

Proud to be part of West Yorkshire  
Health and Care Partnership



NHS West Yorkshire  
Integrated Care Board

# Kirklees Scrutiny Committee 6<sup>th</sup> September

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# Unplanned Care; Resilience Planning

## Quote

“we have begun planning for the coming winter earlier than usual, recognising pressure on the NHS is likely to be substantial, particularly in UEC [Urgent & Emergency Care], making the most of the opportunity created by the formation of ICBs to maximise the benefits of system working”

NHS England 12<sup>th</sup> August 2022

# Unplanned Care; Resilience Planning

## Quote

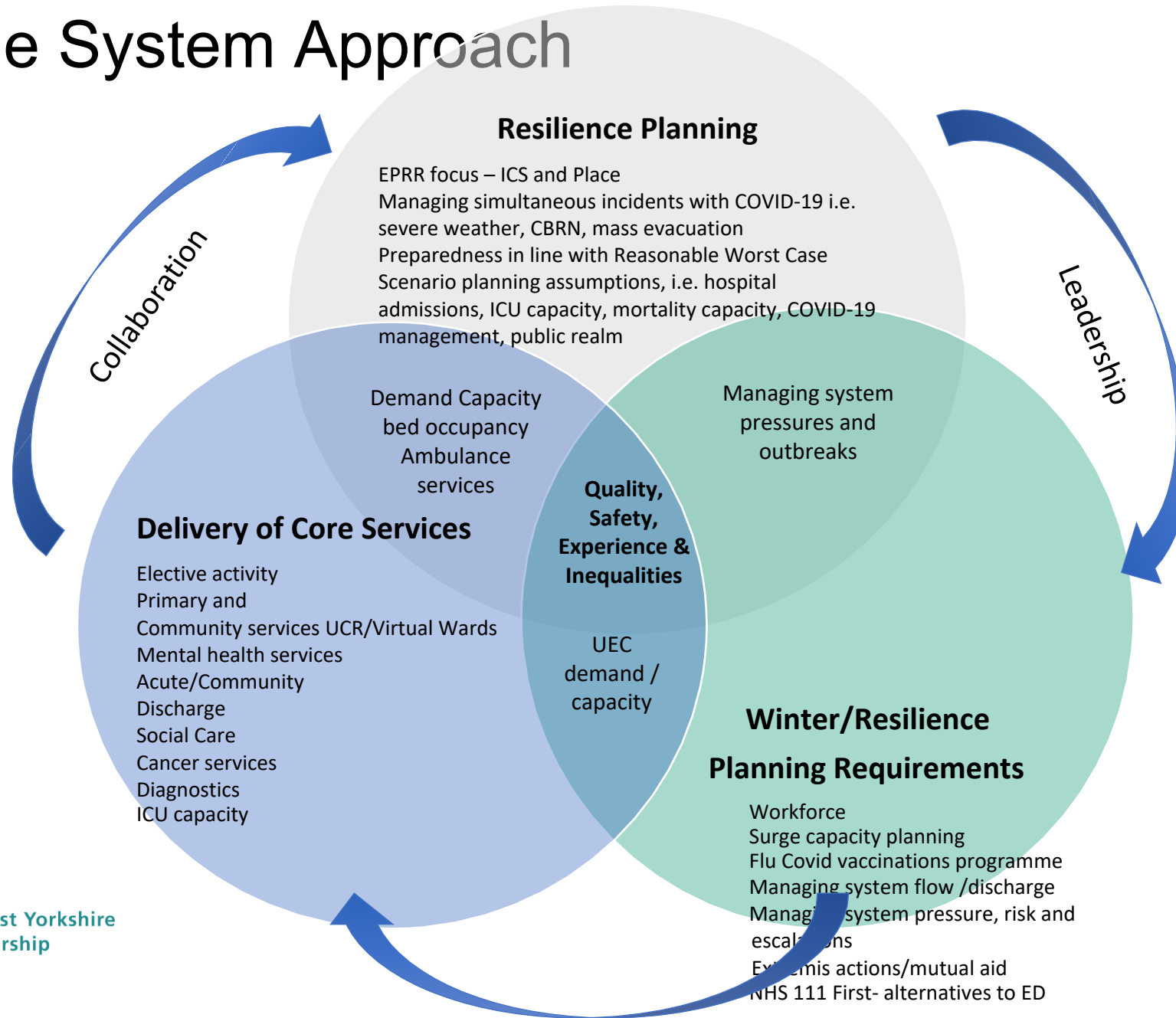
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NHS England 12<sup>th</sup> August 2022

# Partners

NHS West Yorkshire Integrated Care Board  
Kirklees Council  
Calderdale & Huddersfield NHS Foundation Trust  
Mid-Yorkshire Hospital NHS Trust  
South West Yorkshire Partnership NHS Foundation Trust  
Primary Care  
Community Pharmacy West Yorkshire  
Local Care Direct  
Locala  
Third/Voluntary Sector  
Yorkshire Ambulance Service

# Whole System Approach



# Data Summary Insight

- Primary Care: GP attended appointments have continued on an upward trend since March 2020, the attendances now are higher than pre-pandemic levels with 79% of appointments being Face to Face, 46% attended on the same day and 3.6% DNA. The appointment rate per '000 is higher in Kirklees than nationally.
- ED Attendances: To note there was a reduction in overall attendances between Nov 21 to Feb 22 with an increasing trend stabilising over the last three months. Looking at the last 3 months in comparison with the same period last year attendances are 0.9% higher at CHFT and 1.1% lower at MYHT for Kirklees population.
- >12-hour ED Breaches: there is no statistical correlation between ED attendances and >12 hour breaches, please refer to Trust for further intelligence relating to workforce and acuity.
- YAS: the See, Treat and convey performance is 62% at CHFT and 66.4% at MYHT, the average handover time is significantly lower at Dewsbury District Hospital 8mins 51secs, Pinderfields 14mins 35secs compared to Calderdale Royal 20mins and Huddersfield Royal 20mins 23secs, handover % within 15 mins is higher at Dewsbury 83.1% and Pinderfields 63.2% compared to Calderdale 47.8% and Huddersfield 49.7%
- Kirklees 111 demand: Nothing significantly different from West Yorkshire trends, Kirklees top complaint was 18% Chest Pain and upper back, 11% of total calls had Ambulance final disposition and 54% Primary Care, 17.8% of total calls were in relation to 20–29-year-olds.
- Kirklees 999 demand: Chief complaint was 111 advice followed by falls and back injury. 67% of calls resulted in see, treat and convey to ED. This is not that different to the WY position.

**Further reference to data insight will be given during Partner Insight narrative**

# Kirklees Council Insight

- Significant amount of support, service and activity outside of the hospital;
- Admission avoidance to prevent inappropriate attendances
- Anticipatory care across community partners
- Need to get patients and service users on the right pathway
- Home first as a priority
- Proactive Care Home support team
- Strengthen partnerships with independent care providers
- Housing integrated into teams
- Aim to reduce reliance on beds
- Trialing assistive technology
- Follow up in home environment; assess in the home both cared for and carer
- Promoting independence

# Mid-Yorkshire Hospital Trust Insight

- Evidenced history of collaboration and system working since last Winter provides an excellent foundation for this Winter.
- Strong focus on supporting people in their homes and the community is a key element of the planning, making the most of
  - Virtual Wards with a focus on patients with respiratory illnesses and frailty
  - Support for patients with mental health needs
  - Urgent Community Response to support care homes and reduce emergency department attendances
  - Voluntary sector to help people on discharge from hospital and to provide general support
  - Effective signposting to ensure people can get advice and guidance when needed e.g. community pharmacy
- Additional hospital beds at both Pinderfields Hospital and Dewsbury
- Focus on ambulance handover times to improve patient experience and ensure availability of ambulances to respond to 999 calls
- Focus on continued delivery of planned outpatient, diagnostic and surgery cases across Winter to support patients and continue to reduce waiting times



# Calderdale Hospital Foundation Trust Insight

- Focus on Urgent Community Response & Community Teams and not automatic referral into Emergency Department (ED)
- Home first
- Therapy model is critical at home not in acute bed base
- Role of voluntary/third sector in supporting patients at home
- Clarity on options and making it easy to access for clinicians (Single point access)
- Increased referrals into Urgent Care Hubs within both EDs to take out all P4 (Manchester Triage Score grading) illness patients
- Surge capacity modelling for Covid and Non-Covid
- Point of Care Testing within EDs for Covid and Flu
- Discharge focus board rounds with Ward Managers, Matrons, Discharge Coordinators and Therapists
- Ambulance handover Standard Operating Procedure to prevent delays
- Virtual ward hub to commence

# Locala Insight

- Strength in Partnership
- Streamline and avoid duplication
- Developing credible alternatives to avoid admissions
- Prioritisation on strengthening Urgent Community Response through the Alliance
- Building on Trusted assessor single assessment with community partners
- Working with partners to strengthen the Integrated Transfer of Care hub
- Ensuring people are effectively moved on from Intermediate Care when their rehabilitation is complete
- Working with system partners to support care homes over winter
- Implementing surge and escalation plans internally to ensure we remain resilient and responsive
- Development of Virtual Wards in partnership across Kirklees, Wakefield and Calderdale

# Primary Care Insight

- Presented on the day

# Yorkshire Ambulance Service Insight

- About Us - Scope
- Contribution from Community First Responders
- Risks and Challenges
- Greater Resilience
- Kirklees – a Typical Day
- System Support Initiatives
  - Emergency Department avoidance
  - Patient Flow
  - Workforce (Case study)
- Ambulance Response Performance
- Hospital Handover

# Risk Part 1; Generic across all partners

- Risks

- Workforce
  - Recruitment & Retention
  - Increased Absence, Staff burnout
- Covid, Flu and respiratory conditions
- Imbalance of demand v capacity
- Infection Prevention and Control restrictions
- Pay award impact on funding
- Growing waiting lists
- Financial pressure -non recurrent
- Adverse weather and service disruption
- Impact of Winter fuel/costs of living rises
- Supply and demand of consumables

- Priorities

- Ensuring there is no harm to patients and service users
- Any action does not increase health inequalities
- Workforce – well being and best use
- Demand v capacity place-based modelling
- Communications – ICS/Place
- Preparation for winter monies
- Review adverse weather plans
- Agree consistent reporting/escalation across ICS
- Review and Agree Extremis action plans

# Risk Part 2; Urgent Care Pre-Hospital

- Risks

- Impact of further Covid peaks and new variants on demand for services
- Public complacency around Covid and vaccines
- Demand into 111 & 999 services- sustainable delivery
- Pressure within Primary Care services
- Home Care providers resilience against cost-of-living rises

