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Agenda Item: 19

## **Integration Joint Board**

Date of Meeting: 28 November 2018.

Subject: Winter Plan 2018/19.

### **1. Summary**

1.1. NHS Orkney and the Orkney Integration Joint Board are required to produce a plan for the management of anticipated peaks in demand over the winter and the statutory holiday periods, falling over this time. In aiming to achieve continuity of services, the co-operation of all NHS Board staff, primary care contractors, social care partners, ambulance service, NHS 24 and the voluntary sector is essential, and these stakeholders have contributed to the development of this draft plan as part of the consultation process.

### **2. Purpose**

2.1. To present the Winter Plan 2018/19.

### **3. Recommendations**

**It is recommended:**

3.1. That the Winter Plan 2018/19, attached as Appendix 1 to this report, be approved.

### **4. Background**

4.1. The aim of the winter plan is to set out the arrangements for the delivery of primary and community care, out-of-hours and hospital services over the winter period to ensure that NHSO, Orkney's Health and Social Care Partnership, and their partners respond effectively to periods of high predicted or unpredicted activity, the extended public holiday periods and the possibility of high demand as a result of wide spread illness such as seasonal flu or epidemic viral illness.

### **5. Contribution to quality**

Please indicate which of the Council Plan 2018 to 2023 and 2020 vision/quality ambitions are supported in this report adding Yes or No to the relevant area(s):

<b>Promoting survival:</b> To support our communities.	Yes.
<b>Promoting sustainability:</b> To make sure economic, environmental and social factors are balanced.	Yes.
<b>Promoting equality:</b> To encourage services to provide equal opportunities for everyone.	Yes.
<b>Working together:</b> To overcome issues more effectively through partnership working.	Yes.
<b>Working with communities:</b> To involve community councils, community groups, voluntary groups and individuals in the process.	Yes.
<b>Working to provide better services:</b> To improve the planning and delivery of services.	Yes.
<b>Safe:</b> Avoiding injuries to patients from healthcare that is intended to help them.	Yes.
<b>Effective:</b> Providing services based on scientific knowledge.	Yes.
<b>Efficient:</b> Avoiding waste, including waste of equipment, supplies, ideas, and energy.	Yes.

## 6. Resource implications and identified source of funding

6.1. There are no financial implications directly arising from this report.

## 7. Risk and Equality assessment

7.1. There are no risks or equality implications directly arising from this report.

## 8. Direction Required

Please indicate if this report requires a direction to be passed to:

NHS Orkney.	No.
Orkney Islands Council.	No.
Both NHS Orkney and Orkney Islands Council.	No.

## 9. Escalation Required

Please indicate if this report requires escalation to:

NHS Orkney.	No.
Orkney Islands Council.	No.
Both NHS Orkney and Orkney Islands Council.	No.

## **10. Author**

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## **12. Supporting documents**

12.1. Appendix 1: Winter Plan 2018/19.



# Orkney's Winter Plan 2018/19

Version Control: FINAL – V5	Prepared by Christina Bichan, Head of Transformational Change & Improvement
Implementation Date	01/11/2018

Approval Record	Date
NHS Orkney Senior Management Team	08/10/2018
NHS Orkney Board	25/10/2018
Integrated Joint Board	TBC

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## **Introduction**

This winter plan builds on the plans of previous years and the interventions that have been successfully used to manage peaks in demand over the winter period and over the statutory holiday periods. In aiming to achieve continuity of services, we have sought the co-operation of all of our NHS Board staff, working within primary, including our independent primary care contractors, and community (as part of the Orkney Health & Care partnership arrangement) and hospital services. In addition social care partners, the ambulance service, NHS 24 and the voluntary sector have all contributed to this work. We acknowledge that it is essential that these stakeholders have contributed to the development of this Plan as part of the consultation process and ultimately the ownership of Orkney's Winter Plan.

## **Aim and Objectives**

### **Aim**

The aim of this Plan is to set out the arrangements for the delivery of primary and community care, out-of-hours and hospital services over the winter period and to ensure that NHS Orkney, Orkney Islands Council, SAS, NHS 24 and Our Third sector partners can respond effectively to periods of high predicted or unpredicted activity. The extended public holiday periods and the possibility of high demand as a result of wide spread illness such as seasonal flu or epidemic viral illness may also add a level of burden to our collective ability to deliver services.

