

WINTER PLAN

















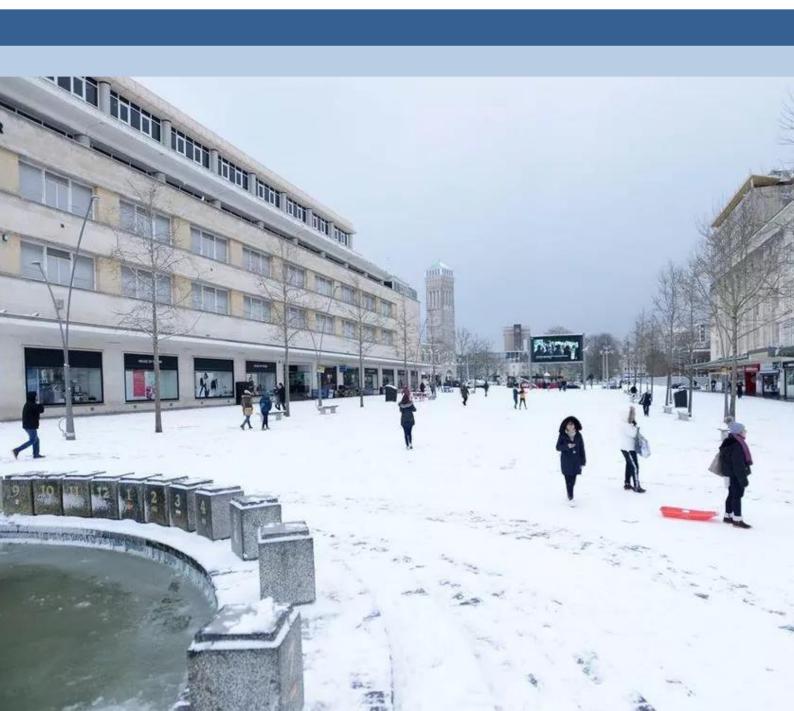
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Infection Control

When the Covid-19 pandemic began in 2019, health and social care providers (including ourselves) were almost completely unprepared for what was to come, but despite this we very quickly adjusted to a new way of life and developed the knowledge and skills necessary to keep both the people we support and the workforce as safe as possible.

As a result of all the hard work, we did not have single case of Covid within the service user group until the lockdown measures were eased and even when this happened, we proved time and time again that we had the systems and processes in place to manage outbreaks effectively.

Some of the main preventative measures still in place are provided below, and it is expected that these will continue preventing and managing outbreaks leading into winter as the risk of infection grows.

We will also continue to monitor reputable guidance and scholarly articles / journals and adapt ways of working when needed to ensure that we are able to continue providing the high level of support and advice we have become renowned for.



Preventative Measures

- Preventing and Managing an Outbreak Guide (PMO)
- Employee Infection Control Risk Assessment
- Service User Infection Control Risk Assessment
- Keeping Up to Date with Current Guidance
- Testing and Isolation Guidance Provided In PMO
- Adequate Stock of PPE
- Temperature Checks
- Digital ID
- Effective PPE & IPC Training
- Online Training
- Manager & Practice Leader Spot Checks
- Hand & Respiratory Hygiene
- Environment & Equipment Cleaning
- Employee Cohorting
- Absence Reporting Procedure
- Visitors Checklist
- Technology i.e., video calls
- Vaccination
- Business Continuity Plan
- Policies & Procedures
- Covid-19 Hospital Passports
- Member of Outstanding Managers Network
- Capacity Tracker (RM completes)
- Medical Advice Sought (if required)
- OBRA tool (2 or more confirmed cases)

Staying Warm

Plan ahead



Check the weather forecast and the news



Make sure you have sufficient food and medicine



Take simple measures to reduce draughts at home

Keep yourself warm



Heat rooms you spend most time in to 18°C if you can



Keep bedroom windows closed



Wear multiple layers of thinner clothing

Prepare your home



Check what financial support may be available for you



Use energy saving tips to save money on heating



Make sure appliances are safe and working well

Look after yourself and others



If you're eligible, get vaccinated against flu and COVID-19



Check on others who may be vulnerable



Get help if needed. Call NHS 111 or in an emergency 999

For more information go to:

Top tips for keeping warm and well this winter - www.GOV.UK

Cost of Living

The economic climate has had a significant impact on people's wellbeing, and this has especially been the case in the past few years with rising cost of petrol, gas, electric and food to name just a few.

