

# Southampton Health & Care Quality

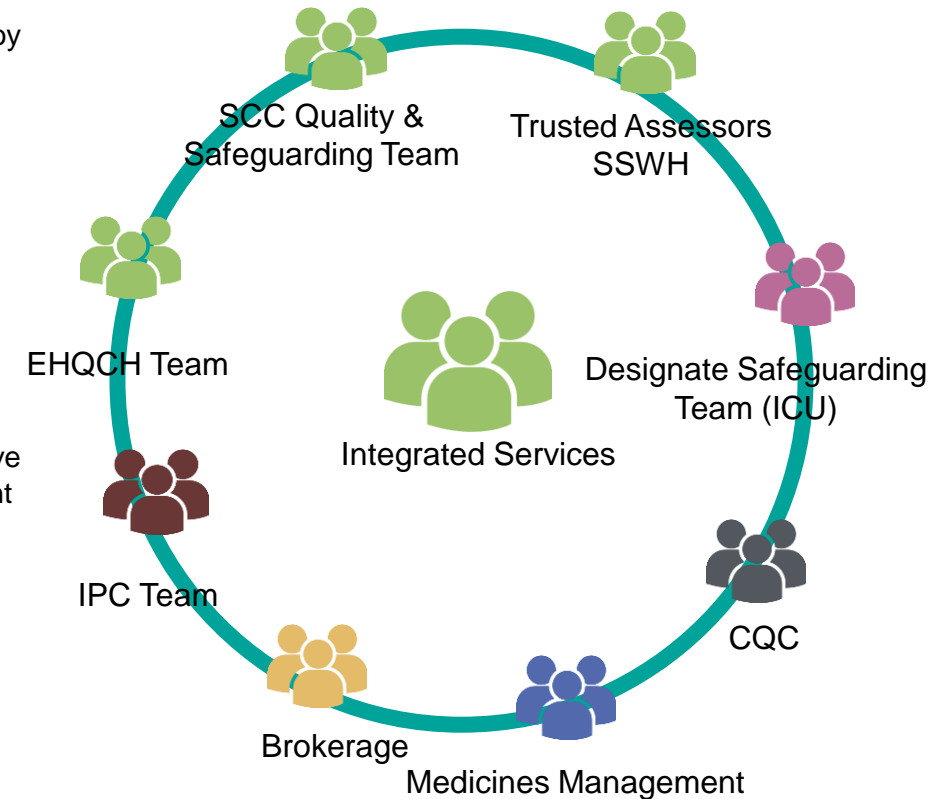
January 2024



# Integrated Health and Care Commissioned Services (Integrated Commissioning Unit)



- The Integrated Commissioning Unit is a joint commissioning team for Southampton City Council and NHS Hampshire and Isle of Wight Integrated Care Board (Southampton area)
- The Integrated Commissioning Unit brings together health and care quality into one model with the ability to deploy NHS and Local Authority resource quickly to support relevant sectors.
- The team comprises the following elements to provide a multi-disciplinary approach to quality assurance and safeguarding in provider services:
- **Quality and Safeguarding in Provider Services Team** – remit to quality assure and improve all social care providers across Southampton City to maintain a high quality and safe service
- **Enhanced Care Home Quality Team** – remit to provide clinical education, training, signposting, advice and guidance to care homes, nursing homes and extra care/supported living (currently vacant posts/no service)
- **Trusted Assessor**- remit to provide independent assessments to facilitate high quality, safe, speedy and effective discharges from hospital to care home. Based at the hospital with other clinicians but independent of them (vacant post from December 2023)
- **Infection Prevention** – remit to provide advice, education and assurance of health and care in Southampton
- **Clinical Quality** – remit to support the Integrated Commissioning Unit with quality advice and quality impact assessments
- **Designate Safeguarding** and the **Medicines Management** teams provide expert support as required
- The Integrated Commissioning Unit previously had a **Digital Care Team** with a remit to support social care providers to enhance digital skills and adopt technology that improves care (or acts as an enabler to accessing other services/projects) – these roles are not in the current ICU structure but the Integrated Care Board does have a digital project team for Hampshire and the Isle of Wight with a remit that includes project support to care homes.