### **Objectives**

The principle objectives of the plan are:

- to set out risks to business continuity and delivery of core services that NHS Orkney and Orkney Islands Council (social care) may face during the periods set out in the plan
- to give the roles, responsibilities and preparatory actions of the main participants in the plan
- to identify contingency processes
- to detail resources available
- to detail processes and procedures in relation to proactive communications

It is intended that this Plan can be developed to detail arrangements for other periods of extended public holiday, e.g. Easter.

### **Related Plans and Guidance**

The following plans set out detailed policies and procedures which relate to or are part of Orkney's response to winter pressures:

- NHS Orkney Local Unscheduled Care Action Plan 2015
- NHS Orkney Business Continuity Plans
- Adverse Weather Guidelines
- Orkney Health and Care (NHS Orkney and Orkney Islands Council partnership) Discharge Policy

- Orkney Islands Council Winter Service Plan 2015/16
- The Scottish Ambulance Service Generic Contingency Plan – Out of Hours Capacity Management September 2015
- NHS Orkney Pandemic Flu Plan 2016
- NHS Orkney Major Incident and Emergency Plan Version 1
- Orkney Islands Council Emergency Plan
- Orkney Islands Council – Winter Service Plan 2015-16 (reviewed 2016/17)
- NHS Orkney Communication & Engagement Strategy
- NHS Orkney Outbreak Control Plan
- Health Protection Scotland Outbreak Guidance 2015
- NHS Scotland Standards for Organisational Resilience 2016 Standard 18
- National Unscheduled Care Programme: Preparing for Winter 2015/16
- Exercise Silver Swan Overall Exercise Report April 2016
- NHSScotland Resilience Mass casualties Incident Plan for NHS Scotland

### **Consultation**

This Plan was prepared in consultation with NHS Board staff, working within primary, including our independent primary care contractors, and community (as part of the Orkney Health & Care partnership arrangement) and hospital services. In addition Orkney Island Council, the ambulance service, NHS 24 and the voluntary sector, notably Voluntary Action Orkney and Orkney Disability Forum have all contributed to this work.

### **Review of the Plan**

The plan will be reviewed through the NHS Orkney Resilience Group meetings and Senior Management Team and circulated to stakeholders within the Orkney Local Emergency Co-ordinating Group. In addition the plan will be reviewed against debriefs circulated by NHSScotland Health Resilience Unit and posted on Resilience Direct as well as debriefs on lessons learnt through the Highlands and Islands Local Resilience partnership and North of Scotland Regional Resilience Partnership.

### **Executive Summary of Key Actions**

- Forecasting enabled by the use of system watch for the first winter in Orkney
- Maintenance of robust medical and surgical rotas which ensure access to a senior decision maker
- Implementation of plans to significantly increase the rate of staff flu vaccination across health and social care
- Consider feasibility of point of care testing for flu diagnosis.

### **Utilisation of Winter allocation of £45,357**

£22,678.50 – Community services

£22,678.50 – Acute Services

The allocation will be utilised to support festive rotas and provide additionality required in community and acute services to ensure earlier in day discharge, improved weekend discharge rates and adequate rota cover.

## **SECTION 1. RESILIENCE PREPAREDNESS**

### **1.1 Business Continuity**

The NHS Board and Orkney Islands Council have Business Continuity Plans (BCPs) in place with clear links to the pandemic plan including provision for an escalation plan. In addition Primary Health Care contractors have individual plans. All of which are subject to review and lessons learnt are fed through the Orkney Local Emergency Co-ordinating Group (OLECG) as well as across internal service areas as appropriate. The NHSO Blog also contains information on Business Continuity for staff. New plans are now under development for the New Hospital and Healthcare Facility which opens in May 2019.

During the planning process critical areas of continued service delivery were identified along with common risks and mitigating factors. Time critical action cards were developed to assist staff with clear guidance. This includes action cards for the loss of staff and single points of failure. Due to its remote geographical location NHS Orkney is reliant on well established partnerships which include OLECG. There are also mutual Aid arrangements in place with neighbouring Boards.

The focus for the NHS Board with its partners is to sustain the delivery of core services during worst case scenario within the following areas: Macmillan Ward, Maternity Unit, High Dependency Unit, Emergency Department, Assessment and Rehabilitation Ward, Acute Ward, Theatre, Radiology, Laboratory and Renal Unit. Mutual Aid arrangements are fully documented within the updated version of the Major Incident and Emergency Plan and reflect current arrangements within Mass Casualties Incident Plan for NHS Scotland 2015. In addition as a Category 1 responder, NHSO has well developed relationships with a range of partners and sits on the OLECG. A number of managers have also undergone Integrated Emergency Management Training provided by the Scottish Resilience Development Service.

