity • Long Length of Stay SW in place providing early discharge planning for complex patients

- Additional 3 step-down beds (bringing total to 9, plus 3 x extra-care flats), to be secured, subject to demand.

5. Comms, Emergency Planning & Escalation Points

	ACTIVITY / AUDIENCE	WINTER ACTIVITY
5.0	General Public	<ul style="list-style-type: none"> • Three core campaigns for comms team in Q3 and Q4: <ol style="list-style-type: none"> Winter Health (self-care; keeping warm; government/LA support offers) Vaccinations (COVID; FLU; RSV; Pertussis; childhood imms) Choosing the right NHS services (pharmacy; 111; ED; UTC; NHS App etc...) • Three levels of comms packages will be offered by central ICB team, and it will then be up to Lewisham HCP to choose based on what meets borough needs and what budget is available.
5.1	Staff teams	<ul style="list-style-type: none"> • Winter workshops to provide space for information, Q&As on key services which support winter pressures • Targeted comms on specific services (e.g. lunch and learn sessions) to increase referrals into key services which help mitigate winter pressures • ICB Organisational Development team will promote various employee health and wellbeing support offers throughout winter via the intranet, SEL Together newsletter, online all-staff briefings, and staff Teams channels. Examples of wellbeing support available this year include Keeping Warm and Managing Finances advice from the Employee Assistance Programme; staff access to wellbeing support via Vivup; information on where to get a flu vaccine; and a daily Advent Calendar leading up to Christmas where a different health, wellbeing, or creative activity is suggested for staff to complete each day.
5.2	GPs, Care Homes, Domiciliary Care agencies (aka Maximising Wellbeing at Home teams)	<p>Annual update of information pack targeted at 3 key groups:</p> <ul style="list-style-type: none"> • GP & practice staff • Care Homes • Domiciliary Care agencies (aka Maximising Wellbeing at Home)
5.3	Escalation protocol	<p>Escalation protocol and contacts in process of being agreed across SEL patch, covering health and social care key service areas. Senior staff on call for Xmas and Bank Hols.</p> <p>SEL ICB EPRR team have been invited to SEL-wide winter planning workshop to ensure they are involved with strategic conversations regarding winter plans and potential escalation points.</p>
5.4	Christmas and New Year cover	Detailed plans worked up by each organisation in November.

5.5	Severe weather impact	<p>Severe weather can impact on travel and transport reducing people's ability to access healthcare and to get to pharmacies to collect medication and on staff ability to deliver services. Lewisham is part of the London Resilience Group, which plans for severe weather impacts on London.</p> <p>A local winter preparedness service plan is produced by the highways team within Lewisham Borough Council with the support of local Public Health teams, this includes identification of high priority roads for gritting to enable access to hospital and shopping areas: Lewisham Council - Gritting in icy weather</p> <p>Primary Care and community service providers will receive email updates from EPRR team regarding adverse weather.</p>
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6. Risks Identified

- Lack of funding to provide additional resources/initiatives to tackle increased demand
- Securing the workforce
- GP Work-to-Rule – unclear what effect this will have on GP access, and the rest of the system as a result (e.g. UTC, 111)
- PCN Vaccinations – Only 3 have signed up to deliver COVID & Flu to patients so far (inc. housebound). Community Pharmacy may need to cover the shortfall
- UHL Front Door Redevelopment – work is happening throughout winter 24/25 to reconfigure existing space into a co-located adult & paediatric UTC). Will need to decant the UTC whilst this is happening, which may create additional pressure on ED. Liaising with CCPLs to help mitigate any risks.