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## BHSCT REBUILDING PLAN PHASE 2: JULY - SEPTEMBER 2020

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### Our July – September 2020 Plan: Delivering the Right Care, in the Right Place and at the Right Time

Our priority in Belfast Health and Social Care Trust is to ensure the continued safety of our patients, service users and staff, while supporting our carers and families, during this challenging time. Our commitment is to recognise and respond to the health and social care priorities across our local community and across the region, delivering the right care in the right place at the right time, and supporting our staff who have continued to show tremendous resilience and creativity during this testing period.

Many services across Belfast Trust continued to operate throughout the pandemic, albeit on a reduced scale while other services had to stand down because of clinical, patient or staff safety, as well as physical and workforce capacity constraints. As requested by the Department of Health, Belfast Trust published a Phase 1 plan for our population, covering the period to 1-30 June 2020. The Department of Health is leading on planning and preparation of a Phase 2 plan, covering the period from 1 July 2020 to 30 September 2020. As part of our Phase 2 plans, we will continue with the incremental, staged approach to our service delivery that we adopted in June and believe this will ensure optimum service availability within the current constraints during July, August and September 2020. However, many of our services will still be running at lower levels of activity than before the pandemic. In readiness for a potential second surge, which could coincide with winter pressures, we need to prioritise and focus on treating those most in need first. As a result, some patients and service users will wait longer than we would like.

Our July-September plan therefore continues to focus on the delivery of services to the most vulnerable people in our community and those people who urgently require acute care, planned cancer surgery and time-critical surgery in a safe environment. Our commitment to provide safe compassionate care to all those who need it continues, even if this means delivering services in a different way because of social distancing. The July-September plan, developed in conjunction with Trusts across the region, also recognises the need for our staff to have the opportunity to take leave during the summer. The plan should;

- Ensure **Equity** of Access for the treatment of patients across Northern Ireland,
- Minimise the **transmission** of Covid-19; and
- Protect the most **urgent** services.

Matching our service delivery capacity to the needs of our population continues to be complex and requires a large number of risks and issues to be considered in decision-making. These factors include, but are not limited to, the social distancing guidelines and the impact this is having on physical space required to deliver the services, availability of our workforce and of Personal Protective Equipment (PPE), supplies of medicines and blood products, supplies of Laboratory Covid-19 tests and the latest public health and infection prevention and control guidance. **As we work to deliver services for those most in need, our absolute priority will be to keep our patients, service users and staff safe.**

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### Our key challenges in respect of implementing our plan include:

- Ensuring a safe working environment during Covid-19 for a planned safe restart of services and providing assurance to patients, service users and staff that the Trust is taking all reasonable steps to ensure safety and minimise risk for everyone;
- Continuing to maintain effective Covid-19 plans in line with Infection Prevention and Control advice and guidance, to safely manage separate pathways for flow of patients and staff across all acute sites, optimise efficient utilisation of PPE and ensure adequate catering and rest facilities for our staff;
- Establishing sustainable models for new services that have been set up specifically to respond to Covid-19 such as ‘swabbing’ and ‘testing’ of patients and health care workers;
- Changing approaches to care and treatment to ensure a Covid-19 safe environment for patients and staff. Our infrastructure presents significant challenges in achieving effective implementation of social distancing measures, including a reduction in site capacity and productivity;
- Securing and sustaining a reliable supply of critical PPE, blood products and medicines and supplies of Laboratory Covid-19 tests to enable us to safely deliver and increase our services;
- Providing necessary support and resources to the nursing/ care home sector on an ongoing basis alongside ensuring Trust-based service demands are met;
- Ensuring we harness opportunities to deliver services differently and with innovative solutions that reduce the need for direct patient contact but which can safely and effectively provide health and social care services;
- Providing continued support to those in need within our population including those who are ‘shielding’, vulnerable people, and people at risk of harm;
- Capacity to test patients prior to admission for elective surgery;
- Workforce availability and flexibility across 7 day service including the need to facilitate staff leave, carer commitments, continued shielding of staff and term time work in key services over the summer period;
- Ongoing discussion and agreement to ensure our health and social care plans reflect our commitment to co-production and engagement and informed involvement in key decision making;
- Balancing safety and risk through regional agreement to ensure both effective ongoing response to Covid-19 locally and the need to increase elective services for prioritised clinical groups on an equitable basis for the Northern Ireland population.

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### What will this look like?

Services may look and feel different to patients, service users, carers and families, for example:

- We are identifying ways to ensure that services will be safely provided using separate pathways for patients suspected or confirmed with Covid-19;
- We recognise that some of our patients and service users may still be shielding and we are making additional plans to support them;
- You may be offered planned appointments during the evening and weekends to avoid unnecessary delays;
- Some outpatient appointments with clinical teams may happen by telephone or by video call, as appropriate. There will be limited face to face appointments for urgent and priority cases;
- To keep you safe we will help you to prepare for your appointments in a different way such as screening questionnaires or getting your blood samples taken before arrival;
- People may be given specific times to access services due to limited waiting spaces;
- Staff may be wearing masks and other protective covering to keep you and themselves safe;
- Maintaining social distancing will impact on our arrangements for transportation, accommodation, cleaning, catering, visiting policies, signage, and car parking;
- Visiting arrangements will be re-established in line with regional policy.

### Examples of innovative practice in our service delivery

- Virtual outpatient clinics across hospital and community services eg. virtual family support hubs, psychology, and across clinical specialties;
- Phlebotomy and glaucoma drive-through services;
- Mobile unit for Macular injections;
- Enabling patients to provide vital readings remotely to be viewed by the clinician to ensure appropriate follow up care is provided or necessary intervention takes place, without the need to attend hospital;
- Virtual live educational training sessions have been trialled in the community, for example, with patients with mental health issues or those receiving psychological support;
- We have established a 24-hour patient transport service for the transfer and stepdown of patients by stretcher or wheelchair, which has reduced the pressure on the Northern Ireland Ambulance Service (NIAS) for inter hospital patient transport;
- A Navigator (senior decision maker) in the Emergency Department signposts walk-in patients and NIAS patients to the correct area for treatment.

