

Report Title:	Gold update on COVID-19		
Sponsoring Executive:	Liam Kennedy, Chief Operating Officer		
Report Author:	Liam Kennedy, Chief Operating Officer Mel Roberts, Chief Nurse Officer Frieza Mahmood - Chief People Officer		
Meeting:	Trust Board (Public)	Date	2 nd February 2022

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

The Report covers the current Covid 19 Position in the organisation and highlights the changes in IPC regulations since the last update.

The report also highlights the position Vaccination as a Condition of Deployment regulations (VCOD) and outlines the future risks in relation to this for the Trust.

~ **The Equality Impact Assessment (EQIA) is included in the Trust Board Reading Room**

2. Alignment to our Vision *[indicate with an 'X' which Strategic Objective this paper supports]*

Our Patients		Our People		Our Population
To be good or outstanding in everything that we do	x	To cultivate and sustain happy, productive and engaged staff	x	To work seamlessly with our partners to improve lives

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

Extraordinary Private Trust Board meeting on Friday 21/1/22 agreed the Trust approach to VCOD

4. Recommendation(s)

The Board is asked to:

- DISCUSS** any impact caused by the change in IPC rules
- DISCUSS** the potential impact associated with the roll out of the VCOD regulations in the Trust, from both an equalities impact perspective and a service provision perspective
- DISCUSS** and acknowledge the decision made in regards to VCOD at the Extra-Ordinary Trust Board last week
- DICUSS** how as a Trust the manage the potential risks in regards to VCOD.

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

Trust Risk Register						
Board Assurance Framework	x					
Equality Impact Assessment	Is this required?	Y	N	Y	If 'Y' date completed	20/1/22
Quality Impact Assessment	Is this required?	Y	N	Y	If 'Y' date completed	

SANDWELL AND WEST BIRMINGHAM NHS TRUST

Report to the Trust Board February 2022

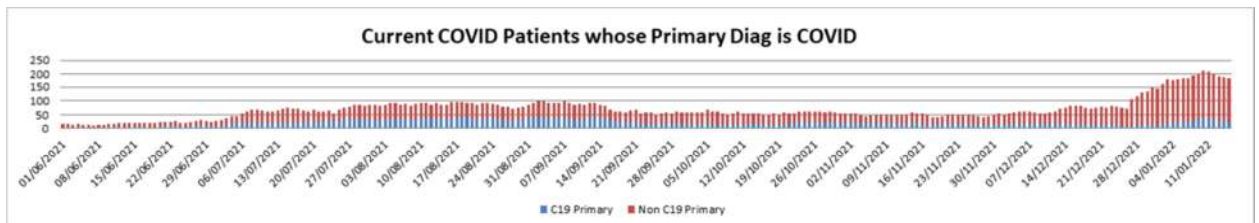
Gold update on COVID-19 position

1. Community infection Rate

- 1.1 After an increase in late December / early January we have seen the Covid community infection rate steadily drop over the last 2 weeks and we are returning to low levels of community infection.

2. Inpatients

Our overall inpatient numbers follow the community infection rate, albeit most of the increase seen over the December / January period was linked to outbreaks and less an increase in overall admission. We reached a peak of 220 inpatients during the early weeks of January, but we are seeing a steady decline over recent weeks. To note, most inpatients with Covid are not in hospital due to Covid but have tested positive for Covid after admission for another primary diagnosis as shown in the graph below.



3. Infection Prevention & Control Updates (IPC)

- 3.1 There have been several changes in national guidance on IPC since the committee last met. The latest position is that staff can return as early as Day 6, providing they have 2 consecutive negative lateral flow device tests (LFDs). However, many are still required to isolate for 10 days if unvaccinated, or 14 if still testing positive on LFD tests. We have implemented this change.
- 3.2 We also pioneered for the national position to change for inpatients from 14 days to 10 days post positive PCR result, for step down. This has now been formally communicated and implemented across both sites.
- 3.3 We have deviated from the national guidance in relation to mask wearing, in that we have increased from surgical face masks to FFP3 masks in all inpatients areas, this was due to the volume of outbreaks and the risk assessment of our ward environments

4. Workforce Hub /Mandatory Vaccine(VCOD)

- 4.1 As part of the increasing staffing absence we have established a workforce hub that has supported daily follow up of Covid related and other sickness absence which has successfully significantly reduced our absence rate down to 8.8% at the time of writing from a peak of 13% with our average rate in recent weeks being maintained at 8.9%.
- 4.2 The workforce hub is also supporting the coordination of Vaccination as a Condition of Deployment requirements (VCOD) which will become law with effect from 1st April 2022. Specifically, the Department of Health and Social Care (DHSC) has formally announced that individuals undertaking CQC regulated activities in England must be fully vaccinated (having 1st and 2nd dose of vaccine) against Covid no later than 1 April 2022.
- 4.3 The timelines involved include a 12-week grace period from legislation being passed in parliament on 6th January 2022 with the expectation that the first Covid vaccine dose is to be administered by 3rd February 2022. The second Covid vaccine dose is to be administered by 31st March 2022
- 4.4 The national guidance states “these regulations will apply equally across the public (NHS) and independent health sector, and will require workers aged 18 and over, who have direct, face to face contact with service users to provide evidence that they have received a complete course of a Medicines and Healthcare products Regulatory Agency (MHRA) approved COVID-19 vaccine, subject to limited exceptions on medical grounds, by no later than 1st April 2022. This will include front-line workers, as well as non-clinical workers not directly involved in patient care but who nevertheless may have direct, face to-face contact with patients, such as receptionists, ward clerks, porters and cleaners”.
- 4.5 This also includes individuals working in non-clinical ancillary roles who enter areas which are utilised for the provision of a CQC-regulated activity as part of their role and who may have social contact with patients, but are not directly involved in patient care, regardless of contracted hours or working arrangements. The scope is also applicable to bank workers, agency workers, volunteers, third-party providers, and students.
- 4.6 We have agreed to adopt a Black Country & West Birmingham system position on the VCOD requirements for all our system NHS organisations to limit risk of staff movement and challenges on consistency grounds. This includes agreements on:
- scope of implementation