The following are some of the measures in place to support people to have financial stability during challenging times:

- ✓ Cost of living payments 2023 2024 (provided by government)
- ✓ Financial appointee or court appointed deputy (to monitor incomings and outgoings)
- ✓ Safeguarding processes in place to minimise risk of financial abuse
- ✓ Support to find deals and discounts
- ✓ Support with weekly budgeting
- ✓ Cutting fuel costs i.e., utilising public transport
- ✓ Switching off electrical items (not using standby)





Key Commodities

During the pandemic, many key commodities were affected such as food, drink and PPE. The learning from this is that while we are unable to control events such as fuel shortages, or the general public stockpiling supplies (causing shortages), we do have systems and processes in place to minimise the impact such as:

- Managed stock of PPE held in office
- Business continuity plan in place (and updated at regular intervals)
- Risk register in place (and updated at regular intervals)
- Business interruption insurance in place
- Service Users supported to purchased adequate supplies (not stockpiling)
- NHS Volunteers Service (when operating)
- Car sharing (employees)
- Organisational infection control risk assessment in place

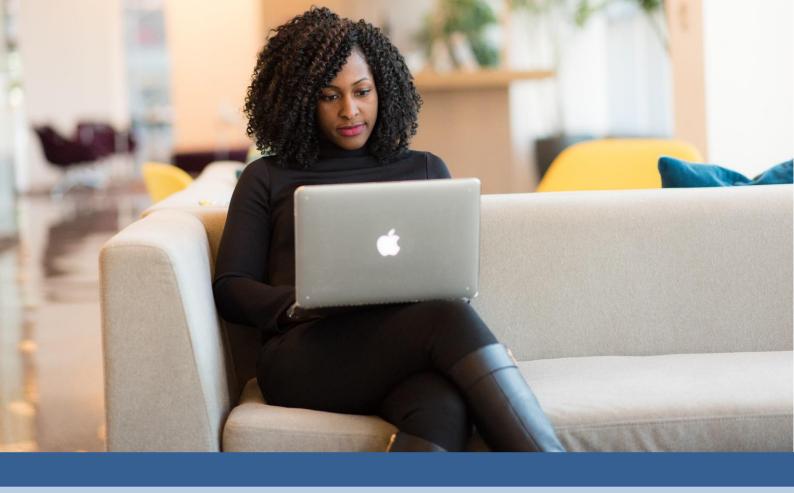
Workforce

A significant cause concern from the start of the pandemic has been workforce challenges, both due to nationwide issues in regards to increased absence levels, and difficulty with recruitment and retention.

Over the past few years, we have had some extremely difficult periods, but have successfully navigated through without disruption to the service being provided to people due to the systems and processes we have in place which are as follows:

Organisational Covid-19 Risk Assessment	Travel & Transport Tool
Employee Infection Control Risk Assessment	P/T Contracts
Preventing & Managing an Outbreak Guidance	Effective Online Recruitment
Effective Staff Training	Indeed / Facebook / Find a Job / Social Media
Standard Infection Control Procedures	Welfare Checks
Live Absence Tracking Tool	PPE & Spot Checks
Staff Continuity Tool	High Level of Vaccination
Staff Cohorting	Other Forms of Cover i.e., management,
Government Guidance	Reduction of support hours (commissioning)





Staff Training & Development

Mandatory Training

Induction

Spot Checks

Assessments / Competency Checks

Training
Database &
PDP's

MMT, PL & Team
Meetings

Supervision & Appraisal

Quality
Assurance
System

Practice Leadership Model

Quality Assurance & Management

The pandemic brought about a number of issues in relation to quality assurance and the ability to manage teams, although this was overcome by implementing a variety of systems, tools and processes which continue to be as effective as when they were first introduced:

Electronic Quality Assurance Database

Remote Working (Working from Home)

Manager Checks (SICP's apply)

Spot Checks (SICP's apply)

