

Public Trust Board - Cover Sheet

Subject:	Preparing for the Omicron variant and 'Super surge'		Date: 25th January 2022	
Prepared By:	Executive team			
Approved By:	Executive team			
Presented By:	Simon Barton, Chief Operating Officer			
Purpose				
To update the Trust Board retrospectively on the preparation of the Trust for the predicted surge of Covid in January 2022 driven by the Omicron variant. To provide assurance to the Board that the Trust had a robust plan and understood and mitigate risks within its control.			Approval	
			Assurance	✓
			Update	
			Consider	✓
Strategic Objectives				
To provide outstanding care	To promote and support health and wellbeing	To maximise the potential of our workforce	To continuously learn and improve	To achieve better value
✓		✓		✓
Overall Level of Assurance				
	Significant	Sufficient	Limited	None
	✓			
Risks/Issues				
Financial	Process should support the mitigation of financial issues			
Patient Impact	Process should support the mitigation of patient issues and improve care			
Staff Impact	Process should support the mitigation of staff issues and support working lives being easier			
Services	This represented a challenge to the operational performance of all services across our 3 hospitals			
Reputational	Process should support better performance across the domains as well as the interconnectivity of them which could enhance reputation			
Committees/groups where this item has been presented before				
N/A				
Executive Summary				
See below				

Preparing for the Omicron variant and other winter pressures

To update the Trust Board as to the action taken in response to the Covid 19 surge, driven by the Omicron variant, in December 2021 and January 2022. The Trusts main approach led via ICT and up through the Executive team was focussed in some key areas:

- Supporting the ramp up of the vaccine programme
- Ensuring patients were treated in line with the latest clinical research
- Support staff, and maximise their availability
- Put a surge plan in place to ensure emergency care is able to function, along with cancer care being maintained and there is minimal disruption to elective care

A briefing session took place with the Trust Chairs, the Non-Executive Directors chairs of Quality Committee, and People & inclusion committee, the Medical Director, Chief Nurse and Chief Operating Officer on 20/12/21. A briefing note was sent to all Board members on 5th January 2022 about the surge and was verbally discussed in Trust Board on 6/1/22. The Medical Director sent briefing notes via email to the Trust Chair twice over the Christmas period.

Supporting ramp-up of the vital COVID-19 Vaccine programme

Towards the end of December, the daily available appointments at the Kings Mill Hospital Hub increased by 35%, where a maximum of 1,600 appointments were available. A combination of colleagues being redeployed from non-patient facing roles to support this capacity increase across the Nottinghamshire system occurred along with additional shifts being booked via the Mass Vaccination Bank.

To complement and support vaccination uptake across the SFH workforce a variety of supportive approaches were introduced including focused group sessions related to vaccine hesitancy, along with specific Equality Diversity and Inclusivity related sessions. A number of these offers were co-designed with colleagues from across the system to ensure maximum impact.

Maximise the availability of COVID-19 treatments for patients at high risk of severe disease and hospitalisation

There is a robust system of receiving, capturing, escalating, and disseminating additional, new or updated clinical information via the Covid-19 inbox. Regular and more bespoke targeted updates have been distributed via the Medical Director to Clinical Chairs, Heads of Service, relevant clinical teams (including primary care) or all medical staff.

This has been supplemented with updated guidance and Standard Operating Procedure's (SOP) where necessary or newly developed SOP's often developed in conjunction with national professional organisations, or other acute Trusts.

Tracking of national guidance, national patient safety alerts and NICE guidance and the collateral implications such as additional required equipment or resource, are co-ordinated via the Incident Control Team meeting.

Support staff, and maximise their availability

Across the period the current comprehensive wellbeing that is in place across the Trust was re-affirmed, providing colleagues opportunities to access support if required. The Winter Wellness Campaign was also focused to offer colleagues support during this challenging period.

Additional dedicated Mental Health and Wellbeing support commenced in substantive roles from January 2022, these have brought additional focus and support to colleagues.

A 'Hot and Cold' De-briefs proposal was approved. Interviews successful and role (chief nurse fellow) in post from early February. Their First task will be to work with relevant leads on the hot debrief process, in conjunction with key stakeholders and build relationships with teams.

The OD team have reviewed their offers at an organisational, leader and individual level and have prepared a clear summary of offers to support colleagues during winter, in addition to their ongoing bespoke interventions work.

To support and increase workforce capacity further, non-critical face to face training was suspended in January to increase workforce capacity. Re-commencement of training was agreed at the ICT and will restart from February onwards, also in line with fellow providers.

Ensure the Trust has a surge plan in place

The approved Covid-19 pandemic plan remains in place and was adjusted for key aspects that may change related to workforce and capacity.

