



**Health Scrutiny Sub Committee
COVID-19 response**

21st October 2020

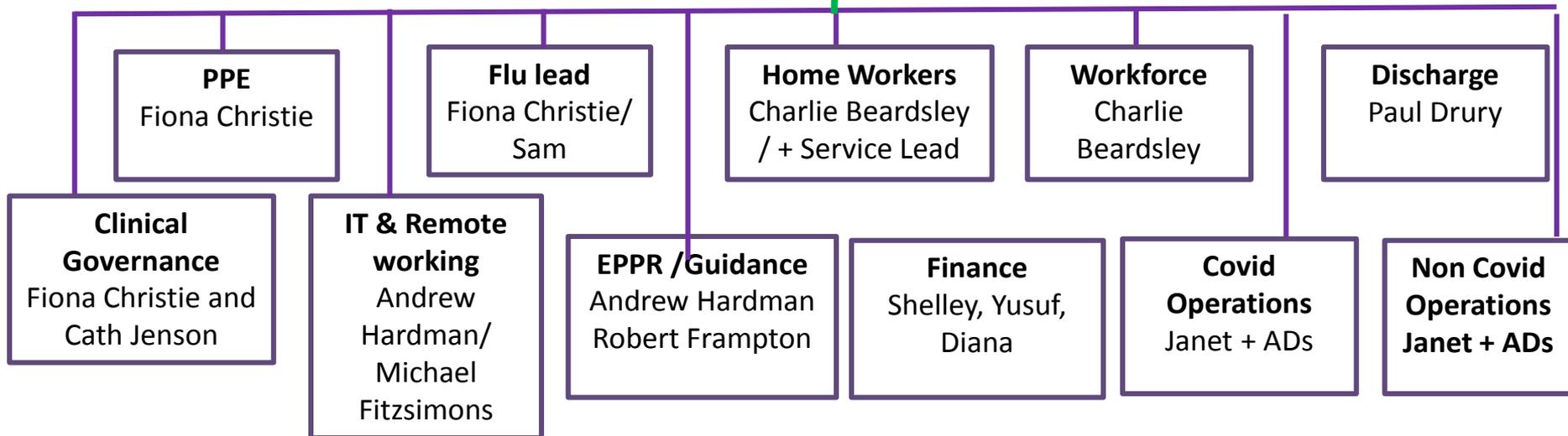
Governance Structure

1. Director on Call Structure in place- 1:6 rota. Manager on call also in place.
2. Incident meeting (as part of operational exec)
3. Borough monthly calls
4. One Bromley bi-weekly calls
5. SEL calls – 3 weekly
6. CQC 6 weekly updates

**Boards and Sub Committees
(virtually)**

GOLD EXECUTIVE INCIDENT
Chair: CEO
Bi-weekly (increasing to daily)

