

Meeting:	NHS Grampian Board
Meeting date:	9 October 2025
Item Number:	10.1
Title:	Planning for Winter 2025/26
Responsible Executive:	Geraldine Fraser, Chief Officer – Acute Services
Report Author:	USC Programme Team/Public Health

1 Purpose and recommendations

This paper is presented to the Board for assurance.

Recommendation

- Review and scrutinise the information provided in this paper and confirm that it provides assurance that necessary steps and actions are progressing to ensure there is a robust response to winter planning for 2025/2026

This report relates to:

- NHS Grampian Strategy: Plan for the Future – People (Citizens & Colleagues), Pathways (Whole System Working, Access)
- Board Annual Delivery Plan – Improve preventative and timely access to care; optimising system capacity & efficiency to enable wellness & respond to illness resulting in reduced clinical risk
- USC Improvement Plan: Grampian Health and Care System
- Government policy/directive – Surge and Winter Preparedness in Health and Social Care Services: National Planning Priorities and Principles

This aligns to the following NHS Scotland quality ambitions:

- Safe
- Effective
- Person Centred

This subject matter of this report is relevant to the mitigation of the following strategic risks (further information provided in the Risk section below):

- Significant delays in the delivery of Unscheduled Care

2 Report summary

2.1 Situation

It is imperative that the system is prepared for the seasonal challenge it is expected to face over the coming winter months. The approach this year seeks to build on the winter planning over the last several years, incorporating the learning from last year's winter

planning process alongside new and emerging drivers including the USC Improvement Plan: Grampian Health and Care System.

In preparation for the 2025/26 winter period, feedback was collected via a Microsoft Form distributed to members of the Unscheduled Care Groups, including Programme Board, Delivery Groups and Project Groups. The form posed five open ended questions to gather insights on what worked well, areas for improvement, missed opportunities, low value efforts and initiatives constrained by investment. A total of 18 responses were received and reviewed.

Successes

Several respondents highlighted the opening of additional surge capacity in Ward 308 at ARI and the contribution of the Boarding Consultant/Team as being beneficial. At Dr Gray's Hospital, the Discharge Lounge was noted as a helpful initiative. The use of social media to share key messages was also positively received.

Areas for Improvement

Feedback indicated a need for broader planning that includes the full spectrum of unscheduled care, not just hospital services. Improved communication around the winter plan was recommended with staff groups. Respondents also noted the need for increased community capacity to support hospital discharge and highlighted the impact of limited access to peer-to-peer Flu vaccinations. Expanding the Boarder Team to include a full multi-disciplinary team (MDT) was seen as a missed opportunity.

Missed Opportunities

Respondents identified several missed opportunities, including earlier and more collaborative engagement with General Practice, better alignment of working patterns across services during the festive period, and proactive opening of surge capacity rather than reactive measures. Involving operational teams more directly in planning was also recommended.

Low-Value Efforts

Most respondents did not identify any efforts that delivered no value. However, it was noted that while surge capacity had a positive impact, its effectiveness was limited without addressing broader flow issues. The use of locum staff was also flagged as problematic due to communication challenges and limited integration into MDT discharge planning.

Investment Constraints

Several initiatives were seen as having strong potential but were constrained by limited investment. These included expanding front-door Allied Health Professional (AHP) services, increasing community service ability, and investing more in General Practice to help manage winter pressures.

Conclusions and Lessons Learned

This feedback highlights the need for improved communication, broader stakeholder involvement and a system-wide approach to winter planning that goes beyond increasing hospital capacity. These insights have informed the Unscheduled Care Improvement Plan and System Wide Preparedness for 25/26 which addresses a number of areas including (this list not exhaustive):

- Permanent Discharge Lounge at Dr Grays Hospital
- Improving community capacity by implementing Discharge to Assess model across Grampian; improving existing Frailty at the Front Door models and review of Community Hospital and Step Down rehab including optimising the use of the physical estate as well as the workforce required.
- Improvements to the use and composition of MDTs for discharge planning ensuring these are held daily and include medical, nursing, AHP, pharmacy and social work input.
- Peer to peer vaccination for hospital staff and GP surgeries

2.2 Background

Winter planning is a key function and well-established annual process for NHS Grampian and its partners across the Local Resilience Partnership. Given the continued challenges and pressures being experienced across the Health and Social Care system in Grampian and beyond, it is particularly important that the system is prepared for the additional season demand which can be expected over the impending Winter 2025/26 period.