- Priorities

- Delivery of Vaccination Programmes
- 7-day provision where able – reduce variation
- Sustainable Clinical assessment service
- Alternatives to Accident & Emergency – pathways/services
- Optimise primary care access e.g. Primary Care Network's extended access services
- Maximise minor urgent care services – Urgent Care Hub, Walk-in-Centre etc
- Communications to manage population expectations and behaviour
- To work with and support Yorkshire Ambulance Service
- Closer working with the voluntary sector

# Risk 3; Urgent Care in Hospital

- Risks

- Infection Prevention & Control restrictions reducing capacity
- Increased non elective demand
- Patients presenting with higher acuity conditions
- Surge pressures affecting elective/ planned care capacity
- Mental health capacity and flow
- Near Patient Testing for flu and covid affecting laboratory capacity
- Ambulance delays / handovers

- Priorities

- Maximise Same Day Emergency Care pathways
- Continued prioritisation of ambulance handovers
- Development of Urgent Care Hub / Treatment Centres
- Integrated Transfer of Care hub development
- Commitment to elective care recovery

# Risk Part 4; Discharge & Community Services

- Risks

- Care Home resilience- fragile market
- Cessation Discharge to Assess funding - financial risk
- Increased demand for Higher Acuity complex pathways
- Social Care reform
- Carers resilience with higher acuity and complexity of discharges

- Priorities

- Commitment to a Home First philosophy
- Improving flow and discharge via 100-day discharge challenge
- Avoid duplication in assessments across pathways
- Embed integrated pathways to coordinate support and avoid duplication
- Assess the Impact of effective integration in the community e.g. Reablement
- Support Options providing support for discharge through innovative outcomes and enhanced relationships with providers
- Closer working with the voluntary sector
- Bed Modelling – system wide



# Consequences; for consideration

- Ambulance diverts
- Single Virtual Contact Centre for 111
- Advantage/Adastra ransomware attack
- 111...now recruiting but time to get online
- Adult Social Care Reforms
- Urgent Care Hubs – access to primary care
- Increased demand and capacity pressures  
e.g. Increased A&E waiting times; longer  
waiting times to see GP; impact on elective  
procedures



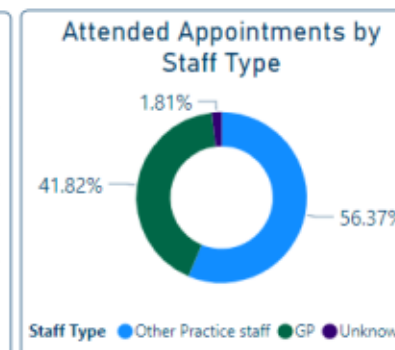
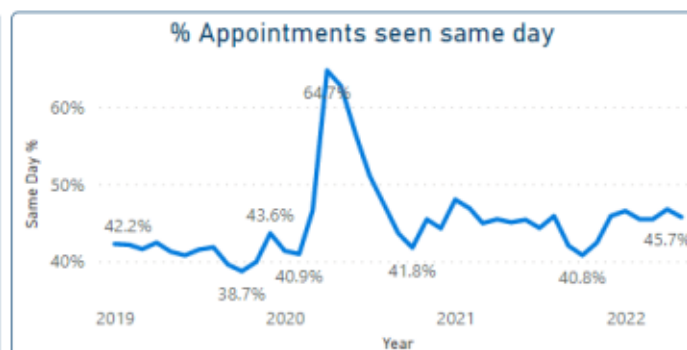
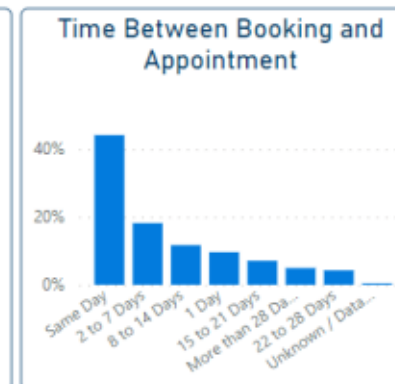
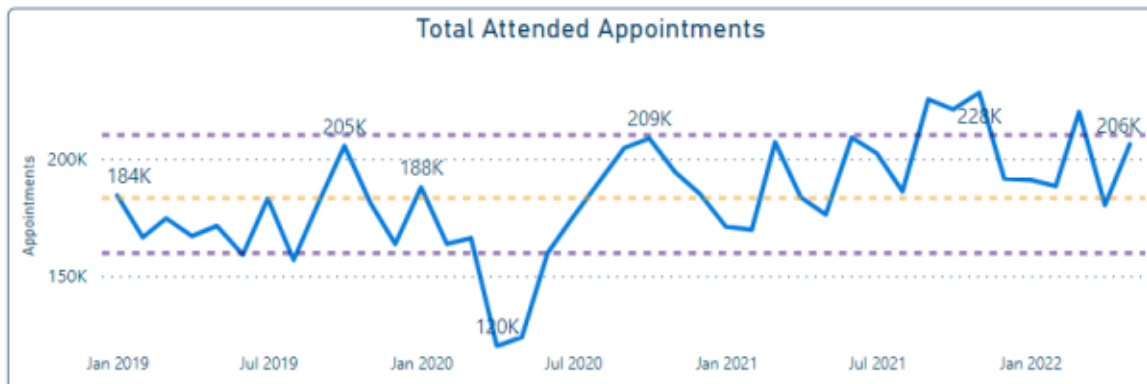
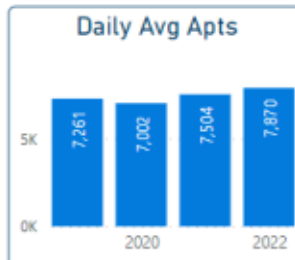
Following supporting slides for  
information/assurance and not  
presentation

# Primary Care Appointments – Trend

## Kirklees

Total Appointments <b>413,824</b>	Attended Appointments <b>386,436</b>	Same Day Booked Appointments <b>182,466</b>	Same Day Attended Appointments <b>46.2%</b>	% Attended FTF <b>79.0%</b>	DNA Appointments <b>14,324</b>	Overall DNA Rate <b>3.6%</b>
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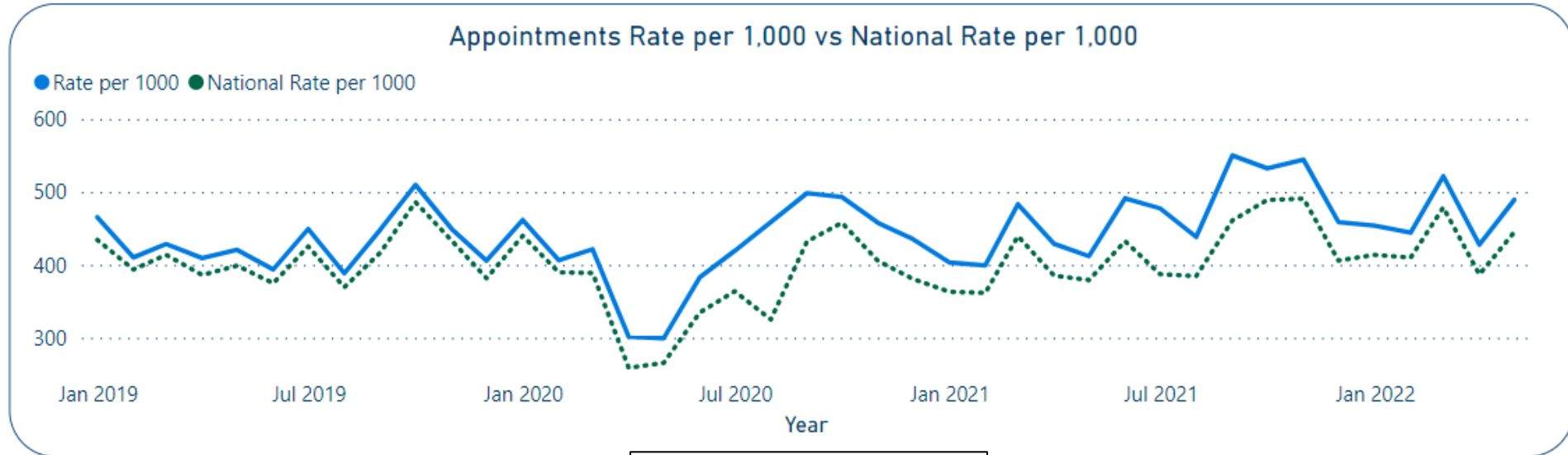
Delivery Rate of 21/22  
**109%**



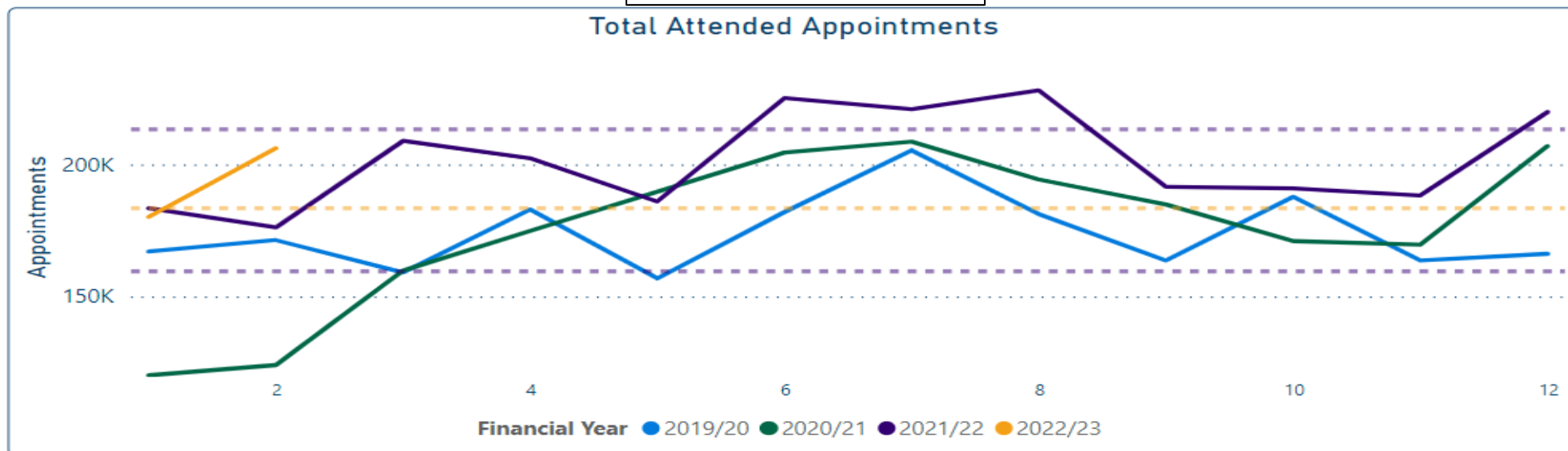
- Slide demonstrates the number of appointments offered within General Practice for Kirklees
- \*\*The publication includes important information however it does not show the totality of GP activity/workload. The data presented only contains information which was captured on the GP practice systems. This limits the activity reported on and does not represent all work happening within a primary care setting. There are no national standards for data entry into GP systems which are not primarily designed for data analysis purposes