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### Looking ahead

As we look ahead to the next phase of our response to this pandemic, we recognise the contribution of our staff, who have shown sustained energy, courage, resilience and commitment over many months. Some have had to adapt to new roles and others have provided training and induction to new colleagues; all have had to demonstrate great flexibility. We will be working with all our staff over the coming months to ensure they get a chance to rest, but also drawing on the expertise of our colleagues in Psychological Services and Occupational Health to provide support as needed.

We want to continue to care and support the health and wellbeing and resilience of staff, including our redeployed staff, with a range of mechanisms available to staff and Managers including psychological support, employee wellbeing programmes and testing. We want to implement a Working Safely Framework and arrangements for staff including fast tracked recruitment and additional childcare arrangements to enable the delivery of services set out within the plan. We will work in partnership with trade unions and stakeholders to support an agile and responsive change of services in line with our statutory equality and rural needs considerations. We will continue to work with our key partners, including Primary Care, Voluntary and Community Care, Independent sector and Trade Unions, to ensure that our plans are representative of and include the valuable input of those who use our services. In addition, we will carry out an overarching Equality Section 75 and Rural Needs screening on this Phase 2 Plan and share it on the Trust website. The Trust is committed to its legal duties under Section 75 of the Northern Ireland Act 1998 as detailed in its approved Equality Scheme and the Rural Needs Act 2016.

During July - September 2020, we will continue to **build on new ways of working to continue to provide safe, effective and compassionate care**. We are working closely with our partners across primary care, community, voluntary and independent sectors and are using flexible and remote working where appropriate and rapid scaling of technology such as telephone and video calls. To inform our shared thinking, we are engaging with service users, patients, carers, our frontline staff and trade unions to reflect on the many 'lessons learned' over these last few months. As a region, we are committed to building on this partnership approach to improve access and models of delivery across health and social care, engaging fully with the wider community before determining an agreed way forward.

**Our services What we did during the Covid-19 pandemic**

**What we did in June 2020 (Phase 1)**

**What we plan to do for July-Sept 2020 (Phase 2)**

**Service Area : Hospital Services**

<p><b>Urgent &amp; Emergency Care</b></p>	<ul style="list-style-type: none"> <li>• Belfast City Hospital became the NI Nightingale Hospital for regional Covid-19 emergency care. The first phase ended on 19th May 2020.</li> <li>• Mater Hospital remained the BHSCT Covid-19 Hospital for emergency care.</li> <li>• Royal Victoria Hospital continued as Regional Trauma Centre and Emergency/Unscheduled Care hospital for non-Covid-19 care, including regional services. Emergency Surgery, as well as surgery for patients with cancer, continued to be delivered.</li> <li>• Musgrave Park Hospital became the base for ambulatory fracture surgery (polytrauma and fragility fractures continued in RVH).</li> <li>• Royal Belfast Hospital for Sick Children Emergency Department temporarily increased the age of children seen up to the age of 16 and continued to provide emergency surgery. A designated area was identified for potential Covid-19 patients.</li> </ul>	<ul style="list-style-type: none"> <li>• Belfast City Hospital remained ready to support the regional Nightingale role as required following the end of the first Covid-19 surge</li> <li>• The Royal Victoria Hospital continued as the non Covid-19 Emergency and Trauma Hospital. The number of patient attendees increased in June to pre-Covid volumes. In order to ensure patient and staff safety, we have redesigned service and patient pathways.</li> <li>• Mater Hospital continued as BHSCT Covid-19 Hospital and was able to reopen the Emergency Department to non-Covid emergencies (by Ambulance only) in mid-June. Non-Covid medical emergencies were admitted from mid-June.</li> <li>• Musgrave Park Hospital remained the base for the majority of ambulatory fracture surgery and prioritised elective patients. Polytrauma, fragility fractures and trauma spine continued in RVH. Regular regional communication continued between all trauma &amp; orthopaedic units in NI to ensure optimal resource use.</li> <li>• Royal Belfast Hospital for Sick Children Emergency Department continued to see children up to the age of 16th birthday. It continued to provide emergency surgery and supported regional services. A designated area was identified for potential Covid-19 patients.</li> </ul>	<ul style="list-style-type: none"> <li>• Belfast City Hospital is the Nightingale facility for the region for any further Covid-19 surges.</li> <li>• The Royal Victoria Hospital continues as the non-Covid-19 Emergency and Trauma Hospital for NIAS and GP referred patients, with strict adherence to social distancing in place. RVH Infectious Diseases Unit will continue its role in managing Covid-19 patients as part of Belfast Trust Covid-19 plan.</li> <li>• The Mater Hospital will continue to treat non-Covid emergency patients (by ambulance only) and emergency medical admissions. The Mater Hospital continues as the Covid-19 Hospital as part of Belfast Trust Covid-19 plan.</li> <li>• Musgrave Park Hospital will remain as the base for the majority of ambulatory fracture surgery and prioritised elective patients. RVH will continue to provide frailty fracture and major trauma operating (including spine) in partnership with the region. Regular regional communication continues between all trauma &amp; orthopaedic units in Northern Ireland to ensure optimal resource use.</li> <li>• Royal Belfast Hospital for Sick Children Emergency Department will continue to provide the same level of service as in June 2020.</li> </ul>
<p><b>Cancer &amp; specialist medicine Services</b></p>	<ul style="list-style-type: none"> <li>• Individual patient-doctor discussions were held to agree future treatment plans.</li> <li>• A regional cancer plan for sustaining cancer services enabled diagnostics, radiotherapy and oncology treatment to be maintained, with some site delivery changes.</li> <li>• Any changes to individual patient treatment plans</li> </ul>	<ul style="list-style-type: none"> <li>• In line with the regional plan for sustaining cancer services we delivered planned cancer surgery for patients (prioritised in line with national guidance) and increased treatment capacity eg. radiotherapy for prostate patients.</li> <li>• The regional tertiary inpatient Haematology ward reopened and stem cell transplantation service</li> </ul>	<ul style="list-style-type: none"> <li>• Planned cancer surgery and increased treatment capacity will continue eg. radiotherapy for prostate patients.</li> <li>• Oncology ambulatory assessment and chemotherapy treatments to return to NI Cancer Centre from Ulster Independent Clinic.</li> <li>• Haematology (regional service) plans to increase</li> </ul>

