

**Strategy Development Manager (Partnerships and Planning), Bucks Health
Authority: David Beckett
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- Mid and South Buckinghamshire NHS Trust were visited in December by the DoH Winter and Emergency Services capacity planning Team (WEST), who explored issues relating to winter planning across the health system in Bucks and Milton Keynes. The report focused on hospital operational issues. It acknowledged that good joint working between the Health Authority and Social Services existed.
- It was noted that South Buckinghamshire Trust provided 3 months free rent for new nurse recruits. Mr Beckett reported that there were a number of overseas recruitment drives and that nurses were offered a reward payment for staying in post for the winter period. £128k had been set aside across Buckinghamshire and Milton Keynes to support recruitment and retention initiatives which were not likely to take effect until Spring.
- When a large number of emergencies occur, this would have an impact on regular elective work, waiting lists and patients being discharged, which could create a backlog in the system.
- The post of 'Homefinder' involved matching up patients with appropriate vacancies, finding available places and assisting with the home care package. It was expected that a database would be generated on the availability of beds in the County.
- A Member referred to the rise in the elderly population and the decrease in the number of home beds available. The Department of Health were encouraging the development of services to ensure patients could leave hospital earlier with initiatives such as 'Hospital at Home Care' and Rapid Response Teams. £900 million had been allocated over the next 3 years to spend on Intermediate Care. This could have an impact on the pressure to find long term residential placements for Social Services.
- In answer to the comment on the effect of winter pressures on long term funding by Social Services, it was noted that the Health Authority understood the pressure on Social Services. Members noted that discussions would be held in early February if there was a projected underspend. This would only relate to non-recurrent winter money set aside for interim care placements. Mr Beckett suggested that the additional 'promoting independence' grant money could be used to support winter initiatives into the next financial year.
- Work needed to be ongoing to ensure there was clarity and transparency across health and social care systems. Resource and planning decisions in health have a large impact on social care provision. As there were a number of organisations involved in the funding of the winter pressure process (Hospital Trusts, Primary Care Trusts, Social Services), these complex implications need to be shared and resolved in partnership.