# Care (nursing, residential, home care)

- Social care providers in Southampton remain under significant pressure post pandemic within the current economic environment but continue to be resilient, despite the ongoing pressures and the complex clinical needs of adults
- The number of provider failures across Residential and Home Care services remains extremely low
- Previously we reported a trend in Southampton providers dropping from Good to Requires Improvement under Care Quality Commission inspection. This trend has stabilised amongst existing providers over the last 12 months, and the statistical changes in the percentage of providers rated Good or above are predominantly to a number of new providers entering the market and being rated as Requires Improvement and a small number of Good providers exiting the market
- There was one provider in Southampton rated Inadequate by the Care Quality Commission in October 2023 – this was the first inadequate provider in Southampton for a significant period of time and the Integrated Commissioning Unit supported the closure of the provision through the provider failure process (the quality issues were identified by the Quality and Safeguarding Team but insufficient progress on resolution was being made)
- Of the visits that took place, the following key improvement themes were identified (these are similar to previous years):-
  - Recruitment checks – requirement to obtain references for all previous employment – the Integrated Commissioning Unit are working with Care Quality Commission and the Home Office around education for providers on safer recruitment
  - Disclosure and Barring Service (DBS) checks not being renewed on a regular basis (there is no nationally defined renewal frequency)
  - Staff training not always being in date – a training directory has been developed and made available to providers by the Integrated Commissioning Unit workforce/commissioning team
  - Risk management around medications
- Care Quality Commission attend the weekly internal Quality and Safeguarding provider oversight meetings to ensure effective information flow and contacts are in place within Care Quality Commission locality Teams
- The Quality and safeguarding Team continue to work with all providers where CQC have raised concerns – both before and following inspection ratings. The remit of the Integrated Commissioning Unit is to support providers; general market management and resilience and to support them to make required improvements.
- The Quality and Safeguarding teams continue to work with providers with proactive audits (remote and on-site); training and of sharing of good practice.



9 Nursing Homes  
**78%** rated Good or above by CQC (no change)



23 Older Adults Residential Homes  
**83%** rated Good or above by CQC (no change)



24 Mental Health / Learning Disability providers  
**88%** rated Good or above by CQC (no change)



60 Home Care providers  
**90%** rated Good or above by CQC (slight improvement)



# Care (nursing, residential, home care)



- In comparison with the totality of the Hampshire and Isle of Wight Integrated care Board Area (Hampshire, Southampton, Portsmouth and the Isle of Wight) Southampton has 78.1% of Nursing and Residential Care rated as Good or above. This is similar or slightly lower than the local, regional and national averages (82.1%, 79.3% and 78.5%, respectively allowing for providers with no published rating). Due to the small numbers of providers in Southampton a single Requires Improvement creates a significant change in % compliance
- At present Southampton has a higher proportion of providers rated as Requires Improvement but a lower proportion rated as Inadequate
- The Care Quality Commission have changed the way they assess providers. Where a provider has previously been rated Requires Improvement but there are no ongoing quality concerns (i.e., the provider has completed their improvement actions and the Integrated Commissioning Unit has been working with the provider) they are no longer a priority for reinspection. This means that most of the providers in Southampton rated as Requires Improvement no longer have quality concerns affecting their service
- No residential homes have received a negative rating within the last nine months with the exception of one home which closed
- On average, Southampton Nursing and Residential Homes are waiting 16 months for a re-assessment with the longest wait currently 39 months

	Inadequate	Requires improvement	Good	Outstanding	No published rating	Total	Inadequate	Requires improvement	Good	Outstanding	No published rating
ENGLAND	177	2493	10978	606	503	14757	1.2%	16.9%	74.4%	4.1%	3.4%
SOUTH EAST REGION	34	451	2053	118	83	2739	1.2%	16.5%	75.0%	4.3%	3.0%
HAMPSHIRE & ISLE OF WIGHT ICB	6	84	464	27	17	598	1.0%	14.0%	77.6%	4.5%	2.8%
SOUTHAMPTON	0	7	25	0	0	32	0.0%	21.9%	78.1%	0.0%	0.0%