Electronic Audits & Checklists

Practice Leaders & Champions in Situ

On Call System in Place

Video Conferencing (Team Meetings & Supervisions)

Quality Assurance Surveys

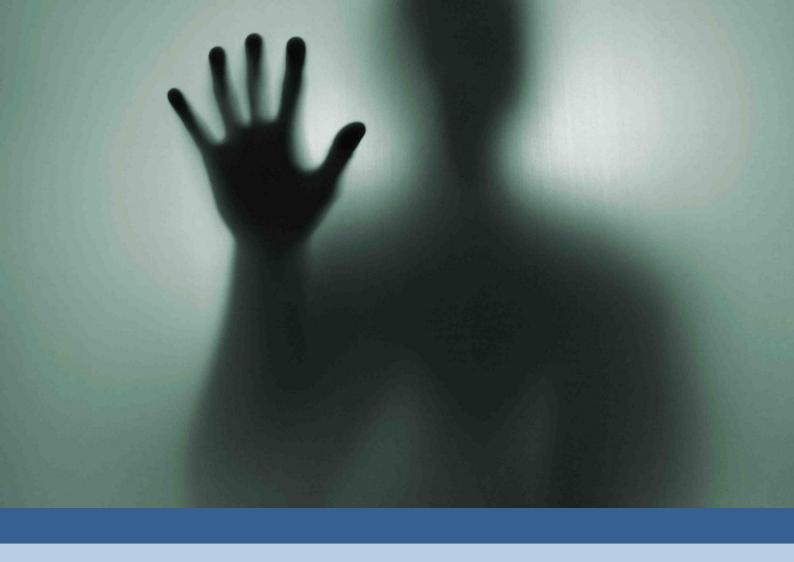
Online Feedback Form Available

Regular Welfare Checks

Changes to Agreed Ways of Working Communicated Effectively, Including Easy Read Materials for the People We Support

Regular MMT Meetings & Management 1:1 Meetings





Deprivation of Liberty

During the pandemic, the population of the United Kingdom were subject to deprivations of liberty due to lockdown measures and this included the people we support. Over time, these restrictions eased for the general public, but in health and social care settings (especially shared / residential) some remained in place i.e., having strict rules around visitors.

This highlights the disparity between the general population and those receiving support in health and social care settings, where restrictions can sometimes remain in place without being reviewed for many years of people's lives even when there is no known risk (usually blanket restrictions), or there is an identified risk from many years ago, sometimes even as far back as childhood that has not been reviewed in adult life.

We are committed to ensuring that people are not unlawfully deprived of their liberty, and while this can be a complicated process, especially with Liberty Protection Safeguards (LPS) not going forward as planned, we have a system in place to simplify the process as much as possible which includes:

RARIT (Risks & Restrictions Identification Tool) – The first step will be to use this tool to assess risks and identify restrictions that are either in place already, or being considered

Capacity Assessments – The next step once risks and restrictions are identified, is to establish whether the person is capacitated in relation to the risks

Best Interests Meeting – We will then request (from the commissioning service) that the best interests process to be followed where we identify there is a restriction in regards to freedom of movement, or food and drink restrictions & modifications. This should also be formally agreed in Court of Protection.

Mental Health & Wellbeing

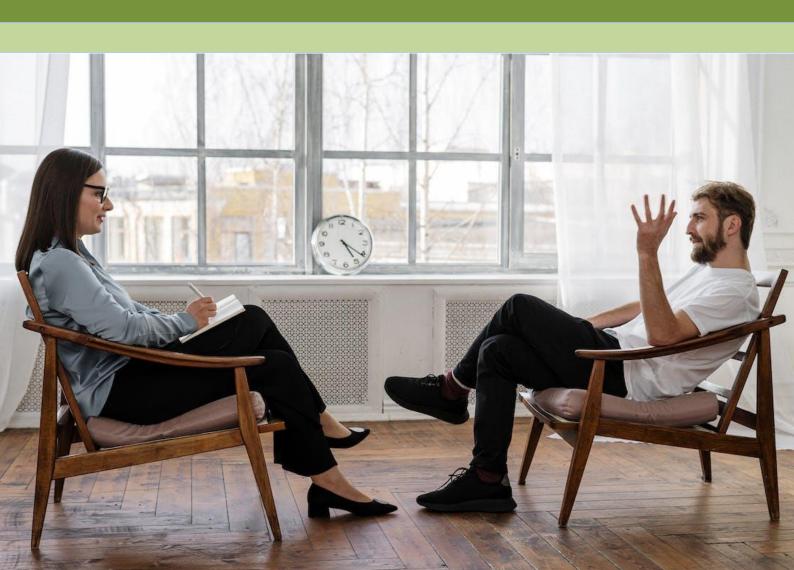
Winter can be an especially difficult time in regards to mental health and emotional wellbeing but over the past few years we've also faced the additional pressure of the pandemic, the societal impact of which cannot be underestimated.

