

OUR APPROACH: REBUILDING HEALTH AND SOCIAL CARE SERVICES IN THE SOUTH EASTERN TRUST

The initial phases of Covid-19 dramatically changed the service delivery offering of the South Eastern Trust. Some services had to be stood down for various reasons including clinical, patient and staff safety as well as physical and workforce capacity constraints. Other new services and ways of working also had to be introduced to meet the predicted demands of the pandemic, whilst others changed considerably.

The Covid-19 virus has demonstrated that it is easily spread, often before symptoms are recognised and a small but significant number of patients develop a severe and fatal illness. As the measures to control infection are eased, the Department of Health requires Trusts to complete risk assessments as part of incremental plans to resume service delivery.

For the South Eastern Trust, this means assessing the risk of exposure to Covid-19 for our service users, patients and staff as well as the risk associated with the direct impact that managing Covid-19 has on reducing the capacity and access to other services for our community. Now is the time to consider and plan to implement the rebuilding of our services over the next 1 month, 3 month and 12 month horizon.

The Department of Health have stated their intention, subject to ministerial approval, to introduce a new "Strategic Framework for Rebuilding HSC Services" and has asked each Trust to prepare and publish a Stage 1 plan for their own area covering the period to 30th June 2020. The Department of Health will lead on planning and preparation of a Stage 2 plan, covering the period from 1 July 2020 to 30 September 2020. In support of this, the South Eastern Trust has set out, in the following document, a high level overview of the services that we plan to **maintain as part of the Covid-19 response** and those that we **plan to rebuild during the month of June 2020.**

Rebuild Plan- Stage one: 1st June to 30th June 2020

In working together with our partners across Northern Ireland to implement the recovery of Non-Covid-19 Health and Social Care Services, our agreed regional approach will be to:

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



Throughout this period our staff have shown tremendous resilience and creativity and have continued to deliver high quality care in some very difficult circumstances. We are now past the first peak of the Covid-19 outbreak in Northern Ireland and our focus is changing to how we rebuild our services. We recognise that this will be complex and we may need to respond to further surges of this disease. It is accepted that Covid-19 remains a public health risk to our population and a flexible, phased approach is needed. Priority will be given to patients and service users who urgently require services and planned cancer surgery.

Plans to rebuild our services will be assessed against a Department of Health checklist to assure our service users, patients and staff that a number of key issues have been considered. These include, but are not limited to: social distancing guidelines and the impact this will have on physical space, Personal Protective Equipment, workforce availability, blood products, medicine supplies and infection and prevention control including hand sanitising and washing facilities. 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.

Our key challenges in respect of implementing our plan include:

- Balancing safety and risk through regional agreements in respect of ensuring both effective ongoing response to Covid-19 locally and the need to rebuild elective services for prioritised clinical groups on an equitable basis for the Northern Ireland population;
- Ongoing local discussion and agreements to rebuilding health and social services plans, being mindful of our commitment to co-production and engagement and informed involvement in key decision making; and
- Ensuring any rebuild plans focus on mitigating the highest level of risks to patients and staff.

What will this look like?

The way services are delivered may look and feel different. Examples are outlined below of what patients and service users may be able to expect:

- We would encourage you to contact your GP Practice if you are concerned about any symptoms you are experiencing;
- To alleviate patient and service user concerns we are working to identify ways to ensure, where possible, services will be provided using separate pathways for patients suspected or confirmed with Covid-19;
- We recognise that some of our service users may be still shielding and we are making additional plans to support their care;
- 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;
- We will use our accommodation in a way which helps us to maintain social distancing;
- There are many factors both local and regional that are interdependent such as transport, cleaning, catering, visiting policies, signage, car parking etc. that we will consider as part of the rebuilding plan; and
- We have temporarily restricted the number of visitors across hospitals and community health care settings. At present, all general hospital visiting has stopped in line with the regional visiting policy. There are some exceptions to these restrictions, for example Critical Care areas and end of life care and we have made local arrangements to ensure you can remain in contact with your loved ones.