Our services	What we did during the Covid-19 pandemic	What we did in June 2020 (Phase 1)	What we plan to do for July-Sept 2020 (Phase 2)
	<p>were in line with national guidance and local assessment.</p> <ul style="list-style-type: none"> <li>The Support &amp; Information Centre switched to virtual delivery for counselling and classes with limited availability.</li> </ul>	<p>restarted.</p> <ul style="list-style-type: none"> <li>Validation of waiting lists continued across specialist medicine, with teams liaising with GPs as appropriate.</li> <li>The use of telephone consultations and virtual platforms for review appointments continued.</li> <li>Nephrology and Transplant service continued deceased donor transplantation. Paediatric living donor transplantation service commenced in June on a named priority patient basis.</li> <li>Dermatology - continued to see a reduced number of Red Flag patients.</li> <li>Rheumatology – biologic clinics and treatments continued, with drive through phlebotomy services. Limited rapid access clinics and helpline service continued.</li> </ul>	<p>inpatient and outpatient capacity.</p> <ul style="list-style-type: none"> <li>Nephrology and Transplant - continue deceased donor and paediatric living donor transplantation programme. Consider recommencement of adult live donor transplantation service, based on individual case need.</li> <li>Dermatology - plan to increase face to face assessment and treatment of red flag and urgent patients and increase the use of virtual IT solutions to triage patients. Rheumatology - plan to increase the use of virtual IT solutions to triage patients. Continue drive through phlebotomy services.</li> </ul>
Planned Surgery	<ul style="list-style-type: none"> <li>Planned Surgery, including surgery for patients with cancer, was prioritised in line with national guidelines, and delivery supported by private hospitals.</li> </ul>	<ul style="list-style-type: none"> <li>Additional prioritised planned surgery for patients with cancer and/or time-critical patients was provided in Belfast City Hospital, Royal Victoria Hospital, Musgrave Park Hospital and the Royal Belfast Hospital for Sick Children, with continued support from independent sector providers.</li> <li>Duration of planned surgery was kept under review in anticipation for a further Covid-19 surge, at which stage surgery would be impacted again. It is not planned to start Elective Orthopaedic Surgery in June.</li> <li>Theatre utilisation was reviewed to enhance theatre capacity in Musgrave Park Hospital and Royal Victoria Hospital to accommodate prioritised surgical patients (prioritised in line with national guidance).</li> </ul>	<ul style="list-style-type: none"> <li>BHSCT will continue to deliver prioritised planned surgery for patients with cancer and/or time-critical patients (prioritised in line with national guidance) in Belfast City Hospital, Royal Victoria Hospital, Musgrave Park Hospital, the Royal Belfast Hospital for Sick Children and with the support of the Independent Sector.</li> <li>It is not planned to restart routine Elective Orthopaedic surgery in July- August 2020. A decision on September capacity will be taken later.</li> </ul>

Our services	What we did during the Covid-19 pandemic	What we did in June 2020 (Phase 1)	What we plan to do for July-Sept 2020 (Phase 2)
Diagnostics (X-Ray, MRI, CT, cardiac investigations and Neuro-physiology)	<ul style="list-style-type: none"> <li>We have continually reviewed existing diagnostics resource for red flag and urgent capacity whilst also supporting unscheduled and inpatient diagnostic demands. We have identified and implemented separate facilities and pathways for patients suspected/ diagnosed with Covid-19.</li> </ul>	<ul style="list-style-type: none"> <li>Radiology actively reviewed and increased diagnostic services for patients with red flag, urgent, planned and, where required, routine pathways. An Imaging referrals hub was developed in the Royal Victoria Hospital to reduce reliance on face to face discussions for inpatient referrals.</li> <li>Cardiac Diagnostics - urgent inpatient diagnostics continued with careful triage of all referrals received. Urgent outpatient diagnostic services remained limited. Urgent outpatient ECHO began on Monday June 22nd in BCH.</li> </ul>	<ul style="list-style-type: none"> <li>We will continue to ensure maximum utilisation of all available diagnostic resources, although patient capacity is limited within the safety arrangements for managing services in the current Covid pandemic.</li> </ul>
Endoscopy (diagnostic & therapeutic)	<ul style="list-style-type: none"> <li>Critical endoscopy services continued with a core team in Royal Victoria Hospital for both elective (red flag) and unscheduled patients. Continued provision of an emergency Trust-wide endoscopy service with ongoing validation of waiting lists.</li> </ul>	<ul style="list-style-type: none"> <li>Critical endoscopy services continued with a core team in Royal Victoria Hospital for both red flag and unscheduled patients.</li> <li>Continued provision of an emergency Trust-wide endoscopy service.</li> <li>Phased recovery of endoscopy services in the BCH Endoscopy Unit including red flag and 'must do' cases.</li> <li>Restart of the virtual Bowel Cancer Screening service and Bowel Cancer Screening colonoscopies in the BCH Endoscopy Unit.</li> </ul>	<ul style="list-style-type: none"> <li>We will continue to ensure maximum utilisation of all available resources with continued provision of an emergency Trust-wide endoscopy service for inpatients and, red flag and urgent endoscopy in the BCH and RVH Endoscopy Units. The continued safe provision of care is reliant on the pre procedure screening and 7-day self-isolation of patients, which is coordinated as part of the booking process.</li> <li>The service plans to increase available capacity via the Trust and the independent sector during July-Sept. Continued provision of Bowel Cancer screening services via virtual clinics.</li> </ul>
Maternity & Neonatal Care	<ul style="list-style-type: none"> <li>Maternity &amp; Neonatal services have continued via the Royal Jubilee Maternity Service (the Mater Midwifery-led Unit has also been based here) with ante-natal &amp; post-natal care delivered virtually. Home births continued.</li> </ul>	<ul style="list-style-type: none"> <li>Maternity &amp; Neonatal services continued via the Royal Jubilee Maternity Service (the Mater Midwifery-led Unit has also been based here) with ante-natal &amp; post-natal care delivered virtually. Home births continued.</li> <li>A help-line was established to address specific concerns.</li> </ul>	<ul style="list-style-type: none"> <li>Maternity &amp; Neonatal services will continue via the Royal Jubilee Maternity Service with the possibility of some Midwifery led services returning to the Mater site, with ante-natal and post-natal care delivered virtually. Home births will continue to be facilitated.</li> <li>The help line will continue, designed to reduce footfall and enhance communication with women.</li> </ul>

