

Board of Directors
Item number: 17
Date: 30 July 2025

Confidential/public paper:	Public
Report Title:	Winter Plan 2025-26
Author(s)	Greg Hackney, deputy director of operations
Accountable Director:	Helen Smart, chief operating officer
Presented by:	Helen Smart, chief operating officer
Vision and values:	The Sheffield Health and Social Care Winter Plan is critical to business continuity and service resilience. It enables us to deliver services which improve the mental, physical and social wellbeing of the people in our communities . The winter plan contributes to system partnership, with specific focus upon urgent and emergency care.
Purpose:	This report summarises our winter plan for 2025 – 2026. It identifies national, regional and local priorities and learning. It also identifies the role that Sheffield Health and Social Care has within Urgent and Emergency Care within the Sheffield Place. Our winter plan summarises the workstreams that will be progressed, in partnership with other organisations, to provide resilient and high-quality services throughout winter.
Executive summary:	<ul style="list-style-type: none"> The Board of Directors are asked to receive assurance that our Winter Plan responds to the national Urgent and Emergency Care Plan as well as regional and local learning from 2024-2025. The Board of Directors are asked to support the recommended workstreams identified within the 2025-2026 winter plan, and to receive assurance that these workstreams have been identified or supported by the Executive Management Team. The Board of Directors are asked to note that the winter plan will be governed through the Senior Leadership Team with updates provided to the Executive Management Team

Which strategic objective does the item primarily contribute to:					
Effective Use of Resources	Yes	X	No		
Deliver Outstanding Care	Yes	X	No		
Great Place to Work	Yes	X	No		
Reducing inequalities	Yes	X	No		

What is the contribution to the delivery of standards, legal obligations and/or wider system and partnership working.

The Winter Plan will ensure the delivery of clinical and operational functions throughout winter. It will also ensure that we have robust Emergency Preparedness, Resilience and Response arrangements to respond to seasonal pressures and events. The winter plan is key to our system partnership to maintain urgent and emergency care across the Sheffield Place.

Board assurance framework (BAF) and corporate risk(s):

- **BAF 0029** There is a risk to quality, safety and patient care due to delayed access to timely crisis support and mental health services, which could result in poor experience of care and potential harm to service users.

Any background papers/items previously considered:

This is the first time this iteration of this report has been presented to Board of Directors

Recommendation:

The Board of Directors are asked to **approve** the 2025 – 2026 Winter Plan.

▶ 2025 / 26 Winter Resilience Plan

Sheffield Health and Social Care NHS Foundation Trust



July 2025

SHSC – Home First (1)

In February 2025 we launched our Home First Programme. This programme was launched to drive sustainable change so that we are on a stronger footing in Autumn to manage the pressures associated with winter to provide the best care for patients.

At the heart of the Home First programme is to deliver safe and effective care and treatment as close to a patient's home, family or community as possible and reduce the time spent in restricted environments.

Safety, high quality of care and risk reduction are a priority for all of us, as well as reducing unnecessary detention under the Mental Health Act supported by Human Rights principles. We know there are risks associated with patients who stay in our inpatient services for longer than necessary and restrictive practices. We all want a service that enables access to support from loved ones and provides hope in recovery.



SHSC – Home First (2)

To achieve this Home First is delivering three key strands of work:

- Operations – daily patient flow: Improve flow in to and out of our acute wards whilst ensuring that high quality and effective care is received by all patients.
- Sustainable pathways: Improve the coordination, integration, and effectiveness of community teams and inpatient wards to provide patient care close to home, families and communities.
- Medium to Long Term capacity: Optimise system resources and improve collaboration between health and social care services to ensure that patients receive joined up care from organisations and sustainable change is made across Sheffield.



The three workstreams underpin how through the winter period we will work with our system partners to support people in the community, divert patients away from A&E and provide hospital care for those that need it

Approach

Our 2025/2026 Winter Plan has been developed in partnership with the Integrated Care Board, Sheffield Teaching Hospital, Sheffield Children's Trust and Sheffield City Council

Our Winter Plan has also been developed in line of the newly published Urgent and Emergency Care Plan 2025/26

Our 2025 / 2026 Winter Plan contributes to the Sheffield Place Winter Plan which is governed through the Sheffield Urgent and Emergency Care Board.

Our 2025 / 2026 Winter Plan applies learning from our partnership with the Voluntary and Community Sector Organisations and has been developed based upon the contribution and feedback of our service users, carers and families.