The winter plan will be circulated for consultation prior to full publication.

### **1.2 Adverse Weather Policies**

The Board has a severe weather policy which provides staff with advice and guidance – this includes guidance for staff unable to attend work, late arrivals, special leave, school closures, protracted weather events, working extra hours and arrangements for staff in local accommodation and can be found on the NHSO staff Blog. The staff blog and social media are used to communicate travel disruption together with direct contact with patients through the patient travel service. OLECG is convened during any period of adverse weather and can arrange access to 4x4 vehicles such as the coastguard. Staff messaging is considered in this forum based on advice and modelling from the Met office to ensure that there is a consistent multi-agency message that is clear for the public.

NHSO operates a Winter Maintenance Plan. All NHSO properties have salt bins provided and the NHS board co-ordinates with the Orkney Islands Council Roads and Environmental Services to maintain access. NHSO and Orkney Islands Council co-ordinate their response to severe weather conditions that may threaten essential lifeline services especially communication and transport links. In addition the Winter Service Plan drafted by Orkney Islands Council Development and Infrastructure outlines the priority gritting routes across Orkney paying particular attention to the school bus runs.



### **1.3 Staff and Public Communication**

Travel advice is provided by Police Scotland in consultation with the Orkney Local Emergency Co-ordinating Group and is communicated through the Police Scotland Communications Team. The NHSO Blog and web site will be used to distribute relevant information to both the public and staff in the event of weather disruption as well as social media such as Facebook and Twitter. The Communications Officer will act as the single point of contact for all required communications and may be assisted in this process by the Grampian Communications Team. Out with office hours, the Grampian Communications Team can be contacted through the Aberdeen Royal Infirmary Switchboard.

In addition local media resource can be utilised to promote nationally produced media information. The local newspaper and Radio Orkney (Monday to Friday morning and evening slots) are the main sources of local information for many residents and should be used to raise awareness about winter well-being and specific information in response to events. This will include surgery, pharmacy and dental practices opening times.

Social media will also be utilised to support timely dissemination of information in line with NHSOs Communication & Engagement Strategy. Using the example of NHS Grampians social media communications which gave information on activity levels and wait times during the winter period a similar approach will be utilised in Orkney this winter.

### **1.4 Mass Fatality Arrangements**

Orkney Islands Council is currently developing the excess deaths plan and has purchased a Nutwell's unit so that mortuary capacity can be increased. Arrangements are also in place for additional body storage at the new undertaker's facility and at Selbro in Kirkwall using refrigeration units.

### **1.5 Testing the Plan**

Multi-agency winter planning meeting is scheduled to take place at OLECG in November 2018. Internally the winter planning group will consider testing the effectiveness of the Boards Plan along with Public Health testing the Flu Plan as part of a development session to consider the recommendations following Exercise Odette.

## SECTION 2. UNSCHEDULED/ELECTIVE CARE PREPAREDNESS

### 2.1 Hospital Overview

The Balfour Hospital inpatient capacity is:

Ward	Capacity (beds)
Acute Ward	23
Assessment & Rehabilitation	14
High Dependency Unit	2 (1 pop up)
Mental Health Transfer Bed	1
Macmillan	4
Maternity	4

This gives a total of 48 beds of which 5 are ring-fenced (4 for Maternity and 1 for mental health transfers).

The average number of admissions each month to the Balfour Hospital is 350 with episode data by year being provided in Figure 1 below. Additionally, a summary of consultant led outpatient activity at the Balfour Hospital is provided in Table 1. As well as variation from year to year, we experience variation from month to month as a result of the variable schedule of visiting services delivered in Orkney by staff from other Boards. The frequency of visiting service clinics is dependent upon demand as well as historical agreements and can range from monthly provision to 6 monthly provision dependent on speciality.