Our services	What we did during the Covid-19 pandemic	What we did in June 2020 (Phase 1)	What we plan to do for July-Sept 2020 (Phase 2)
Gynaecology, Sexual Health and Reproductive Health	Not completed in June	<ul style="list-style-type: none"> <li>• Commencement of Early Medical Abortion (EMA) services.</li> <li>• Urgent Gynaecology patients seen via face to face and virtual consultations.</li> <li>• Emergency patients were seen in the Sexual Health Clinic via face to face and also virtual consultations.</li> </ul>	<ul style="list-style-type: none"> <li>• Continuance of EMA services and possible extension beyond 9+6 weeks gestation.</li> <li>• Regional Fertility Clinic - currently rapid access clinic for emergencies only. Working towards recommencing fertility treatment on a phased basis.</li> <li>• Sexual Health Clinic – We will continue to see emergency patients via face to face and virtual consultations.</li> </ul>
Neuro-rehabilitation Services	<ul style="list-style-type: none"> <li>• Our Neuro-rehabilitation service at Musgrave Park Hospital was unable to admit patients for respite care in Neurology MPH or to provide rehabilitation in Amputee Services.</li> </ul>	<ul style="list-style-type: none"> <li>• Prioritised neurology patients were admitted to Neurology.</li> <li>• Service delivery continued in RABIU (Regional Acquired Brain Injury Unit) with virtual outpatient clinics and inpatient services continuing as per service need.</li> </ul>	<ul style="list-style-type: none"> <li>• Prioritised Neurology patients will continue to be admitted to Neurology.</li> <li>• Regional Acquired Brain Injury Unit to begin outpatient services for priority outpatients on face to face basis, with virtual outpatient clinics continuing.</li> <li>• In-patient amputee service planned to restart in August 2020.</li> </ul>
Regional Disablement service	<ul style="list-style-type: none"> <li>• For prioritised patients, we continued to virtually deliver Outpatient services through telephone and video calls and, only where required, with face-to-face attendance.</li> </ul>	<ul style="list-style-type: none"> <li>• Prioritised patients were reviewed, virtual appointments continued and face to face appointments accommodated.</li> <li>• Continued to respond to wheelchair referrals received from Trusts. Continued to see urgent referrals from Trusts face to face where patient safety was an issue.</li> <li>• Reduced levels of wheelchair referrals were received from Trusts. Orders for wheelchair equipment continued to be placed and where possible handover to clients was facilitated.</li> <li>• The Approved Repairer Service for wheelchairs continued operating and responded to service demand.</li> </ul>	<ul style="list-style-type: none"> <li>• Priority patients will continue to be reviewed, utilising virtual clinics and increasing face to face consultations within guidance.</li> <li>• Service is seeking alternative accommodation for amputee patients suitable for outpatient rehabilitation.</li> <li>• Clinics will continue to be held in each Trust area with local arrangements in place.</li> <li>• The Approved Repairer Service for wheelchairs will continue to respond to the service demand.</li> </ul>
Hospital Outpatients	<ul style="list-style-type: none"> <li>• We continued to virtually deliver Outpatient services through telephone and video calls and, only where required, with face-to-face attendance. We have seen over 58,000 patients since 14 March 2020, including over 31,000</li> </ul>	<ul style="list-style-type: none"> <li>• We continued to virtually deliver Outpatient services through telephone and video calls and, only where required, with face-to-face attendance.</li> </ul>	<ul style="list-style-type: none"> <li>• We will continue to virtually deliver Outpatient services, mainly through telephone and video calls. A number of outpatient clinics will be restored across hospital sites, with reduced patient numbers, in line with appropriate safety</li> </ul>



Our services	What we did during the Covid-19 pandemic	What we did in June 2020 (Phase 1)	What we plan to do for July-Sept 2020 (Phase 2)
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through tele-calls and virtual contacts. We now have 65 services using virtual clinics, an increase from 25 services in February 2020.

measures.