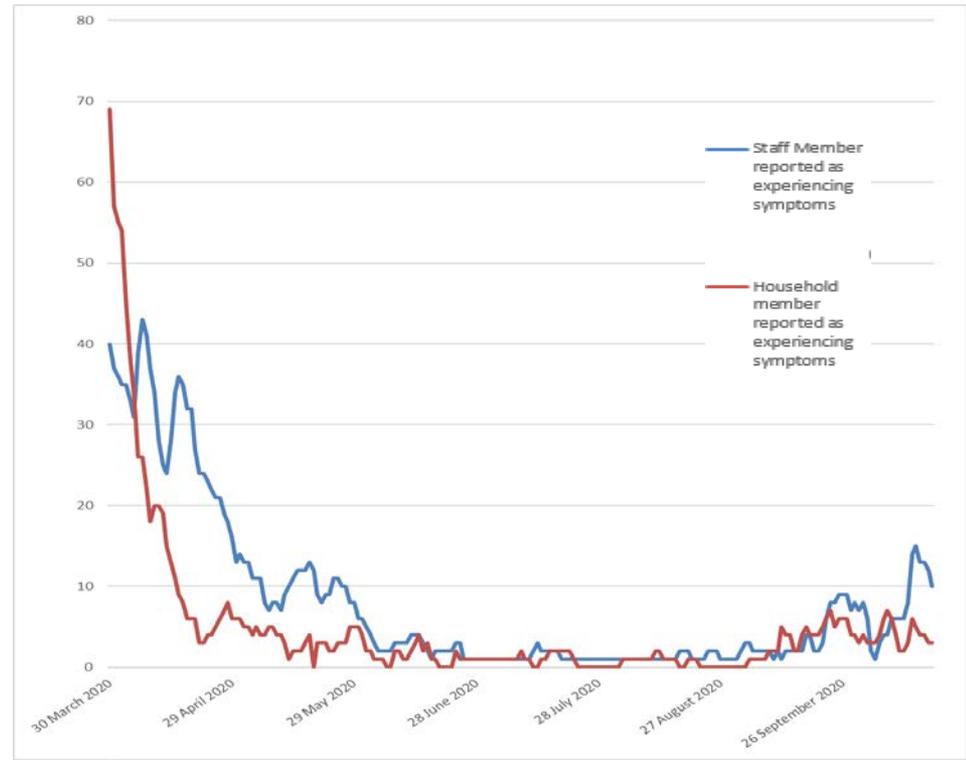
**Incidents, Risks,
Complaints Mt**
Attendees: CEO/MD/
Chief nurse
Meets: Weekly



Workforce Response

- ❑ Currently 35 staff sickness, including 13 COVID related absence, of which:
 - ❖ 8 self-isolating due to household / other (inc. Test & Trace)
 - ❖ 4 has / had symptoms
 - ❖ 1 quarantining following travel abroad

- ❑ 91% of colleagues have been COVID risk assessed, of which:
 - ❖ 3% are unable to continue in their role
 - ❖ 2% operate with restrictions on what they can do
 - ❖ 95% of those with a risk assessment being able to continue in their role



Wellbeing Hub

- We have created a 'Wellbeing Hub' to support staff during and post COVID.
- Talk Together Bromley have delivered 7 Covid-19 Resilience Workshops for colleagues with a further 2 planned.
- Talk together Bromley hotline for staff members who require support
- Confidential counselling service available
- Checking in on teams and people working from home
- Post wave 1 'zoom calls' with teams to discuss learning from the pandemic.
- New appraisal framework introduced with a focus on wellbeing and career progression
- Started to implement mental health and wellbeing strategies incorporating Schwartz rounds, mental health first aiders and speak up guardians
- BAME network established by four BAME senior leaders.



Wellbeing support for our People

	Level 1: Promotion & Prevention	Level 2: Early Signs Interventions	Level 3: Immediate Intervention
Individual	Are you in need of some help and support? There is information for improving your health & wellbeing with a view to preventing the need for more 'prescribed' interventions	Are you having difficulties adjusting to new ways of working: (frontline, redeployed, working from home) reduced productivity; mood changes.	Are you unable to function normally, experiencing unmanageable distress; psychological difficulties and clear difficulty performing role
Teams	Aiding your team mates wellbeing. Check in regularly. Are they coping OK? Sleeping well? Still finding work enjoyable and keeping on top of it? Still able to laugh and joke?	Do colleagues seem less motivated, unable to concentrate and overwhelmed. Do they sound stressed, are they feeling isolated or unsupported?	Have you noticed your colleagues seem more withdrawn or more irritable or are constantly feeling worried or tearful?
Leader	Are you checking in frequently and making yourself available? Are they feeling supported, kept informed? Are they well? Sounding happy, positive and managing their work - life balance?	Have you noticed changes to usual behaviour; distress also noticed by others; Increased conflict; increased periods of absence and some difficulties in role	Significant changes in moods and emotions. Demonstrating unusually poor judgement/struggling to make decisions? Significant concerns for their health and wellbeing? Increased/frequent absences





Help Each Other Out

Level 1:
Promotion & Prevention

- Start a conversation about mental health. These origami 'Time To Change' conversation starters will help: [Time to Change](#)
- Make your new colleagues feel welcome - even remembering their name can make a big difference!
- Host a team (or inter team) quiz on Zoom, Share virtual coffee or lunch breaks with colleagues

