

Integrated Care Board

Date of meeting	13 March 2024
Title of paper	Urgent and Emergency Care Recovery and Winter Update 2023/24
Presented by	Professor Craig Harris, Chief Operating Officer
Author	Jayne Mellor, Director of Urgent, Emergency and Planned Care
Agenda item	13
Confidential	No

Executive summary

This paper provides an overview of and update on the various programmes of work that are underway to support Urgent and Emergency Care recovery, performance and winter pressures in Lancashire and South Cumbria.

Recommendations

The Integrated Care Board is requested to:

1. Note the content of the report.
2. Note the report as assurance that oversight of progress and all associated requirements will be via place-based Urgent & Emergency Care Delivery Boards and the Lancashire and South Cumbria Urgent and Emergency Care Collaborative Improvement Board.
3. Receive further reports at Integrated Care Board meetings.

Which Strategic Objective/s does the report relate to:		Tick
SO1	Improve quality, including safety, clinical outcomes, and patient experience	✓
SO2	To equalise opportunities and clinical outcomes across the area	✓
SO3	Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees	✓
SO4	Meet financial targets and deliver improved productivity	✓
SO5	Meet national and locally determined performance standards and targets	✓
SO6	To develop and implement ambitious, deliverable strategies	

Implications

	Yes	No	N/A	Comments
Associated risks	✓			As set out in section 5.
Are associated risks detailed on the Integrated Care Board Risk Register?		✓		In discussion.

Financial Implications	✓			As set out in the paper.
Where paper has been discussed (list other committees/forums that have discussed this paper)				
Meeting	Date		Outcomes	
Executive Team	5 March 2024		Approved	
Conflicts of interest associated with this report				
Not applicable.				
Impact assessments				
	Yes	No	N/A	Comments
Quality impact assessment completed			✓	
Equality impact assessment completed			✓	
Data privacy impact assessment completed			✓	
Report authorised by:	Professor Craig Harris, Chief Operating Officer			

Integrated Care Board – 13 March 2024

Urgent and Emergency Care recovery and winter update 2023/2024

1 Introduction

1.1 The purpose of the paper is to provide an update to the Board on the status and/or progress of:

- Urgent and Emergency Care recovery plan delivery and assurance, including the NHS England priority areas of focus to be achieved by March 2024
- Urgent and Emergency Care capacity investment funding
- Winter preparedness and actions agreed by system leaders following the Lancashire and South Cumbria winter workshops
- The implementation status of the ten high impact interventions to support Urgent and Emergency Care recovery.

2 Urgent and Emergency Care recovery plan and national ambitions

2.1 The current performance for the two key national ambitions is outlined in the table below.

Table 1: Key national ambitions - performance from 1 April 2023 to 31 January 2024

Key ambitions		Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24
76% of patients being admitted, transferred, or discharged from Emergency Departments within four hours by March 2024	Lancashire and South Cumbria	76.8%	77.6%	76.8%	77.5%	76.8%	75.9%	74.9%	74.6%	74.8%	74.6%
	North West	72.7%	73.1%	73.7%	73.0%	72.3%	70.6%	69.0%	68.3%	67.7%	67.4%
	England	74.6%	74.0%	73.3%	74.0%	73.0%	71.6%	70.3%	69.7%	69.4%	70.3%
Ambulance response times for Category 2 incidents 30 minutes on average over 2023/24	North West Ambulance Service	20m:36s	22m:02s	26m:30s	25m:22s	27m:19s	29m:07s	32m:12s	32m:04s	38m:33s	36m:06s
	England	28m:35s	32m:24s	36m:49s	31m:50s	31m:30s	37m:38s	41m:40s	38m:30s	45m:57s	40m:06s

2.2 For the fifth consecutive month, Lancashire and South Cumbria’s four-hour performance is below the target of 76%, but we are aiming to achieve it during March. The target for category two ambulance response time was not achieved for the fourth consecutive month, but this metric is reported at a regional level and the performance in Lancashire and South Cumbria is usually better.

