

From the Office of Sir David Nicholson KCB CBE
Chief Executive of the NHS in England



Richmond House
79 Whitehall
London
SW1A 2NS
david.nicholson@dh.gsi.gov.uk

- To: All Chief Executives in NHS Trusts in England
All Chief Executives of Local Authorities in England
All Chief Executives in NHS Foundation Trusts in England
All Chief Executives in Primary Care Trusts in England
All Chief Executives in Strategic Health Authorities in England
- cc: All Chairs of NHS organisations in England
All Leaders of Local Authorities in England
All Directors of Adult Social Care in England
NHS independent and voluntary sector partners
Monitor
Care Quality Commission
Local Government Association

Gateway reference: 15148

23 November 2010

Dear Colleague

Managing winter

Introduction

I last wrote to you on 10 September 2010 about our collective responsibility for ensuring we deliver continued high quality care within the resources we have available during the transition to a new health and social care system as set down in the White Paper, *Equity and Excellence: Liberating the NHS*.

In that letter, I stressed the importance of strong leadership at this time of transition. I also set out that planning for the coming winter needed our full attention in order for us to manage winter pressures as successfully as we have in recent years.

As we enter winter and face the pressures that it brings, I wanted to write to you again to underline the importance of ensuring we are well prepared for winter.

Winter planning

Alan Hall set down in his letter on winter of 23 September 2010 our expectations over planning for winter. He emphasised the importance of robust, effective and timely preparation and this year's process for winter reporting which began on 2 November 2010.

The key areas you will have been addressing are not new, but they are tried and tested, and I would ask you to yourself check again that your organisation is prepared.

I would ask you in particular to consider again your capacity and contingency plans to ensure they are robust in the face of the challenges you anticipate. We will also continue to look to SHAs to ensure local health economies are well prepared for winter.

A copy of Alan's letter is set down here.

http://www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/Dearcolleagueletters/DH_119671

Leadership

Maintaining a solid grip on our current performance is pivotal, both to the success of the transition process and to ensuring we successfully get through this winter.

It is critical that as leaders we do not lose sight of delivery, notwithstanding the demands of QIPP and the transitional and many other challenges we face.

Strong, skilful, and energetic leadership will be key to delivering good quality care for patients at a time when we routinely see services under the greatest strain. We can again expect periods when there are sharp rises in hospital admissions, heavy demands on accident and emergency, ambulance and social services, particularly at Christmas and New Year.

I know that you will be looking to take every possible step to support staff, and to look ahead and across boundaries for opportunities to identify and mitigate risks. I would look to all Chief Executives to assure themselves that their organisations are well prepared and appropriately resourced to maintain a strong grip on performance and productivity.

Joint working

To promote a safe and dignified patient experience we should be effectively working with all partners across organisational boundaries, including health, social care and other agencies to maintain a whole system approach to managing winter. Well rehearsed collaborative escalation working arrangements with other agencies at times of peak demand in particular can pay real dividends and result in poor patient experiences being avoided.

Open communication/dialogue between key partners across the entire health and social care system has proved to be enormously beneficial in previous winters, and I know work has already been going on across the NHS to consider how better use can be made of joint working to predicatively plan ahead and respond to operational pressures and capacity constraints during winter and beyond.

Coordination and implementation of joint winter plans will only be successful where emergency and community care networks work hand in hand with each other and are able to understand where there are increasing pressures in their systems and meet them with appropriate escalation plans.

There are significant efficiency requirements facing both health and social care. It is key that the implications of any proposals for changes to services are discussed between health and social care before decisions are taken. This will allow, wherever possible, the potential for mutual support to be addressed, and appropriate preparations to be put in place across the local care system.

Conclusion


I will be taking a continued and active interest in performance over the winter period, ensuring we continue to provide timely and high quality care for patients.

I know these are challenging times for the whole health and social care system as we strive for better quality and improvements to services and outcomes, so it is essential we keep our eye firmly on delivery.

I urge you all in the coming weeks to continue, working together, to ensure that through your leadership, your assurance of winter plans and management of risks as they arise that we maintain delivery of high and improving quality services.

I believe that as in previous years, we can again achieve this goal.

Yours faithfully

A handwritten signature in black ink, appearing to read 'D Nicholson', with a long horizontal flourish extending to the right.

Sir David Nicholson KCB CBE
NHS Chief Executive