Microsoft have produced a step by step guide here <https://www.msn.com/en-gb/money/technology/how-to-run-the-best-zoom-quiz-tips-for-quizzing-success/ar-BB13KoUZ>

- If you're managing a team remotely, have a look at this video <http://citymha.org.uk/managing-remote-teams-in-challenging-times/>







Keeping Our People Safe

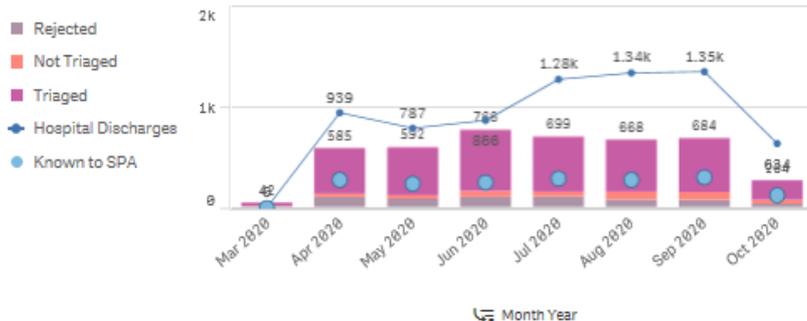
- IPC Board Assurance Framework (BAF) completed and signed off at BHC Exec with subsequent reviews by Board and Quality and Performance.
 - Central stock room operating with 24/7 availability of PPE with a driver distribution service to all our community sites (across Bromley, Bexley, Greenwich and Lewisham)
 - Over 1 million items of PPE have been distributed to date
 - 354 colleagues have received 'don and doffing' training
 - We trained 16 staff to fit test front line staff on use of FFP3 masks and have trained up 101 staff on multiple mask types
- Colleagues working from home wherever possible
- Majority of training has moved online
 - Premises are Covid secure with social distancing, each room has number limitation, additional cleaning.



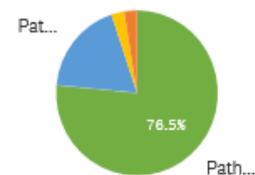
Discharge from the Single point of access

Patient's Discharged From Hospital - Summary

Referrals Received and Discharges From Hospital



Hospital Discharge Outcomes



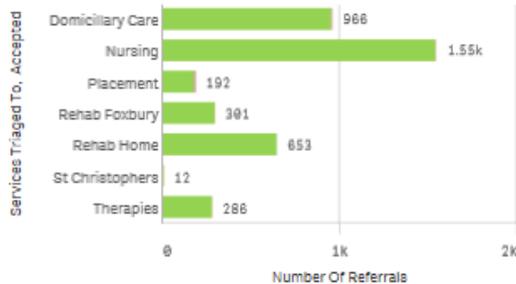
* Only those with confirmed hospital discharge

% Completed

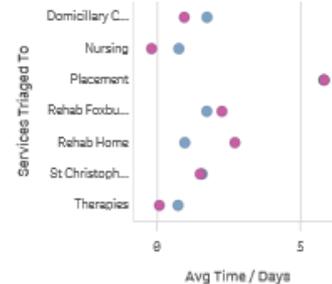


Pathway	Discharges	Description	Outcome
Pathway 0	5514	Simple discharge e.g. no change in circumstances, no new needs, package of care re-start	Patient returns to usual place of residence (inc. residential care home)
Pathway 1	1323	Identified needs can be met by social care and/or community nursing and/or therapy • Patient deemed safe between visits at home	Patient returns to usual place of residence with interim support
Pathway 2	187	Therapy, safeguarding or recovery needs • Identified short term needs can only be met in community bed or short stay residential setting	Patient is transferred to a non-acute bed and receives care and support until able to safely return to usual