# Kirklees Primary Care Appointments

Per 1000 Population

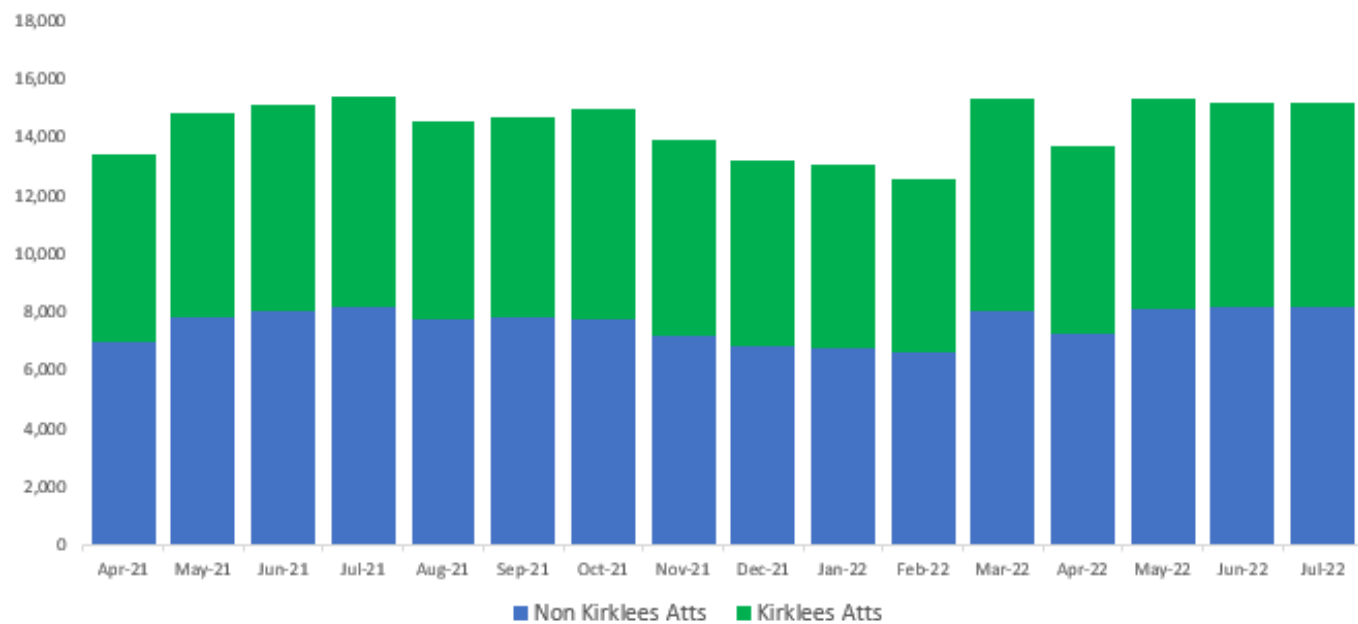


Year on Year



# CHFT ED Attendances

CHFT A&E Trend



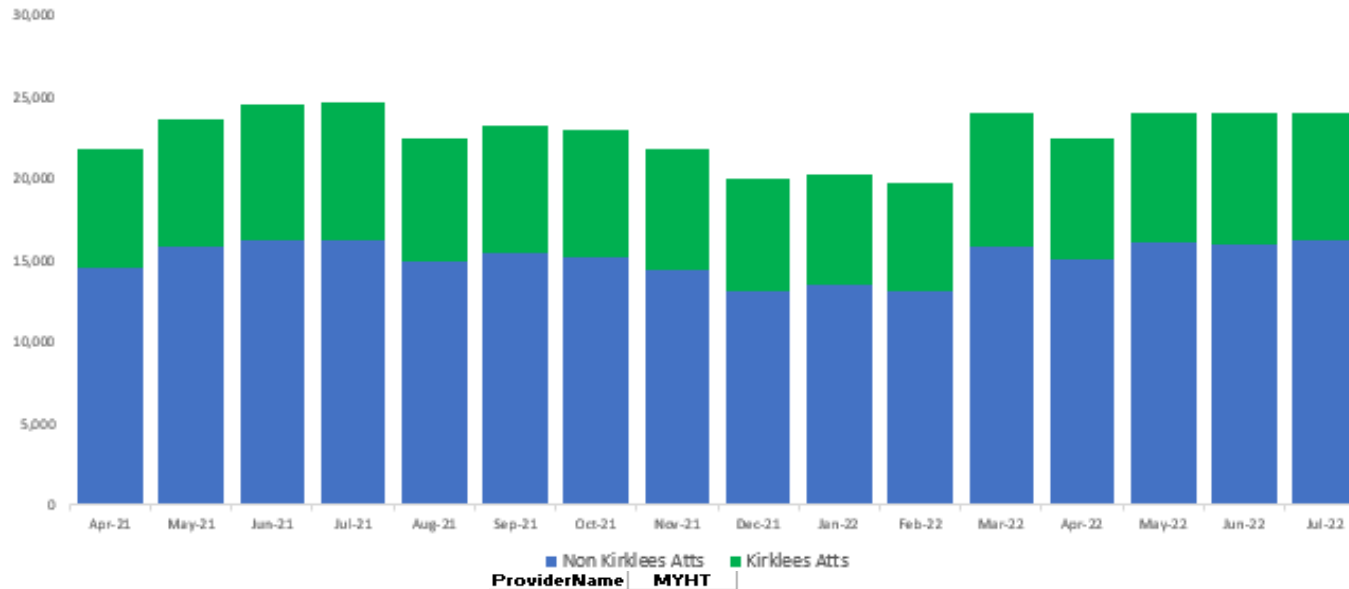
ProviderName	CHFT
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AttendanceMonth	Non Kirklees Atts	Kirklees Atts	Total Atts	% Kirklees Activity
Apr-21	6,969	6,423	13,392	48.0%
May-21	7,806	6,971	14,777	47.2%
Jun-21	7,982	7,109	15,091	47.1%
Jul-21	8,156	7,222	15,378	47.0%
Aug-21	7,708	6,783	14,491	46.8%
Sep-21	7,786	6,891	14,677	47.0%
Oct-21	7,756	7,208	14,964	48.2%
Nov-21	7,198	6,700	13,898	48.2%
Dec-21	6,817	6,393	13,210	48.4%
Jan-22	6,726	6,331	13,057	48.5%
Feb-22	6,570	5,993	12,563	47.7%
Mar-22	8,043	7,260	15,303	47.4%
Apr-22	7,253	6,445	13,698	47.1%
May-22	8,106	7,170	15,276	46.9%
Jun-22	8,188	6,989	15,177	46.0%
Jul-22	8,122	7,065	15,187	46.5%
<b>Grand Total</b>	<b>121,186</b>	<b>108,953</b>	<b>230,139</b>	<b>47.3%</b>

The graph above shows the total CHFT ED attendances over the last 16 months and the proportion of which are Kirklees population. On average Kirklees accounts for 47.3% of all ED attendances. To note there was a reduction in overall attendances between Nov 21 to Feb 22 with an increasing trend stabilising over the last three months. The number of ED attendances over the last 3 months are 0.9% higher than the same period last year.

# MYHT ED Attendances

MYHT A&E Trend (All Department Types)



The graph shows the total MYHT ED attendances over the last 16 months and the proportion of which are Kirklees population. On average Kirklees accounts for 38.5% of Type1-2 ED attendances, 83.4% of WIC attendances. To note there was a reduction in overall attendances between Nov 21 to Feb 22 with an increasing trend stabilising over the last three months. The number of ED attendances over the last three months are 1.1% lower than the same period last year.

AttendanceMont	01 Emergency Department				03 Other type of A&E/MIU				04 NHS WIC				All Department Types			
	Non Kirklees	Kirklees Atts	TotalAtt	% Kirklees	Non Kirklees	Kirklees Atts	TotalAtt	% Kirklees	Non Kirklees	Kirklees Atts	TotalAtt	% Kirklees	Non Kirklees	Kirklees Atts	TotalAtt	% Kirklees
Apr-21	10,208	6,286	16,494	38.1%	4,272	36	4,308	0.8%	132	926	1,058	87.5%	14,612	7,248	21,860	33.2%
May-21	11,332	6,774	18,106	37.4%	4,360	30	4,390	0.7%	188	999	1,187	84.2%	15,880	7,803	23,683	32.9%
Jun-21	11,388	7,308	18,696	39.1%	4,697	30	4,727	0.6%	169	997	1,166	85.5%	16,254	8,335	24,589	33.9%
Jul-21	11,404	7,292	18,696	39.0%	4,672	27	4,699	0.6%	228	1,046	1,274	82.1%	16,304	8,365	24,669	33.9%
Aug-21	10,378	6,333	16,711	37.9%	4,333	19	4,352	0.4%	193	1,171	1,364	85.9%	14,904	7,523	22,427	33.5%
Sep-21	10,593	6,675	17,268	38.7%	4,646	26	4,672	0.6%	196	1,075	1,271	84.6%	15,435	7,776	23,211	33.5%
Oct-21	10,414	6,791	17,205	39.5%	4,566	29	4,595	0.6%	193	987	1,180	83.6%	15,173	7,807	22,980	34.0%
Nov-21	9,947	6,429	16,376	39.3%	4,235	28	4,263	0.7%	190	1,066	1,256	84.9%	14,372	7,523	21,895	34.4%
Dec-21	9,272	5,854	15,126	38.7%	3,649	32	3,681	0.9%	178	972	1,150	84.5%	13,099	6,858	19,957	34.4%
Jan-22	9,437	5,837	15,274	38.2%	3,869	38	3,907	1.0%	162	984	1,146	85.9%	13,468	6,859	20,327	33.7%
Feb-22	9,185	5,668	14,853	38.2%	3,825	17	3,842	0.4%	175	857	1,032	83.0%	13,185	6,542	19,727	33.2%
Mar-22	11,031	7,091	18,122	39.1%	4,564	20	4,584	0.4%	212	1,136	1,348	84.3%	15,807	8,247	24,054	34.3%
Apr-22	10,228	6,319	16,547	38.2%	4,569	34	4,603	0.7%	252	1,103	1,355	81.4%	15,049	7,456	22,505	33.1%
May-22	11,016	6,697	17,713	37.8%	4,837	30	4,867	0.6%	293	1,192	1,485	80.3%	16,146	7,919	24,065	32.9%
Jun-22	10,680	6,752	17,432	38.7%	4,962	21	4,983	0.4%	307	1,264	1,571	80.5%	15,949	8,037	23,986	33.5%
Jul-22	10,897	6,575	17,472	37.6%	5,065	40	5,105	0.8%	313	1,193	1,506	79.2%	16,275	7,808	24,083	32.4%
<b>Grand Total</b>	<b>167,410</b>	<b>104,681</b>	<b>272,091</b>	<b>38.5%</b>	<b>71,121</b>	<b>457</b>	<b>71,578</b>	<b>0.6%</b>	<b>3,381</b>	<b>16,968</b>	<b>20,349</b>	<b>83.4%</b>	<b>241,912</b>	<b>122,106</b>	<b>364,018</b>	<b>33.5%</b>

# >12 Hour ED Breaches

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22
MYHT	0	0	0	1	6	0	1	2	0	1	0	3	31	4	2	22
CHFT	0	0	0	3	0	0	2	0	2	4	1	1	0	1	2	2

The table above shows the number of >12 hour breaches by month for both MYHT and CHFT, there does not appear to be any correlation between attendances and increase in 12 hour breaches.



