

COVID-19 Temporary Service Changes Update

**Health Overview and Scrutiny Committee
13th July 2021**



Temporary Service Change Restoration Plan - GHNHSFT



#	Temporary Service Change	Outcome	Status
1	Emergency General Surgery to GRH	Retain at GRH – FFTF	<i>Complete</i>
2	CGH Emergency Department	Restore at CGH to pre-Pandemic state ¹	<i>Complete</i>
3	Acute Medical Take ² to GRH	Restore at CGH to pre-Pandemic state	<i>Complete</i>
4	Vascular Surgery to GRH	Retain at GRH – FFTF	<i>Complete</i>
5	Urology emergency pathway to GRH	Restore to pre-Pandemic state	<i>Complete</i>
6	Neurology to CGH	Restore to pre-Pandemic state	<i>Complete</i>
7	Aveta Birthing Centre to GRH	Restore to pre-Pandemic state	<i>Complete</i>

Note 1 – Consultant led 8am to 8pm, Nurse led 8pm to 8am

Note 2 – Including high-care respiratory



Three GHNHSFT Temporary Changes to be retained until March 2022

High Care Respiratory – to remain at Gloucestershire Royal

Acute Stroke and Rehabilitation - to remain at Cheltenham General

Medical Day Unit – to remain at Cheltenham General



Service Proposals - High Care Respiratory

Proposal	High Care Respiratory to remain at Gloucester Royal as a Temporary Service Change until March 2022.
	To maintain our ability to be responsive to further ‘waves’ of COVID-19. We will continue to work through the evidence to develop a longer-term proposal for Respiratory care in Gloucestershire.
Benefits	Reduces the number of patients needing to go to the critical care unit which relieves pressure on critical care unit beds.
Points	<ul style="list-style-type: none">• Patients with other emergency respiratory symptoms will continue to be taken to Gloucester Emergency Department (ED) or Cheltenham ED by ambulance or as directed by their GP. Walk-in respiratory patients will also continue to be treated at both sites.• National guidelines recommend that advanced respiratory support and complex respiratory care are delivered within dedicated respiratory support units. This proposal will enable us to continue to deliver this important service for respiratory patients across the county.



Service Proposals - Acute Stroke & Rehabilitation

Proposal	To retain Acute Stroke & Rehabilitation at Cheltenham General Hospital and the additional Stroke Rehabilitation beds at The Vale as a Temporary Service Change until March 2022.
	The temporary COVID configuration has highlighted a number staff and patient benefits including improvements in the Sentinel Stroke National Audit Programme, we propose to continue to work through the evidence to enable us to develop a long term proposal for Stroke care in Gloucestershire.
Benefits	<ul style="list-style-type: none">• Quality improvement as measured by SSNAP.• Improved ward environment at CGH (Woodmancote)
Points	We would like to evaluate the current Stroke service to determine if the temporary change configuration can deliver longer term benefits, this review will include: <ul style="list-style-type: none">• The effect of separating the Hyper Acute Stroke Unit (GRH) and Acute Stroke (• The benefits we have seen from locating Acute Stroke rehabilitation at CGH• Longer term preferred staffing models for each element of the pathway• Optimal number of beds for Stroke (including community rehabilitation beds)• The opportunity presented by enhancing the Early Supported Discharge service



Service Proposals - Medical Day Unit (MDU)

Proposal	Retain the MDU at CGH as a Temporary Service Change to March 2022
	Undertake targeted engagement/ involvement with affected patient groups regarding the proposal that the MDU move to CGH should be a permanent service change
Benefits	<ul style="list-style-type: none">• Given the positive benefits already identified by locating the MDU at CGH, both for patients who need to access services at the MDU but also for patients accessing our ED services• The move has already enabled the Trust to carry out further GRH site moves, (involving the Frailty Assessment Service and the Gloucestershire Priority Assessment Unit), making better use of the GRH site, supporting care delivery in the ED at GRH by improving patient flow. It has also enabled re-location of Surgical Assessment Unit and the Gynaecology Assessment Unit to co-locate these important assessment services adjacent to the GRH ED.
Points	Temporary changes, such as MDU, have created an opportunity for rapid learning and trialling of service change that support improvements to patient outcomes/ experience and system efficiency/ effectiveness and should be considered as the possible future-state

Temporary Service Change Restoration Plan - GHCFT



Temporary Service Change	Outcome	Status	
Tewkesbury MIIU ¹	Restore to pre-Pandemic state	Complete	
North Cotswold MIIU	Restore to pre-Pandemic state	Complete	
Cirencester MIIU	Restore to pre-Pandemic state	Reduced opening hours. Reinstate by end August 21 ²	
Lydney MIIU	Restore to pre-Pandemic state	Reduced opening hours. Reinstate by end August 21 ²	
Vale MIIU	Restore to pre-Pandemic state	Reduced opening hours. Reinstate by end August 21 ²	
Stroud MIIU	Restore to pre-Pandemic state	Reduced opening hours. Refurbishment closure mid-August to December Re-open 8am – 11pm	
Tewkesbury Theatre	Restore to pre-Pandemic state	Complete	
Dilke MIIU	Retain extension of temporary service change	Remains temporarily closed	
Vale – Stroke Beds	Retain extension of temporary service change	20 beds	Note 1 – Minor Injury and Illness Note 2 – subject to confirmation



Temporary Changes - Summary of Proposals

NHSFT

High Care Respiratory – to remain at GRH (March 2022)

Acute Stroke and Rehabilitation - to remain at CGH (March 2022)

Medical Day Unit – to remain at CGH (March 2022)

CFT

Dilke MIU – to remain closed until all social distancing measures can be removed.

Vale Community Hospital – Stroke Rehabilitation beds to remain at #20 (March 2022)

Stroud MIU – to reopen in pre-Pandemic state in December 2021 following refurbishment programme.