

## Service Changes – update for Board

### Purpose

This paper provides an update to the Board on the services that have been paused due to the Covid-19 situation, summarising the associated risks and mitigations to patients. Specifically, the paper asks the Board to ratify the suspension of two services. The paper also references other key changes made to services across the Trust and describes the process for determining if, when and how services will be resumed.

### 1. Paused services

Each decision to suspend a service, as described in the following paragraphs, has been made through balancing risk. In some cases, staffing constraints have made suspending a service a necessity, whilst in other areas it is to free up capacity to directly support our Covid-19 response. As such, the risk of taking the action described below has been deemed a lower risk than attempting to continue with normal service provision.

#### *Newark Urgent Care Centre (UCC)*

The opening hours of the Newark UCC have been reduced, with a full closure overnight (10pm-9am) for a 12 week period from 6<sup>th</sup> April. This is to address staffing constraints and potential short notice closures overnight, leading to confusing messages for local residents. This change has previously been ratified by the Board.

#### *Home births*

This service has been suspended (since 6<sup>th</sup> April), with monthly review points. The suspension was implemented to reduce pressure on staffing, to enable effective surge planning and to reduce potential pressure on the ambulance service. Patient choice, rather than patient safety has been affected. A Quality Impact Assessment (QIA) is attached at Appendix 1, which the Board is asked to ratify.

#### *Termination of pregnancies*

The obstetrics and gynaecology consultants are required to support the Covid-19 response, leading to the suspension of this service, initially for an 8 week period from 6<sup>th</sup> April. At the point of this update being provided, there are no patients awaiting treatment. GPs have access to a private provider, which under normal circumstances is usually the first choice for patients. A QIA is attached at Appendix 2, which the Board is asked to ratify.

#### *Elective activity*

This decision is consistent with the national guidance from NHSIE on Covid-19. As such the following decisions have been taken:

- To continue to take referrals from primary care
- To pause all non-urgent / routine operating for at least 3 months, from 19<sup>th</sup> March
- To reduce some diagnostic procedures in line with national guidance where the risk of infection is higher than the risk of waiting for the test
- Following risk assessment and where clinically appropriate, to reduce the reliance on face to face outpatient appointments (from 19<sup>th</sup> March), by converting to telephone or other virtual method, or through cancelling until further notice

- To continue with cancer, urgent and emergency activity

Taking this approach reduces the volume of patients attending the hospital, reducing the potential spread of Covid-19, whilst ensuring focus remains on treating patients with cancer and urgent needs. Colleagues are also released to support other areas.

### *Pathology*

In line with guidance released by the Royal College of Pathologists, certain routine testing was suspended (the majority of which was suspended from 2<sup>nd</sup> April). This guidance was based on a clinical risk assessment, but referrals can still be made if clinically justified.

## **2. Other changes**

In addition to suspending certain services, changes have been made in other areas, to enable the Trust to effectively adapt to the developing situation. These changes include the following:

- Minor Injuries Unit – since 29<sup>th</sup> March, a minor injuries unit has been established in Clinic 2, away from the emergency department (ED), to enable clinicians in ED to focus on medical patients this activity is still being recorded as part of the ED dataset
- End of Life care – a dedicated area has been introduced for end of life care, for Covid-19 patients, located on the Ward 35 side of the Short Stay Unit;
- Colposcopy and hysteroscopy – All associated Newark activity has been transferred to King's Mill for 6 weeks (from 25<sup>th</sup> March) to maintain staff resilience.

## **3. Review process**

As part of the Trust's approach to recovery and restoration, a series of workstreams are being established, operating within the Covid-19 Incident Control Team governance structure. One of these workstreams encompasses service changes that have been introduced as part of the Trust's Covid-19 response. It is within this workstream that the service changes will be reviewed, with a specific methodology being used to determine the following:

- the activities we have started and will continue;
- the activities we have started and will stop/ amend;
- the activities we have stopped and will restart;
- the activities we have stopped and will not restart; and
- the activities we have stopped or started and we will want to amend

The service changes that are described within this paper will be considered in this context, with further information to follow at June's Board meeting.

## **Recommendation**

The Board is asked to:

- **Note** the update on services that have been paused or changed
- **Ratify** the changes relating to the two QIAs at Appendix 1 and 2