06 04 2020

Media and Communications Team

**Briefing note:**

**Southern Health’s response to coronavirus epidemic: update 2**

**Overview**

As a result of the current and ongoing coronavirus epidemic, Southern Health (along with all other NHS organisations across the country) is having to adapt its healthcare services to (a) keep pace with the fast evolving situation, (b) adhere to Government guidance on increasing capacity for current and expected demand across the system and (c) protect our patients, staff and local communities.

During these fast-changing times, our aim is to provide our local overview and scrutiny committees with regular updates on those healthcare services where changes are necessary as a result of the national crisis.

This paper is the second in a planned series of updates – and follows the first written briefing on 27 March 2020, which also provided some background on the coronavirus.

**Changes Previously Shared**

Changes we have already shared (and in more detail, in the last briefing) include:

Staffing

Where teams can continue to carry out essential duties whilst working from home, we are encouraging them to do so. At the same time, we are also drawing up contingency plans to redeploy staff to other duties and work in other settings, if/when the need arises.

**Bed capacity**

Across the Trust, we working to release capacity in our inpatient units in order to help alleviate the increasing demand that acute hospitals are, and will be, facing.

Closing wards to visitors

On Tuesday 24 March, we took the difficult but necessary decision to close our wards to visitors with immediate effect.

Specific service changes

In terms of specific services where we have already agreed adaptations with our commissioning colleagues, these include:

* Beechwood ward: a mental health ward for older people at Parklands Hospital. This will temporarily become a ward for adult/older people with mental health issues who require physical health care for COVID-19. It will operate in this capacity as an 18 bedded ward from Monday 6 April 2020.
* Diabetes services: have moved to a single team across all sites to maintain a safe service. Group education is cancelled and the team are working on videos and webinars to replace this. Face to face appointments have also been cancelled (many will switch to telephone reviews).
* Electro-Convulsive Therapy (ECT): these services will temporarily operate from a reduced number of sites, (reducing from three sites to two, or potentially one if necessary).
* Outpatient services (in particular musculoskeletal services): patients who cancel appointments will be discharged but able to self-refer back into the service at any point over the next 12 months.
* MSK (musculoskeletal) services are also currently only providing a telephone service, predominantly for triage, advice and discharge (and the vast majority of staff will be redeployed)
* italk services: face to face sessions have been cancelled and replaced with virtual consultations/appointments.
* Psychology services: have stopped ISP group interventions for adult mental health inpatients, instead patients are being offering interventions via telephone and via Visionable.

**Additional Changes at Southern Health**

Additional services, where we have now agreed adaptations with our commissioning colleagues, include:

Across all areas

A number of community care services across Hampshire will cease temporarily during the coronavirus pandemic. These include:

* Orthopaedic Choice (except urgent triage, in line with national guidelines)
* Diabetes education sessions
* Pulmonary rehabilitation
* Routine therapy - Podiatry, Hand Therapy, Pain Service, MSK (as outlined above)
* Continence assessments
* Dietetic clinics
* Parkinson’s routine clinic
* Dexa (bone density) scanning
* Routine endoscopy
* Falls assessments and clinics
* Falls classes
* 6/12 follow up stroke assessment
* All routine medical outpatient departments – i.e. respiratory, cardiology, medical, ENT
* Routine bloods
* Outpatient routine diagnostics - 24 hour tapes, plain film x-ray, MRI, CT, ultra-scan
* Routine rehabilitation in the community
* Routine wound clinics (however self-care packs in relation to wound care will be given to all care homes)
* Medicine or dressing deliveries
* CHC (continuing health care) applications for nursing home placements
* Pressure ulcer panels
* Psychological services across the Trust have been moved where possible to video/telephone contact, this includes: older people’s mental health, eating disorders, adult mental health, early intervention in psychosis, crisis resolution and home treatment and community mental health teams.
* 0-19 services - child health clinics, community group baby clinics and group work have been suspended and staff have been redeployed to support the Covid19 response. (The ChatHealth service remains open as usual).

A number of services will be subject to a reduction in frequency (based on national guidelines during the pandemic). These include:

* Catheter care (moving from 3/12 to 6/12)
* Vitamin B12 injections (moving from 3/12 to 6/12)
* Periods of time between dressings for wound therapy to be extended
* Essential rehabilitation for discharge (in the Romsey and Fordingbridge area only at present)
* PICC lines (peripherally inserted central catheter) - moving from 7/7 to 10/7
* Bowel care (no longer twice daily although work underway to teach families/carers)
* Depot injections for Prostap, Denusomab, Epoetin and Zoladex
* CHC FastTrack provision assessments (although this may be delivered by redeployed CHC staff)
* Nephrostomy (urinary tubes/bags) care.
* Complaints

New guidance from NHS England/Improvement has recommended a system-wide ‘pause’ in the NHS complaints process, to allow all staff to concentrate their efforts on the Covid-19 crisis. This means that whilst all Trusts should ensure that people are still able to raise concerns or make a complaint (and that all complaints should be logged, triaged and acknowledged), they will then remain open until further notice (the initial ‘pause’ period is recommended to be for three months).

