

<b>Report Title</b>	Gold update on COVID-19 position, including vaccine update		
<b>Sponsoring Executive</b>	David Carruthers – Medical Director		
<b>Report Author</b>	David Carruthers – Medical Director, Liam Kennedy – Chief Operating Officer		
<b>Meeting</b>	Public Trust Board	<b>Date</b>	1 <sup>st</sup> April 2021

### 1. Suggested discussion points *[two or three issues you consider the Committee should focus on]*

The community rate of COVID infection is falling with resultant decline in COVID related hospital admissions and mortality. This includes General admissions and admissions into our critical care capacity with both expansion areas for critical care now empty and occupancy just over 100%.

Community infection rates in the those age groups who have undergone the vaccination programme appear positive on initial review, whilst we have seen an increase in the 13-17 age range possibly linked to the return of schools and increase in testing in that age group.

Sandwell is returning its last COVID ward to non-COVID, with separate areas in specialist wards supporting COVID going forward. The Respiratory hub at City will continue to support covid positive patients. 2 wards at Sandwell have returned to surgical services for restoration work as we now switch our focus on restoring elective services, whilst being very mindful of staff wellbeing.

LAMP testing is now embedded in the organisation and the vaccination hub has returned at Sandwell for 2<sup>nd</sup> doses.

The Board should note the current position, changes we have implemented in light of the reduction in prevalence of community rates and discuss any further information or considerations they would like to be sighted on.

### 2. Alignment to 2020 Vision *[indicate with an 'X' which Plan this paper supports]*

Safety Plan	<input type="checkbox"/>	Public Health Plan	<input type="checkbox"/>	People Plan & Education Plan	<input type="checkbox"/>
Quality Plan	<input type="checkbox"/>	Research and Development	<input type="checkbox"/>	Estates Plan	<input type="checkbox"/>
Financial Plan	<input type="checkbox"/>	Digital Plan	<input type="checkbox"/>	Other <i>[specify in the paper]</i>	<input type="checkbox"/>

### 3. Previous consideration *[where has this paper been previously discussed?]*

CLE and Q&S

### 4. Recommendation(s)

BOARD is asked to:

- a. Note the change in pressure on hospital and ICU beds
- b. Discuss the changes we have put in place in light of the reduction

### 5. Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*

Trust Risk Register	<input type="checkbox"/>				
Board Assurance Framework	<input type="checkbox"/>				
Equality Impact Assessment	Is this required?	Y	<input type="checkbox"/>	N	<input checked="" type="checkbox"/> If 'Y' date completed
Quality Impact Assessment	Is this required?	Y	<input type="checkbox"/>	N	<input checked="" type="checkbox"/> If 'Y' date completed

# SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

## Report to the Public Trust Board: 1st April 2021

### Gold update on COVID-19 position, including vaccine update

#### 1. Community infection Rate

- 1.1 We now see less than 40 new infections per day in the Sandwell community as compared to nearly 700 at the peak just 8 weeks ago. This is being seen mainly in the 13-17 age range, hypothetically due to the return to schools, with those age ranges vaccinated showing a decreasing infection rate. This hopefully will continue and provides hope as we come out of the latest lockdown situation.

#### 2. In-patient Beds

- 2.1 In-patients have fallen considerably since last Board update to just over 80 inpatients (reduced from peak of 430). These patients are spread across both City and Sandwell sites. A total of just 11% of in-patients are COVID positive now. The number of patients on respiratory hub has reduced significantly. Patients in ICU have fallen as well, but still running over 100% capacity. We have been able to decant from N1 at Sandwell, which is one option to become part of the restoration work to create a green area for postoperative surgical care.

#### 3. Contact Ward

- 3.1 We have created a contact ward at Sandwell on Newton 3 for contact patients from the ward area or step down from admitting Red wards when found to be Covid negative. Data suggests that this combined with bed spacing and improved air flow has reduced the risk of nosocomial infection.
- 3.2 Swabbing continues on day three and day seven. Point of Care testing (POCT) is now in place for all admissions at Sandwell and for admissions after 2pm at City (rapid swabbing covers the morning admissions). This significantly improves correct allocation across the sites, given the estates issues specific to us.
- 3.3 The bed plan is to reduce all red bed capacity at Sandwell down to just specialist areas and a small section in the assessment areas and to continue to offer red capacity over at city on D17 and D27. Both the streams in ED are being reviewed to understand how we can start to manage COVID as per any other infectious diseases and less as a national pandemic.
- 3.4 The Gastroenterology project is still on track to consolidate on one site at Sandwell for in-patient beds to improve care for that group of patients who require specialist gastro

team input and allow more efficient working of the gastro team. PCCT will continue to support one medical ward at City while back fill arrangement for any lost work within their routine clinical space is being agreed.

#### **4. Staff testing**

4.1 The roll-out has begun of a switch from lateral flow testing to LAMP testing which is a once weekly saliva based antigen test with higher degree of accuracy. The roll-out programme has identified high risk areas initially within surgical and medical bed base progressing to all wards and then other clinical areas subsequently. This will hopefully increase the early detection rate of COVID positive staff prior to them becoming symptomatic. Data is still awaited on staff members who have become COVID positive and how this correlates with results of lateral flow testing.

#### **5. Vaccination**

5.1 The vaccination centre at Sandwell opened for second vaccines on the 23<sup>rd</sup> March until 26<sup>th</sup> April.

5.2 We are currently reviewing the Trust Data to ensure we have captured all staff that have received the vaccine whether that is with the hospital hub or elsewhere within the region so that this is recorded on our staff systems so we can have sensitive conversations with colleagues who have not yet received the vaccine and analyse the data within the organisation looking at our high risk staff etc

5.3 We have undertaken a campaign throughout February/March to encourage staff to have the vaccine particularly with our BAME colleagues via use of videos, webinars, Q&A sessions and continued communications to reassure and answer any concerns or issues

5.4 Tipton has been open since the 22<sup>nd</sup> February seven days per week offering vaccine to the first 9 cohorts so those over the age of 50. We have just agreed a number of roaming clinics working with community and faith leaders to reach our hard to reach population

#### **6. Personal Protective Equipment(PPE)**

6.1 The committee will be aware that as a Trust we have been providing PPE above national guidelines within our amber wards following a risk assessment we undertook a few months ago due to lack of ventilation, increased community cases and the number of admissions of asymptomatic patients.

6.2 We have recently reviewed this decision. With community cases now reducing data to suggest there are less than 3 asymptomatic patients per week and work ongoing to improve ventilation it has been decided as of 22<sup>nd</sup> March that we will revert to our original PPE within amber wards. The risk assessment has been updated and this

decision will be documented as risk management committee following the decision at gold command.

## **7. Recommendations**

7.1 The Board is asked to:

- a. Note the change in pressure on hospital and ICU beds
- b. Discuss the changes we have put in place in light of the reduction

David Carruthers  
Medical Director

18<sup>th</sup> March 2021