Many Trust services continued to be sustained during the Covid-19 surge. However, for services that have been significantly impacted as a result of the pandemic - the table below outlines the Trust's 'Stage 1 Service Rebuilding Plan' (period: 1 to 30 June 2020).

Looking ahead

During June 2020, as we prepare for the next stage of the regional rebuilding plan for July, August and September 2020, we will be using the opportunity to **build on new ways of working to continue to provide safe and effective care**. This will involve working closely with our partners and clinical leaders, using flexible and remote working where appropriate and rapid scaling of technology such as telephone and video calls. We are engaging with our frontline staff to reflect on the many 'lessons learned' and further work on this will be crucial to inform our plans going forward. This learning and sharing of best practice will inform our longer-term operational, strategic and financial planning as well as the wider regional priorities.

We will also continue to engage with key partners to ensure that plans are representative of and include the valuable input of those who use our services.



REBUILDING PLAN PHASE 1 JUNE 2020 TABLE

HOSPITALS		
Our services	What did we do during Covid-19 pandemic?	What do we plan to do during June 2020?
Urgent and Emergency Care	 Ulster and Lagan Valley Hospitals Emergency Departments managing suspect /positive Covid-19 and non-Covid-19 patients Downe Hospital Emergency Department including Minor Injuries Unit temporarily closed Bangor and Ards Minor Injuries Units temporarily consolidated in Ards Hospital We provided inpatient care at the Ulster Hospital, Lagan Valley Hospital and Downe Hospital for both positive Covid-19 and non-Covid-19 patients, with clear pathways on all three hospital sites 	 Ulster and Lagan Valley Hospitals Emergency Departments to continue safe provision of urgent and emergency care Downe Hospital Emergency Department and Minor Injuries Unit to remain temporarily closed Bangor Minor Injuries Unit to continue temporarily operating from Ards Hospital Continue to provide inpatient care for both positive Covid-19 and non-Covid-19 patients, with clear pathways on all three hospital sites
Critical Care	Critical Care services were provided as per the Critical Care Network Northern Ireland Surge Plan. There were clear pathways for suspect /positive Covid-19 and non-Covid-19 patients	Continue to provide critical care services according to Critical Care Network Northern Ireland Surge Plan, with clear pathways for suspect/ confirmed covid-19 and non-covid- 19 patients
Diagnostics (X-Ray, MRI, CT, Cardiac Investigations)	Services prioritised for inpatient, red flag and urgent investigations (Trust wide)	Continue prioritised inpatient, urgent and red flag investigations across all sites
Day Surgery and Endoscopy	 Continued complex day surgery in the Ulster Hospital Temporarily ceased day case surgery and endoscopy in Lagan Valley Hospital and Downe Hospital Only emergency and in-patient endoscopies were carried out during Covid-19 as per national guidance. 	 Continue complex day surgery, inpatient, red flag and urgent endoscopy in the Ulster Hospital Recommence Lagan Valley Hospital day case surgery and endoscopy services Recommence endoscopy services in the Downe Hospital



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Outpatients	Phone and video call assessment for urgent, recand review patients as well as prioritised face to assessment appointments (Trust wide)	· · ·
Cancer Services	 Cancer diagnostics and surgery continued as penational and Northern Ireland Cancer Network regional guidance across our hospitals and using independent sector Oncology and Haematology Systemic Anti-cance treatments including chemotherapy continued, national and Northern Ireland Cancer Network regional guidance 	Oncology and Haematology Systemic Anti- g the cancer treatments as per national and Northern Ireland Cancer Network regional er guidance
Surgery- Emergency and Elective Inpatients	 Inpatient surgery continued for emergency, trau and fracture services Elective inpatient surgery for prioritised urgent cancer patients 	surgery for prioritised urgent and cancer
Maternity and Paediatrics Services	 Ante-natal and post-natal visits continued, with undertaken through phone and video call appointments Birthing options available in the Ulster Hospital. births temporarily ceased Paediatric outpatients assessed by phone and v call. Face to face assessments prioritised (Trust 	some undertaken by phone and video call Birthing options to continue at the Ulster Hospital with home births supported as much as possible rideo Paediatric outpatients to continue by phone