## Mobile Response (Kirklees)

Preventing Hospital Admissions

**975**

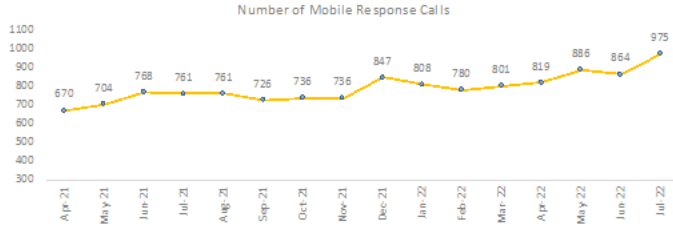
**4390**

**97.6%**

Calls Received (In Month)

Calls Received (YTD)

% of calls where ambulance not called (In Month)



## Rapid Response (Kirklees)

Two hour community rapid response; admission avoidance, follow-up, re-ablement

**86**

**917**

Referrals Received (In Month)

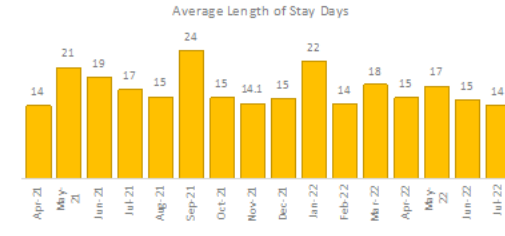
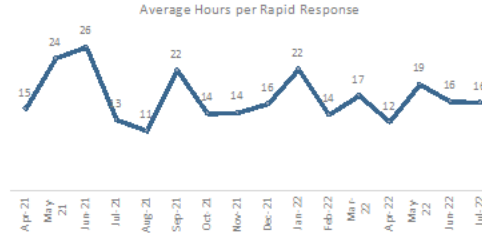
Referrals Received (YTD)

**16**

**14**

Avg Hours per Rapid case (In

Average Length of Stay Days (In



## Reablement (Kirklees)

Timely Access to Community Support & Reablement

**138**

**1464**

**97.10%**

**77%**

**13%**

**54%**

Referrals Received (In Month)

Referrals Received (YTD)

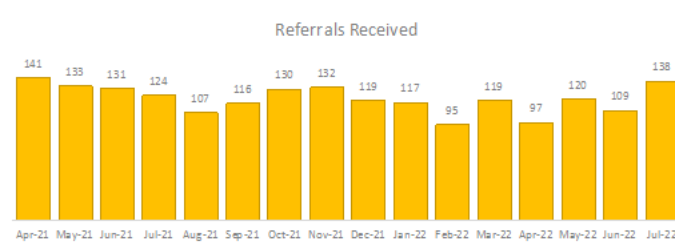
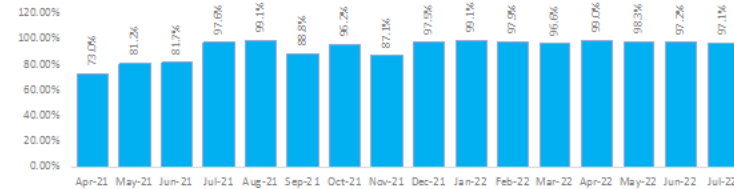
% of Referrals going on to receive Reablement Services

% No further/decreased support (In Month)

% Admitted to Hospital (In Month)

Visits made within 2 days (UCR Target)

% of Reablement Referrals going on to receive Reablement Services



## Discharge to Assess Beds (Kirklees)

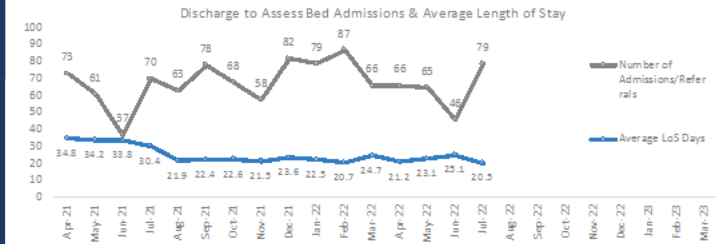
Appropriate D2A and community bed capacity

**79**

**20**

Referrals Received (In Month)

Average Length of Stay Days (In



## Market Capacity (Kirklees)

Strong wrap around multi-agency support to Care Homes / Ensure Resilience in Home Care Market

**1354**

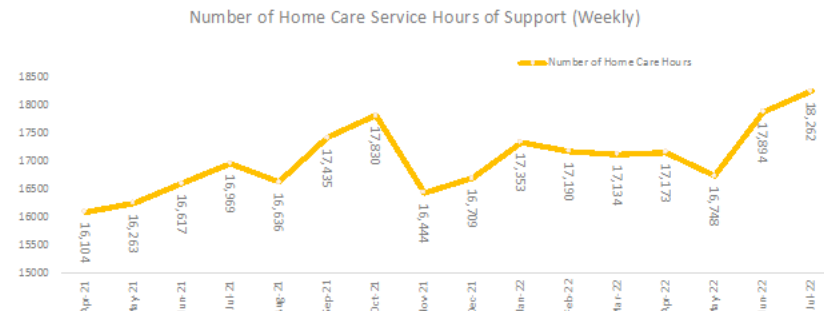
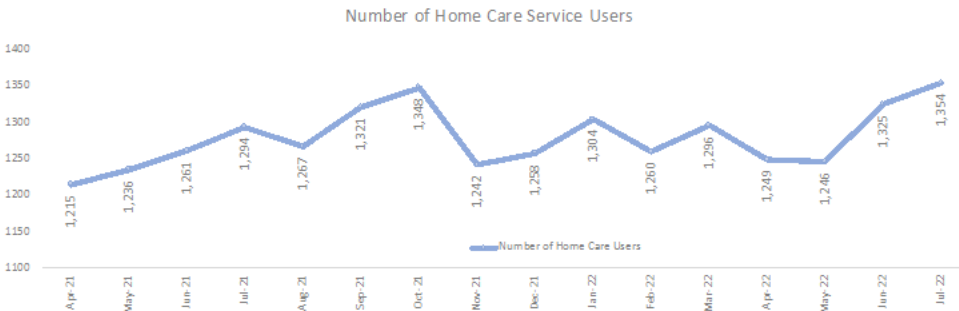
**1449**

**9**

Number of Current Home Care Users

Number of Current Care Home Placements

Number of People on Home Care Waiting



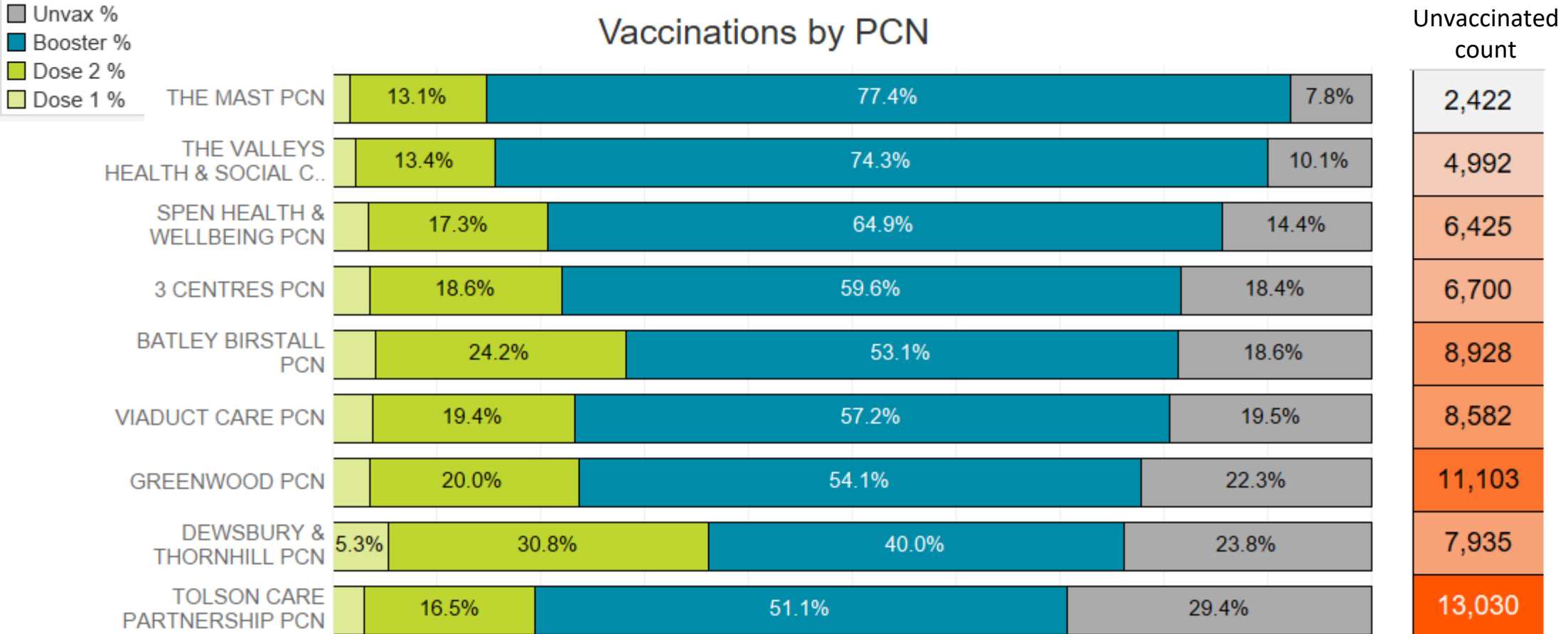
# Kirklees Council Statutory Activity over 12 months



Activity	Hospital Social Care Team	Community Social Care Teams
Care Act Assessments	1,072 – 86% led to services	1,292 – 57% led to services
Care Act Reviews	1,425	8,911
Professional interventions		2,535
SCOT Assessments		581
Mental Health Assessments		965
Safeguarding referrals	1,727	
Gateway to Care enquiries	39,538	
<b>Unplanned work contributing towards hospital avoidance</b>		
Hospital Avoidance Team referrals	620	
Carephone alerts for assistance	352,656	
Mobile Response call outs	9,014	
Pieces of Equipment supplied by KICES	48,000	
<b>Services provided (Current)</b>		
Domiciliary Care Hours provided	18,360	
Dom Care wating list	90.29 hours	
Care home placements (resi/nursing) in Kirklees (includes self-funders)	2,715	