# Improvement & Prevention (examples)



- **Residential Care Home:** Care Quality Commission inspection rated Requires Improvement (RI) in Safe and Well Led domains. Following the pandemic, further concerns were raised and a focused quality assurance audit was completed by the Quality and Safeguarding Team, supported by the Infection Prevention and Control Team. Following this involvement the Care Quality Commission Inspected again and found the provider to be Good overall in all five key lines of enquiry. The provider contacted the Quality and Safeguarding Team to request a full audit the following year where minimal actions or recommendations were made, confirming the provider had sustained improvements and embedded good practice. There have been no major concerns raised, and since this time the provider has opened a home care service that has been accepted on to the home care framework platform
- **Home Care Provider:** The Provider was in an Large Scale Safeguarding Enquiry process for five months and at risk of provider failure. With the support of the Quality and Safeguarding Team and joint working with Commissioning, improvements were made, and actions taken by the provider. It was recognised that the provider was making improvements when the Care Quality Commission completed an inspection and rated it overall Good in all five key lines of enquiry. Since then the provider has been accepted onto the home care new framework provider platform
- **Nursing Home:** Due to safeguarding concerns identified during a quality assurance audit the home was brought into a Large Scale Safeguarding Enquiry process in two consecutive years. There were significant issues relating to the nursing staff and leadership of the home. Wrap around intensive support by the Quality and Safeguarding Team, Medicines Management, Enhanced Quality in Care Homes Team, and Infection Prevention and Control Team has supported the provider to make sustained improvements and the Care Quality Commission have since rated them Good overall. The manager has excellent working relations with Quality and Safeguarding practitioners who have regular meetings with the provider. It is recognised that the improvements have been sustained and provider is working with commissioning to look at future plans
- **Rehabilitation Nursing Home:** The home has not been inspected by the Care Quality Commission since 2019. It was deemed necessary to complete a quality assurance audit where there were recommendations and actions requested. This audit took two days to complete and when the practitioners returned on the second day the improvements identified in the first day had already been completed
- **Residential Care Provider:** The Quality and Safeguarding Team worked with the provider following an assessment which identified systemic concerns of quality and safety. The involvement commenced in April and a Large Scale Safeguarding Enquiry process was implemented. The provider has shared grateful thanks to the Quality and Safeguarding Team for the support and involvement by the Quality and Safeguarding practitioner in identifying the actions required. Following a Large Scale Safeguarding Enquiry review the suspension has been removed, and a Caution applied.



# Improvement & Prevention



- **Nursing Home:** The Care Quality Commission inspection rated the service as Requires Improvement. Previous Quality and Safeguarding Team audits had established recommendations and actions, however with a change to management and ownership the quality of care had slipped. Large Scale Safeguarding Enquiry commenced and suspension on new admissions applied. The Quality and Safeguarding Team worked with the provider and the Care Quality Commission to review their action plan. The Infection Prevention and Control and Medicines Management also provided input all of which has resulted in significant progress. The removal of the suspension for new admissions is to be removed. The manager and the Quality and Safeguarding Team have regular contact to discuss any concerns and ensuring partnership working is embedded. The Quality and Safeguarding Team have arranged a full follow-up quality assurance to ensure good practice is sustained.
- **Care Quality Commission** - Joint working continues with the Care Quality Commission with regular attendance at the quality and safeguarding teams weekly review meeting to share information and intelligence to support an immediate response to ensure safe practise is being applied within the Commissioned care homes
- **Learning Disabilities Residential Care Home:** A Large Scale Safeguarding Enquiry commenced early 2022 in response to the new manager raising a concern regarding one adult as significant concerns had been raised by the family about the leadership and staffing. The Quality and Safeguarding Team provided input by conducting quality reviews of the service, working in partnership with the Learning Disability team, Medicines Management, All Age continuing Care Team and Care Quality Commission and the provider to improve the quality of care. The Large Scale Safeguarding Enquiry has now closed and the individual continues to live at the home. The family are satisfied with the outcome and improvements made.
- **Assurance and quality improvement visits:** The Quality and Safeguarding team continue to provide quality assurance audits to ensure that social care commissioned services are regularly monitored and evaluated. Face-to-face visits, both announced and unannounced and virtual reviews are utilised as appropriate. For 2023/24 110 Quality Assurance visits were completed, with 145 enquiries/concerns managed via the Duty inbox.