MENTAL HEALTH		
Our services	What did we do during Covid-19 pandemic?	What do we plan to do during June 2020?
Community and Outpatient services Mental Health Awareness Week 15/24 My 2000 Looking after your mental health and wellbeing	Services continued using phone and video call with some face to face appointments including clients assessed as being at an increased risk and needing emergency support	 Continue by phone and video call with face t face appointments prioritised Face to face appointments will be offered on a risk assessed basis
Inpatient Facilities	Addiction facility temporarily closed	Prepare for the next stage of restarting services on a phased basis
Conditions Management Service	Service temporarily ceased	Prepare for the next stage of restarting services on a phased basis
Derriaghy Centre	Centre temporarily closed	Prepare for the next stage of restarting services on a phased basis
PSYCHOLOGICAL SERVICES		
Our services	What did we do during Covid-19 pandemic?	What do we plan to do during June 2020?
Outpatient Clinics	Services continued using phone and video call with some face to face appointments including clients assessed as being at an increased risk and needing emergency support	 Continue by phone and video call with face to face appointments prioritised Increase in new patient appointments



ADULT DISABILITY		
Our services	What did we do during Covid-19 pandemic?	What do we plan to do during June 2020?
Day Care	All Statutory and Independent Sector day care services were temporarily ceased	Prepare with key partners for service users to return to Trust Day centres in a phased way
Day Opportunities	Service temporarily ceased	Plan for phased reintroduction working with Independent Sector and key partners
Respite Care Carer Support	Urgent respite provided only	Continue to provide urgent respite on risk assessed basis

PRISON HEALTH CARE		
Our services	What did we do during Covid-19 pandemic?	What do we plan to do during June 2020?
All Prison Healthcare Services	 Prison healthcare services continued to provide services to people in prison including using technology where appropriate AHP Services and Start 360 (psychosocial support services for people with drug addiction) - scaled back or delivered by alternative methods such as phone or video calls Face to face clinical assessment facilitated where required 	 Will continue limited face to face appointments Continue to increase phone and video call options where beneficial



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PRIMARY AND	COMMUNITY	SEKVICES

What did we do during Covid-19 pandemic? What do we plan to do during June 2020? **Our services** Urgent referrals have been contacted via phone and video Prepare for phased introduction of new and **Podiatry** review face to face clinics for most urgent **Allied Health Professionals** call appointments Patients have been supported using phone and video call (Physiotherapy, Occupational cases Therapy, Speech and Language appointments Continue phone and video call appointments, Therapy, Podiatry, Orthoptics, Urgent services continued at a reduced level for those with face to face appointments prioritised for people who need face to face assessment, for example: Dietetics) urgent services **Community Rehabilitation** Podiatry service continues for people with foot ulceration Falls services scaled back except for referrals from **Community Stroke team Orthopaedic Integrated Clinical** Northern Ireland Ambulance Service **Assessment and Treatment Service** (ICATS) Falls service **Primary Care Covid-19 Centres** Service created on three sites within the Trust area. Service to continue **Community Dental** All routine dental care temporarily ceased Limited phased restart of children's and Five urgent care dental centres established regionally special care dental theatre lists South Fastern Trust centre is based in Lisburn Health Prepare to increase a prioritised number of Centre urgent appointments in line with regional guidance **Sexual Health Outpatients** Phone and video call reviews undertaken Prepare for phased introduction of new and Essential emergency face to face reviews undertaken. review clinics for most urgent cases including Following up on SH24 (online sexual health testing) those who require face to face assessment platform) positive results for South Eastern Trust area