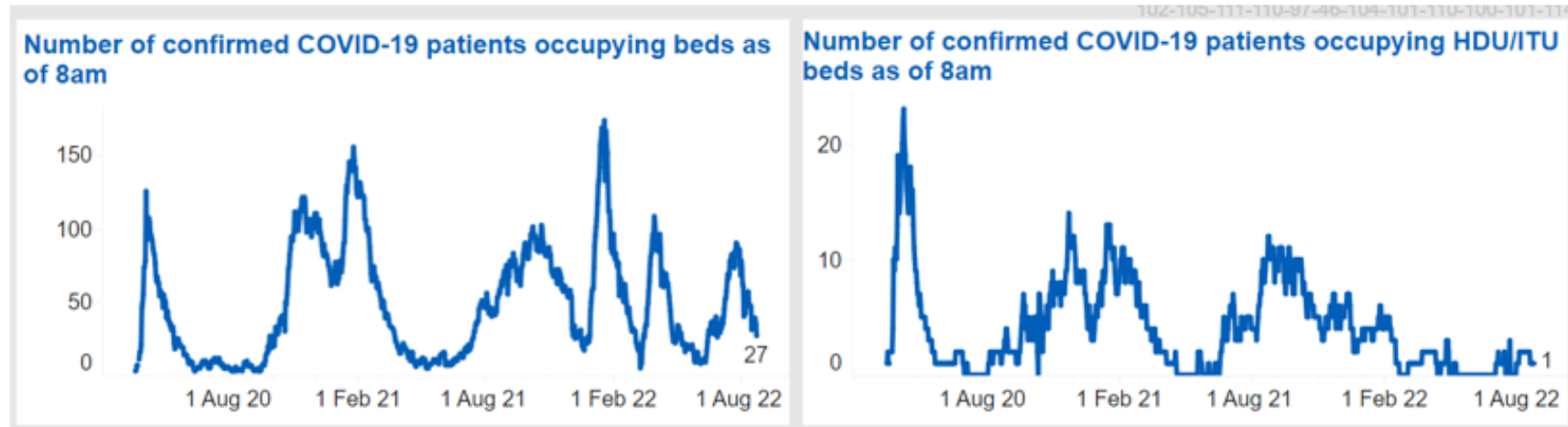
# Covid Vaccination status as at July 2022

Vaccinations by PCN



# Covid – CHFT In Hospital

Number of open beds reported <b>647</b>	Number of beds occupied by confirmed COVID-19 cases as of 8am <b>27</b>	HDU/ITU beds occupied by confirmed COVID-19 cases as of 8am <b>Adult: 1</b> Paeds & neo: 0	Inpatients diagnosed with COVID-19 in past 24 hours <b>4</b>	New admissions with COVID-19 in past 24 hours <b>2</b>	Patients currently awaiting swab results as of 8am <b>4</b>	All discharges <b>6</b>	Of these discharges to usual place of residence <b>6 (100%)</b>	Staff - All Absences <b>345</b>	Of these COVID-19 related absences <b>44 (13%)</b>
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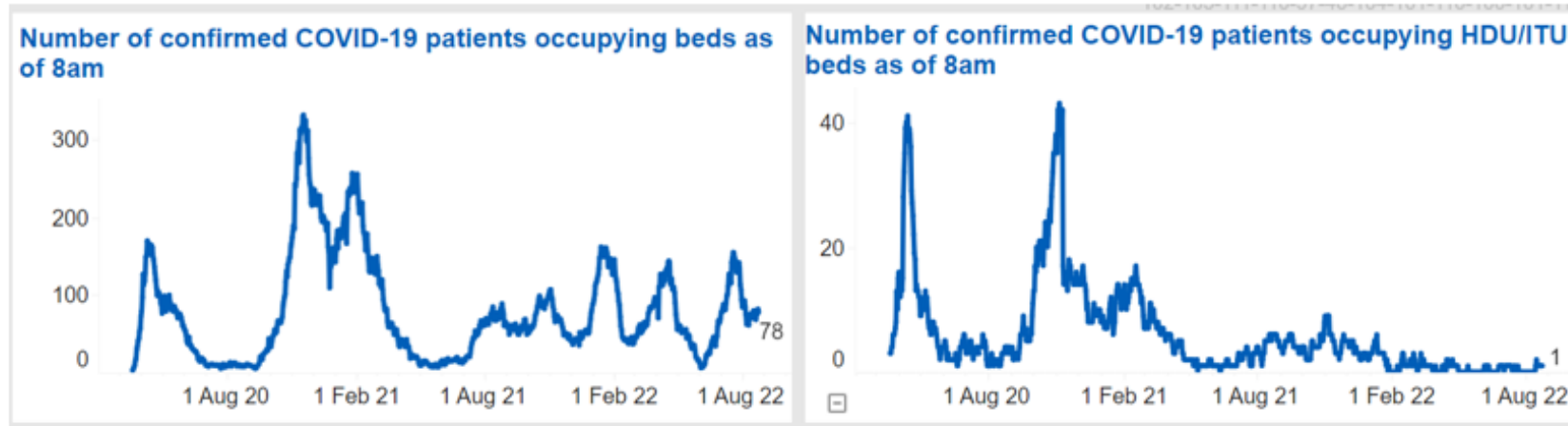


As reported 23<sup>rd</sup> August

- Covid in hospital position – 4% of total beds
- Total of 27 confirmed covid patients in a bed
- ICU – 1 patient in a bed
- 13% of staff absences due to covid

# Covid – MYHT In Hospital

Number of open beds reported <b>1,122</b>	Number of beds occupied by confirmed COVID-19 cases as of 8am <b>78</b>	HDU/ITU beds occupied by confirmed COVID-19 cases as of 8am <b>Adult: 1</b> Paeds & neo: 0	Inpatients diagnosed with COVID-19 in past 24 hours <b>9</b>	New admissions with COVID-19 in past 24 hours <b>0</b>	Patients currently awaiting swab results as of 8am <b>4</b>	All discharges <b>12</b>	Of these discharges to usual place of residence <b>10 (83%)</b>	Staff - All Absences <b>576</b>	Of these COVID-19 related absences <b>59 (10%)</b>
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As reported 23<sup>rd</sup> August

- Covid in hospital position – 7% of total beds
- Total of 78 confirmed covid patients in a bed
- ICU – 1 patient in a bed
- 10% of staff absences due to covid