Figure 1. Discharges from Balfour Hospital, 2008/9- 2017/18  
(Source: ISD - , extracted July 2018)

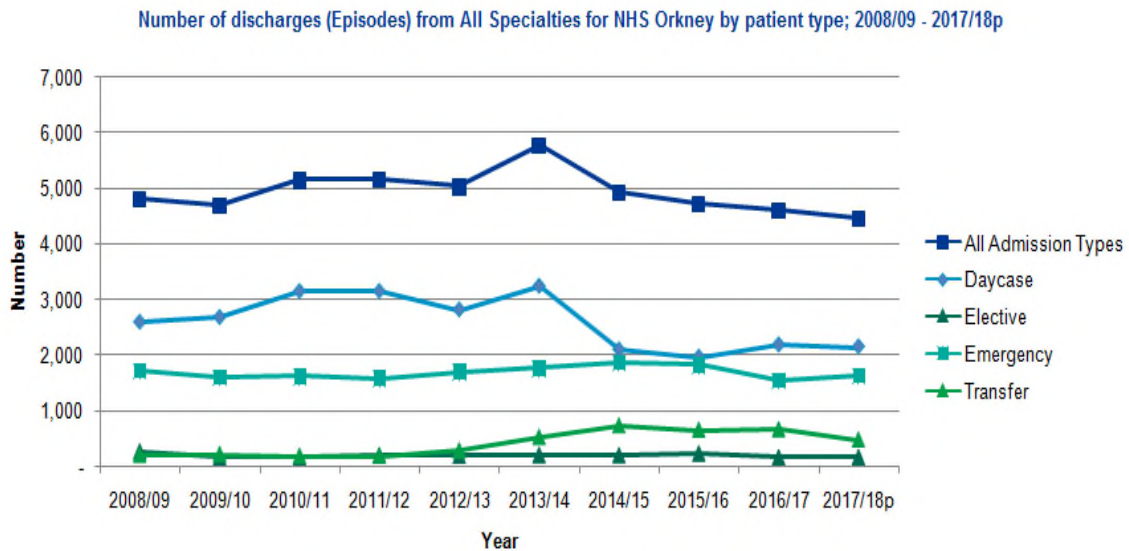


Table 1. Consultant Led Outpatient Activity, Balfour Hospital 2013/14 – 2017/18 (Source: ISD)

Year	New	Return	Grand Total
2013/14	4094	7610	11704
2014/15	4082	7897	12069
2015/16	3993	7796	11789
2016/17	4111	7239	11350
2017/18	3858	7117	10975

Figure 2 provides an overview of Emergency Department attendances over the period April 2016 to September 2018. NHS Orkney continues to achieve the LDP standard of 95% and seeks to obtain the 98% stretch aim in regards to the 4 hour target. Just over 6,000 ED attendances are expected annually and breaches of the 4 hour target are largely due to timely access to a senior decision maker (particularly in the OOH period when medical cover is more limited) and waits for CT reporting or lab results. Figure 3 provides an overview of compliance with the 4 hour target over the period January 2014-July 2018. As can be seen variation in performance has increased since January 2017 when a ward resulted in the removal of temporary beds from within the Accident and Emergency Department. This has replicated provision in the new Balfour – Orkney’s new hospital and healthcare facility which will open in May 2019 – and operational activities to support patient flow improvements at the front door are being actively pursued at present. This will support the delivery of the 4 hour target throughout the winter period as will an increased focus on before 12noon discharge to bring the admission and discharge curves into better alignment.

