

BHSCT Service Delivery Plan - Quarter 4 addendum (12/01/22) v2

Background

The Trust Service Delivery Plan for Quarter 4 covers the period from January to March 2022. However, it is recognised that in the production of Trust plan for Quarter 3, the Trust worked on the planning assumption that the plan would broadly cover the full winter period. The Trust reviewed and updated its plan in November/December 2021 to ensure robust planning remained in place throughout Quarter 4.

Due to the timing of these plans, the documents do not specifically take into account the potential impact of Omicron.

It has become clear over the last few weeks that the Omicron variant is less severe than Delta and will not have a further impact on the availability of acute beds over and above what is already set out in Trust plans. On this basis the Trust, in agreement with the HSCB, has not updated the model for acute beds.

However, it is anticipated that the levels of infection associated with Omicron will impact on the staffing resource across HSC services and in this regard the Trust has been asked to refresh Quarter 4 plans to take into account the downturn in staffing as a result of Omicron.

This addendum sets out the additional escalated Trust actions resulting from Omicron which are not detailed in the main Quarter 4 plan.

Additional escalated Trust actions

In light of additional demand for hospital beds, the significant discharge challenges facing our ward teams, and impact on staff availability arising from the omicron variant and its significant community transmission, BHSCT has further reviewed its winter service plans to make the following adjustments. BHSCT remains committed to keeping as many services operational as possible but it is likely that some services will be impacted by the changes required to ensure patient/client safety for those in our care.

In line with the regional modelling, BHSCT anticipate the pressure to be greatest in the next 6 weeks with a peak in demand circa 29/1/22. At that time the priority will be to focus on the most acutely unwell patients and to maintain, where possible, patient flow in the unscheduled journey through timely discharge. In order to do this we are working tirelessly to implement all actions as outlined in our winter plans which includes taking measures to ensure the safe discharge of patients back into the

community and in particular to ensure flow through our system in spite of the challenges brought about by delayed discharges.

However, in keeping with the risk of loss of staff resource to those key operational services BHSCT is preparing to implement the following additional escalated actions:

- 1) Workforce prioritisation and allocation to highest clinical priority areas.
- 2) Pause appropriate corporate services to redeploy personnel to support the key operational services identified.
- 3) Reschedule elective work at short notice. The key priority will be to protect emergency surgery and time critical surgery in line with the Regional Prioritisation Oversight Group (RPOG), taking into consideration the Regional Covid-19 Critical Care Surge Level.
- 4) Re-prioritise nursing and medical staff which may require a downturn in outpatient services in order to manage patients unable to be discharged
- 5) Review visiting in line with regional guidance.

To be in a state of readiness the Trust has implemented the following:

- 1) Daily Charles Vincent huddle of senior system leaders.
- 2) Ongoing escalation and control team meetings throughout the day (24/7) to coordinate patient flow and discharge.
- 3) A workforce hub has been established to coordinate redeployment.
- 4) Additional capacity to support the demand for swabbing and contact tracing activity.
- 5) Delivery of nMABs service.
- 6) Identified clinical support service teams which can be temporarily paused to support priority workload and facilitate redeployment.
- 7) Escalated discharge protocols agreed.
- 8) Helping Hands model utilised to secure additional staffing circulated.
- 9) Additional resource for staffing has also been sought via external workforce appeal