GP OOH service	<ul style="list-style-type: none"> <li>Belfast Trust GP Out-of-Hours service continued, with reduced face-to-face contact where possible.</li> </ul>	<ul style="list-style-type: none"> <li>No change – GP Out-of-Hours service continued.</li> </ul>	<ul style="list-style-type: none"> <li>No change – GP Out-of-Hours service continues as described.</li> </ul>
Dental Services	<ul style="list-style-type: none"> <li>Hospital Dentistry and Community Dental services – emergency only and red flag continued.</li> <li>School of Dentistry – all QUB dentistry patient treatments ceased.</li> <li>The Urgent Dental Clinic in Carlisle Wellbeing &amp; Treatment Centre was available for all patients who could not be managed by their local dentist.</li> </ul>	<ul style="list-style-type: none"> <li>School of Dentistry – all QUB dentistry patient treatments remain ceased.</li> <li>Telephone Reviews have been maximised but these have limited success in dentistry.</li> <li>Community Dental service – telephone reviews only</li> <li>The Urgent Dental Clinic in Carlisle Wellbeing &amp; Treatment Centre was available for all patients who could not be managed by their local dentist.</li> </ul>	<ul style="list-style-type: none"> <li>Limited hospital dentistry is anticipated due to the requirements of aerosol generating procedures.</li> <li>Priority will be given to the regional oral medicine, paediatric dentistry, and head and neck cancer services.</li> <li>Clinically urgent patients will be assessed and treated.</li> <li>Community Dental service can be re-established as soon as access to the health and treatment centres becomes available.</li> <li>The Urgent Dental Clinic in Carlisle Wellbeing &amp; Treatment Centre continues to be available for all patients who cannot be managed by their local dentist.</li> </ul>

### Service Area : Adult Community & Older People's Services

Care Homes	<ul style="list-style-type: none"> <li>Our multi-disciplinary team has reached into Care Homes to support sick residents and provide PPE, training and Covid-19 testing for both residents and staff.</li> </ul>	<ul style="list-style-type: none"> <li>Our enhanced multi-disciplinary team extended the level of Trust staffing into Care Homes as required, with enhanced clinical input, end of life care, and post Covid-19 recovery support.. We sustained acceptable staffing levels and completed the testing of residents and staff in care homes. We provided onsite infection prevention and control visits to all care homes.</li> </ul>	<ul style="list-style-type: none"> <li>The Belfast team will continue to proactively provide support across all Care Homes, including management of Covid-19 outbreak. We will work with stakeholders to develop plans to sustain the support required.</li> </ul>
Community Care Services	<ul style="list-style-type: none"> <li>Community and District Nursing Teams have continued to provide home visits to those people most at risk and support arrangements are in place for the most vulnerable. Tele-calls were held with those referred into services to assess</li> </ul>	<ul style="list-style-type: none"> <li>Our Community Teams continued to assess, prioritise and support the most vulnerable in our community.</li> <li>Psychiatry of Old Age undertook face-to-face</li> </ul>	<ul style="list-style-type: none"> <li>Our Community Teams will explore the potential to meet the needs of our service users through the expansion of home visits and face to face contacts.</li> </ul>

Our services	What we did during the Covid-19 pandemic	What we did in June 2020 (Phase 1)	What we plan to do for July-Sept 2020 (Phase 2)
	<p>their needs and provide initial support.</p> <ul style="list-style-type: none"> <li>Day Centres have been temporarily closed to service users, except in exceptional circumstances, and have continued to support service users with activity packs and telephone calls.</li> </ul> <p>Patients who were referred by their GP or GP Out-of-Hours service were assessed by the Primary Care Assessment Centre at Beech Hall Wellbeing and Treatment Centre. A total of 1700 patient assessments have been completed.</p>	<p>assessment where appropriate.</p> <ul style="list-style-type: none"> <li>Urgent respite services were provided.</li> <li>The work of the Covid-19 Coordination Centre was amalgamated into the work of the Connected Communities Hub.</li> <li>Intermediate Care services continued to support hospital flow through discharge facilitation with a range of support services.</li> <li>Day Centre outreach services continued across the 11 Physical and Sensory Disability, and Older People's Day Centres.</li> <li>We continued to deliver domiciliary care and planned for the restart of domiciliary care packages for those suspended by service users during the pandemic.</li> <li>The Primary Care Assessment Centre at Beech Hall Wellbeing and Treatment Centre continued to support Covid-19 assessment of the wider community as required.</li> </ul>	<ul style="list-style-type: none"> <li>Urgent respite care will be facilitated as requested by service users and families;</li> <li>The Connected Communities Hub will continue its preventative work with people with long term conditions.</li> <li>We will develop a new frailty pathway for older people, involving primary, community and hospital teams.</li> <li>We will continue to review our intermediate care provision against demand.</li> <li>There will be a phased reopening of Day Centres to support those who are most vulnerable. Day care outreach will continue to be delivered to service users and carers.</li> <li>We will continue to deliver domiciliary care and respond to new requests for this service, depending on availability.</li> <li>The Primary Care Assessment Centre will continue to be provided at Beech Hall for patients who are referred for Covid 19 assessment and testing.</li> </ul>