3 NHS England letter – achieving the national ambitions and the priority areas of focus by March 2024

- 3.1 On 25 January 2024, the Integrated Care Board received a letter from NHS England thanking teams and its partners for their outstanding leadership throughout the winter period. It highlighted that nationally four-hour performance has been better in every month this year compared to the same month last year, and category two ambulance response times in December significantly improved in comparison to the previous December.
- 3.2 Whilst significant progress is recognised, the letter outlines the expectations to deliver 76% performance against the four-hour standard by March 2024, and improve category two ambulance response times to an average of 30 minutes over 2023/24, as set out in the Urgent and Emergency Care recovery plan and the operational planning reset which took place in November 2023.
- 3.3 In addition to continuing to deliver the programme of transformative improvement as set out in the Urgent and Emergency Care recovery plan, the letter highlights an immediate action and focus on ensuring that every Emergency Department is operating as effectively as possible to achieve the expected performance levels this year. Trusts have been asked to review their own internal systems and ensure that they have the following five key initiatives in place:
- Streaming and redirection
 - Rapid assessment and treatment
 - Maximising the use of Urgent Treatment Centres
 - Improving ambulance handovers
 - Reducing time in department.
- 3.4 The letter also outlines the key areas in which the national team will place a particular focus on in terms of oversight and support offers to improve performance, which includes:
- Access and instructions to optimise Getting It Right First Time urgent and emergency care data, supporting identification of opportunities at system level related to the five initiatives set out at 3.3
 - A series of online integrated urgent and emergency care masterclasses during February 2024 linked to the five key initiatives
 - Virtual drop-in sessions to provide access to subject matter experts.
 - Improvement support pack with various resources to support rapid delivery of the five priority initiatives.
- 3.5 The letter from NHS England has been shared with the Trust Chief Operating Officers and co-chairs of the four Urgent and Emergency Care Delivery Boards, requesting their support to oversee the required actions at place.
- 3.6 Urgent and emergency care team representatives from the Integrated Care Board, and relevant colleagues from partner organisations, attended the online masterclasses.

4. NHS England regional support offer and weekly oversight of performance trajectories

- 4.1 The Integrated Care Board was requested by NHS England to work with acute trusts to produce revised projected trajectories by provider for the period 12 February to 31 March 2024, using actual performance for week commencing 29 January 2024 as the baseline, and to identify three top priority initiatives that will be delivered to achieve the 76% four-hour standard over the seven weeks' period.
- 4.2 NHS England confirmed the expectation for integrated care boards to deliver 76% four-hour standard throughout March 2024. The Integrated Care Board worked with acute trusts to complete this exercise, and tables 2 and 3 below outline the revised trajectories and initiatives at a system level that were submitted to NHS England North West in February 2024.

Table 2: Lancashire and South Cumbria four-hour standard – revised weekly projected/planned performance from 12 February to 31 March 2024

Description	Trajectories						
	12/02/2024	19/02/2024	26/02/2024	04/03/2024	11/03/2024	18/03/2024	25/03/2024
Week commencing							
Projected performance	74.8%	74.8%	76.0%	77.0%	77.0%	77.0%	77.0%
Planned performance as per H2 plan	75.9%	75.9%	76.4%	76.4%	76.4%	76.4%	76.4%

Table 3: Lancashire and South Cumbria top three initiatives for four-hour improvement

Title of initiative	Description
1) Alternatives to Emergency Department	Streaming, redirection and admission avoidance, including maximising the use of Same Day Emergency Care.
2) Workforce	Review, targeting and optimisation of staffing rotas and workforce deployment, including senior decision makers.
3) Estates	Making best use of available space to improve patient flow.

- 4.3 The top three initiatives at a system-level are noted in the table above, however specific local actions being progressed include:

- maximising the use of virtual wards;
- developing 2-hour urgent community response;
- delivery of local winter plans;
- implementation of flow improvement plans;
- revising same day emergency care to accept a wider cohort of patients;
- short stay ward/acute medical unit footprint expanded to enable direct admissions from GP practices;
- urgent treatment centre relocated temporarily to increase emergency department footprint; and

- prompt assessment by appropriate clinician as part of the ambulance handover process.
- 4.4 Further industrial action took place from 7am on 24 February 2024 to 11.59pm on 28 February 2024, which presented further challenges on urgent and emergency care pathways, system pressures and performance.

5. NHS England Tiered Intervention – Risk for Lancashire and South Cumbria

- 5.1 As referenced in the previous report to the Board, the national team is actively considering if Lancashire and South Cumbria should be escalated from Tier 3 (lowest level of intervention) to Tier 2 or Tier 1 (highest level of intervention).
- 5.2 Within Lancashire and South Cumbria, oversight will continue via local Urgent and Emergency Care Delivery Boards and the system-wide Urgent and Emergency Care Collaborative Improvement Board.
- 5.3 The risk of losing the Tier 3 status remains the highest risk in relation to urgent and emergency care and processes are underway to determine whether the risk should be included on the Integrated Care Board's corporate risk register.