- periods between first and second doses (8 weeks with 3rd Feb as key assessment date)
 - pre-employment expectations for new recruits and students
 - completion of Equality Impact Assessment (EQIA) assessments on agreed template to Integrated Care System (ICS) VCOD Group by 5th Feb 22.
 - consistent application of medical exemptions
 - system wide redeployment and appeal process to be implemented for consistency
- 4.7 The agreed approach for the scope of mandatory vaccinations is to include staff who have face-to-face contact with patients or service users, in a clinical area, as part of their role. This includes staff entering areas that are utilised for the provision of a CQC-regulated activity which may result in incidental face-to-face contact with patients or service users in those areas.
- 4.8 The suggested system approach (in line with national guidance) is for mandatory vaccination rules **not** to apply by way of exemption if staff fall into the below categories:
- under the age of 18
 - clinically exempt (national guidance e.g. end of life care, learning disabilities, severe allergies)
 - participating in an official Covid clinical trial
 - exempt due to a short-term medical condition (e.g. for pregnant women, the exemption expires 16 weeks post-partum and requires them to become fully vaccinated thereafter)
- 4.9 Anyone relying on an exemption to avoid vaccination will need to use the NHS Covid Pass to verify exemption status. This process along with confirmation of vaccination status is being centrally administered by the workforce hub managed by the People and OD Directorate under the leadership of the Chief People Officer.
- 4.10 Process charts, template letters, FAQ's and scripts have been developed and issued to ensure that line managers and staff have a consistent understanding of their responsibilities. Trade Unions have also been actively engaged in development and communication processes.
- 4.11 All staff in scope who are currently identified as having an unconfirmed vaccination status (754) along with staff (449) who have received their first dose but have not received the second dose yet, have been written to directly to confirm the impact of the changes to legislation on our ability to continue to employ them beyond 31st March 2022. This letter also provides the necessary support and guidance on expectations and assistance in line with this. Further follow up communication is taking place centrally via the Workforce Hub, Managers, Unions and Group Triumvirate leadership teams .The work that is being undertaken to validate the vaccination status of staff will conclude on Friday 28 January 2022 so the above figures are a point in time and change on a daily

basis. It has also become a pre-employment requirement to confirm Covid vaccination before unconditional offers of employment are processed for affected individuals.

- 4.13 A full EQIA has been completed along with a modelling exercise to review the potential service risk to the Trust. A copy of the finalised assessment will be provided to the Board following sign off by the system on 5th February 2022. However the current draft version is attached in the Trust Board Reading Room for reference. Due to the level of diversity in our workforce relating to ethnic minority representation (currently comprises of 45% of our total workforce), set against the backdrop of vaccine hesitancy (known to be higher in these staff groups), measures have also been taken to escalate concerns to the regional NHSEI team. Most specifically the likely over representation of ethnic minority staff in dismissed groups for our Trust, a pattern which is likely to be repeated for our system, particularly in Wolverhampton. This issue continues to be managed at a tactical and strategic level with multi-disciplinary engagement and Executive Team leadership, along with oversight in line with the Covid command structure.
- 4.12 The current worst-case scenario based on no movement in levels of vaccine uptake/confirmation for those staff who have no recorded vaccine or only one recorded dose, is the requirement to serve contractual notice to potentially over 1000 staff. The total number of staff affected will however reduce following completion of the validation exercise which is scheduled to conclude on Friday 28th January 2022. Daily internal position reports on the progress of this exercise will be provided by the Performance and Insight Team with effect from 26th January 2022.

5. COVID Community Vaccination Programme

- 5.1 Our vaccination programme continues across both Sandwell & West Birmingham Places.
- 5.2 The 12-15 year old programme at schools is ongoing and we are now undertaking vaccine in schools for both Sandwell and Dudley schools. This will be completed by the end of February. The offer will then continue within the vaccine centres for 12-15 year olds.
- 5.3 We continue to support our primary care colleagues by visiting and offering vaccines within care homes to patients and staff and to our vulnerable housebound patients.
- 5.4 Pop up clinics continue across Sandwell in conjunction with public health colleagues and we have use of a vaccination bus to undertake these clinics. This is to help increase uptake of the vaccine across the place particularly in areas where uptake remains low.
- 5.5 We are gearing up to commence administration of the vaccine for 5-11 year olds so staff are currently undergoing training. This should commence at the end of the month.
- 5.6 Letters have been sent to our immunocompromised staff offering both third vaccine and the fourth booster dose.

5.7 At the next system vaccine board we will be discussing how the Covid vaccination programme becomes business as usual

6. Recommendations

6.1 The Trust Board is asked to:

- a) **Discuss** any impact caused by the change in IPC rules
- b) **Discuss** the potential impact associated with the roll out of the VCOD regulations in the Trust, from both an equalities impact perspective and a service provision perspective

Liam Kennedy
Chief Operating Officer

Melanie Roberts
Chief Nurse

Frieza Mahmood
Chief People Officer

26th January 2022