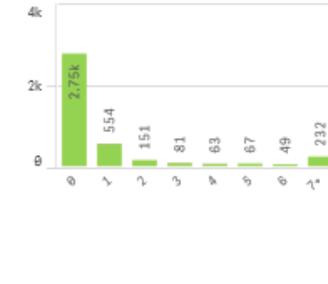
Services Referred On To



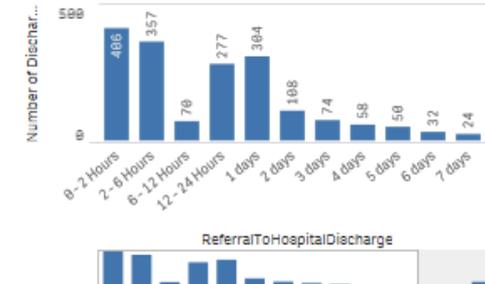
Average Time to Confirmation/...



Time to confirm / days



Time to hospital discharge



[View Daily Referrals and Outcome T...](#)
[Hospital Discharges Further De...](#)
[Pathway 1 Further Details](#)
[Pathway 2 Further Details](#)
[View All Patient Details](#)
Month Year

- In collaboration with system partners built discharge SPA in the Care Coordination Centre. The dashboard details the latest information.

Hospital Discharge Summary

- To date 7238 hospital discharges with 26% discharged via the SPA. Of these 76% were discharged within 1 day, 60% with 24 hours and 22% in 2 hours.
- During the same period, 92% of patients referred from in borough acute were able to be accepted and managed via the SPA.
 - 77% of patients were able to return to their usual place of residence via Pathway 0.
 - 18% of patients were able to return to their usual place of residence with extra support via Pathway 1.
 - 3% of patients were transferred to a community bed / short stay residential setting via Pathway 2.
 - 2% of patients were transferred to a residential / nursing home via Pathway 3.
- There has been a reduction in length of stay and an increase in discharges:
 - LOS in beds has decreased by an average of 2.42 days per month (-12.3%) against the same period last year, with a corresponding average increase of 5 additional pts discharged per month (+13%)
 - LOS in home pathway has decreased by an average of 5.12 days per month (-21%) against the same period last year, with a corresponding increase of 35 additional patients discharged per month (+51%)

Single Point of Access for Discharge: Case Studies

Case Study 1: Mr V, 72 years old, lives with wife.

- History of Parkinsons disease and multi system atrophy.
- Mr V was admitted to hospital on 29/3/2020 following 3 days of increased fever and was tested as COVID-19 positive.
- Discharged via the SPA to Pathway 2 on 21/4/2020. On arrival at Foxbury ward was non verbal, unable to walk and had low mood.
- The team, including a redeployed member of staff from neuro rehab trained in speech and language therapies and a redeployed paediatric speech and language therapist, worked with the patient daily for just over two weeks.
- By the time of the patient's discharge home on 11/5/2020 he was able to read aloud from a book and he was 'smiling from ear to ear'.
- Physically the patient was still unable to walk, but for a patient with two neurological disorders his ability to become verbal again, meant a transformation in his quality of life.

Case Study 2: Mrs M, 82 years old.

- Mrs M was admitted to the PRUH on 13/3/2020 with shortness of breath and diagnosed as COVID-19+ following a reported 22 week history of lethargy and malaise.
- She had bilateral pneumonia, was on oxygen and was ventilated during her stay in hospital. Three times her family were warned she may not survive and the palliative team were involved.
- Mrs M was discharged via the SPA to Pathway 2 on 15/4/2020 with physical weakness and shortness of breath and very much still in recovery.
- During her time at Foxbury Mrs W regained her strength and following treatment with the enhanced physiotherapy team she was discharged on 25/4/2020 able to walk and talk and was congratulated by the whole team as she left.