2.3 Assessment

The Scottish Government Draft Surge and Winter Preparedness in Health and Social Care Services: National Planning Priorities and Principles has supported the completion of the System Wide Preparedness Document 2025/26. NHS Grampian will follow the five national priorities for winter planning which are:

- Priority 1: Prioritise care for all people in our communities, enabling people to live well with the support they choose and ensuring safe, person-centred care through integrated-place-based planning.
- Priority 2: Utilise effective prevention to keep well, avoiding them needing hospital care through supporting primary and community care to manage demand and reduce avoidable admissions, delivering vaccination programmes and promoting public awareness through national messaging campaigns.
- Priority 3: Ensure people receive the right care, in the right place at the right time, this including prioritising care at home, or as close to home as possible, where clinically appropriate.
- Priority 4: Maximise system capacity and capability by improving patient flow and access, reducing delayed discharges and long waits, minimising unmet need, and using data and intelligence to support real time decisions. Strengthen urgent and unscheduled care pathways, including hospital at home and virtual capacity, and protect access to planned care and established services.

- Priority 5: Support the mental health and wellbeing of the health and social care workforce, their capacity and improve retention, as well as supporting unpaid carers.

Collaboration with HSCPs and wider partners is an important aspect of service delivery and development year round, but this is particularly pertinent over the winter period where colleagues work collaboratively to meet and balance demands being felt in specific parts of the system.

Meeting and balancing these demands is the key focus of the Unscheduled Care Improvement Plan: Grampian Health and Care System which was a combined effort of the Health and Social Care Partnerships for Aberdeen City, Aberdeenshire and Moray and the Acute Sector. Colleagues from across these areas have worked together over several months to identify the approach which will give the most impact and benefit to the Grampian unscheduled care system to improve safety and patient experience, and to ensure that patients receive the right care in the right place at the right time.

2.3.1 Quality / Patient Care

This work should improve the quality of care as it seeks to improve the winter health and wellbeing of Grampian citizens and where possible alleviate some of the additional demand for unscheduled care which presents during the winter period.

2.3.2 Workforce

This approach is intended to have a positive impact for those working across the system. It aims to help increase the understanding of the linkages and opportunities for joint working with partner agencies and our shared approach between acute services and community services to managing increased demand during winter months. Ultimately, those working within the system are also users of the system and should benefit as citizens as well as staff. The plan will be made available to staff groups on the intranet so they can be aware of the approach and plans in place.

2.3.3 Financial

There are no financial implications for the system wide winter preparedness plan. Additional funding to deliver the Unscheduled Care Improvement Plan: Grampian Health and Care System is detailed in the separate item on today's agenda.

2.3.4 Risk Assessment / Management

There is a risk that additional pressure will be placed on a system which is already experiencing considerable demand. Ensuring that people know where to access services and support locally will be key, and this aligns to the national winter planning approach of keeping people safe at home over the winter.

2.3.5 Equality and Diversity, including health inequalities

An equality impact assessment has not been completed for this programme of work specifically, however equality, diversity and health inequalities are routinely considered as part of the planning processes.

2.3.6 Other impacts

No other impacts have been identified.

2.3.7 Communication, involvement, engagement and consultation

Communicating with the public is especially important over the winter period where increased demand for services can be influenced by environmental factors. Our Corporate Communications Team have developed several resources to support this, and work with colleagues locally and nationally to ensure consistent messaging. 'Know Who To Turn To' is a well-established campaign which highlights the range of options available, many of which are within the community rather than a hospital setting.

Supporting citizens to keep safe and well over winter is an important aspect of managing demand on health and social care services over winter. NHS Grampian utilises and supports the established national messaging in this area, with regular posts on social media using nationally developed assets. Additional messaging on being prepared for winter weather and the services available from pharmacies further supports this important aspect of preparation.

2.3.8 Route to the Meeting

Feedback on Winter Planning for 2024/25 document was shared and endorsed by the USC Programme Board on 19th August 2025

Public Health Winter Planning 25/26 was shared and endorsed by the USC Programme Board on 19th August 2025

USC Improvement Plan: Grampian Health and Care System has been to the Assurance Board in August and September 2025.

2.4 Recommendation

The Committee is asked to:

- **Assurance** - Review and scrutinise the information provided in this paper and confirm that it provides assurance that necessary steps and actions are progressing to ensure there is a robust response to winter planning for 25/26

3 Appendix

The following appendix is included with this report:

- NHS Grampian System Wide Preparedness 2025/26