Figure 2: ED Attendances – Balfour Hospital, April 2016 – September 2018

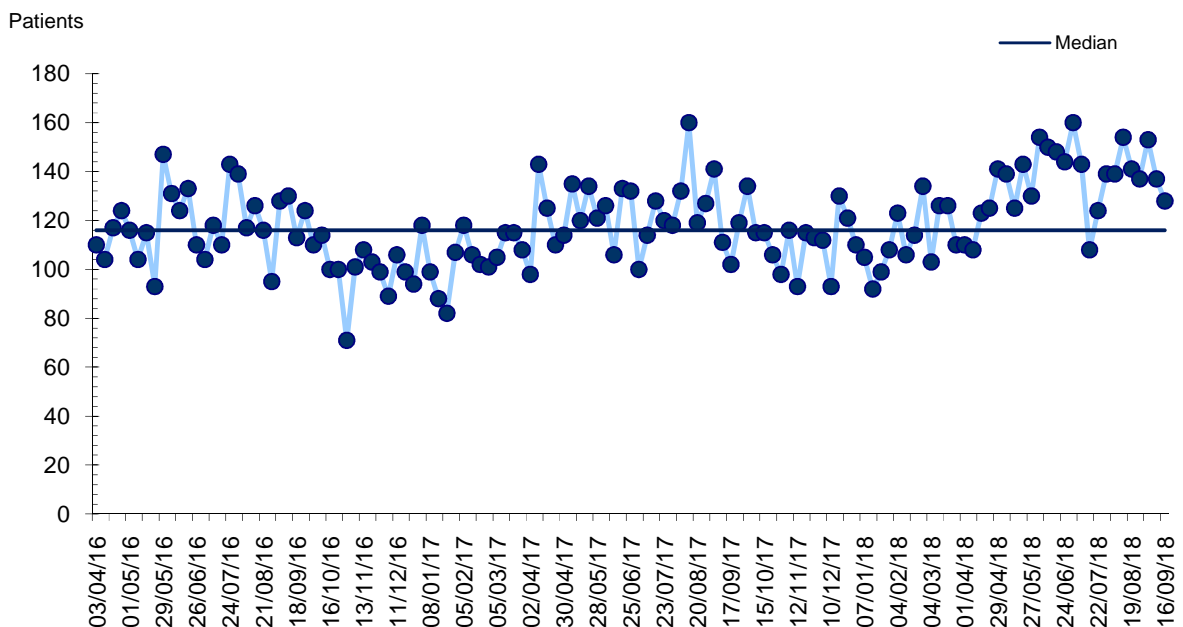
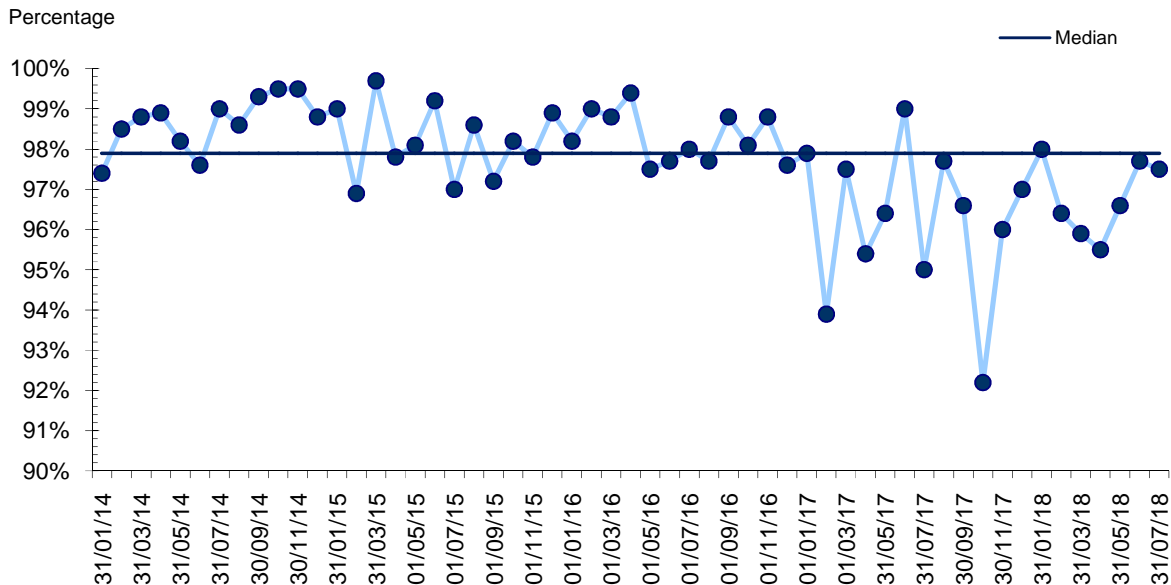


Figure 3: Performance against the ED 4 Hour Target – Balfour Hospital, January 2014 – July 2018