# Improvement & Prevention



- **Provider Assessment and Market Management Solution:** The Integrated Commissioning Unit and Quality and Safeguarding Team are working to implement the Provider Assessment and Market Management Solution with the Home Care framework. The Provider Assessment and Market Management Solution is an online assessment tool which can be used either as a direct audit tool by commissioners or as a self-assessment tool by providers which can be linked to the brokerage function. The tool will help assess the quality of care delivered by providers of adult social care services and is in use in the South West and East of England, which provides a standardised approach to quality and a useful comparison on market management. The team are currently scoping and training on the system prior to roll out to further homes in the city. There is a current Inclusive Lives Project Group where discussions on implementing Provider Assessment and Market Management Solution to support as many as 60 providers are ongoing
- **Virtual Transfer of Care:** Virtual Transfer of Care as initiated by University Hospitals Southampton continues to be a strong focus for both the Trust and the Integrated Care Board especially going into winter. University Hospitals Southampton continues with the roll out of Virtual Transfer of Care across the trust and making virtual handovers 'business as usual'.

This initiative has been robustly tested and proved to have multiple benefits, as set out below, for all organisations and for individual patients.

- Improved patient experience enabling the home to be introduced to the patient and the patient to meet with a member of the care home team and greater involvement in their discharge process
- Improved quality and speed of the handover from University Hospitals Southampton to receiving care home and improve communication
- Aids the facilitation of same day discharges
- Improved working relations between University Hospitals Southampton and care home settings
- Provides an opportunity for the home to see how the patient transfers, mobilises, sits to stand via a virtual call
- Provides an opportunity for feedback and learning to eliminate failed discharges, readmissions, section 42's and complaints

The virtual handover does not replace the trusted assessor role; the purpose of the handover is purely to replace the telephone handover or a ward visit. Ward visits take time for both organisations and wards will be offering a virtual handover as the primary method of handing over.. If Virtual Transfer of Care is deemed not suitable, and a ward visit is the most appropriate method, then this will still be facilitated.



# Interdependencies



- The Quality and Safeguarding Team meet and liaise with a wide variety of professionals in order to build a picture of risk across the social care system
- **Integrated Health and Care Commissioned Services Quality Manager (currently vacant), Deputy Director of Quality and Nursing (ICB) and Adult’s Designated Safeguarding Nurse** – chair Large Scale Safeguarding Enquiry meetings on behalf of SCC via s113 arrangement
- **Care Quality Commission** – attendance at internal Quality and Safeguarding Team meetings with regular liaison via the Deputy Director of Quality and practitioners regularly engage with local Care Quality Commission inspectors
- **ICB Medicines Management** – a high proportion of audit findings relate to provider management of medications
- **All Age Continuing Care** – utilises Continuing Healthcare reviews and intelligence to gather insight into provider management and low level concern
- **Children’s Designated Safeguarding Nurse** – provides support to the Children’s Quality Lead who assures unregulated children’s placements in the City
- **Adult’s Designated Safeguarding Nurse** - provision of safeguarding advice and guidance
- **Infection Prevention & Control** – utilises intelligence from Infection Prevention & Control visits, caseload and response to audit/ Care Quality Commission findings
- **Joint Integrated Care Board / Southampton City Council digital care team** - Supports with provider access to Health and Care records, NHS mail, Data Security Toolkit completion and webinars as well as supporting the new pilot Virtual Transfer of Care. These posts were removed September 2023
- **Adult Social Care Operational Teams** – team representation at safeguarding adults meeting, supporting a joint working approach to intelligence sharing and quality visits to inform best practice in the care provider setting
- **SCC Commissioning Teams** – attendance at various strategy and operational meetings to ensure that Quality is considered and embedded in ongoing decisions. Supporting workforce development and the market position. Influencing contractual arrangements
- **HCC and other LA’s** – Attendance at locality quality and safeguarding meetings to share intelligence in provider services.





# COVID-19 and Influenza Vaccination (care workers)



## COVID-19 Vaccination Programme:

UK COVID-19 vaccination programme is entering its third autumn season in 2023. The primary aim of the programme remains the prevention of severe illness (hospitalisations and deaths) arising from COVID-19. During the current phase of pandemic recovery, and while the virus continues to circulate and cause illness, the objective is to continue to focus the offer of vaccination on those at greatest risk of serious disease and who are therefore most likely to benefit from vaccination.