Bromley Community Covid Monitoring Service (BCMS)

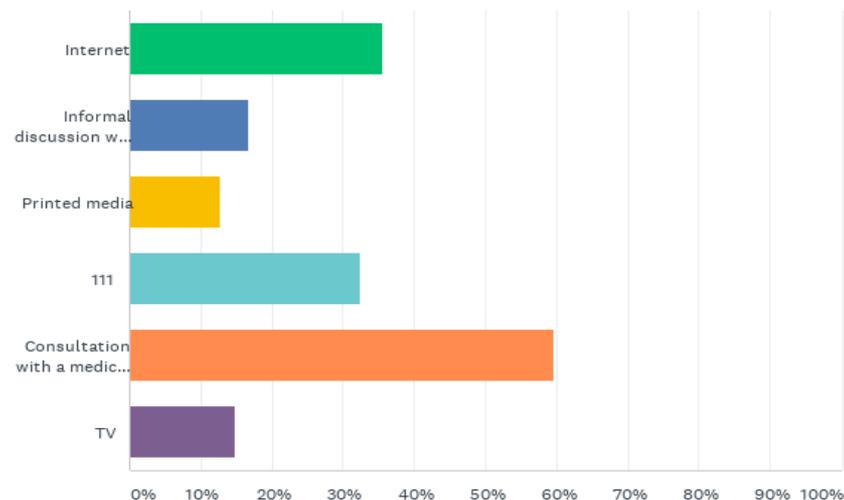
- Created to assess and monitor patients, registered with Bromley GPs, who were staying within the borough & with symptoms of Covid-19.
- Aim: to ensure that patients in the community who had tested Covid-19 positive, but did not require admission to hospital, were supported & acute beds kept free for those with urgent need (category 1 patients).
- The service was mobilised within 2 days on 10th March 2020 & operated 24 hrs 7/7.
- The pathway was established to receive 111 referrals for category 2 (active health management required daily by telephone) and category 3 (receive a single telephone call with health advice and a contact number for calling back into the service if required), but took calls from GPs and any other referrers.
- New Crisis Response team created made up of ICN coordinators, a Dietician, Community Matrons, 2 local GPs, the GP Alliance GPs, Respiratory Nurses/Physiotherapists, Out of Hours staff, Children's Nursing, COMPAED clinicians and managed by two senior level staff established and a Community Matron roster set up within hours.
- Team consisted of a telephone triage service, medical prescribing, video consultations, home visits from the Community Matrons/Rapid Response and Out of Hours staff, as well as a 'hot hub' where patients could be seen by a GP at Biggin Hill. The team also linked into the BHC Rapid Response and IAPT teams and already established links (from the ICN proactive care pathways) were accessed to provide social and emotional assistance to patients.
- The BHC Informatics team rapidly created a dashboard for the team to monitor, which enabled them to safely manage the incoming patients and patients on the caseload. In addition, patients identified by other teams as COVID-19 positive, but not known to the BCMS service, were identified and followed up on.