*Please note, critical services across the county which will remain a priority are as follows:*

* *End of life care - syringe driver management, symptom management*
* *Insulin injections*
* *Urgent oxygen assessment and provision(for high risk patients/to facilitate acute hospital transfers)*
* *Admission avoidance*
* *Blocked catheters*
* *Older People’s Mental Health depot injections*
* *Clexane and Daltaparin injections (given an oral anticoagulant alternative)*
* *Complex wounds (in line with national guidance).*

Specifically in Portsmouth and South East Hampshire

The following temporary adaptations are being implemented within these divisional services, in order to reduce contamination and prioritise activities:

* Care Home Team: nursing home forums/group sessions are cancelled.
* Primary Care Teams: routine appointments including health checks, routine smears, annual reviews (ie diabetic, respiratory, routine blood tests, travel vaccinations, face to face routine consultations/medication reviews) cancelled.
* Adult MHLT (mental health liaison team): the team has temporarily changed location (the aim is to redirect patients without medical needs from the Queen Alexandra Hospital to the Turner Centre at St James’ Hospital) and is undertaking assessments and triaging by telephone, with minimal face to face contact.
* Respiratory: routine appointments and routine oxygen assessments have now temporarily ceased.
* Parkinsons: face to face consultations have temporarily ceased.
* MS (multiple sclerosis): face to face consultations have temporarily ceased.
* Continence urology stoma: face to face routine work has temporarily ceased.

South West Hampshire

The following temporary adaptations are being implemented within these divisional services, in order to reduce contamination and prioritise activities:

Radiology

* Ultrasound appointments only for suspected significant pathology. Routine scans will be appointed for approximately four months’ time. No ultrasound guided injections are being offered at present.
* Dexa scans are being discontinued for over 65s (and the service may be suspended in near future).
* Flouroscopy is for urgent cases only at present.
* Routine MRIs are being cancelled for those over 70 years old. The team are running down the list and will no longer accept routine scan requests. Urgent referrals only.
* Xrays are moving to bookable appointments only and, whilst Lymington is open Monday to Friday (8.45 – 12.30 and 13.30 – 16.00), Romsey is now closed until further notice. GPs are asked to consider not referring routine extremity x-rays. For urgent chest x-rays, there will still be a walk-in service in Lymington Hospital.

Endoscopy

* In line with Government guidance, there will be no routine diagnostic upper or lower GI endoscopy in Lymington for the foreseeable future. Any routine referrals will be kept by the team until the current restrictions are lifted, at which point appointments will be sent out. ‘Clinically urgent’ cases will still be seen, following a discussion of the balance of risks and benefits, particularly for older patients and those with co-morbidities.
* ENT: this service will now only accept urgent 2 week waits and will also offer phone consultations.
* Rhueumatology: this is now closed at Lymington Hospital, urgent patients only will be referred to University Hospital Southampton.
* Gastro: this is now closed at Lymington Hospital, urgent patients only will be referred to University Hospital Southampton.
* 24 hour tape services: this service is temporarily closed.
* Spirometry and pulmonary function tests (PFT): this service is temporarily closed.
* Paediatrics: this service is temporarily closed.

Southampton

The following temporary adaptation is being implemented:

* The Lighthouse in Southampton: (run in partnership with Solent Mind) will temporarily run as a ‘virtual’ crisis lounge, as the premises in Shirley are too small to maintain safe social distancing.

**When?**

The changes have taken place with immediate effect and will be regularly reviewed.

**Engagement Activity & Next Steps**

We are working closely in partnership with our CCG colleagues and those across the local healthcare and social care system to agree and implement these temporary changes. The situation is fast-paced and we will continue to engage with these partners as more changes are required in the coming weeks and months.

We are also working with local teams to encourage them to share any necessary service adaptations with patients and carers as quickly as possible and to offer support and guidance.

Additionally, the Trust’s communications team is working to share messages regularly on Southern Health’s website and across our various social media channels.

As soon as services can resume ‘business as usual’ we will swiftly communicate this to our patients, carers and partners.

**Any questions?**

If you have any questions, please contact Heather Mitchell (Southern Health’s Executive Director for Strategy, Infrastructure and Transformation) via email: [heather.mitchell@southernhealth.nhs.uk](mailto:heather.mitchell@southernhealth.nhs.uk).

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