With the inevitable increase in cases of flu and Covid this winter and the ever-present potential of restrictions being brought back into place leading to feelings of loss, isolation and loneliness, it's imperative that we stay prepared and have support mechanisms in place to ensure that people's needs are met.

We will continue to ensure that the people we support stay as connected as possible, for instance, using technology to meet with family and friends. We will also support people by getting help when they need it most from relevant services, to stay safe and well. We will also strive to ensure people have a good quality of life through implementation of the Practice Leadership model and PERMAH.

We will ensure support staff receive regular welfare checks, and have access to the 24/7 employee assistance programme. A letter which signposts every known mental health resource in Plymouth has already been sent out and we will always be at the end of a phone, or there in-person when needed.

As additional guidance, pages 44 – 47 of the Winter Planning Toolkit provided by QCS, provides advice in regards to recognising loneliness, social isolation and depression, and what we can do as a support provider, to ensure people's changing needs are met.



Checklist: Are We Doing It?

1.Covid-19 & Flu

What should we be doing?	How can we do it?	Are we doing it?
Be aware of, review and follow the latest guidance provided by the Government and other reputable agencies	Be proactive with commissioners, health services, CQC, other agencies and the wider Local Authority	
	Ensure that there is a person responsible for monitoring latest guidance	
	Discuss changes in management meetings and the implications for the service	
	Ensure that the service is signed up for updates from the Government	
	Work in partnership with other providers locally and nationally	
Make sure we have procedures in place to share information internally & externally	Have regular team meetings to share information	
a externally	Have infection control as an item on agendas	
	Check the understanding of the person receiving the information	
	Sign up to provider forums / alliances	
	Preventing and Managing an Outbreak Guidance accessible to all	
	Reporting two or more cases using the OBRA tool	
Prepare for new strains / further waves	Undertake regular reviews of how the service is managing Covid-19 / Flu	
	Reflect on any previous lessons learned	
	Be honest and open about where the organisation could do better	

	Involve employees, the people we support and other stakeholders i.e., relatives Share updated plans, risk assessments and systems / tools Preventing and Managing an Outbreak Guidance accessible to all, and this contains guidance regarding preventative measures Understanding that during winter, Covid-19 may be combined with additional pressures such as flu and norovirus and other health concerns Focus on recruitment, retention	
	and improving staff capacity so there are sufficient staffing levels in the event of resurgence	
Assess the levels of stock and supplies that will be required	Order sufficient PPE stocks prior to Winter to ensure that if / when demand increases that there is stock to meet the demand Keep in contact and maintain positive relationships with suppliers Clinically extremely vulnerable will require access to LFD tests (119)	
Vaccinations	Liaise with health professionals regarding vaccinations for people we support Encourage and provide information regarding vaccinations for employees Ensure consent has been provided in relation to vaccination status Keep a vaccination recording system for staff and people using the service Start a flu / Covid-19 campaign to promote awareness of the importance of vaccination and preventative measures Ensure people are supported to have an annual health check	

2.Workforce

What should we be doing?	How can we do it?	Are we doing it?
Understanding employee needs	Welfare meetings with staff and regular supervision (1:1)	
	Provide individual infection control risk assessments for employees	
	Provide active support to employees	
	Consider implications for the service i.e., dependents, clinical vulnerability and incorporate this into business continuity plan	
	Provide Employee Assistance Programme	
	Provide a recognition scheme	
Rota planning	Consider developing cohorts of employees that work in teams to reduce the chance of infection spread	
	Consider individual requests, and ensure staff are aware of the shift swap policy	
	Ensure to provide a rota a month in advance	
	Consider changing shift patterns to support people using public transport (especially when services reduce as they did during lockdown)	
	Use established tools to assess potential issues with employees i.e., travel and transport, dependents, previous high absence levels	
Assessing skills, knowledge and experience	Ensure that the rota has a balance of necessary skills to meet the needs of the people using the service	
	Practice Leaders & Champions in place monitoring staff training and development, and identifying shortfalls	