**Service Area : Learning Disability Services**

<p>Muckamore Abbey Hospital</p>	<ul style="list-style-type: none"> <li>Muckamore Abbey Hospital continued to provide care for its existing inpatients. However in reach and outreach activities associated with resettlement ceased and daycare services on site were reduced in line with infection prevention and control advice.</li> </ul>	<ul style="list-style-type: none"> <li>Muckamore Abbey Hospital continued to provide care for its existing inpatients.</li> <li>Plans for resettlement of residents will recommence in line with infection prevention and control advice.</li> </ul>	<ul style="list-style-type: none"> <li>Muckamore Abbey Hospital will continue to provide care for its existing inpatients and develop plans for family visiting in line with regional policy.</li> <li>In-reach activities for the resettlement of residents will recommence in line with infection prevention and control advice.</li> </ul>
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Our services	What we did during the Covid-19 pandemic	What we did in June 2020 (Phase 1)	What we plan to do for July-Sept 2020 (Phase 2)
Learning Disability Day Centres (including day opportunities)	<ul style="list-style-type: none"> <li>Day Centres have been temporarily closed to service users, except in exceptional circumstances, and have continued to support service users with activity packs and telephone calls.</li> <li>Our Nursing Team and Psychological Therapeutic Support Services provided regular advice to the residents of our Learning Disability Residential and Supported Housing to maintain their safety and security in relation to anxiety as a result of change in routine.</li> </ul>	<ul style="list-style-type: none"> <li>In line with regional guidance, we developed plans for the reopening of some Day Centres for the most vulnerable service users. We have continued to support service users with activity packs and telephone calls.</li> <li>In partnership with Orchardville Society, NOW, Mencap, Arts For All, Equal Notes, Belfast Hills Partnership, L'Arche, Everyday Harmony, USDT, Association for Real Change and Street Soccer, we delivered virtual activity where possible and also made plans for a return to planned activity.</li> </ul>	<ul style="list-style-type: none"> <li>We plan a phased reopening of a number of our day centres during July for our most vulnerable service users.</li> <li>We plan to maintain support workers with each community team to maintain care in community.</li> <li>Commissioned day opportunities recommencing alongside virtual activities.</li> </ul>
Learning Disability Residential & Supported Housing	<ul style="list-style-type: none"> <li>Our Nursing Team and Behavioural Support Team provided regular advice to the residents of our Learning Disability Residential and Supported Housing to maintain their safety and security in relation to anxiety as a result of change in routine.</li> </ul>	<ul style="list-style-type: none"> <li>Residential and Supported Housing continued as normal with use of IT and social media for family contact.</li> </ul>	<ul style="list-style-type: none"> <li>Residential and Supported Housing continues as normal. The service will develop plans for family visiting and staff reviews with residents in line with regional policy.</li> </ul>
Community Learning Disability Outpatient Clinics	<ul style="list-style-type: none"> <li>Telephone screening was undertaken for all service referrals, with face-to-face contact in an emergency or where required.</li> </ul>	<ul style="list-style-type: none"> <li>Virtual outpatient assessment continued for the most vulnerable. We considered new ways of working to meet the face to face needs of our service users.</li> </ul>	<ul style="list-style-type: none"> <li>Virtual outpatient assessment will continue and we will plan new ways of delivering outpatient appointments to reduce the number of times service users have to attend a hospital or healthcare environment.</li> </ul>
<b>Service Area : Mental Health / Child and Adolescent Mental Health Services</b>			
Inpatient services	<ul style="list-style-type: none"> <li>Inpatient services for Adults and Children remained operational, with the Adult Acute Mental Health Unit and Beechcroft Regional Unit open.</li> </ul>	<ul style="list-style-type: none"> <li>Acute Mental Health Service began to see an increase in mental health referrals during June, with increased demand for the Adult Mental Health Inpatient Centre. Stepdown facilities opened to improve the patient journey.</li> </ul>	<ul style="list-style-type: none"> <li>All inpatient services will remain operational.</li> <li>Planning for additional step down facilities is underway with additional capacity to support the patient journey from the Adult Mental Health Inpatient Centre into the community.</li> </ul>
Community Mental Health Teams	<ul style="list-style-type: none"> <li>The Community Mental Health Teams have continued to provide therapy and contact with service users through virtual consultations. Urgent patient referrals have a comprehensive telephone triage.</li> </ul>	<ul style="list-style-type: none"> <li>In June routine appointments were restarted, using a comprehensive telephone assessment process. Patients who required to be seen face to face were also accommodated.</li> </ul>	<ul style="list-style-type: none"> <li>Home Treatment House (HTH) will open in July, as an appropriate alternative to hospital admission.</li> <li>Substitute prescribing will continue, working on the current waiting list.</li> </ul>

Our services	What we did during the Covid-19 pandemic	What we did in June 2020 (Phase 1)	What we plan to do for July-Sept 2020 (Phase 2)
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- The Substitute Prescribing Service restarted.
- Preparation for the opening of day opportunities began in line with social distancing requirements.
- Preparation for the restarting of group therapeutic interventions began, in line with social distancing requirements.

- Day opportunities and therapeutic group work will begin, using identified facilities, where social distancing can be adhered to, with smaller group numbers.
- Towards Zero Suicide work commences again in July 2020.

**Service Area : Psychological services**

Inpatient & Outpatient services

- Inpatient Psychological Services continued across hospital sites, including Mental Health and Learning Disability.
- Outpatient work has continued using a mix of virtual and phone therapeutic delivery.
- Additional family and patient support helplines have been set up to increase direct access to our services for those with psychological distress and concerns. Advice on managing emotions, behaviours and activities has been delivered within our learning disability therapeutic services, maintaining connections with clients and supports to families and carers.

- Inpatient services continued to be provided across all acute hospital sites. We continued to deliver outpatients using phone contact and virtually and explored the delivery of psychoeducational groups and training, using webinars and facilitated sessions.

- Inpatient services will continue across all acute hospital sites.
- Outpatient work will continue using a mix of virtual and phone therapeutic delivery.
- Family and patient support helplines continue to support direct access to our services for those with psychological distress and concerns.
- We will increase our capacity to offer face-face individual and group work within social distancing and infection control parameters.

**Service Area : Allied Health Professional community services and clinics**

Allied Health Professional community services and clinics

- Allied Health Professional services (Podiatry, Speech & Language Therapy, Dietetics, Occupational Therapy and Physiotherapy) have continued to deliver urgent face to face clinics or domiciliary visits and have introduced virtual clinics and consultations wherever possible. There were 11,000 consultations with service users undertaken during the 6 weeks up to the end of April – 51% of these were undertaken virtually.

- There were approximately 10,000 consultations with service users undertaken during May – 65% of these were undertaken virtually.
- Drive through weighing appointments have been introduced at the MOT centre during June, which will help to support the virtual treatment options for Dietetics.

- The AHP services will continue to provide face-to-face urgent care on a risk assessed basis and will aim to maintain and, where possible, further increase virtual service capacity during July and August.
- The Occupational Therapy service hope to increase their engagement with other agencies such as NI Housing Executive and third party providers such as contractors.

