

Governing Bodies

8 April 2020

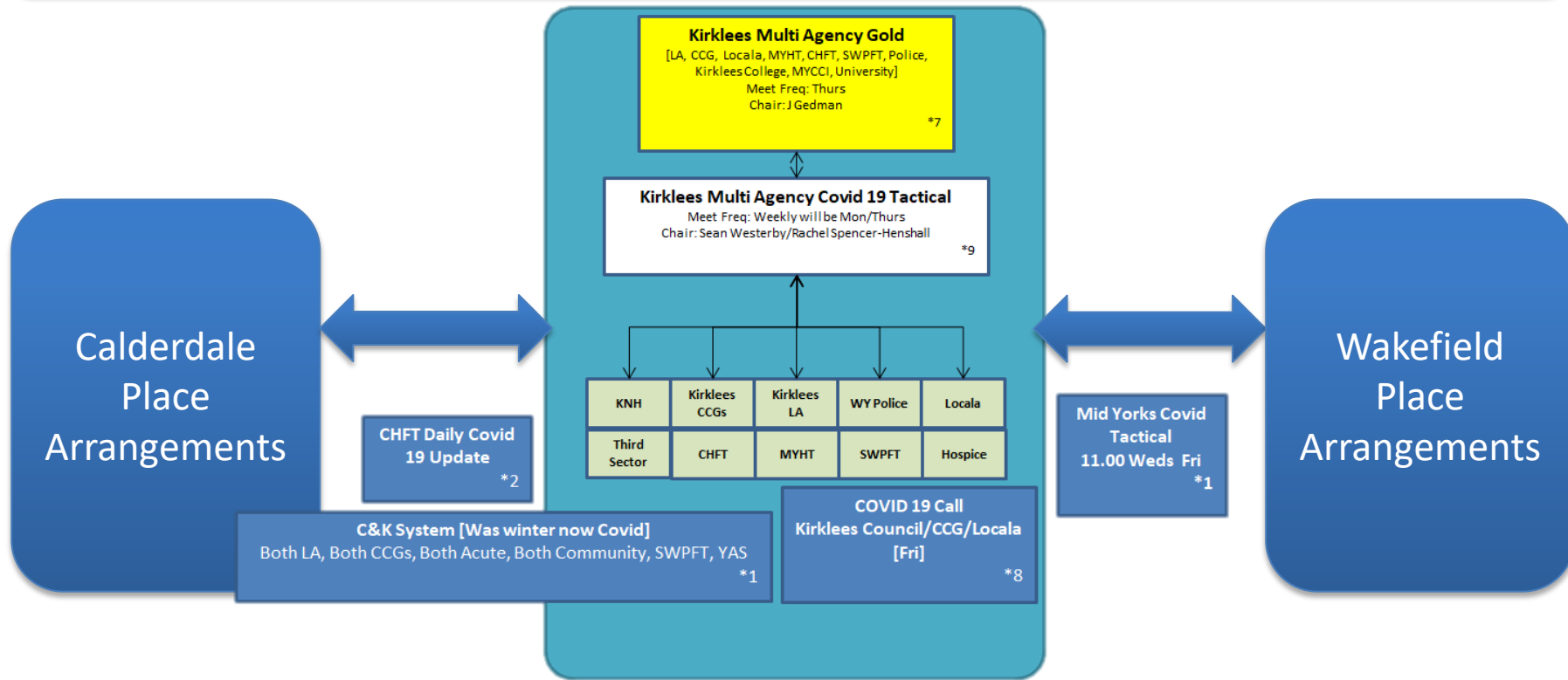
Covid-19

Current Position (at 6 April 2020)

- Kirklees confirmed cases: 198
- CHFT reporting 32 deaths, MYHT 57
- Number of cases based on hospital testing – actual number of cases will be much higher
- 4 messages at ICS level:
 - Increasing critical care capacity
 - Safe discharge of 1000s of patients
 - Joined up support for shielded patients
 - Managing business continuity

Governance & Co-ordination

Regional Arrangements [West Y&H Covid 19 Strategic Health Co-ordination Group
West Yorkshire Strategic Command Group]



Organisational Arrangements [Gold/Silver/Operational]

Increasing Critical Care Capacity

- Harrogate Nightingale Hospital – up to 500 beds
- Opening date to be confirmed, being overseen by LTHT with Executive team convened from across the region
- CHFT and MYHT are both opening additional capacity – this flexes as required and is influenced by equipment availability (ventilators)

Releasing Bed Capacity

- Significant push to discharge patients from hospital beds
- Supported by national suspension of Continuing Healthcare Assessments.
- Postponing of non-urgent elective surgery
- Scoping requirements for additional community based beds
- National position on what community providers should stop doing in order to support increased discharge

Support for Shielded Patients

- System in place to support with food, medicines, social needs – rapidly evolving as national guidance is issued and central elements of the infrastructure are deployed
- Fits with the Councils Place Based Support Hub – Partnership Spectrum of Support (see later slide)
- c1,000 patients registered on national portal as at 01/04 – all those asking for help contacted by phone
- First emergency food deliveries made locally on 30/3
- National food deliveries have also started direct to patients doors
- Risks re capacity within community pharmacy to deliver medicines
- Working to streamline the process which has been put in place in just over a week and to ensure it is sustainable

Primary Care Response

- Our practices operating in line with national instructions have made radical changes:
 - Total triage model
 - Many appointments are now done by phone, email or online
 - Face to face and home visits still available for those who need them
 - Patients asked not to visit the practice without a confirmed appointment

Primary Care Response

- 2 Primary Care Covid-19 Assessment Centres:
 - NK – 1 April 2020
 - GH – 6 April 2020
- Service for ambulant patients with Covid symptoms, subject to specific criteria
- Covid Home Treatment Service in development
- GP practices open on Good Friday and Easter Monday

Managing CCG Business

- NUH not being opened unless for specific issues
- Doing as much as we can to support mutual aid – internally and externally
- All meetings taking place virtually
- Review of existing programmes to determine which can be paused and capacity re-deployed elsewhere

Managing CCG Business

- Processes adapted to reflect pace of change and need for quick decisions:
 - Assurance Process for Rapid Service Change in response to Covid-19
 - Financial decision making
 - Decision log with reporting into next available Committee
 - Primary Care Commissioning Committees – Emergency Decision Making meetings now in place

Current Issues

- PPE Distribution, in particular to services other than acute hospitals
- Introduction of staff testing
- Mobilisation of CoHoRT
- Confirmation of increased community bed base

In three weeks, our system has:

- Radically changed the model of primary care
- Mobilised two Covid-19 Assessment Centres
- Maximised the discharge of patients from hospital
- Expanded critical care capacity in our hospitals
- Provided support to our most vulnerable residents
- Demonstrated new ways of working by being flexible, adaptable and embracing digital solutions