

AGENDA ITEM

2.2.7

QUALITY & SAFETY COMMITTEE

CTMUHB COVID 19 SURGE PLANS SERVICE SUSPENSION QUALITY IMPACTS

Date of meeting	19/01/2021
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Marc Penny, Programme Consultant
Presented by	Nick Lyons, Executive Medical Director
Approving Executive Sponsor	Executive Medical Director
Report purpose	FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)				
Committee/Group/Individuals	Date	Outcome		
CTMUHB COVID Gold Command	16/12/2020	Approved		

ACRO	ACRONYMS	
CAI	Community Acquired Infections	
3Cs	3 level command structure	
ITU	Intensive Treatment Unit	
DGH	District General Hospital	
CPAP	Continuous Positive Airway Pressure	
FH	Field Hospital	
LA	Local Authority	
WTE	Whole Time Equivalent	
RN	Registered Nurse	
HCSW	Health Care Support Worker	
USC	Unscheduled Care	



WG Welsh Government

1. SITUATION/BACKGROUND

- 1.1 The Health Board is currently operating its emergency response 3Cs structure (Gold, Silver, Bronze) to co-ordinate its response to COVID.
- 1.2 COVID forecasting and modelling has shown a significant surge of COVID CAIs with a peak of admissions and bed occupancy for the first two weeks of January 2021.
- 1.3 CTMUHB Gold Command asked for assurance on the following key questions:
 - That we have plans in place and assurance that we have sufficient staffed capacity (ITU and Non ITU Beds) to meet forecast demand which includes Oxygen / CPAP, DGH, Community and FH capacity until end of January 2021
 - SILVER Cell 1 That plans are in place with LA partners to enable patient discharges are at a sufficient level in order to deliver capacity up until end of January 2021
 - SILVER Cell 2 That plans are in placer across the Health Board to ensure key staffing and workforce supply requirements are in place to respond to the COVID situation across Cwm Taf Morgannwg (CTM) and deliver capacity up until end of January 2021
 - SILVER Cell 3 That plans are in place to manage CTM's elective program in order to respond to the deteriorating COVID situation across CTM.
- 1.4 At the current modelled peak based on current available and open / staffed beds there was a forecast deficit of:
 - -19 Critical Care Beds (103.6 WTE RNs required)
 - o -145 Non Critical Care Beds (46 WTE RNs / 122.7 HCSW required)
- 1.5 In order to provide enough staffed bed capacity to meet the forecast surge Gold Command approved on the 16/12/2020 the suspension of a number of services to enable the redeployment of staff to increase staffed bed capacity for critical and non-critical care. Gold agreed to cease selected services (continue life, limb and USC pathway) specifically by reducing the following Services by 100%:
- 1.5.1 Cancel 100% outpatient clinics (Face to Face and Virtual)
- 1.5.2 Cancel 100% specialist nurse clinics
- 1.5.3 Cancel 100% non-urgent diagnostic services (e.g. radiology/endoscopy), and:



- 1.5.4 Fully redeploying clinical staff from non-clinical roles
- 1.5.5 Mental Health Clinical Service Group (CSG) Reduce Nursing establishments on Ward 14 + Psychiatric Intensive Care Unit (PICU)
- 1.5.6 Suspend 'Choice' policy for all discharges as per current WG guidance
- 1.5.7 Allow 'Temporary' and 'Out of Area' placements
- 1.6 The assessment and decision to suspend services was made in-line with Welsh Government Guidance. A copy of the guidance is available upon request.
 - It is assumed that all options to expand and augment the available workforce have been exhausted, recognising that there are competing priorities for the workforce.
 - Workforce & Organisational Development (WF&OD) have exhausted all available options for augmenting RN workforce including overseas recruitment, bank and enhanced overtime rates
 - It will also be important to facilitate a reduction in non-patient facing work for clinical staff before these options are activated.
 - Minimal opportunity in this area, however release of nonpatient facing clinical staff included in this proposal
 - Reducing involvement in education and training is another consideration in these exceptional circumstances; however this needs to be balanced with the cumulative risks in our professional pipeline and training needs, including a particular risk in surgical specialties.
 - HB has already approved changes to trainee doctor rotas to increase COVID rota cover
- 1.7 Assessment on which services to suspend were informed by the HB Quality Impact Assessment (QIA) process.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.1 For Quality & Safety Committee to formally **NOTE** the above decision by Gold and be assured that the Quality Impact Assessments for suspended services was completed as follows (the full Quality Impact Assessments can be shared with Committee Members upon request):
- 2.2 QIAs for approved suspension of services:
 - Outpatient & Specialist Nurse Clinics;
 - Non Urgent Diagnostic Services (e.g. Radiology/Endoscopy);
 - Local Authority Temporary Placements;



- Local Authority Current Policy (not using temporary placements)
- 2.3 QIAs for other services considered but <u>not</u> approved for suspension:
 - Community Based Care Group B: Dental Services/Non-Critical Clinics/School Nursing;
 - Community Based Care Group A: Health Visiting/Non-critical home based Therapies;
 - Surgery Cancer Surgery and Urgent Elective;
 - Surgery Non-Urgent Elective Surgery

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 To note the below QIA scores:
- 3.1.1 Cancel 100% outpatient clinics (Face to Face and Virtual) QIA score = 12
- 3.1.2 Cancel 100% specialist nurse clinics QIA score = 12
- 3.1.3 Cancel 100% non-urgent diagnostic services (e.g. radiology/endoscopy) QIA score = 12
- 3.1.4 Suspend 'Choice' policy for all discharges as per current WG guidance QIA score = 12
- 3.1.5 Allow 'Temporary' and 'Out of Area' placements QIA score = 12

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	See individual QIAs Annex 2
Related Health and Care	Choose an item.
standard(s)	If more than one Healthcare Standard applies please list below:
Equality impact assessment	No (Include further detail below)
completed	
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report. Suspension carried out in-line with WG
	guidance (Annex 1)
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.



	Any financial impacts are covered by Gold command and its delegations
Link to Strategic Well-being Objectives	Choose an item.

5. RECOMMENDATION

5.1 For the Quality & Safety Committee to formally **NOTE** the decision to suspend selected services and the associated QIAs.