OLDER PEOPLES		
Our services	What did we do during Covid-19 pandemic?	What do we plan to do during June 2020?
Community Care Services	 Assessment for Social Care and Community Nursing undertaken and service provision continued on prioritised need Support provided to Care Homes. There has been a Multi-disciplinary approach to in reach to care homes including the Enhanced Care At Home (ECAH) service 	 Service provision continuing Enhanced support to Care Homes continuing
Domiciliary Care	Some social care packages have been paused due to service users choice	Reassessment and provision of packages of care to meet assessed need
Day Care	 Day centres facilities temporarily closed Support to service users and their carers services have been provided in alternative ways 	 Prepare for phased reopening of statutory day centres to support the most vulnerable service users with disabilities and people with dementia. Continue to provide support to carers and people with Dementia
Respite Care	Urgent respite has been provided	Continue to provide urgent respite on risk assessed basis
Mental Health Services for Older People	 Emergency face to face appointments prioritised as determined by clinical need Routine outpatient face to face clinics ceased replaced by phone and video advice, where suitable 	 Continue clinics where appropriate Review waiting lists and prepare to increase capacity based on clinical prioritisation



COMMUNITY CHILDREN'S SERVICE	S	
Our services	What did we do during Covid-19 pandemic?	What do we plan to do during June 2020?
Health Visiting and Community Paediatric Services	Child health services scaled back temporarily	Prepare for phased re-introduction of services, in line with regional plan
Immunisation Programme	School health immunisation temporarily ceased	 Prepare for completion of human papillomavirus (HPV) immunisation programme—June/July 2020
Cared for Children	Short breaks for children temporarily ceased	 Recommence short breaks for children with a disability in a planned way Actively planning safe and appropriate arrangements for children in care
Paediatric Services	Phone and video call appointments provided	 Continue by phone and video call with face to face appointments prioritised Across services, scope the need for face to face consultations, to inform the plan going forward
Family Support Hubs	Services continued by phone and video call	Continue by phone and video call with face to face appointments prioritised
Child Protection Services	Services prioritised for at risk children	 Services continue to be prioritised for at risk children Planning for stage 2 will ensure safe contact for children with families



Sure Start	Service continued by phone and video call with face to face appointments prioritised	Preparing for the next stage of restarting services
Contact for Children in Care	Direct face to face contact temporarily ceased. Contact provided by phone and video call	 Preparing for the next stage of restarting services Assessing where face to face contact can take place safely
HEALTH DEVELOPMENT		
Our services	What did we do during Covid-19 pandemic?	What do we plan to do during June 2020?
Diabetes Prevention	❖ Telephone based service	 Continue by phone and video call as well as prioritised face to face appointments The service will commence using a phone and video calling once the Cardiac Rehabilitation service is re-instated
Cardiovascular Prevention / Early Treatment Service	Start of this service temporarily delayed	The service will commence using phone and video calls following re-instatement of the Cardiac Rehabilitation service



CORPORATE		
Our services	What did we do during Covid-19 pandemic?	What do we plan to do during June 2020?
Trust Shielding Team	Established a shielding service with approximately 1500 calls from shielded patients and service users, which led to the implementation of approximately 800 shield packages including help with food, medicines and emotional support	❖ Continue shielding service in the Trust area
Domestic Abuse and Sexual Violence	In recognition of the prevalence of domestic abuse and the escalation of risk due to lockdown the Domestic Abuse and Sexual Violence Partnership in the Trust area raised awareness and support through online videos, social media, posters in pharmacies and supermarkets	Safety planning with partners - continue awareness raising to keep domestic violence issues alive and increase communication accessibility
Screening programmes	 Regional screening programmes were paused temporarily: Abdominal Aortic Aneurysm screening and surveillance monitoring Routine breast screening Bowel cancer screening Routine cervical screening Routine diabetic eye screening and surveillance monitoring 	Regional screening programme will recommence in line with Public Health Agency recommendations