Agenda Item: 08

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE TRUST BOARD (IN PUBLIC)

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Denise Smith Chief Operating Officer	Decision		High	Med	Low
	Consideration		x		
	Information	x			
LEAD MANAGER:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
	Strategic	x			
	Operational	x			
	Governance	x			
	IMPLICATIONS:		**RELATED WORK: (PREVIOUS PAPERS TO BOARD/COMMITTEE)**		
	Patient Care/Safety/ Experience	x			
	Finance	x			
	Workforce	x			
	Policy	x			
PEER ASSIST (inc. clinical engagement):	**PEER REVIEW:**				
Laura Skaife-Knight Deputy CEO					
CQC Domain: (safe, caring, effective, responsive, well-led, use of resources)	**Well-Led, Safe, Caring, Use of Resources, Responsive, Effective**				

Meeting Date: **7 April 2020**

Report Title: **Preparedness and Response to COVID-19**

PURPOSE:

The purpose of this paper is to provide the Board (and public) with an update on the Trust's preparedness and response to the COVID-19 pandemic.

SUMMARY:

In common with other NHS organisations, the Queen Elizabeth Hospital King's Lynn NHS Foundation Trust (QEH) has been preparing for the impact of COVID-19. The Trust has robust plans to deal with the impact of Coronavirus (COVID-19), and this includes planning for our bed (capacity), people and equipment requirements. QEH and is working closely with local system and national partner agencies (including Public Health England and NHS England/Improvement) and to ensure our patients, public and staff remain safe.

QEH preparedness and response

We have set up an Incident Control Team, led by our Chief Operating Officer, and supported by our Medical Director, Chief Nurse and Divisional Directors, so that there is a single forum for strategic decision-making, and this is supported by the Incident Control Room, led by Head of Patient Flow and where tactical command is based.
We are forecasting April to be tougher still. As at 2 April, there are 180 confirmed cases of COVID-19 across Norfolk (including 58 cases at QEH), with these cases predicted to rise again, for which we are well-prepared.

We have completed detailed modelling on a number of scenarios to plan for the number of beds we will need to reflect the growth in patients requiring admission to QEH for respiratory care and critical care from April onwards. We expect the peak of demand on our services to be mid-April and therefore have plans to increase ICU and base ward capacity as we plan for worst case scenario, which will likely include building modular wards on site. We will separate our Emergency Department and our hospital into zones (COVID-19 and non COVID-19) as we plan for the increase in COVID-19 patients. We are also working as a whole system across Norfolk to plan for the peak in demand on our collective capacity.

Patients, visitors and volunteers

Due to the advice on social distancing (and avoiding close contact with other people to prevent the spread of the virus), we are advising people not to come into hospital unless absolutely necessary.

We are prioritising our cancer and clinically-urgent patients. Most outpatient appointments are now taking place over the phone (70% of follow-up outpatients are being carried out virtually), where safe to do so, and we have set up a dedicated helpline for patients and their families who may have questions about their care and treatment, which has been used by many hundreds of patients and families. We have started to roll-out new video consultations in Dermatology and Paediatrics to allow patients who don't need to come into hospital for a physical examination or procedure to be seen online, and we plan to extend this to wider specialties in the weeks to come.

We have all but stopped visiting and access to our hospitals in light of the Government's advice, with a few exceptions, including end of life patients.

We have paused volunteers' activities on-site, and redeployed volunteers to other support other roles, where possible.

We have waived car parking fees to reduce the financial burden on our patients, visitors and staff (this will also support social distancing by encouraging more visitors to come by car, rather than public transport).

Looking after our staff

We have been approached by more than 70 former QEH staff from across the board expressing an interest in returning to help our response to COVID-19, including 15 Registered Nurses and 17 Healthcare Assistants (bringing valuable experience back into the Trust). In addition, an extra 35 domestic staff have also been recruited to our cleaning teams to support the increased demand of infection prevention and control. We are fast-tracking recruiting staff across professions so that maximise the staff we have available to help.

Several hundred staff are now working from home, where practicable to do so, enabled by access to technology and equipment that enables them to do so.

We are introducing staff COVID testing for those displaying symptoms who are working in key clinical areas and if staff members in priority groups have symptomatic family members, we are offering to test their family members on-site in the pod at QEH.

A dedicated staff helpline and email address is in place for all questions, enquiries and concerns.

We know from feedback we have received that staff are concerned about the use of Personal Protective Equipment because of the risk of health care staff acquiring infection at work. We are ensuring supplies are provided and up-to-date information on PPE is shared with staff, based on national guidance. We took the decision on 1 April, after listening to our staff, to support clinical staff who want to wear additional PPE (ie: to go further than current national guidance presently states re: PPE).

We are reminding our colleagues to strictly follow good hand hygiene practice and not to wear uniforms to and from work to minimise the spread of the virus.

We have cancelled mandatory training and most external training, other than COVID-19 related updates, to release staff for frontline duties

We are investing much time looking after and caring for Team QEH. We have further strengthened our staff health and wellbeing programme to ensure our staff feel supported and have places to go to talk and discuss their worries and anxieties. Our colleagues in Clinical Psychology are supporting a new staff helpline and we have a counselling service available via phone 24/7 for any staff who have any work-related concerns about COVID-19.

Thanks to support from our partners at the Borough Council, additional childcare support is available to staff at Lynn Sport to help colleagues to stay at work, where possible.

Recognising these are uncertain times financially for many of our staff, adding further to people's worries, we have set up a Hardship Fund to support staff. This means colleagues who have lost household income as a result of the pandemic can apply for financial support and there is a means in which we can arrange for staff to get an advance of up to £50 per week during the pandemic. This is open to all staff groups.

Support from our local community

The support we have received from our local community has been heart-warming. We have received hundreds of offers of help from local businesses and members of the public ranging from the provision of food, self-care items, transport and accommodation, for which we are grateful. Social media has also been flooded with messages of support and gratitude for Team QEH, including from our local MP – which is testament to Team QEH and evidence of just how important the role we play is to the community we serve.

Keeping our patients, staff and local community informed

We recognise that there is concern among our patients, visitors and staff about COVID-19 and therefore it is important that we ensure the information we communicate is factually accurate and reassures everyone of our preparedness.

We have daily communications updates for our staff, Governors and Board members and continue to post regular updates via our channels (including website and social media) to keep our patients, partners and local community up-to-date and informed in these fast-changing and challenging times, ensuring open, transparent and timely communication.

Strategic / External	Operational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience	Workforce
X	X	X	X	X	X	X

RECOMMENDATION/S:

The Board are asked to:

- Note this update
- Endorse the Trust's continued approach to openness and transparency in our communications with our staff and updates with patients, the local community, partners and key stakeholders on its response to COVID-19.