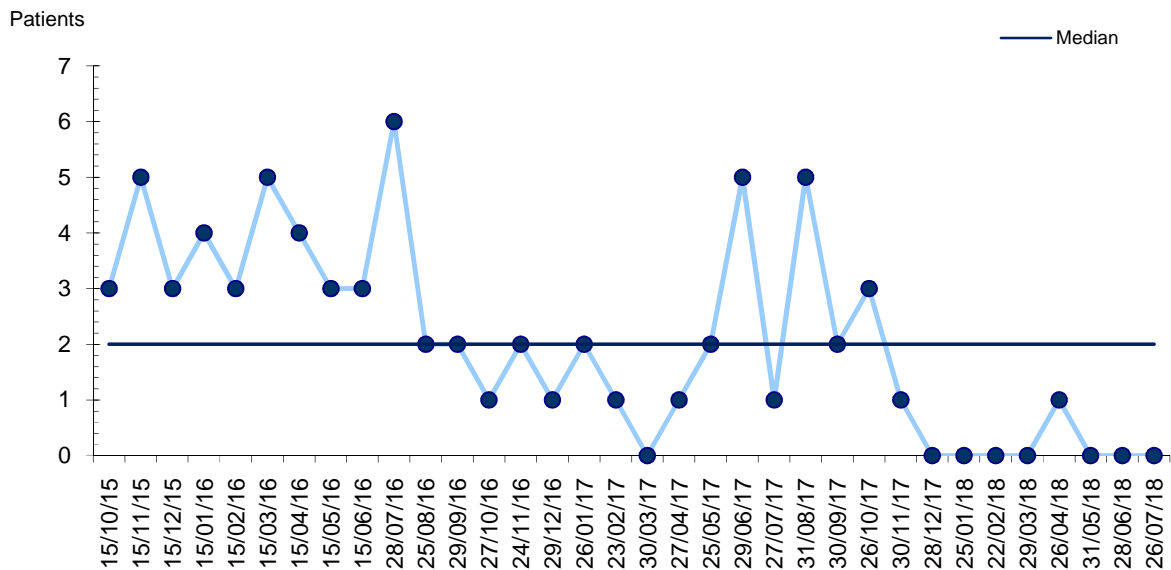
Unscheduled care services in Balfour Hospital are managed through a collaborative approach. NHS Orkney’s Medical Director is the designated clinical lead for Unscheduled Care and works alongside the Board’s Unscheduled Care Lead (Head of Transformational Change & Improvement), Head of Hospital and Support Services and Director of Nursing, Midwifery and Allied Health Professionals as well as the Chief Officer of the Orkney Integrated Joint Board to ensure management processes are in place to maintain an overview of all emergency and elective activity and to support patient flow across the whole health and care system in Orkney. There is no dedicated Unscheduled Care Board to support this purpose however this function is absorbed into the Senior Management Team which meets regularly, includes all of the staff members referred to above and routinely considers performance and improvement metrics. To date NHS Orkney has not utilised System Watch for predicting demand and informing service planning however data is now being submitted with plans in place to fully utilise this resource for operational planning purposes.

Within the Balfour Hospital, daily huddles and multi-disciplinary team meetings are used to support effective communication and the identification of emerging issues. An Escalation Policy is in place to support effective communication between wards and departments and enable issues to be responded to timeously as they emerge. This process is supported operationally by the role of Clinical Flow Co-ordinator which aims to maintain an overview of inpatient capacity including liaison between off island facilities and community services to ensure timely access to care and support to facilitate discharge. The Hospital Operational Management Team meets regularly to maintain an overview of operational issues affecting performance and to ensure the appropriate actions are taken. This group is chaired by the Head of Hospital and Support Services. All breaches of 8 hours or above are recorded on the Datix incident reporting system and are subject to investigation to identify opportunities for learning to be shared and improvements to be made.

## 2.2 Managing discharges and transfers from mainland hospitals

Patients whose discharge has been delayed for non medical reasons are relatively few in number as a result of proactive communication and management processes between operational teams. Figure 4 below provides an overview of delayed discharges over the period October 2015 – July 2018.

Figure 4: Patients whose discharge has been delayed for non medical reasons, Balfour Hospital, October 15 – July 18.



A locally agreed Discharge Policy is in place which focuses on commencing planning for discharge at the point of admission. This policy was recently reviewed by members of the Patient Flow Group (an operational group whose purpose is to identify opportunities for cross system working and to take forward improvement activities in relation to patient flow across the health care system) in consultation with the clinical advisory committees and the refreshed policy is now being widely communicated as part of its implementation. An audit on compliance with the policy is regularly undertaken and used to inform continuous improvements in this regard. All incidents relating to ineffective discharges are reported in the Datix system and investigated to identify opportunities for learning and improvement, with lessons learnt being shared through the Patient Flow Group and onwards to Quality and Safety Group as appropriate as well as through operational dissemination to teams by team leads.

