



Update on Temporary Services Changes

30th September 2020

Temporary service changes shared previously

- Most face-to-face outpatient appointments suspended
- Community hospital bed usage changed
- Older adult mental health ward (Athelon) decanted
- Child development centres moved to virtual
- Planned respite for adults and children suspended
- Elective surgery moved to independent sector or cancelled
- Kidderminster MIU closed overnight, Tenbury & Evesham MIUs temporarily closed
- Garden Suite (chemo) and Women's Health Unit both moved from the Alexandra Hospital to Kidderminster Treatment Centre
- Maternity (Women's Health Unit) moved to Princess of Wales Community Hospital
- Screening for breast, bowel and Aortic Aneurysms suspended
- GP Out of Hours restricted to two sites (WRH and Alex)



Shared at June and July HOSC

Guiding principles

As we review the Covid-related service changes we have made across the system, we will continue to:

- limit the risk of transmission of the virus to patients and staff, routinely using alternatives to face-to-face consultations where this is clinically possible and acceptable to the users of our services.
- enable clinicians to restore many of the services paused in response to phase 1 so that the amount of cancer surgery, planned care and specialist diagnostic activity is increased, especially to those patients who are most vulnerable,
- give confidence to our local population that our healthcare settings are safe places to receive care.



Worcester Acute Hospital Trust

Temporary Service Changes

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Paul Brennan

Worcestershire Acute Hospital Trust - Update

- Some challenges in achieving 100% restoration of services
 - Staff and physical capacity will limit our ability to restore all outpatient clinics, diagnostics and inpatient services. Elective activity where the patient needs overnight stays is restricted by the available bed base.
 - Suspension of services during response has increased 52 week waiting list
 - Public confidence resulting in some members of the public deferring treatment
- Further work being undertaken looking at how we would respond to a second COVID surge
 - Early warning triggers (e.g swabbing, public health data, safety huddles, staff absence)
 - Detailed work to understand impact on activity



Jo Newton

Worcestershire Health and Care Trust

Update on Temporary Service Changes

- Face-to-face outpatient appointments available where clinically necessary
- Community hospital bed usage changed
- Older adult mental health ward (Athelon) decanted
- Child development centres have opened for some clinics
- Planned respite for adults and children resumed
- Tenbury & Evesham MIUs temporarily closed but scheduled to reopen through a booking system (28th September)



Mental Health Services

- Strong confidence in achieving 100% restoration of services
- Further work being undertaken looking at how we would respond to a surge in mental health activity
 - 110%, 120%, 130% increase
 - Covid direct, indirect, exacerbation of existing mental health problems
 - Early warning triggers (e.g increase in CAMHS and paediatric referrals now schools have reopened, mental health need related to redundancies, social isolation etc)



Use of technology to support access to care

- The accelerated development of a shared care record solution over the next 6 months will underpin many of the longer term restoration activities,
- We are making use of technology to ensure swift transfer of and availability to patient information in all care settings;
- Our improved digital infrastructure will allow us to continue to ensure teams and front line professionals can collaborate remotely to deliver wrap around care;
- We are developing care portals to support patients to live well with Cancer and self-manage; shared care records will enable clinicians across care settings to support cancer patients especially those with co-morbidities.



Primary Care

We continue to have the ability to offer online and video consultations across all practices in the STP. All clinicians and key practice staff can access primary care systems remotely ensuring the sustainability of services. NHS 111 can make appointments and book into all GP practices.

National guidance on 14th September reiterated that primary care is required to ensure

- Clear information for patients about how they can access services, that encourages patients to consult where necessary, and that face to face care always remains available when clinically appropriate
- No practice suggests in their communication that the practice is closed or that the practice is not offering the option of face to face appointments.
- Adjustments are in place to ensure that those who find it difficult to engage in virtual consultation are able to access the appropriate care



Mari Gay