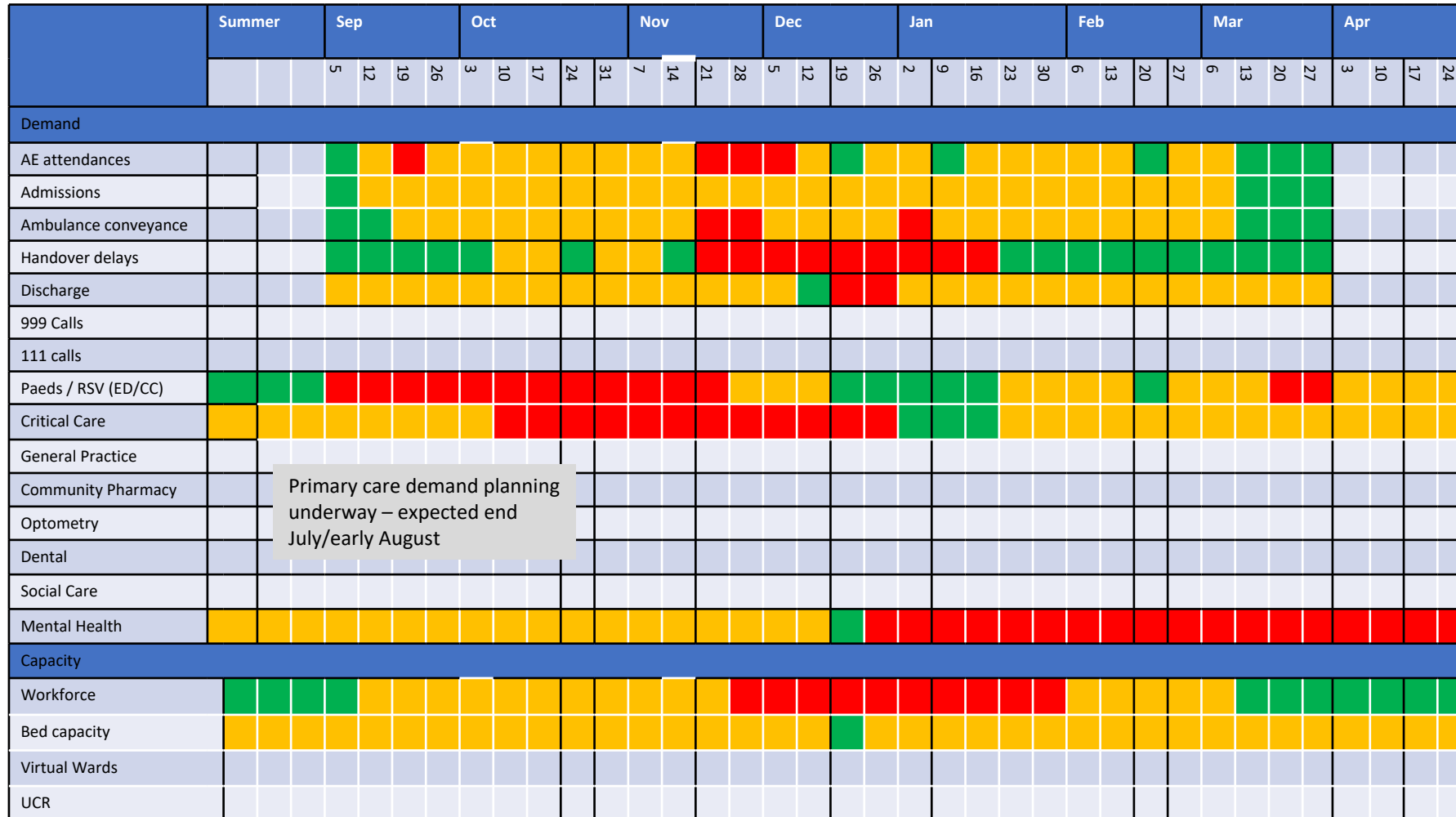
# Unvaccinated status as at July 2022

	Yet to have dose 1								
	Age 12-15	Age 16-17	Age 18-29	Age 30-39	Age 40-49	Age 50-59	Age 60-69	Age 70-79	Age 80+
All	41%   9,216	32%   3,468	31%   21,453	25%   15,907	16%   9,271	20%   5,950	13%   2,864	7%   1,315	4%   672
Female	40%   4,365	29%   1,549	27%   9,021	21%   6,438	13%   3,516	8%   2,298	6%   1,250	3%   633	4%   384
Male	42%   4,850	35%   1,919	34%   12,432	30%   9,467	20%   5,754	12%   3,652	7%   1,614	4%   682	4%   288
Deprived (DQ1)	54%   4,476	44%   1,736	38%   10,170	33%   7,783	24%   4,513	16%   2,583	11%   1,188	8%   520	8%   286
Moderately Deprived (DQ2)	45%   2,314	37%   886	35%   6,269	27%   3,987	17%   2,172	10%   1,301	7%   631	4%   273	4%   158
Average (DQ3)	32%   1,055	24%   359	24%   2,397	20%   1,927	12%   1,082	8%   846	5%   422	3%   197	2%   85
Moderately Affluent (DQ4)	24%   951	19%   356	18%   1,867	16%   1,580	10%   1,043	6%   829	4%   409	2%   206	2%   94
Affluent (DQ5)	20%   397	12%   123	14%   655	13%   590	8%   435	5%   381	3%   203	2%   112	2%   46
White British	29%   3,752	21%   1,337	19%   7,384	17%   6,137	10%   3,589	6%   2,913	4%   1,468	2%   718	2%   278
White other	55%   377	53%   136	57%   1,847	48%   1,851	36%   1,000	22%   440	17%   249	8%   72	5%   28
Pakistani	55%   2,549	44%   961	32%   3,451	23%   2,199	17%   1,397	13%   571	12%   338	14%   143	17%   111
Indian	57%   699	47%   267	33%   1,350	27%   829	17%   542	11%   218	7%   104	8%   57	11%   36
Asian other	44%   235	44%   104	60%   2,474	37%   890	24%   413	17%   151	15%   80	15%   30	20%   17
Black	54%   263	59%   117	49%   1,013	47%   896	31%   452	27%   381	24%   165	19%   45	18%   58
Mixed	57%   522	49%   229	49%   951	46%   650	32%   254	19%   113	17%   35	21%   11	
Any other ethnic gr..	61%   177	52%   64	64%   1,306	53%   809	39%   362	27%   127	18%   42	12%   15	

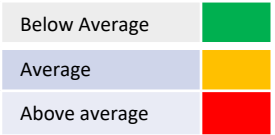
# Flu Data for 2021/22 as of 7<sup>th</sup> March 2022

Flu data as at 07.03.22 Using Foundry Flu Dashboard	Vaccinated	Total Eligible population size	% Vaccinated	% 2020.21 Total Outturn**	No. Of vaccinations achieved as at 08.03.21	Total Eligible population size	% Vaccinated as at 08.03.21	Change from this time last year	Target %
Kirklees*	156543	289832	54.0%						
Care Home Residents	2753	3661	75.2%	77.9%	1877	2409	77.9%	-2.7%	75%
Age 65+	64504	79673	81.0%	81.6%	61219	75010	81.6%	-0.7%	85%
Age 50-64	43445	82071	52.9%	31.3%	16553	52804	31.3%	21.6%	75%
Flu at risk	56383	81912	68.8%	55.4%	42050	75942	55.4%	13.5%	75%
Immunosupressed	6649	10247	64.9%						75%
Household contacts of Immunosupressed	8385	22220	37.7%						75%
Pregnant	794	4080	19.5%	43.6%	1056	2422	43.6%	-24.1%	75%
Children age 2-3	3964	9825	40.3%	46.1%	4885	10587	46.1%	-5.8%	70%
School age children	29567	67808	43.6%	56.5%	28719	50875	56.5%	-12.8%	70%
Frontline Healthcare workers	6723	14244	47.2%						85%
Frontline Socialcare workers	4293	13012	33.0%						85%
CCG Staff	121	192	63.0%	68.1%	130	191	68.1%	-5.0%	100% Offer

# Provisional Demand & Capacity Modelling – West Yorkshire



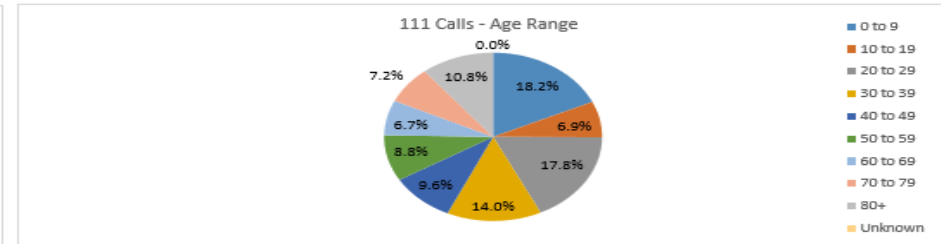
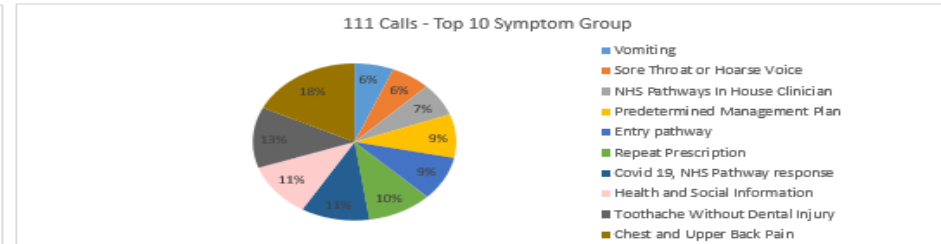
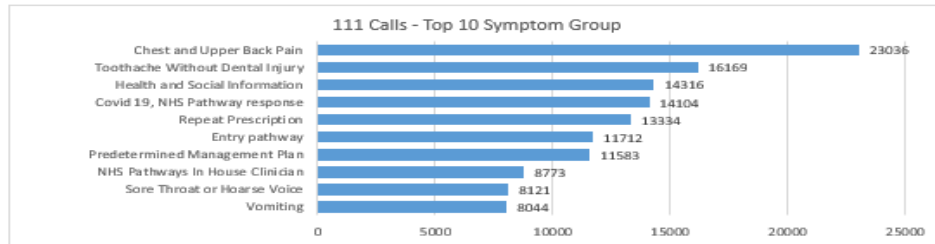
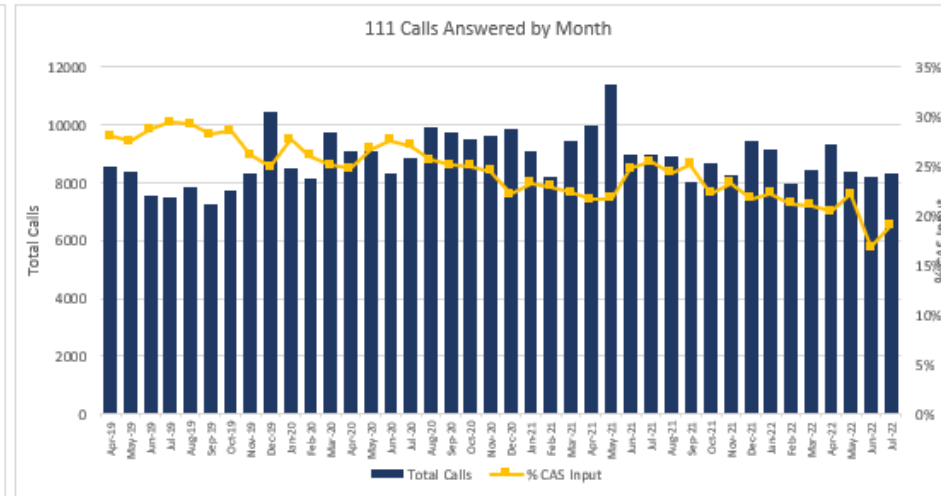
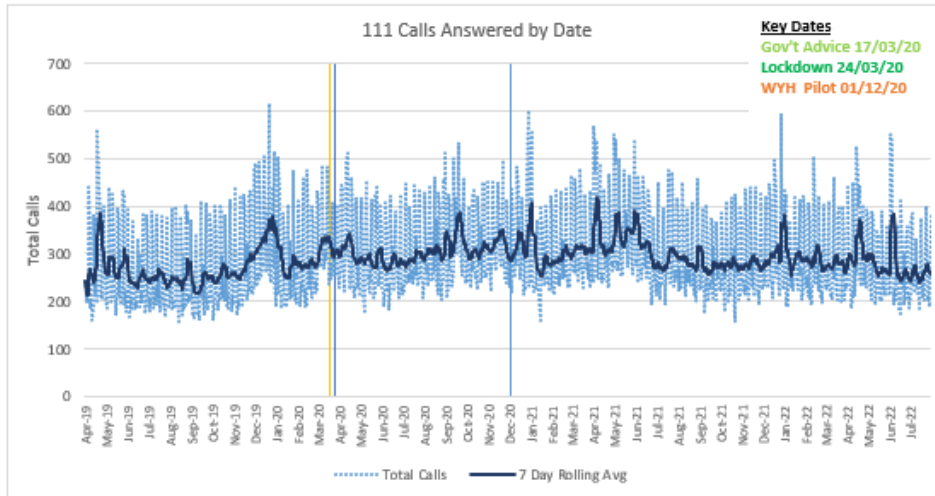
Primary care demand planning underway – expected end July/early August