**Care workers:** Uptake of the first, second and booster doses of the COVID-19 vaccine in care workers in Southampton was extremely successful. However as there is no longer the legal requirement for staff to be vaccinated, homes are finding it much more difficult to get the data themselves. In addition, not all homes are proactive in reporting the data.

Factors influencing uptake include vaccine fatigue, legacy from the mandatory vaccination of care workers in 2021/2022 and higher rates of natural immunity through infection. This has also impacted on influenza vaccination rates. Similar patterns have been noted in health workers.

## NHS England Data:

- **Staff vaccinations:** COVID vaccine uptake is 31% compared to last year's 38%
- **Residents:** COVID Vaccinations – 76%

**There is no flu data available from NHS England at the time this report was written.**



# Infection Prevention & Control (IPC)



- The Integrated Care Board employs 1.8 WTE specialist infection prevention nurses in collaboration with Southampton City Public health to support Southampton Place
- These specialists continue to work across health and care settings, including as part of Public Health team in Southampton City Council
- The team supports surveillance, quality improvement, training and assurance across health and care settings, including undertaking infection prevention audits to support the safeguarding process or where Care Quality Commission have highlighted concerns.
- The IPC team are working with the Quality & Safeguarding Team to ensure infection prevention is included in the new education forums for the Health & Social Care Sector across the city
- The capacity tracker no longer captures outbreak data as it does not specifically ask about outbreaks, however the infection prevention team have advised and supported 37 homes where cases of COVID have been highlighted on the capacity tracker since February 2023
- IPC will contact, advise and support homes when informed of outbreaks by UK Health Security Agency or local teams and other organisations.
- IPC team advise and support homes who have outbreaks caused by many different organisms including Norovirus, Flu, Scabies, respiratory illness and COVID 19.
- Southampton had no reported Influenza outbreaks at the time of this report, however other areas of Hampshire have seen Flu activity
- Infection prevention support to the Health and Social Care sector is crucial to relieve the pressure on the whole health care system as early intervention, advice and support can prevent hospital admissions, serious illness and potential outbreaks.



# Risks / Issues



Title	Risk	Mitigation/Actions
<b>Financial sustainability and viability</b>	<p>There is a risk that some care homes may become financially unsustainable as a result of any combination of:</p> <ul style="list-style-type: none"> <li>• Inflation and overhead costs;</li> <li>• The rates that publicly funded organisations can afford to pay for clients;</li> <li>• The number of new private clients being lower than planned for, reducing income levels;</li> <li>• Increased costs of Personal Protective Equipment, staffing not covered by fees and charges</li> <li>• Homes unable to recruit, retain or supply enough staff to manage with outbreaks, staff isolation and sickness.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to develop the understanding of risks for all homes so that proper management of risk can take place.</li> <li>• Monitoring of void levels overall and by individual home to identify specific risks and mitigations.</li> <li>• Contingency funding in place in case of provider failure</li> <li>• Care home needs assessment underway to identify long term needs</li> <li>• Support to homes to develop clinical skills to diversify client group</li> </ul>
<b>Workforce</b>	<p>There is a risk that care providers (homes and home care) may not be able to sustain high quality care due to workforce recruitment and retention pressures and issues relating to sponsorships</p>	<ul style="list-style-type: none"> <li>• Recruitment tools and campaign developed in Southampton, including overseas recruitment</li> <li>• Develop the workforce support strategy together with providers and Hampshire Care Association</li> <li>• SCC Commission Grey Matter learning – e-learning portal for Social Care Providers</li> <li>• Improved education of sponsorship to ensure sponsorship rights are not removed</li> </ul>
<b>Care Quality Commission standards</b>	<p>There is a risk that providers may not be able to meet and sustain Care Quality Commission standards due to the demand and capacity of registered managers and other workforce, which may result in vulnerable people not receiving optimal care</p>	<ul style="list-style-type: none"> <li>• Returned to face to face assurance visits and support</li> <li>• Continue to provide support and advice via Quality and Safeguarding, infection prevention and control lead</li> <li>• Link with Care Quality Commission re intelligence and information sharing</li> <li>• Looking to develop support calls and forums</li> </ul>