Urgent and Emergency Care Plan 2025/26

Areas of Focus

- Category 2 patients must receive an ambulance within 30 minutes.
- Ambulance handovers must not exceed 45 minutes.
- At least 78% A&E patients to be discharged, admitted or transferred within 4 hours.
- Less than 10% patients to wait over 12 hours for admission or discharge from an ED.
- Reduce the number of mental health patients waiting in ED's for over 24 hours.
- Reduce the number of patients staying 21 days over their discharge-ready date.
- See more children within 4 hours.

NHS Trusts Roles and Responsibilities

- Improve vaccination rates among health and care workers.
- Provide accessible occupational health vaccination throughout the flu campaign, including onsite bookable and walk-in appointments.
- Acute trusts to establish a trajectory towards achieving the 15-minute hospital handover target (query if this should be 45-minute ambulance handover).
- Ensure more children are seen within 4 hours by effectively utilising Urgent Treatment Centres (UTCs) and specific services and standards for children and young people.
- Acute trusts to set ambitious local performance targets for daily pathway 0 discharges and profile them through the week.
- Acute trusts and local authorities to set local performance targets for pathway 1, 2, and 3 patients.
- Review bed usage, return people to home-based care where possible, and provide surge capacity alongside IPC cohorting where effective and appropriate.

Mental Health Trusts Roles and Responsibilities

- Mental Health trust leaders to improve Urgent Emergency Care (UEC) services requiring by contributing to system winter plans
- Investment in Crisis Assessment Centres. These centres aim to offer rapid assessment and short-term support in a therapeutic environment, ensuring timely access to specialist care (£26 million)
- Mental health trusts to eliminate inappropriate out of area placements by increasing local inpatients capacity and reducing such placements by 150- 160 patients (£75 million)
- System winter plans must show how local mental health providers will ensure inpatient stays are as short as possible.
- Plans should include:
 - Reducing out-of-area placements (OAPs) to eliminate all ICB commissioned OAPs by March 2027.
 - Identifying and reducing re-admissions of high-intensity crisis pathway users, with specific reduction targets.
 - Ensuring fewer patients wait over 24 hours for mental health admissions by using [UEC Action Cards](#) and implementing 10 high-impact actions for [mental health discharges](#) across all relevant pathways.

Yorkshire and Humber Learning from 2024 / 2025

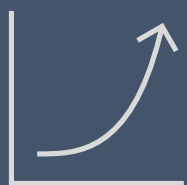
- **Winter Plan**
 - Delayed development, sign off, funding and implementation of winter plans
- **Workforce Pressures**
 - Winter sickness levels not always accounted for in the plans
 - Winter posts not recruited early enough
- **Infection, Prevention Control-**
 - Balancing flow and infection risk was a key challenge
 - IPC approach needs to be embedded into winter planning
- **Inconsistent Service Models**
 - Opening hours
 - Access
 - Directory of Service /Clinical assessment service profiles not consistent of reflective of the services available.
- **Inconsistent use of action cards-**
 - OPEL, Mental Health etc
- **Vaccination Uptake**
 - Especially staff
- **Escalation and oversight**
 - Overuse or under use of escalation
 - Need to focus on resolving issues at the point nearest the risk.
- **Hospital flow**
 - Need to Focus on Flow 24/7 (to avoid out of hours escalation)
 - Consider Flow co-ordinators
 - 7 day discharge plans

SHSC Learning from 2024 / 2025

- We experienced increased transmission of Covid-19 and Influenza. We must ensure that our vaccination programme protects the most vulnerable and reduces sickness absence.
- We managed industrial action around pay and conditions across our nursing and medical workforce. We must build upon our positive engagement and interface with staff side and our workforce.
- Our hospital facing crisis services experienced high demand from the Emergency Department at Sheffield Teaching Hospital. A BCF initiative was mobilised which increased liaison psychiatry resource and diverted more people to the Decisions Unit.
- 25% of our hospital beds were occupied by delayed discharges. A programme was established to reduce delayed discharges to the national target of 10%, this included:
 - 3 Additional step-down beds through Sheffield City Council
 - 3 Additional social worker roles through Sheffield City Council
 - £50,000 to the Citizen's Advice Bureau to support earlier discharge from hospital
- Delayed discharge, attributed to social care delays remains a significant challenge



