

Changes to services to support the Covid-19 response

Briefing for Health Overview and Scrutiny Committee

8 June 2020

Dear Colleagues,

You will be aware that as a commissioner of local health services we have been working closely with NHS Providers and other bodies in our response to Covid-19. Part of this work involves making changes to local services to manage the increased demand on our hospitals.

Some of the changes we have made have been mandated nationally, for example reducing face-to-face appointments and postponing the provision of some non-urgent services. Other changes have been made by the local system, in response to locally specific circumstances. This includes local implementation of national guidance, for example where staffing levels are becoming unsafe for a non-urgent service to continue.

The degree of pressure on the system and the rapid pace at which we have had to respond to protect the safety and welfare of patients and staff has meant that it has not always been possible to notify the Local Authority of changes that, in normal times, you would be consulted on. In the main, changes have been made by providers to manage workforce and operational pressures and to maintain patient safety. They have not been commissioned by the CCG.

We have provided retrospective briefings on a number of temporary service changes, discharging our statutory duty to notify the Local Authority of substantial change to a health service. We have now compiled a full list of all service changes that have been made in response to the Covid-19 pandemic and have included this with this briefing.

Over the next two weeks we will be undertaking analysis to identify which of the changes need to be reversed as soon as it is safe to do so, and which we are considering making permanent. The latter will include changes that have been made that are aligned to the ambitions in the NHS Long Term Plan and have made a positive impact on health outcomes.

Once we have undertaken this initial assessment we will discuss with you the viability of adopting some of the changes permanently, subject to the usual procedures for considering changes to services.

We are providing the full list of service changes now in the spirit of transparency and to support future discussions with you on potential areas that we may want to consider and/or consult on for permanent change.

We want to reassure you that any temporary service change made in response to Covid-19 will be done so with the safety and care of patients at the centre of our decision-making.



For more information please contact:

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List of service changes made to support the Covid-19 response

All changes have been made to support a number of principles for care:

- Ensuring adequate hospital and intensive care capacity for patients who need acute care as a result of Covid-19
- Keeping staff and patients safe in healthcare environments (including cohorting of infected patients, infection prevention and control and workforce deployment)
- Reducing face-to-face contacts where care can safely be delivered via alternative methods
- Supporting the most vulnerable members of the population.

Primary Care

Description of change	Briefing issued
Introduction of Clinical Management Centres (CMCs) to allow general practice to function effectively during the COVID-19 outbreak.	Y 4/4/2020
Introduction of a new GP operating model including greater use of remote working; phone and video consultations; suspension of routine non-urgent appointments	N
Enhanced support to care homes from GP Practices	N

Urgent Care

Description of change	Briefing issued
Development of a single discharge pathway	N
Relocation of the primary care element of the Urgent Treatment Unit (UTU) at QMC to Platform 1, Upper Parliament Street	N
Temporary overnight closure of Newark Urgent Treatment Centre (UTC) from 22:00 – 09:00 from 6 April. A further extension has been proposed due to ongoing workforce pressures – we will provide a separate briefing on this.	Y 3/4/2020
NUH are developing plans to transfer hyper acute stroke services from Nottingham City Hospital to QMC, to support winter planning and infection prevention and control measures - we will provide a detailed briefing on this when we have further information	N



Mental Health

Description of change	Briefing issued
Open access all age 24/7 crisis line set up	N
Reduction or suspension of face-to-face contact and increased use of phone and video consultations and online resources for the following: Crisis Teams; Local Mental Health teams; Community Mental Health Teams; CAMHS; Kooth; Sharp; Harmless project	N
Temporary use of Haven House crisis house as a step down unit to support discharge (change now reversed)	Y 28/4/20
Recovery College services suspended and staff deployed to other areas	N
CAMHS support to schools via in-reach	N
Alexander House locked rehabilitation service designated as an isolation unit, with patients transferred to the Orion Unit at Highbury Hospital	N

Planned Care

Description of change	Briefing issued
Block Contracts established with Independent Sector providers to create additional bed capacity	N
Move from face-to-face to virtual clinics for outpatient services where appropriate	N
Postponement of all non-urgent elective operations	N
Suspension of community non-obstetric ultrasound service	N
NUH suspended faecal sample testing	N
SFH Suspension of termination of pregnancy service – service to recommence from 9 June (community service continued)	N
Temporary suspension of home births service by SFHT and NUH - NUH have since re-established a restricted home births service	Y 13/5/20



Children and Young People

Description of change	Briefing issued
Integrated Community Children and Young People's Healthcare Programme:	N
Routine reviews of respiratory conditions delayed except for at risk patients; routine referrals delayed; therapy services delivered by video conferencing or phone.	
Out of hospital community services stopped except clinical priority services; child protection medicals; phone advice and urgent referrals	N
Rainbows Childrens Hospice:	N
Respite Short Breaks suspended; family support services by video and phone; adult day care suspended	

Community care

Description of change	Briefing issued
Community Orthoptics service suspended all non-essential face-to-face services and increased use of video and phone consultation	N
Community diabetes nursing teams suspended clinics and education courses	N
Face-to-face community rehabilitation suspended, except for patients who have had recent elective surgery; fractures or those with acute and complex needs	N
Neuro rehabilitation - Chatsworth Unit patients discharged to community provision and inpatient function temporarily closed to admissions	N
Community podiatry and podiatric surgery services suspended, except for high risk patients	N
Community services provided by Primary Integrated Community Services (PICS) suspended all non-essential face-to-face interventions	N
Community MSK groups suspended	N
Community specialist nursing service suspended	N



Changes to community pain management services, including suspension of face-to-face consultations; greater use of video and phone consultations and suspension of	Y 18/5/20
steroid injections	