Health and Social Care Services are anticipating a higher level of transfers and discharges from acute mainland hospitals (Aberdeen Royal Infirmary - ARI in particular) as these providers prepare for the festive period and discharge patients back home. Our clinical flow coordination role and Orkney/Shetland Liaison Nurse in NHSO and NHS Grampian will liaise about the reduction in elective admissions, the increase in discharges (if clinically appropriate) with appropriate plans in place, and transport arrangements.

If patients from ARI or the Balfour Hospital are to be discharged home, plans are in place to ensure that Community Nursing, Homecare, Community Mobile Responder Service, Intermediate Care Team, AHP services, Assessment and Rehabilitation Team and General Practice are involved in the discharge process and arrangements for a seamless transfer are as robust as possible.

Transport to the outer islands of Orkney is disrupted over the festive period and therefore there can be unavoidable delays for some patients. This is however taken into account as part of the discharge planning process and where possible alternative arrangements are made.

### **Planned actions to avoid unnecessary admissions**

- Regular day of care auditing to be maintained to ensure oversight of appropriateness of admission
- Maintenance of access to senior decision maker and to consultant of the week (surgical and medical) to provide access to advice pre admission for Primary Care

NHS Orkney is committed to establishing improvement trajectories for weekend and earlier in the day discharge as it is recognised that current performance is below the expected standard. This will be actively taken forward as part of our improvement activity linked to the 6 Essential Actions for Unscheduled Care with clinical oversight from the Medical and Nursing Directors.

Our festive arrangements for elective surgical provision have been planned to take account of staff availability given our limited on island capacity and the need for a resilient emergency surgical response. In the run up to the festive period and in the immediate days after prioritisation of elective theatre time for those specialities with the greatest waiting times pressures will be ensured to mitigate and adverse impact to standard compliance.

## **SECTION 3. OUT OF HOURS PREPAREDNESS**

### **3.1 Festive Arrangements**

Elective surgery will continue up to 21 December with urgent surgical provision via an on-call rota through 22, 23, 24, 25 and 26 December 2018. Thereafter there will be a return to normality from the 27 to 28 December 2018. Similarly there will be restricted surgical provision from 31 December 2018 to 2 January 2019 again via the on-call process with a resumption of normal services on 3 January 2019. This process is designed to deliver a relatively uninterrupted service reducing the risk of post-festive patient surge.

There is limited capacity to increase staffing numbers to cope with potential upsurge in patient numbers immediately beyond the festive period. Patient discharge through the daily safety huddle as well as the use of a limited pass system to allow some patients back to family environments also assists in this process.

Account has also been taken of Christmas revelries in the main town including what is known locally as 'Mad Friday'. Staffing levels will be slightly raised in anticipation in a spike in demand for services.

The Ba will be on 25 December and 1 January and the Surgical Team will be available if required. Preparations are underway to ensure that all Out of Hours GP shifts are covered from the period 24 December 2018 to 2 January 2019.

Service winter planning updates will also be provided through the OLECG meeting process in the autumn so that agencies can update their respective partners with regard to their winter preparedness.

### **3.2 Primary Care Out of Hours Services**

The Head of Primary Care Services will as part of her discussions with NHS Primary Care Contractors discuss and reinforce the contractual requirements for provision of care on key dates such as 24 December, 27, 28 and 31 December and 3 January. Confirmation has been received from some of the independent contractors indicating their willingness to support the NHS Board and alleviate any pressures on the OOH service at these critical times.

Patients will be advised to ensure supplies of repeat medications are ordered sufficiently for the holiday period, with Practices taking responsibility to promote this locally and NHS Scotland undertaking the national campaign with this advice as part of the message.

NHSO will provide the usual Out of Hours service on 25 and 26 December and 1 and 2 January inclusive although it should be noted that at this stage the OOH rota has not yet been fully confirmed. There will be a first and second on call for this period. NHSO has a standing arrangement with NHS24 that any Orkney calls that wait longer than 40 minutes will be passed onto the first on call GP who will make the decision to either deal with the case themselves or pass it on to the second on call. The Isles' GPs and Nurse Practitioners will provide an on call service over the festive period.

GP Practices will be encouraged to keep the days after re-opening after Christmas and New Year strictly for urgent, on the day appointments, to cope with patient demand after practices have been closed for the festive period.