# Risks / Issues



Title	Issue	Mitigation/Actions
<p><b>Workforce / Vacancies – ICB/ICU restructure</b></p>	<p>The Integrated Care Board / Integrated commissioning Unit are currently embarking on the next steps in redesigning the organisation to ensure that it is fit for the future. This is about making sure that the right skills, teams, structures and resources are in place to deliver on our strategic aims, duties and responsibilities for the benefit of people in the communities we serve. This work is taking place as we continue to work with our system partners in ensuring that services are delivered in the most efficient and effective way possible.</p> <p>The redesign work is being informed by a comprehensive review of all current team structures and resources. In the interim, no changes are being made to existing structures; which means that vacancies are being held. This has led to short term gaps within our Quality &amp; Safeguarding, Enhanced Quality in Care Homes Team and the Trusted Assessor role.</p> <p><b>Impact on Quality:</b></p> <ul style="list-style-type: none"> <li>• Proactive working with all providers cannot be prioritised. The current team members are under pressure to cover vacant hours to ensure continuity of daily duty cover, business meetings, safeguarding in provider services.</li> <li>• There is temporarily no proactive nursing support to support providers with clinical education, training, advice and guidance and signposting.</li> <li>• Risk of increase in pressure ulcers and other health related issues.</li> <li>• Inability to increase providers accessing technology to reduce restriction/support care</li> </ul>	<ul style="list-style-type: none"> <li>• Current workload is prioritised with a focus on providers with highest level of concern and areas for improvement</li> <li>• Business case approved requesting utilising some of the vacancy funding to increasing the working hours of some of the current workforce who work part time</li> <li>• Responding to safeguarding alerts, visiting when required.</li> <li>• Clinical oversight support for providers requested from HIOW ICB Nurse Facilitator (Hampshire). This is on an ad hoc basis to support services with clinical education including Restore 2.</li> <li>• Support calls arranged with the 9 nursing homes in the city. Advice given to report PU's as safeguarding when assessed as required.</li> <li>• Possible ad hoc support from Hampshire Trusted Assessor</li> <li>• The Quality Team and All Age Continuing Healthcare Team has clinicians that can advise the social care sector when required</li> <li>• Trusted Assessor has informed care/nursing homes. Queries to be signposted to the Transfers of Care Hub (TOCH)</li> </ul>



# Health



- The wider Integrated Commissioning Unit Clinical Quality Team continues to support and monitor health providers utilising the internal governance and assurance functions of those providers which has proved to be a more collaborative approach. This includes participation in the providers own internal quality assurance visits, governance meetings and quality improvement initiatives.
- The Southampton & South West local Quality Committee has now been divided to facilitate a Southampton only Quality Group. This group is made up of health, social and voluntary sector providers and continues to develop and mature
- The health system continues to be under sustained and exceptional pressure (akin to permanent high winter demand and ongoing industrial action, more latterly in 2023 specific to Junior Doctors across the system). Extensive planning and contingency to maintain safety was put in place by both employers, workers and the unions. Further industrial action is occurring in early 2024.
- Project Fusion: the name being given to the work underway to create a new NHS Trust for community, mental health and learning disability services. This is bringing together community, mental health and learning disability services across Hampshire and the Isle of Wight. In January 2022, the Hampshire and Isle of Wight Integrated Care System commissioned an independent review of community, mental health and learning disability services across Hampshire and the Isle of Wight, to find out how best to meet the current and future demands of our local populations. One of the review’s key recommendations was that a new organisation should be formed - to bring together these services into a single, new NHS Trust. This includes all the services provided by Solent NHS Trust, Southern Health NHS Foundation Trust, community, mental health and learning disability services provided by Isle of Wight NHS Trust, and Child and Adolescent Mental Health Services provided by Sussex Partnership NHS Foundation Trust in Hampshire. The ambition is to create this new organisation by April 2024
- South Central Ambulance Service continues to make good progress on improvement, overseen by the Integrated Care Board.