Our services	What we did during the Covid-19 pandemic	What we did in June 2020 (Phase 1)	What we plan to do for July-Sept 2020 (Phase 2)
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**Service Area : Children's Community Services**

Early Years teams	<ul style="list-style-type: none"> <li>No inspections were undertaken. Telephone support was given to providers where required.</li> </ul>	<ul style="list-style-type: none"> <li>No inspections took place with telephone support being provided to providers.</li> </ul>	<ul style="list-style-type: none"> <li>Inspections will continue to be stood down. Registrations are continuing and visits are undertaken where deemed necessary or safeguarding issues arise.</li> <li>The Early Years Team role is to support the sector by reassessing all group registrations and varying them to ensure they comply with DOH Guidance regarding pods and risk assessments.</li> </ul>
Child Health	<ul style="list-style-type: none"> <li>Health Visiting and School Nursing Services &amp; Children's Community Service will prepare for a phased reintroduction of some services in line with the regional plan, including school immunisation programme.</li> <li>Overnight care for a small number of highly complex children was provided.</li> </ul>	<ul style="list-style-type: none"> <li>Plans were developed to carry out school immunisations to those children and young people who had not received them during the period March-May. Immunisation clinics commenced 15th June 2020. Health Visitors increased the number of face to face visits to babies in their first 16 weeks post birth</li> <li>Overnight care was provided for a small number of highly complex children in their own homes.</li> </ul>	<ul style="list-style-type: none"> <li>The new baby visits will continue.</li> <li>Any school immunisations not given in year will be prioritised over the summer months. Year 1 and year 8 health assessments will be planned for those children who have not received these due to COVID period. Plans will be made to manage the roll out of the influenza immunisation from September/October onwards.</li> <li>Overnight care will continue to be provided to the most highly complex children in their own homes. The children's community nurses will visit children with health care needs on the basis of priority.</li> </ul>
Children's Community social work teams	<ul style="list-style-type: none"> <li>Gateway Service: Initial home visits to all new referrals to be determined by priority</li> <li>Child protection referrals: All children on the child protection register will receive a minimum of one visit every 4 weeks.</li> <li>Priority Looked After Children (LAC) visits took place and all other contacts were undertaken virtually. All face to face contact between parents and children was paused with contact taking place virtually or by telephone.</li> <li>The Trust's 10 Children's Homes remained open. Support continued to be provided to foster carers virtually where possible.</li> </ul>	<ul style="list-style-type: none"> <li>All initial referrals were screened and responded to according to priority. All cases requiring initial assessment received a face to face visit. All child protection referrals received a visit within 24 hours.</li> <li>Plans were put in place for all children on the child protection register to receive a minimum of 1 face to face visit every 4 weeks. Priority looked after children visits took place.</li> <li>Work was undertaken regionally to develop a risk assessment tool to support the introduction of contact for LAC and their families. All cases were being reviewed during this month.</li> </ul>	<ul style="list-style-type: none"> <li>All initial referrals were screened and responded to according to priority. All cases requiring initial assessment received a face to face visit. All child protection referrals received a visit within 24 hours.</li> <li>All children on the child protection register will continue to receive a minimum of one face to face visit every 4 weeks. All other visits to take place either virtually or face to face depending on the risk assessment.</li> <li>All looked after children are to be reviewed to determine if face to face or virtual visits by social workers should take place.</li> </ul>

Our services	What we did during the Covid-19 pandemic	What we did in June 2020 (Phase 1)	What we plan to do for July-Sept 2020 (Phase 2)
Children with Disability Teams	<ul style="list-style-type: none"> <li>Children with Disability Teams remained operational with visits determined by priority need. All residential short breaks were stood down.</li> <li>Support from Speech &amp; Language Therapy, Occupational Therapy and Physiotherapy for children who attend Special Schools within Belfast has continued. Services have provided resources and online support for families, with home visits arranged wherever necessary.</li> </ul>	<ul style="list-style-type: none"> <li>The 10 Children's Homes remained open.</li> <li>Support continued to be provided to foster carers both virtually and face to face where deemed necessary.</li> <li>Children with Disability Teams are developing new forms of outreach including new options for short breaks for their most vulnerable families. Willow Lodge short breaks unit will offer non-residential short breaks 7 days a week for a small number of children with a learning disability.</li> <li>Support from Speech &amp; Language Therapy, Occupational Therapy and Physiotherapy for children who attend Special Schools within Belfast has continued. Services have provided resources and online support for families, with home visits arranged as necessary.</li> <li>Online support will continue to be provided to families where appropriate. Face to face visits will take place and practical support provided with families where necessary.</li> </ul>	<ul style="list-style-type: none"> <li>Face to face contact between looked after children and their parents may be facilitated subject to review and risk assessment.</li> <li>The 10 Children's Homes will remain open.</li> <li>Children will continue to be admitted into care.</li> <li>Non-residential Short breaks will continue to be provided through Willow Lodge to a small number of families.</li> <li>Online support will continue to be provided to families where appropriate. Face to face visits will continue to take place with practical support for families where necessary.</li> <li>Allied Health Professional services continue to engage with Education colleagues in planning for the arrangements for returning children to school and exploring potential options for summer schemes within Education settings.</li> </ul>
Child Care Centre	<ul style="list-style-type: none"> <li>The Child Care Centre was closed with staff maintaining contact with children and families via virtual platforms.</li> </ul>	<ul style="list-style-type: none"> <li>The Child Care Centre has remained closed but staff have begun to meet individually with a small number of young people outdoors to reconnect with them and provide support.</li> <li>Both Family Centres remained closed.</li> <li>The Contact Centre remained closed.</li> </ul>	<ul style="list-style-type: none"> <li>The decision to reopen the Child Care Centre will be kept under review.</li> <li>The decision to reopen the Family Centres will remain under review.</li> <li>Planning will commence to reopen the contact centre by the end of July for a limited number of contact visits. This planning will take account of availability of the following: staff, PPE, IPC measures that need to be put in place and the contact risk assessments for each case.</li> </ul>
Family Centres	<ul style="list-style-type: none"> <li>Both Family Centres were closed.</li> </ul>		
Trust Contact Centre	<ul style="list-style-type: none"> <li>The Trust's Contact Centre was closed.</li> </ul>		

