

National Emergency Pressures Panel - note of the meeting

28 February 2018, 10:00 – 11:30

Panel attendees: Derek Alderson (President, Royal College of Surgeons), Paul Cosford (Public Health England), Jane Cummings (NHS England), Janet Davies (Royal College of Nursing), Sir Bruce Keogh (Chair) (NHS England), Clifford Mann (NHS England), Ruth May (NHS Improvement), Kathy McLean (Deputy Chair) (NHS Improvement), Pauline Philip (NHS Improvement and NHS England), Mary Smith (Manchester City Council), Helen Stokes-Lampard (Royal College of GPs), Keith Willett (NHS England)

Apologies: Jane Dacre (Royal College of Physicians), Prem Premachandran (Care Quality Commission)

1. The Chair opened the meeting and invited an operational update from the National Director for Urgent and Emergency Care.
2. The National Director presented an operational update and made the following points:
 - We are seeing persistent high levels of occupancy
 - A&E performance stabilised in January, but D&V and flu have both hit hard this year and been persistent, with thousands of beds closed throughout February.
 - Flu levels have started to go down slowly, more slowly than envisaged and it is estimated we still have around 4,000 patients in G&A beds with confirmed flu.
3. The panel all agreed the impact of the flu on the service had been significant this year, more so than any other year since at least 2010/11. The panel wanted to formally record their thanks for the hard work of frontline staff in the face of the most challenging circumstances for several years.
4. The Chair commented that pressure in the system this year had been significant and it's not over. He referenced the burst of cold weather which we know is going to bring additional pressures, in the form of cardiac and respiratory conditions, stroke and falls. Given the expected continued pressure, the Chair sought agreement from the panel to publish a communication to the system to that effect, including thanking staff and urging the public to use the NHS responsibly; the panel agreed.
5. The National Director confirmed that elective activity undertaken by trusts remains under monitoring, with Regional Directors working with local systems to agree the best approach given local circumstances. Panel members raised

that in their experiences that the most pressured organisations are still running a reduced elective programme.

6. The National Director opened a discussion on demand and capacity planning in 2018/19. She highlighted that next year systems are asked to do their activity planning on a monthly basis, for elective and non-elective activity, under pinned by a capacity plan, to include beds and staff. The following points were made in discussion:
 - What local systems need from hospital and out of hospital services differ seasonally as a result of seasonal demand.
 - We need to do more to profile activity across the year reflecting seasonal variation.
 - There is opportunity across all community, primary care settings not just the hospital.

7. The National Director thanked the panel for their input and asked for further input into demand and capacity planning.