6. Urgent and Emergency Care capacity investment funding

- 6.1 The Urgent and emergency care capacity investment schemes for 2023/24 continue to be monitored as outlined in previous Board reports.
- 6.2 In regard to urgent and emergency care capacity investment funding 2024/25, amounting to £28.355m, a workshop was convened on the 6 February 2024 to bring together system and place partners to co-produce a set of arrangements for potential investment.
- 6.3 In readiness for the workshop, a range schemes were shared with each place-based team to hold round table discussions. The proposed schemes will focus on:
- creating additional capacity (e.g. alternatives to emergency departments, supporting timely hospital discharge)
 - improving urgent and emergency care performance;
 - improving patient experience and quality of care; and
 - financial benefits.
- 6.4 Collective agreement was reached by all participants that places would continue to review, develop, and prioritise schemes locally via the Urgent and Emergency Care Delivery Boards.
- 6.5 A further workshop will take place on the 15 March 2024 to provide the opportunity for system partners to peer review the schemes determined at

place as high priority and high impact, and to help us get to a manageable and deliverable number of schemes.

7. Winter preparedness – Lancashire and South Cumbria winter workshop

- 7.1 The place Urgent and Emergency Care Delivery Boards continue to oversee the implementation of winter plans to support system coordination and flow. These actions will also be taken into consideration as part of the place prioritisation process, described in section six, to ensure that work programmes are aligned.

8. Implementation status of the recovery plan ten high impact interventions

- 8.1 The summary table set out at appendix A outlines the ten high impact interventions by Trust footprint and provides the position for December 2023 and February 2024 in terms of the overall maturity status.
- 8.2 The place Urgent and Emergency Care Delivery Boards continue to oversee progress, and current implementation status may inform considerations for places to determine their highest priority schemes for potential urgent and emergency care capacity investment funding.

9. Recommendations

- 9.1 The Integrated Care Board is requested to:
1. Note the content of the report.
 2. Note the report as assurance that oversight of all associated requirements and delivery will be via place-based Urgent & Emergency Care Delivery Boards and the Lancashire and South Cumbria Urgent and Emergency Care Collaborative Improvement Board.
 3. Receive further reports at Integrated Care Board meetings.

Jayne Mellor, Director of Urgent, Emergency and Planned Care
29 February 2024

Implementation status of the ten high impact interventions

Key: 0-2 early maturity, 3-5 progressing maturity, 6-7 mature, 8 benchmarkable maturity. Each of the ten high impact interventions uses eight criteria to determine to the level of maturity. The maturity definitions and criteria have been set by NHS England. Green highlighted boxes are the priority areas for each place.

Ten High Impact Interventions	Blackpool/North – F&W/BTH		East Lancs/ BwD/ELHT		Central/LTH		South Cumbria/North – Lancaster /UHMB	
	Dec 2023	Feb 2024	Dec 2023	Feb 2024	Dec 2023	Feb 2024	Dec 2023	Feb 2024
Same day emergency care	8	7 ¹	7	7	7	7	7	7
Acute Frailty Services – ward processes	6	6	7	6 ²	6	6	6	6
Acute Hospital Flow	4	4	7	7	6	6	4	4
Community bed productivity and flow – ward processes	7	7	6	6	7	7	2	2
Care transfer hubs	4	4	6	6	4	4	4	4
Intermediate care	3	3	3	3	3	3	3	3
Virtual wards	6	6	7	7	6	6	5	5
Urgent community response	7	7	7	7	8	8	5	5
Single point of access ³	1	1	1	1	1	1	1	1
Acute respiratory infection hubs	0	0	0	0	0	0	0	0

¹ **Blackpool Teaching Hospitals NHS Foundation Trust - Same Day Emergency Care** – Due to pressures across the wider trust with flow, the same day emergency care has been bedded on several occasions during January and February 2024. Ongoing work is taking place with the wards to improve flow performance to unblock key areas such as the Acute Medical Unit and the Emergency Department

² **East Lancashire Hospital NHS Trust – Acute Frailty Services** - Access 12 hours per day, 7 days per week has been limited due to workforce challenges. The trust continues to work and improve direct access for Same Day Emergency Care areas which includes frailty. The trust achieved the trajectory of 80% (229 patients) in December 2023 and 76.17% (281 patients) in January 2024.

³ **Lancashire and South Cumbria - Single point of access** – Lancashire and South Cumbria has multiple single points of access. Work has commenced to develop a single point of access that supports the integrated care coordination to facilitate the management of patients into the right care setting, with the right clinician or team, at the right time.