Key Risks



Rising rates of
Influenza and Covid- 19



Increased demand into
General Hospitals



Increased workforce
sickness absence



Adverse weather



Flexibility across wider
health and care system



Social isolation and
loneliness

Key Risks



Estates and Facilities



Cyber / Data Security



Staff wellbeing and
resilience



MH Social Work
recruitment / retention



Absence of 7 day
discharges



High LoS / above
national average

Key Risks



Timely patient flow
through our services



Appetite for positive
clinical risk



On Call Leadership
capacity and capability

Our plan and deliverables



Action	Owner	Delivery impact
Vaccination	SRO – Caroline Johnson	Protect our most vulnerable service users and workforce and maintain workforce resilience
Workforce Wellbeing and resilience	SRO – Caroline Parry	Workplace Wellbeing and making SHSC a great place to work.
Home First Programme	SRO – Gulnaz Akhtar	Reduce Length of Stay and eliminate Out of Area Hospital Care
Adverse Weather plan	SRO – Helen Smart Lead – Jean Kiyori	Ensure service resilience during adverse weather
EPR optimisation	SRO – Phillip Easthope Lead – Chris Reynolds	To optimise our EPR to deliver benefits to clinical care.
Better Care Fund	SRO – Gulnaz Akhtar Lead – Greg Hackney	Avoid unnecessary admission to hospital and reduce delayed discharges
Optimise our pathways with Yorkshire Ambulance Service	Lead – Raihan Talukdar / Paul Harding	Divert patients directly to our Decisions Unit instead of ED
Optimise our pathways with Sheffield City Council	Lead – Greg Hackney	Reduce delayed discharges by promptly arranging social care
Local mobilisation of OPEL for MH	Lead – Jessica Green	Launch of a national operational pressures framework to mobilise system support for mental health services and ensure system connectivity
Consider bid for national capital funds for the Decisions Unit	Lead – Jason Rowlands / Raihan Talukdar	Capital expenditure to be accessed to improve Decisions Unit environment
Pilot 7 day week discharges	Lead – Helen Crimlisk	Improved patient flow, avoiding surges and delays.
ICB are planning two one-hour sessions commencing in September to review escalation etc	Lead – Greg Hackney	Effective partnership working across Sheffield Place

Our plan and deliverables



Action	Owner	Delivery impact
Ensuring fewer patients wait over 24 hours for mental health admissions by using <u>UEC Action Cards</u> and implementing 10 high-impact actions for <u>mental health discharges</u> across all relevant pathways.	SRO – Gulnaz Akhtar (Home First) Lead – Greg Hackney and Emma Highfield	Reduce 12 hour breaches in ED Avoid 24 hour breaches in ED
All high users of crisis and inpatient services to be supported with a crisis avoidance plan to minimise ED attendance and ensure prompt support is provided to avoid admission.	Lead – Emma Highfield	Reduce crisis presentation Reduce ED attendance Avoid hospital admission when in crisis
Business Continuity stress testing	Lead – Jean Kyori	<ul style="list-style-type: none"> • Winter Maintenance Plan • Heating and Water System inspections • 24/7 Emergency Facilities Contact • Cyber Incident Response Plan and IT Disaster Recovery plan • 24/7 IT support over winter • Regular system back-ups • System outage: high dependency due to remote working and extreme weather
Review of emergency plans	Lead – Jean Kyori	<ul style="list-style-type: none"> • Adverse Weather Plan • Infectious Diseases Plan • New and Emerging Pandemics Plan • Cyber Incident Response Plan • IT Disaster Recover Plan • Emergency Communication Plan • Corporate Business Continuity Plan • Major Incident Response Plan • Urgent and Emergency Care Plan

Our plan and deliverables



Action	Owner	Delivery impact
On-call leadership development programme	SRO – Greg Hackney Lead – Jean Kyror	Develop the leadership capability of our on-call leadership and ensure readiness to respond to clinical, operational or Emergency incidents.
Joint look back and learn event with SC, SYICB and SHSC	SRO – Helen Smart	Ensure all learning is captured from 2024-2025 and is addressed within this plan.
Ensure adverse weather communications messages are ready should weather impact service delivery	SRO – Holly Cubitt	Clear information provided to staff and service users should any services be impacted by adverse weather as detailed in adverse weather plan and emergency communications plan
Ensure clear information is provided on OPEL so staff understand operational pressures	SRO – Holly Cubitt	Staff will be alerted appropriately when we are operating at OPEL 4 and above so they can take necessary action
Support the vaccination of staff with clear call to action	SRO – Holly Cubitt	Clear information on the expectations and benefits of vaccination provided to staff to encourage them to take up vaccination offer
Provide information to staff and key stakeholder on our Home First programme	SRO – Holly Cubitt	Successes of the Home First approach will be communicated to staff and key stakeholders with aim of enhancing our reputation
Communicate about developments with new electronic patient record	SRO – Holly Cubitt	Staff understand the functionality of Rio and have information on the benefits of using it
Maintain messages about prioritising staff wellbeing during operational pressure points and adverse weather	SRO – Holly Cubitt	Staff understand how to access wellbeing support