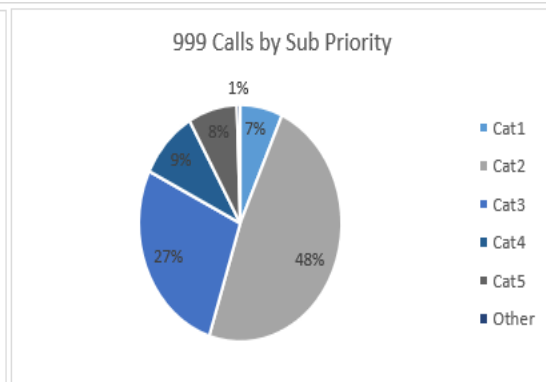
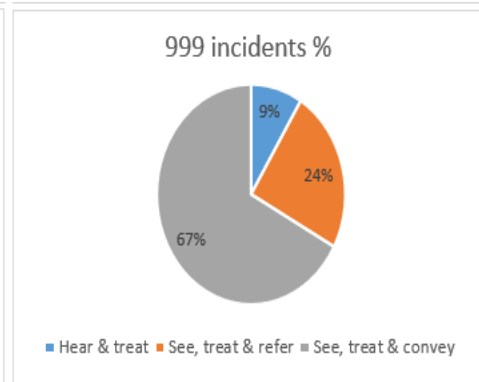
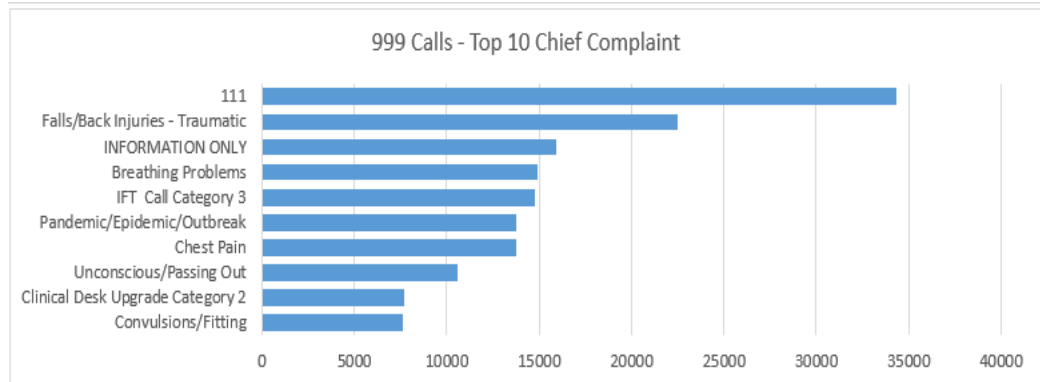
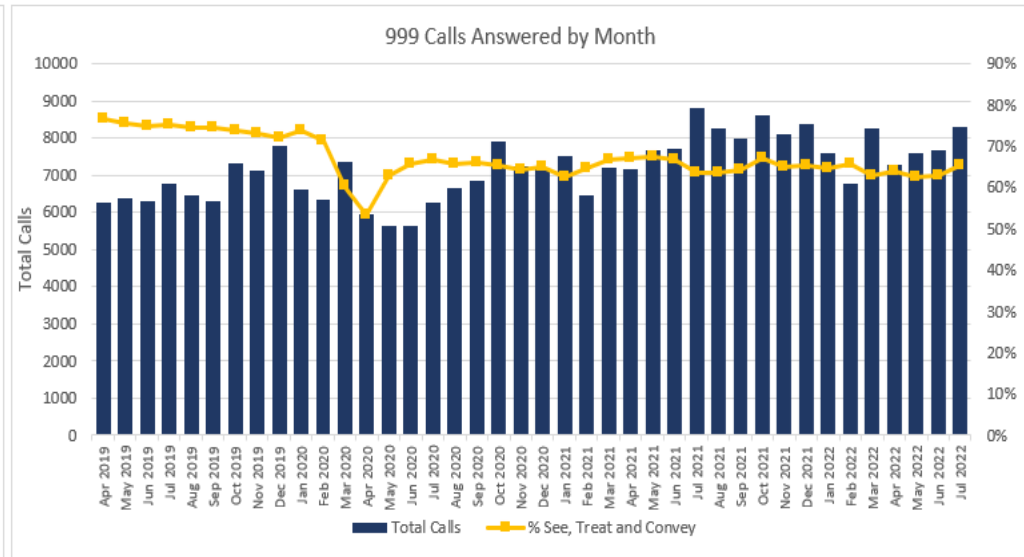
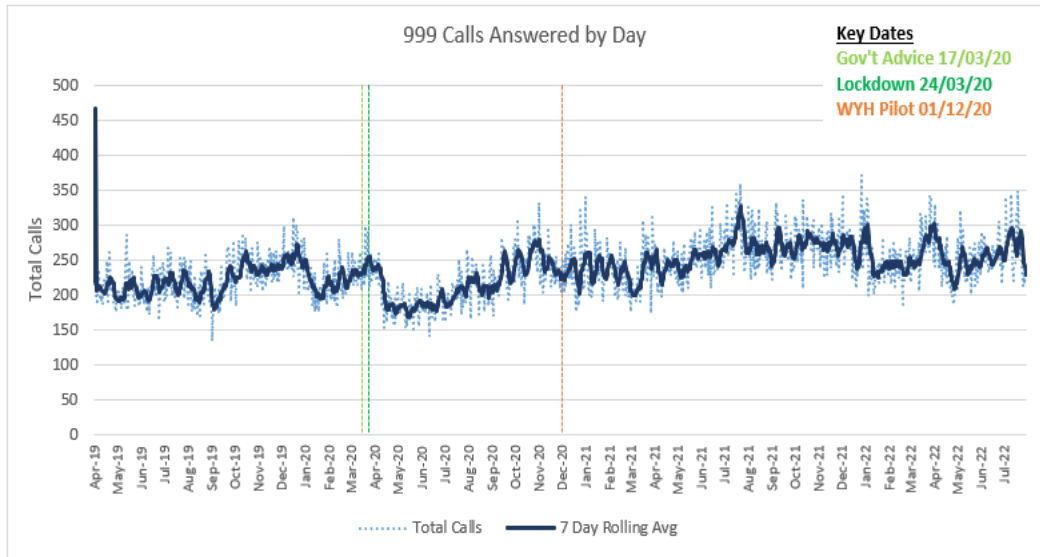
- Workforce - Three scenarios to consider in planning:**
1. same as this winter with peak in January
  2. higher absence through winter but no spikes
  3. lower absence most of winter but then big spike due to flu and COVID at same time



# Kirklees 111 Demand



# Kirklees 999 Demand



# YAS Performance – Delivery Board Overview



## Delivery Board Overview

Note: Hambleton Delivery Board will show no data if selected in conjunction with a date before March 2020, although trend data will still show.



**Select Month**

- Jul 2022
- Jun 2022
- May 2022
- Apr 2022
- Mar 2022
- Feb 2022
- Jan 2022
- Dec 2021

**Call and Response Demand by Category**

Category	Incidents	Responses	On Scene Responses
Cat1	341	324	322
Cat2	2,233	1,658	1,634
Cat3	770	483	458
Cat4	557	14	5
Cat5	492	188	6
HCP Level 3	70	61	61
HCP Level 4	69	39	38
IFT Level 3	64	58	58
<b>Total</b>	<b>4,619</b>	<b>2,843</b>	<b>2,600</b>

**Responses by Category**

**Response Outcomes**

**Select A&E Delivery Board**

- Barnsley
- Bradford and Airedale
- Calderdale and Greater Hudd...
- Doncaster
- Hull and East Riding
- Leeds
- Mid Yorks
- Rotherham
- Sheffield
- Vale of York, Scarborough an...

**Select Measure to Show on Graph**

- Conveyed to ED
- Conveyed to Non-ED
- Hear & Treat
- See, Treat & Convey
- See, Treat & Refer

**Hospital Information**

Hospital	Conveyances	Attends with a Handover Time	Average Handover Time	Average Turnaround Time	Handovers Under 15 Mins
CALDERDALE ROYAL HOSPITAL	1,566	830	00:20:00	00:45:25	47.8 %
HUDDERSFIELD ROYAL INFIRMARY	1,636	925	00:20:23	00:46:31	49.7 %



# YAS Performance – Delivery Board Overview



## Delivery Board Overview

Note: Hambleton Delivery Board will show no data if selected in conjunction with a date before March 2020, although trend data will still show.



**Select Month**

- Jul 2022
- Jun 2022
- May 2022
- Apr 2022
- Mar 2022
- Feb 2022
- Jan 2022
- Dec 2021

**Select A&E Delivery Board**

- Barnsley
- Bradford and Airedale
- Calderdale and Greater Hudd...
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- Vale of York, Scarborough an...

**Select Measure to Show on Graph**

- Conveyed to ED
- Conveyed to Non-ED
- Hear & Treat
- See, Treat & Convey
- See, Treat & Refer

**Call and Response Demand by Category**

Category	Incidents	Responses	On Scene Responses
Cat1	1,198	1,119	1,119
Cat2	7,320	5,564	5,522
Cat3	2,569	1,586	1,527
Cat4	1,438	29	24
Cat5	1,438	642	20
HCP Level 3	325	297	296
HCP Level 4	311	217	214
IFT Level 3	676	607	607
IFT Level 4	142	121	121
<b>Total</b>	<b>15,417</b>	<b>10,182</b>	<b>9,450</b>

**Responses by Category**

**Response Outcomes**

**Hospital Information**

Hospital	Conveyances	Attends with a Handover Time	Average Handover Time	Average Turnaround Time	Handovers Under 15 Mins
DEWSBURY DISTRICT HOSPITAL	325	243	00:08:51	00:35:27	83.1 %
PINDERFIELDS GENERAL HOSPITAL	3,383	3,012	00:14:35	00:38:24	63.2 %

**Trend Data for Selected Measure**

# NHS 111- Kirklees data



## NHS Kirklees CCG

This data contains both NHS Kirklees CCG and Greater Huddersfield CCG with a comparison of data over three years, 2019/20, 2020/21 and 2021/22.

Comparison on calls by month shows that 2020/21 had the highest number of calls for Kirkless CCG when comparing the three years.

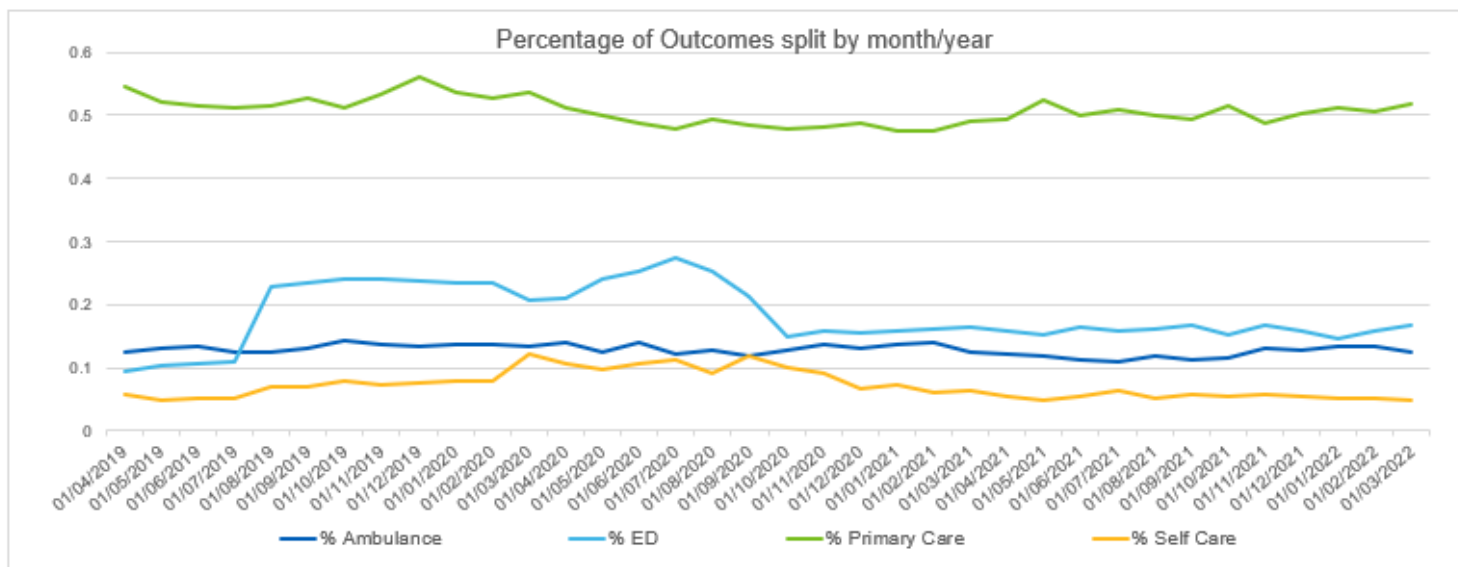
Looking at outcomes for triaged calls we can see that some of the average figures over the three years shifted when looking at 2020/21 - this will likely be due to covid.