Consider training needs changing during winter, for example, there might be more of a focus on infection control, hygiene and health monitoring	
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3.Recruitment

What should we be doing?	How can we do it?	Are we doing it?
Ensuring workforce capacity	Ensure there are sufficient numbers of staff to meet the capacity of the service	
	Continue to use recruitment methods that are established as being successful	
	Explore recruitment strategies, inclusive of schemes such as 'refer a friend' and 'cycle to work'	
	Use local networks	
	Build on enhancing the reputation of the organisation, in particular, focusing on customer service	
	Highlight the positives and benefits of working for the service	
	Provide sponsorship	
	Vacancies list sent regularly	
Relationships with agencies	When agency use cannot be avoided, try to ensure exclusivity of agency staff to avoid spread of virus and also to provide continuity	
	Avoid using staff that work between multiple locations	
Build on 'goodwill'	Take the opportunity to build on reputation and actively commence recruitment even when there are limited posts available	
	Utilise social media to connect with local businesses (not just care / support providers)	
Efficient and good quality application and induction process	Online application form in place Application system is monitored to	
	ensure that barriers to an efficient	

and good quality process are mitigated	
Online learning utilised (working in partnership with Care Skills Academy)	
Bespoke online induction in place (if needed i.e., if further lockdowns occur)	
Practice Leadership model in place to support all employees and for knowledge and experience to be shared	

4. Supplies / Suppliers

What should we be doing?	How can we do it?	Are we doing it?
Relationships with suppliers	Open communication with suppliers	
	Paying promptly to avoid disputes and promote a positive relationship	
	Contact suppliers regularly to stay in touch (even if not requiring anything)	
	Review suppliers list at regular intervals	
	Where there are shortages of supplies, communicate this via the commissioning team and the capacity tracker	
Reviewing potential need	Review stock at regular intervals and plan for future demand	
	If stock is non-perishable, review winter needs now and order sufficient quantities (especially for hygiene and PPE purposes)	
	The organisation does not advocate stockpiling	
Long term contracts	Review contracts and see if there are benefits in negotiating and formalising / extending the period	
	Work closely with commissioners to explore new opportunities for development or expansion where appropriate	

5. Environment

What should we be doing?	How can we do it?	Are we doing it?
Hygiene	Preventing & Managing an Outbreak guidance in place Ensure robust checks are carried out on at least a monthly basis, and more frequently during the winter months Document findings from the audits and highlight actions required, these will be discussed in 1:1 and management meetings	
Adverse weather preparation	Ensure that adequate supplies are available (not stockpiling) Ensure safe entry and exit from premises Ensure that all servicing is up to date Staff are aware to report any issues to management who will respond effectively Ensure staff are aware of infection control guidance in relation to travel	

6. Management Oversight

What should we be doing?	How can we do it?	Are we doing it?
Quality monitoring	Documented audits and checks are carried out regularly and actions for these are monitored through to their completion	
Monitoring audits	QA & KPI systems are in place, reviewed on a monthly basis	
Developing action plans to address quality issues	Develop with staff and ensure that the person accountable for actioning has the necessary experience to complete them Service improvement plan in place for actions affecting the entire organisation	

Statement of Purpose	Statement of Purpose is reviewed annually Any changes to the service are reflected in this document This is available in paper form, and is freely available electronically on the organisation's website	
Developing evidence	Collation of regulatory evidence which is reviewed at least monthly All audits are filed electronically and are easily accessible Any action plans are monitored closely and updated with reasons when an action is unable to be completed by the predicted target date	
Developing local networks and sharing resources	Link with local and national networks to find out about new initiatives and share ideas Attend virtual meetings (if group attendance is not possible) Attend networking events when these are available	

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