

Report to the Meeting of the Oxford Health NHS Foundation Trust Board of Directors

COVID Recovery Update

14 April 2020

BOD 19/2021 (Agenda item: 9(a))

Introduction

In responding to the COVID pandemic over the past 12 months, the Trust has divided its response into two primary activities. **RESPONSE & RECOVERY**. Although the two have and continue to be managed as two separate workstreams, the two are closely aligned with recovery activities running often in parallel.

This report provides an update to the Board of Directors on the Recovery activities specifically.

Situation

The Trust has setup a Recovery meeting (Recovery & Surge Response Group (RSRG) that meets on a weekly basis. Whilst Recovery is now the overarching term used at organisation, Integrated Care System (ICS) and at a national level, it is important to highlight that the Trust did not stop many of its services as part of the response to COVID. What the Trust did see though, was a reduction in the number of referrals, especially during the 1st wave of COVID that has resulted in the risk of an unmet need and surges at various points in referrals. In particular, the Trust has seen a significant increase in Urgent and Emergency referrals across many of its services.

Recovery & Surge Response Activities

The principal role of the weekly COVID Recovery & Surge Response Group (RSRG) is to provide co-ordination, alignment of activity and support for the Directorate Recovery & Surge Response Plans. At the present time, each Directorate is refreshing its own plan that shows key activities underway/planned and a central list of key priorities have been defined in the joint discussions. The key priorities are currently:

Priority 1 – Health & wellbeing for staff (Roz O’Neill)

Priority 2 – New ways of working and operational models (Directorate Leads)

Priority 3 – Demand & Capacity (Martyn Ward/Nic McDonald)

Priority 4 – Surge Planning (Martyn Ward/Nic McDonald)

Priority 5 – Learning from COVID (Directorate Leads)

Priority 6 – Preparing for further waves of COVID (Directorate Leads)

Recovery Principles

In developing Directorate Recovery Plans, the following principles have been defined by the RSRG.

- As with the 1st phase of Recovery, the Directorates will continue to own their own Recovery & Surge Response Plans and will continue to receive support from the central teams (in particular, Estates and IM&T)
- COVID 19 will remain a threat for a considerable period of time. The Infection Prevention Controls (IPC) are likely to remain in place for the remainder of this year (and potentially beyond) despite the Government's published roadmap. For this reason, the Trust will not have full access to its estate for a comprehensive return to face to face appointments in the near future
- Whilst numbers have now reduced at both local and at a regional level, it is very likely that there will be further waves of infection throughout 2021
- There will be an increase in demand for services as lockdown restrictions are eased.
- The Trust will adopt a hybrid model in terms of the delivery of its services and will continue to see and treat patients using a combination of face to face and digital contacts
- Reporting to Commissioners (over and above the agreed urgent and emergency performance indicators) will resume but not until early summer at the earliest.

Key Activities by Priority:

Priority 1 – Health and wellbeing for staff (Roz O'Neill)

- **Additional days leave** for all staff in FY22
- Completion of Risk Assessments & staff vaccinations
- Focus on **releasing time for staff** to participate in health and wellbeing activities
- Environmental safety and support for staff (including rest areas, IT equipment etc)
 - Working at Home support package - advice, support & guidance (including financial support)

- IT equipment made available, information sheets/guidance and new apps to enable Teams
- Collaborative approach between the **Mental Health & Wellbeing Hubs** and the enhanced **Occupational Health & Wellbeing project** across BOB to ensure alignment
- - The three key deliverables of the hub are to deliver proactive outreach and engagement, to provide rapid assessment to staff in need of support, and to facilitate onward referral and rapid access to existing mental health services and support where needed.
 - The enhanced Occupational Health and Wellbeing Project will provide rapid, convenient and co-ordinated access to specialist OH&WB and ensure appropriate triaging to maximise the impact of the Mental Health & Wellbeing Hubs.
- Restart of the Trust's Stress Steering and action groups
- Further development of a wellness culture in the Trust
 - Single page H&W COVID-19 page developed with easily identified support boxes in partnership with Psychosocial Response group
 - Collation of resources and creation of video on stress control strategies
- **Leadership development** through coaching and mentoring

Priority 2 – New ways of working and operational models (Directorate Leads)

- **Qualitative analysis** of the impact of the rapid **transition to digital**
- **Quality Impact Assessments** to be completed (QIA) for all service changes
- Narrative to describe **changes to services** that have happened, are scheduled to happen, why, the benefits and any new or elevated risks

Priority 3 - Demand & Capacity (Martyn Ward/Nic McDonald)

- Development of the **Demand & Capacity Planning APP** that is now available in the Trust's Online Business Intelligence (TOBI system)
- Demand and capacity plans by service line to show what can be achieved with the resources available and to **improve the management of risks** such as extended waiting times

Priority 4 - Surge Planning (Martyn Ward/Nic McDonald)

- Development of an **automated tool** that supports the identification of unmet need and develops the Trust's understanding of the **impact of the forecast surge** – especially on waiting times


Priority 5 - Learning from COVID (Directorate Leads)

- Identify the **key learning** in responding to and recovering from the first waves of COVID
- Identifying and adopting the **learning from other organisations** via the various System wide Recovery Groups/Plans

Priority 6 - Preparing for further waves of COVID (Directorate Leads)

- Further development of the Trust's approach to managing its COVID Response
- Ensuring that the **Trust's estate is prepared** in the best way possible (given the current conditions) for staff (e.g. rest areas) and patients
- Continuing to rollout equipment (such as laptops and phones) to ensure staff can work in a **mobile and flexible way**, freeing up clinical time and reducing travel

Outline Timeline

Trust Recovery & Surge Response Plan 

Recovery & Surge Response - TIMELINE

Government dates:

- Step 1 – 8th March.
- Step 2 – No earlier than the 12th April
- Step 3 – No earlier than the 17th May
- Step 4 – No earlier than the 21st June – Removal of all restrictions

Trust dates:

- Step 1 – Evaluate learning from COVID – Remote consultations continue
- Step 2 – Preparation of new Operating Models– Remote consultations continue
- Step 3 – Preparation of the Estate for a return to face to face appointments
- Step 4 – Hybrid Operating Model – face to face & digital appointments

Key Risks Identified by the RSRG

- Ongoing workforce pressures and impact of 'burnout' from COVID Response
- A surge of unmet need could overwhelm services in the spring/summer?
- Managing the Trust's estate during a return to the new 'Norm'
- An uncertain financial regime after Q2 FY22
- Services remain in different places – Fully in response, partially in response, partially in recovery etc
- System pressure to return to pre-COVID levels too soon

- Inability to prevent new ways of working returning to old...
- Preparing for Winter!

Next steps:

The Board of Directors are asked to note the content of this report and to provide any input or direction on the Recovery & Surge Response approach adopted so far.

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