Ambulance outcomes remain similar over the three years, whereas ED outcomes peak in 2020/21 at 19.9% then drop by 4% for 2021/22.

Primary care dropped in 2020/21 by 4.1% from 2019/20, while self-care followed the same pattern as ED and increased for 2020/21 then decreased by 3.6% in 2021/22.

Number of triaged calls split by Outcome - an average by year

Average	Triaged Ambulance	% Ambulance	Triaged ED	% ED	Triaged Primary Care	% Primary Care	Triaged Self Care	% Self Care
2019/20	1,137	13.3%	1,629	18.9%	4,529	52.8%	621	7.2%
2020/21	1,210	13.1%	1,833	19.9%	4,500	48.7%	840	9.1%
2021/22	1,096	12.2%	1,432	15.9%	4,555	50.4%	490	5.4%



# Category 1 Response Times



## Response Times

The below table shows the Category 1 Performance times broken down by month and Postcode district.

Postcode District	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Average
BD11	00:11:25	00:11:18	00:09:53	00:10:08	00:11:30	00:10:19	00:09:29	00:09:52	00:10:38
BD19	00:09:58	00:09:08	00:07:52	00:08:12	00:10:34	00:09:03	00:08:39	00:09:16	00:09:11
HD1	00:07:59	00:08:35	00:07:27	00:06:48	00:06:33	00:08:04	00:06:25	00:07:09	00:07:20
HD2	00:08:37	00:08:19	00:07:48	00:07:18	00:08:31	00:07:56	00:07:29	00:08:15	00:08:02
HD3	00:08:53	00:08:13	00:07:26	00:06:48	00:09:04	00:06:48	00:07:13	00:07:56	00:07:47
HD4	00:09:56	00:08:22	00:08:24	00:09:43	00:09:49	00:09:28	00:06:56	00:08:46	00:08:56
HD5	00:10:58	00:09:08	00:08:44	00:06:57	00:09:37	00:08:50	00:08:43	00:09:09	00:09:08
HD6	00:08:07	00:08:25	00:06:58	00:07:05	00:09:01	00:07:30	00:07:38	00:07:34	00:07:53
HD7	00:13:08	00:14:07	00:12:43	00:12:00	00:11:59	00:12:15	00:10:27	00:11:17	00:12:25
HD8	00:14:31	00:12:26	00:12:28	00:12:18	00:13:36	00:13:20	00:12:57	00:13:59	00:13:12
HD9	00:11:36	00:12:41	00:10:53	00:12:16	00:12:09	00:10:22	00:09:43	00:11:35	00:11:24
WF12	00:12:04	00:10:31	00:09:34	00:09:56	00:12:39	00:11:06	00:09:00	00:09:49	00:10:44
WF13	00:09:04	00:09:17	00:09:52	00:08:45	00:10:46	00:09:45	00:08:25	00:08:53	00:09:19
WF15	00:11:42	00:10:07	00:08:17	00:10:41	00:11:31	00:08:35	00:09:40	00:10:01	00:09:59
WF17	00:10:38	00:09:17	00:08:42	00:08:36	00:10:11	00:10:07	00:08:56	00:09:16	00:09:31

## Demand

The below table shows Category 1 Demand broken down by month and Postcode district.

Postcode District	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Total
BD11	13	21	16	8	15	10	8	12	103
BD19	29	32	25	28	41	20	30	18	223
HD1	59	59	70	54	73	78	83	89	565
HD2	44	39	40	45	49	53	35	41	346
HD3	44	52	41	39	35	46	45	39	341
HD4	42	41	42	34	42	36	36	40	313
HD5	46	46	35	34	48	32	29	51	321
HD6	51	38	26	22	37	28	38	32	272
HD7	28	25	18	14	24	14	18	13	154
HD8	24	29	24	29	31	32	30	31	230
HD9	27	33	25	24	30	39	26	30	234
WF12	37	52	42	34	55	38	33	29	320
WF13	73	57	46	56	63	46	66	49	456
WF15	19	33	31	24	26	25	21	21	200
WF17	53	56	59	32	57	50	44	53	404



# Category 2 Response Times



## Response Times

The below table shows the Category 2 Performance times broken down by month and Postcode district.

Postcode District	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Average
BD11	00:45:46	00:58:10	00:44:45	00:31:34	00:52:27	00:43:17	00:30:36	00:44:15	00:44:24
BD19	00:47:47	00:50:26	00:39:30	00:31:47	00:52:50	00:38:20	00:36:43	00:38:48	00:42:15
HD1	00:35:39	00:44:01	00:26:11	00:26:23	00:36:40	00:29:53	00:22:33	00:31:37	00:31:59
HD2	00:40:32	00:49:34	00:35:05	00:24:22	00:41:52	00:32:10	00:24:04	00:32:08	00:35:31
HD3	00:42:20	00:55:22	00:31:41	00:25:12	00:40:50	00:31:05	00:26:13	00:28:35	00:35:34
HD4	00:39:58	00:48:28	00:32:14	00:26:19	00:40:38	00:32:02	00:25:11	00:30:51	00:34:50
HD5	00:38:02	00:52:26	00:30:43	00:31:50	00:44:59	00:34:21	00:28:21	00:29:00	00:36:02
HD6	00:41:52	00:40:40	00:26:39	00:23:40	00:35:29	00:29:18	00:28:00	00:28:07	00:31:53
HD7	00:43:13	00:58:59	00:34:53	00:30:04	00:48:31	00:32:48	00:28:41	00:33:35	00:39:35
HD8	00:49:29	01:01:38	00:38:18	00:35:10	00:45:42	00:39:43	00:33:31	00:42:47	00:43:24
HD9	00:44:34	01:00:55	00:31:17	00:33:12	00:54:41	00:37:35	00:33:02	00:37:13	00:42:25
WF12	00:53:33	01:02:33	00:49:12	00:37:44	00:57:53	00:44:42	00:31:54	00:40:04	00:46:55
WF13	00:49:46	00:56:36	00:43:12	00:29:32	00:59:19	00:40:10	00:33:58	00:40:02	00:44:18
WF15	00:50:17	00:55:25	00:35:13	00:36:43	00:52:22	00:35:43	00:32:54	00:32:04	00:40:51
WF17	00:47:21	01:00:34	00:34:39	00:29:12	00:58:09	00:34:59	00:33:58	00:40:41	00:42:31

## Demand

The below table shows Category 2 Demand broken down by month and Postcode district.

Postcode District	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Total
BD11	74	76	78	54	69	68	69	64	552
BD19	151	154	165	148	170	165	133	146	1232
HD1	288	303	249	252	290	265	270	301	2218
HD2	220	220	210	168	221	217	192	206	1654
HD3	301	312	311	249	303	273	299	288	2336
HD4	240	234	205	199	234	193	230	199	1734
HD5	221	203	205	214	197	216	214	218	1688
HD6	217	201	179	181	189	172	228	227	1594
HD7	110	127	89	89	112	123	97	117	864
HD8	175	184	178	178	192	172	175	192	1446
HD9	182	183	143	149	195	177	162	160	1351
WF12	201	196	193	177	207	206	228	233	1641
WF13	272	274	277	250	243	242	234	258	2050
WF15	106	90	130	112	103	86	124	100	851
WF17	240	209	225	203	224	222	224	206	1753

# Hospital handover



## Handover Times

The below table shows the average Handover times broken down by Hospital and Month.

Calderdale Royal Hospital	
Month	Average Handover Time
Nov-21	00:21:23
Dec-21	00:23:16
Jan-22	00:20:08
Feb-22	00:21:13
Mar-22	00:18:42
Apr-22	00:19:51
May-22	00:18:12
Jun-22	00:18:26
Total	00:20:12

Huddersfield Royal Infirmary	
Month	Average Handover Time
Nov-21	00:19:40
Dec-21	00:22:10
Jan-22	00:21:29
Feb-22	00:17:01
Mar-22	00:17:49
Apr-22	00:19:53
May-22	00:19:06
Jun-22	00:20:24
Average	00:19:43

Pinderfields General Hospital	
Month	Average Handover Time
Nov-21	00:27:55
Dec-21	00:23:14
Jan-22	00:20:50
Feb-22	00:20:43
Mar-22	00:23:08
Apr-22	00:22:18
May-22	00:16:56
Jun-22	00:14:54
Average	00:21:08

Delays are monitored by our WY coordination center and escalated early to the duty operational commander.



# Governance & Oversight

- West Yorkshire Integrated Care System (ICS) Urgent & Emergency Care Programme Board
- Calderdale & Greater Huddersfield Urgent & Emergency Care Board
- Wakefield Urgent & Emergency Care Board
- Kirklees System Pressures (strategic)
- Kirklees System Pressures (operational)
- Weekly CHFT system Silver call (all partners)
- Kirklees Discharge Group (under the Health & Wellbeing Board)
- Weekly Escalation discharge call
- Contract meetings
  - Yorkshire Ambulance Service
  - North East Commissioning Support
  - Local Care Direct

# Escalation

- Internal CHFT Silver & Gold Escalation triggers based on Operational Pressures Escalation Levels Framework
- Calderdale, Kirklees use new Operational Pressures Escalation Levels Framework to gauge system scoring across partners
- Mid- Yorks Escalation process uses same framework
- Kirklees Place escalation if needed can be called by partners if it was felt this would be useful across both acute trust footprints
- Emergency Preparedness, Resilience and Response utilised to respond to, a wide range of incidents and emergencies

# Planning

- Surge & Escalation Plan across Calderdale & Greater Huddersfield (under review)
- Calderdale & Greater Huddersfield surge & Silver & Gold Escalation
- Resilience Plan (formally Winter Plan) recognising the pressures within services are year-round
- West Yorkshire Integrated Care System Resilience plan a combination of Integrated Care Board Place plans
- Assurance for NHS England responding to Key Lines of Enquiry
- Additional specific planning for Bank Holidays; joint approach across CHFT and MYHT footprints with co-terminus plans produced across acute footprint
- Learning from previous years, seasons and events