CMS

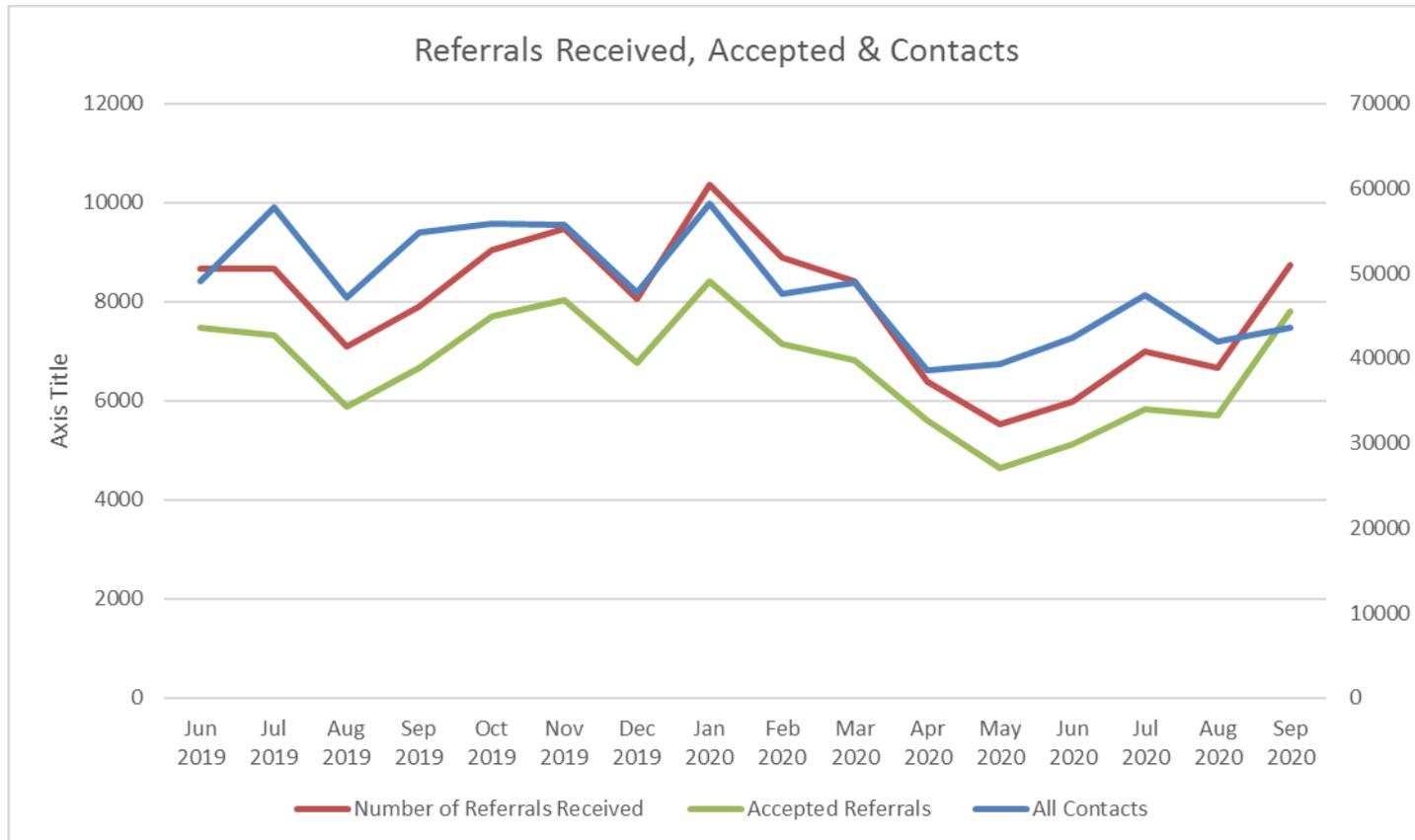
The CMS service performed a survey in August of 2600 patients who had used the service between Mar – Jul and had been discharged

- 447 responses were received
- 376 responded to the question detailing what symptoms they developed with the virus
- 321 confirmed they were still suffering with certain symptoms
- 202 responded that they felt they needed assistance with their symptoms
- 380 patients responded to the question about seeking advice for persistent Covid 19 symptoms. Of those who responded 35% had sought advice whilst 65% had not
- 203 stated where they received the advice from



Activity

Due to the pandemic referrals into many services were halted as those services were suspended following NHSE guidance. Correspondingly activity also reduced, but increased activity in services that did continue can be seen



Restart Programme

- ❑ Each team produced their own recovery programme, as well as an escalation plan to follow if another COVID-19 peak occurs
- ❑ All clinic services have now resumed with reduced format (except for Talk Together Bromley)
- ❑ Clinic resumption a checklist / risk assessment is completed which is ratified at weekly exec meeting
- ❑ All critical face to face services have been operating throughout COVID (DN, RATT, Rapid Response, Rehabilitation Beds & Rehabilitation Home, as well as other services treating Urgent patients either face to face or remotely as required)
- ❑ Pressure on DN teams with colleagues shielding + increasing no of housebound patients
- ❑ Teams are reviewing their current pathways e.g. tissue viability service
- ❑ Publishing waiting lists to primary care – set expectations for patients at point of referral
- ❑ 0-19 Bromley service mobilised during COVID and went live on the 1st October
- ❑ Senior management team visible in services / bases as services resume

