

WHST Service Delivery Plans - Quarter 4 addendum (18 January 2022)

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 the 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. It is recognised however that the Trust is likely to experience a significant bed deficit this winter and while mitigation measures have been identified, these will not be able to fully offset this projected deficit.

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 revisit 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

Given the emergence of Omicron variant in Northern Ireland and the resulting impact of increased community transmission on staff absence rates, the Western Trust has been reviewing its winter plans on an ongoing basis, learning from each surge and from key issues as they emerge which affect those plans. The Trust will endeavour to keep as many services operational as possible, however it is highly likely that many will be impacted given reduced staff availability. Patient and client safety remains the priority of the Trust.

In line with the regional modelling we anticipate the pressure to be greatest over the next 4-6 weeks with a peak in demand in mid to late January 2022. 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. Similarly, our community-based services are likely to be challenged in terms of securing and maintaining safe staffing levels across all areas and services will have to be prioritised based on need. In order to do this we are working to implement all actions as outlined in our winter plans. However in keeping with the risk of loss of staff resource to those key operational services, we are preparing to implement the following additional actions:

- 1) Workforce prioritisation and allocation to highest clinical priority, and highest risk areas.
- 2) Pause or reduce appropriate corporate services to deploy personnel to support the key operational services identified.
- 3) Prioritise elective activity in line with the Regional Prioritisation Oversight Group (RPOG), taking into consideration the Regional COVID-19 Critical Care Surge Level.
- 4) In light of the unprecedented high level of COVID-19 transmission in the community and the continued pressures on our hospitals with significant staff absences due to COVID-19, the current temporary visiting restrictions implemented across our hospital sites and facilities will be continued. This will be kept under regular review by the Trust Visiting Group and Trust Silver.
- 5) We are also implementing a range of measures aimed at supporting our staff, including increased occupational health support, the ongoing advancement of the Trust's staff wellbeing framework encompassing team development, manager support, psychological support and health and wellbeing initiatives and our Working Safely Together group which aims to create a safety culture within the Trust.

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

- 1) Trust Silver Command is meeting daily.
- 2) A robust process is in place to collate and escalate any issues arising and for escalation to HSC Silver via sitreps as necessary.
- 3) Operational services conduct daily situation reviews through established Bronze arrangements and make decisions to downturn services as necessary to manage time critical services and those patients who are judged to be the highest priority to be in receipt of services whether in hospital or community priority service areas.
- 4) Escalated focus on discharge management from our acute and community hospitals to enable flow and avoid ED congestion.
- 5) A multi-disciplinary workforce surge group has been established to identify and respond to staffing requirements and co-ordinate allocation of staff to high priority service areas.

- 6) Additional capacity has been identified to support the demand for swabbing, testing and contact tracing activity.
- 7) A number of additional support roles have been identified to support teams and services where staffing shortages of professional staff exist to allow diversification of duties across alternative roles as the need arises, for example, care home support team, housekeeping roles, additional admin support, support for family liaison and pharmacy assistants. Medical students are also providing support to phlebotomy, swabbing hubs and vaccination centres and nursing students are being invited to join nurse bank or care home support teams to bolster nursing and care assistant resources.
- 8) Significant recruitment activity continues to be undertaken through the workforce appeal process to secure additional resources.