

Appendix 1 Winter Resilience Overview 2022-23

Aberdeenshire Health and Social Care consultation response:

General

1. How effective were government actions to support winter resilience across health and care systems last year?

- Additional funding came too late, it needed to be provided at a much earlier stage and although additional resource is always appreciated, consideration needs to be given to the time required to recruit and train new staff.
- Additional frontline staff are required across services, with particular focus on posts that are hard to recruit into. Staff shortages in social care and across services are having a significant impact on delayed discharges. New staff were coming into post in the middle of winter last year, requiring inductions and training, adding more pressure on to the system and managers.
- Many areas where recruitment is challenging involve roles that are low paid which can result in certain roles being less attractive. Temporary posts due to fixed term funding can make recruitment challenging.
- Additional funding to commission interim beds was welcome but came too late, it was short term and it was a relatively low care home bed rate. Aberdeenshire are already paying above the National Care Home rate for interim beds and if this had not been the case it may have been difficult to acquire beds at the right time.
- Difficult to provide rehabilitation and enablement patients the required support to reach their full potential due to wards having people who are delayed discharges on them.
- Temporary measures / funding is often reactive and services are seeing sustained level of demand all year round, not only in Winter.
- The multiple requests for performance information and action planning from various government departments could often be repetitive and created significant additional workload. We are aware of our own performance and the areas we need to give attention to. We also acknowledge the Scottish Government's entitlement to receive assurance on performance. However, to ensure the most efficient and effective system of assurance, it is strongly recommended that the government from the outset identify key performance measures with the health and social care system so that these can be shared in a planned manner.

2. What additional priorities should inform actions to support winter resilience across our health and care system this year?

- Funding provided at a much earlier stage.
- Funding of additional interim beds



- A financial commitment to the recruitment and retention of staff across services including wider teams, particularly social care staff and other services, who play a vital role in supporting nursing and medical teams.
- Increased funding for the maintenance of estates and facilities to prevent closures.
- The removal of requests that do not add value or distract staff from being able to undertake their role when under pressure – such as increased multi reporting.
- Increased training opportunities for university students and modern apprenticeships and continue to improve the image of the sector, making it a more positive industry to work in and be part of.
- Additional beds for those on delayed discharge and the staff to support an increased bed capacity and increased beds on elderly wards is required as our elderly population increases.
- Additional support for local private nursing homes to prevent closures resulting in more options for people who are in hospital and require support.

Capacity and system flow

3. What were the key factors limiting capacity and delivery in the NHS and social care last winter?

- Lack of social care staff to deliver and support people at home.
- Lack of therapy staff on wards to assess patients adequately.
- Lack of community beds.
- Lack of social care staff to support patient's home.
- Delayed discharges.
- Lack of care home placements and intermediary care bed placements.
- Lack of respite care.
- Increased acuity of patients
- Reduced bed base due to lack of staffing, resources or estates limitations

4. Was the flow through the NHS and social care adequately maintained last year?

Flow was maintained as much as possible given the extremely difficult circumstances that staff were working in. Patients were being moved on as quickly as possible, however, staff were being placed under an immense amount of pressure at times. A lack of available bed space and the acute sector, often being at maximum capacity impacted the flow at times.

5. How can capacity be maximised to meet demand, and maintain integrated health and social care services, throughout the coming autumn and winter?

- Any additional funding to be provided early and flexibility given as to how it is used.
- A focus on recruitment and retention; targeting school and universities, providing incentives and career progression opportunities to work in health and social care sector.
- Care homes to utilise rehabilitation and enablement model.
- Creation of additional bed space within wards and care homes to be used to support delayed discharge.
- National public messaging campaign in relation to their role in looking after themselves, who to contact for support and when.

Workforce and staff wellbeing

6. What factors affected the wellbeing of those providing health and social care support, including both paid and unpaid carers, over the 2022-23 autumn and winter periods?

Negative - Paid Carers

- Winter illnesses and resurgence of Covid
- Increased stress and mental health issues due to pressure on staff
- Relentless pace of work and repeated asks to work additional shifts
- Rapid discharges from acute services sometimes without sufficient planning
- A lot of emphasis placed on the pressures facing acute hospitals but less recognition of the extreme pressures being felt in the community.

Negative - Unpaid Carers

- Families put under additional pressure when services were at maximum capacity
- Lack of social care availability leading to frustration and families having to do more
- Lack of respite and direct support for carers.
- Often having to make decisions in terms of location of discharge which they may not have wanted (e.g. interim bed at a distance from home address).

Positive – Paid Carers

- Managers encouraging staff take a wellbeing break for half an hour every week, letting them know their health and wellbeing is important.
- Practicing compassionate leadership and introducing “How full is your bucket” concept to promote good team and peer working.

Positive - Unpaid Carers

- Local “Know where to go to” and winter readiness information.

7. What should be done this year to ensure staff wellbeing, and ensure those providing support (in all settings) are able to continue to do so?

- Review of workloads and caseloads across services
- Continued vaccination programme for staff
- Continue to be supportive - it makes a difference
- A robust plan of how to open additional beds in acute, with a focus on elderly patients.
- Early recruitment of social care staff internal and commissioned and improved pay and conditions.
- A staff retention plan and a focus on staff wellbeing to support those who work hard to provide a service every day.

Outcomes

8. Were patient outcomes affected last winter, either positively or negatively?

Negatively

- Impacted by the pressure on acute hospitals causing corridor care.
- Impacted by the lack of social care staff.
- Less rehabilitation due to staffing and time and people having to go home without goals having been met.
- Families left feeling frustrated when trying to support patients out of hospital.

Positive

- Community services picked up additional work.
- Good working relationships within MDTs were able to prevent admissions and keep people at home safely.
- Positive outcomes achieved by staff who have worked in one area for a period of time and have built relationships with colleagues.

9. What recommendations would you make to ensure services best support vulnerable communities and achieve positive outcomes this year?

- Investment and increased staffing levels in addition to a review of wages, terms and conditions, in particular for hard to recruit roles.
- National campaign about staying safe and where to find support, greater visibility of services
- Investment in acute beds for frail and elderly patients.

Additional Information

10. Do you have anything else to tell us?

- Colleagues are physically and mentally drained and fatigued.
- Inform staff and the public of plans and be transparent around investment making it easier for professional, experienced staff to support government plans.