The key risks with regard to the forecast Omicron wave are related to:

1. **Workforce supply** – due to a high prevalence and expected growth of absence due to positive Covid tests
2. **Bed capacity to meet demand** – due to the current status of the hospitals being at almost full capacity

Workforce supply

Twice daily Nursing, Midwifery and Allied Health Professionals (NMAHP) staffing meetings were enacted in November 2021 and will continue until the end of February 2022. With regard to medical staffing there are always meetings with the clinical chairs twice a week that review the medical staffing positions. This was increased to daily during this surge period.

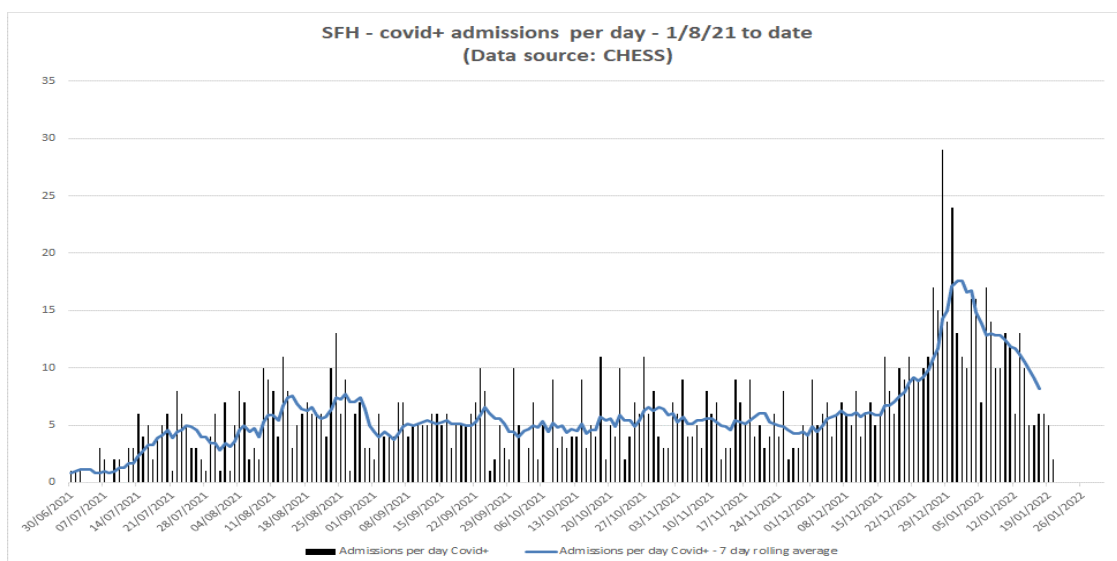
The NMAHP leadership team have signed off the following plans to support significant workforce loss and the super surge plan:

- Covid-19 workforce loss redeployment plan and exceptional workforce loss minimum staffing plans
- Omicron super surge staffing plan
- 24/7 Head of Nursing rota and 24/7 matron's rota to be stepped up as part of major incident response with supporting Standard Operating Procedure

Despite the workforce loss experienced over December and January and the opening of super surge capacity we have not derogated from our business as usual agreed minimum staffing for nursing and AHP's. Exceptional workforce loss minimum staffing plans were enacted for maternity on 26th December 2021. This was approved by gold on call without adverse outcome.

As part of a clinical surge plan, an additional 46 beds 'Super surge' capacity were identified to be used as inpatient capacity should they be needed to within the surge. This was on top of the 66 opened as part of the winter plan. This was agreed at ICT on 23rd December. This is on top of the planned changes of Respiratory Support Unit that opened on 29th December on ward 21, the return of Orthopaedic ward (formerly Ward 21) from day case to Ward 43 (temporarily) and then ward 43 will become a medical ward as per the winter plan from 4th January 2022. All the 'super surge' areas have QIAs in place that assess the risk of those areas being opened for inpatients.

What has happened with Covid admissions during this period?



Covid admissions saw a very sharp surge over the 2 week period just before Christmas and into the second week of January. Since then, admissions have remained high, but are now decreasing and returning to more normal levels of variation.

Outcomes to date

- Critical care has not exceeded 15 patients in total during the current surge and did not need to use Theatres.
- Despite the workforce loss experienced over December and January and the opening of super surge capacity we have not derogated from our business as usual agreed minimum staffing for nursing and AHP's
- Ambulance turnaround has remained one of the lowest in the EMAS area
- There was some ED crowding across majors/resus in the week after Christmas and the first week of the new year. This is now reduced to lower levels.
- The forecast elective activity volume compared to 19/20 for the month of January (as at 24/01) is outpatient 91% / day case 90% and Inpatient 74%. No cancer patients have been cancelled. To put this into context the elective activity over the past 3 months has ranged from 97% to 105% of 2019/20 activity.

The Board is requested to receive the update and assurance that the Trust had a robust plan, mitigated identified risks and managed the Omicron variant wave effectively and safely.