Restart Programme: Urgent Community Response

- All critical face to face services have operated throughout COVID:
- Rapid Response
- Home Based Rehabilitation
- Foxbury
- Rapid Access to therapies



- Part of the Accelerator bid for Our Healthier South East London
- Focus on a 2 hour response time
- Team includes of nurses, therapies, medical and geriatrician input
- Home based rehab have increased capacity by 50% by changing protocols
- Combining rehabilitation and reablement to create better joint working and efficiencies

Restart Programme: Adult Services

July

- Dental – Clinics resumed – worked as Emergency Hub during lockdown
- Sexual Health & CRHS – Face to face clinics restarted for contraception
- Bladder & Bowel – Telephone consultations
- Tissue Viability & Lymphoedema - Face to face clinics restarted at Caritas House
- Podiatry – Face to face clinics restarted at Beckenham Beacon
- Adult Physio, OT & Falls – Home visits

August

- Adult SLT – Face to face clinics restarted at Beckenham Beacon
- Bladder & bowel – Face to Face appointments restarted
- Tissue Viability & Lymphoedema - Face to face clinics restarted at Beckenham Beacon
- Wheelchair – restarted in Slade Green
- Hayeswick extended GP hours – Telephone and Face to face appointments restarted

September

- Adult Dietetics – Face to face clinics to restart
- Phlebotomy – Clinics restarted on Wednesday & Friday

October

- Diabetes – Face to face clinics to restart at Beckenham Beacon

Restart Programme: Children's Services

July

- Children's Physio – Orthotics clinics restarted
- Children's OT – Remote appointments
- Children's Speech and Language – Remote appointments & Face to face home visits
- Health Support for Schools (enuresis) – Remote appointments

August

- Children's OT – Clinics at Phoenix CRC for 1 day per week
- Community Paediatrics – Clinics restarted at Phoenix CRC
- Audiology – Clinics restarted at Phoenix CRC

September

- Children's Dietetics – 1 x AM clinic session per week
- Children's Dietetics – 1 x PM session per month
- Children's Speech & Language – Mon – Fri Clinics at Beckenham Beacon and Phoenix CRC
- Children's Speech & Language – Tue – Fri Clinics at Mottingham
- Health Support for Schools (enuresis) – face to face appointments resumed

Staff Flu Vaccination Programme

- Programme started 25th September
- 277 staff vaccinated so far
- 3 staff clinics held in October
- Additional clinics arranged for November
- 10 peer to peer vaccination sessions held to date.
- 7 more peer to peer sessions booked
- Weekly reminders in CEO update
- Internal communications to include personal messages from members of our Patient Reference Group. Matthew and his mum Deirdre submitted last week's message, which included the following:

“Hi, my name is Matthew, I am 33 years old and have cerebral palsy. I have just had my flu jab – have you had yours?”

He finished off with a slogan for the staff:

“Please have your flu jab:

*Protect yourself
Protect your colleagues
Protect your patients.”*



Plaudits

District Nursing: the nurses...were all so lovely...; in Mum's intense last few days were so kind and caring. Always felt we could depend on one of the team to support ...Thank you to a wonderful team.

Adult OT:...very helpful and supportive at a difficult time.

Wheelchair: ... I was very anxious about getting a new chair... I am so thankful, appreciative and glad that their calm assertiveness made me see that change was required. The aftercare handover advice was very thorough ensuring my wellbeing was not compromised. **100% satisfaction** with care, customer service, professionalism and kindness.

Adult OT: ...so kind and patient. Thank you so much.

TTB: I could not have asked for a better experience... thank you Bromley Healthcare for the help and support you provided.

TTB:...my experience was really positive and I would recommend it to anyone in the local area.

Bexley Dieticians: I am happy to say...was very efficient, very helpful, yet very friendly and reassuring.

District Nursing: Your nursing team at Bromley Healthcare has been an absolute godsend in providing a prompt first class service whenever my elderly Mother needs medical assistance, both routine and otherwise...they make my mother smile whenever they are here, and that means a lot to us both! I have the utmost admiration and respect for them all...