**Current Care Quality Commission ratings for the main Providers in Southampton (no changes since the last report):**

	University Hospital Southampton	Solent NHS Trust (Community Services)	Southern health NHS Foundation Trust (mental health services)	Practice Plus Group Urgent Treatment Centre	Spire Healthcare	Countess Mountbatten Hospice	South Central Ambulance Service
Care Quality Commission rating	Good	Good	Requires Improvement	Good	Good	Good	Inadequate

# Primary Medical Services



- All 25 General Practices (GP's) in Southampton are rated as Good by the Care Quality Commission

Primary Medical Services General Practice	Outstanding	Good	Requires Improvement	Inadequate	Not rated
Southampton	0	24	0	0	1

- Primary Care offered 71702 thousand (K) appointments in October 2023, of which 46179 (K) were face to face (compared with 677,072 total appointments (K) in October 2022)
- Primary Care responded to winter resilience offering same day surge capacity access from December 2023
- Southampton Quality have continued onsite quality insight visits with primary care practices to promote the sharing of good practice and to support preparation for Care Quality Commission visits. Twenty visits have been completed with a further two planned before March 2024. Part of this work seeks to identify and spread innovation and best practice.
- Annual General Practice Patient Survey was published in July 2023 – the response rate in Hampshire and Isle of Wight was one of the best in the South East Region
- Overall, there has been a slight drop in overall experience rated as good between 2022 and 2023 from 72% to 70% which mirrors the national picture (71% nationally assessing overall experience as good)
- The main area of concern continues to be access to primary care, despite the additional numbers of appointments – this may be due to the change in the type of appointments being offered – e.g., online access and appointments with qualified health professionals other than General Practitioners
- There has been a slight drop in ease of getting through on phone (1% percentage points) – better than the national picture
- Website satisfaction – is down two percentage points which may indicate people are trying to use websites more for digital access and finding them difficult to navigate – work is being done to scope standardising websites
- Static result in patients being offered a choice of appointments with a decrease in being offered a choice in appointment times
- Southampton is offering above national average face to face appointments
- Confidence and trust remains stable and slightly above national average (ICS 73%)



# Health Risks



Title	Risk	• Example Actions
<b>Urgent and Emergency Care</b>	There is a risk that activity in urgent and emergency care pathway (Primary Care, NHS111, Out of Hours, SCAS, Urgent Treatment Centres, Emergency Departments) remains high and results in difficulties and delays in access for patients and workforce fatigue / clinical risk for providers	<ul style="list-style-type: none"> <li>• Primary Care providing additional capacity through increased appointments, including face to face</li> <li>• Acute respiratory hubs implemented</li> <li>• UTCs are supporting by releasing some pressure from the Emergency Department</li> <li>• Alternative pathways to urgent care being developed</li> <li>• Primary Care stocktake on same day access</li> </ul>
<b>Industrial Action</b>	<p>Impact of industrial action: risk of harm and increased waits. Impact on staff (fatigue, resilience and additional ongoing impact for staff covering during periods of industrial action). Future potential risk with plans for further industrial action across the health system.</p> <p>Quality impact: increased waiting times, delays to diagnosis and treatment and potential risk in relation to patient outcomes.</p> <p>No reported significant harm to date.</p>	<ul style="list-style-type: none"> <li>• tried and tested plans in place to mitigate risks to patient safety and manage any disruption.</li> <li>• Emergency care and other critical services such as maternity departments will be open and life-threatening calls responded to.</li> <li>• Local services will keep their websites and social media accounts up-to-date with information about service disruption.</li> </ul>
<b>Elective Surgery Backlog</b>	Dealing with the pandemic and more recently the ongoing Industrial action, has inevitably had an impact across the health service, including on the amount of planned care the NHS has been able to provide, in turn meaning longer waits for many patients and a rapidly increasing waiting list.	<ul style="list-style-type: none"> <li>• NHS England published Elective Recovery Planning supporting guidance.</li> <li>• Providers looking at how they can expand capacity.</li> <li>• Prioritisation of treatment is based on clinical urgency.</li> <li>• ICB is working with providers in relation to undertaking harm reviews.</li> </ul>
<b>Workforce</b>	There is a risk that health providers may not be able to sustain high quality care due to workforce recruitment and retention pressures.	<ul style="list-style-type: none"> <li>• Workforce strategies being developed across the ICB</li> <li>• Providers are collaborating around supply of workforce</li> <li>• Increased investment into social care to reduce medically optimised for discharge patients and workforce demand</li> <li>• ICB oversight continues with workforce included in meetings with providers.</li> </ul>