Our services	What we did during the Covid-19 pandemic	What we did in June 2020 (Phase 1)	What we plan to do for July-Sept 2020 (Phase 2)
Public Health Services: New Entrants	<ul style="list-style-type: none"> <li>All New Entrant Screening was stood down for 3 months but TB cases were immediately actioned.</li> </ul>	<ul style="list-style-type: none"> <li>All TB cases were actioned.</li> </ul>	<ul style="list-style-type: none"> <li>The NINES service will incrementally reintroduce face to face working as determined by priorities.</li> </ul>
Homeless Inclusion Service	<ul style="list-style-type: none"> <li>Screening of the homeless population for Covid-19 continued and telephone contact maintained with hostels.</li> </ul>	<ul style="list-style-type: none"> <li>Screening of the homeless population continued as required.</li> <li>GP sessions continued via telephone triage</li> <li>Assessment as per Covid-19 Criteria</li> <li>Testing those who meet the Criteria within the facilities, street outreach and those placed in non-standard accommodation.</li> <li>Follow-up in relation to specific health needs.</li> <li>Follow-up with Direct Contacts and advice re isolation.</li> </ul>	<ul style="list-style-type: none"> <li>Screening of the homeless population for COVID and providing support to the Hostels will continue.</li> <li>We will scope how services can incrementally be increased through use of bookable clinics, and providing services in a different way.</li> <li>Planning for the introduction of antibody testing will commence in early July.</li> </ul>
Regional Emergency Social Work service	<ul style="list-style-type: none"> <li>Service continued to be operational for out-of-hours social work emergencies.</li> </ul>	<ul style="list-style-type: none"> <li>The service continued to respond to emergencies out of hours.</li> </ul>	<ul style="list-style-type: none"> <li>The service will continue to operate.</li> </ul>

### Service Area : Corporate

Health Improvement/Community development	<ul style="list-style-type: none"> <li>Coordination and delivery of local support (Food / Fuel / Pharmacy / Wellbeing) through Regional Advice NI Helpline, Trust Community Coordination Centre and Belfast City Council Helpline.</li> <li>Management of Trust Donations mailbox and distribution process across community and acute sites.</li> <li>Supporting Staff Health and Wellbeing through the development of literature and promotional material.</li> </ul>	<p>We delivered on:</p> <ul style="list-style-type: none"> <li>Coordination and delivery of local support (Food / Fuel / Pharmacy / Wellbeing) through Advice NI Helpline, Trust Community Coordination Centre and Belfast City Council Helpline.</li> <li>Management of Trust donations mailbox and distribution process across community and acute sites.</li> <li>Support for staff and public health and wellbeing through the development of literature and promotional material.</li> <li>Stop Smoking and Diabetes Prevention support on an telephone/virtual basis.</li> <li>Support of carers in accessing priority supermarket slot using the Carer ID cards.</li> </ul>	<p>We will:</p> <ul style="list-style-type: none"> <li>Develop virtual delivery of training ie. involvement training, PPI, Smoking Cessation, Diabetes Prevention Programme, Roots of Empathy, Physical Activity, Mental &amp; Emotional Health &amp; Well Being.</li> <li>Explore new and creative ways to involve service users and carers including the use of arts in health.</li> <li>Work with community partners to develop local health profiles and action plans to improve health and wellbeing.</li> <li>Develop new ways of reaching and supporting carers, with a focus on health and wellbeing.</li> </ul>
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Our services	What we did during the Covid-19 pandemic	What we did in June 2020 (Phase 1)	What we plan to do for July-Sept 2020 (Phase 2)
Domestic Abuse & Sexual Violence	<ul style="list-style-type: none"> <li>In recognition of the prevalence of domestic and sexual violence and the escalation of risk due to lockdown, the Belfast Domestic Abuse and Sexual Violence Partnership raised awareness through the Partnership App and Website and supported member agencies, social media and poster campaigns. The Trust also supported our two Women's Aid Refuges, through the provision of PPE and financial assistance for families in need / at risk in the community.</li> </ul>	<ul style="list-style-type: none"> <li>Safety planning with partners agencies. The Partnership has continued to engage in awareness raising of domestic and sexual violence across our statutory, voluntary and community sectors, in the Trust area. The Partnership has also developed Safety Planning Cards for use by professionals and victims.</li> </ul>	<ul style="list-style-type: none"> <li>Safety planning with partner agencies. The Partnership has developed a bespoke awareness raising programme for hairdressers and beauticians, across Belfast and will be delivering this in early Autumn. A series of "Healthy Relationships" sessions will be delivered shortly to community and voluntary agencies in the Trust, who work with young people and we plan to deliver an awareness raising session, specifically highlighting the needs of male victims of domestic and sexual violence and for those in our LGBTQ+ community.</li> </ul> <p>All these programmes will be delivered via various platforms, including zoom and webinar.</p>
Screening programmes	<ul style="list-style-type: none"> <li>New Born Hearing Screening continued to be delivered.</li> <li>Regional screening programmes were paused temporarily:               <ul style="list-style-type: none"> <li>- Abdominal Aortic Aneurysm screening and surveillance monitoring</li> <li>- Routine breast screening</li> <li>- Bowel cancer screening</li> <li>- Routine cervical screening</li> </ul> </li> <li>Routine diabetic eye screening and surveillance monitoring.</li> </ul>	<ul style="list-style-type: none"> <li>New born hearing screening provided for all new born babies.</li> <li>Regional screening programme as per Public Health information.</li> </ul>	<ul style="list-style-type: none"> <li>New Born hearing screening will continue for all new born babies.</li> <li>Trust continues to deliver essential screening in line with Public Health Agency recommendations.</li> </ul>