Practices will be encouraged to ensure that all patients with high risk of admission over this period have EKIS (Electronic Key Information Summary) special notes in place to help OOH team and prevent unnecessary admissions EKIS will allow clinicians access to relevant data when the practice is unavailable. Anticipatory Care Plan's (ACPs) will be completed for people with significant COPD and Palliative Care plans for those with end stage disease.

All independent practices have opted out of providing out of hours care. NHS Orkney has invested in and provides an out of hours service which uses NHS24 (via Highland Hub based in Inverness) for nurse triage.

### 3.3 Pharmacy Cover

Community Pharmacy provision over the festive period is well tested and activity levels monitored each year. The community pharmacy rota has been drawn up to take this into account and will be well publicised. A and E and the out of hours doctor service have good access to an extensive range of essential medicines. The stock levels over the festive period will be checked accordingly. There is extensive access to emergency medicines in the hospital during the out of hours period.

Community Pharmacies opening Hours for 25<sup>th</sup> & 26<sup>th</sup> of Dec 2018 and 1<sup>st</sup> & 2<sup>nd</sup> Jan 2019 are:

#### NHS ORKNEY FESTIVE & NEW YEAR 2017/2018 OPENING TIMES (Community Pharmacies)

Name of Pharmacy	Address	Sun 23 <sup>rd</sup> Dec 2018	Mon 24 <sup>th</sup> Dec 2018	Tues 25 <sup>th</sup> Dec 2018	Wed 26 <sup>th</sup> Dec 2018	Thurs 27 <sup>th</sup> Dec 2018	Fri 28 <sup>th</sup> Dec 2018	Sat 29 <sup>th</sup> Dec 2018	Sun 30 <sup>th</sup> Dec 2018	Mon 31 <sup>st</sup> Dec 2018	Tues 1 <sup>st</sup> Jan 2019	Wed 2 <sup>nd</sup> Jan 2019	Thurs 3 <sup>rd</sup> Jan 2019
<b>Dounby Pharmacy</b>	Vetquoy Rd Dounby	Closed	09:00 to 17:00	Closed	Closed	09:00 to 17:00	09:00 to 17:00	10:00 to 13:00	Closed	09:00 to 17:00	Closed	Closed	09:00 to 17:00
<b>WHB Sutherland Ltd</b>	74 Victoria Street Stromness	Closed	09:00 to 17:30	Closed	Closed	09:00 to 17:30	09:00 to 17:30	09:00 to 17:30	Closed	09:00 to 17:30	Closed	Closed	09:00 to 17:30
<b>WHB Sutherland Ltd</b>	43 Victoria Street Kirkwall	Closed	09:00 to 17:30	Closed	TBC*	09:00 to 17:30	09:00 to 17:30	09:00 to 17:30	Closed	09:00 to 17:30	Closed	TBC*	09:00 to 17:30
<b>Boots Ltd</b>	51 Albert Street Kirkwall	12:30 to 16:30	09:00 to 17:30	Closed	TBC*	09:00 to 17:30	09:00 to 17:30	09:00 to 17:30	Closed	09:00 to 17:30	Closed	TBC*	09:00 to 17:30

\*One of the Kirkwall pharmacies will be open for a fixed time on the 26<sup>th</sup> of December 2018 and 2<sup>nd</sup> of January 2019 to process prescriptions issued by OOHs GPs

These arrangements will be circulated to ensure NHS 24 & the OOHs GPs are fully sighted on opening hours in order to access patient medication during this restricted period.

There is no formal on-call provision for pharmacy staff within the Balfour Hospital, however service provision for out of hours medical information and guidance can be accessed through NHS Grampian OOH service which operates on a 24/7 basis and can be contacted via the Balfour Switchboard service who hold the contact details. Medicines can be obtained following the OOH access to medicines procedure: electronic copy available on Blog>Pharmacy & Prescribing>OOH

The Balfour Pharmacy Department is an integral part of the discharge process as outlined in our local Health and Care Discharge Policy. Pharmacy staff attend daily dynamic discharge meetings to facilitate the allocation of appropriate staff resource to support timely processing of discharges. Staff will work late or attend early to support additional work load associated with winter pressures or festive bank holidays. Pharmacy will receive discharge prescriptions or



electronic notification of discharge at least two hours in advance of discharge from acute wards and 24 hours before discharge from other areas. The aim is to assist in making the discharge of patients as joined up and seamless as possible.

### **3.4 Dental Cover**

NHS Orkney Dental Clinics are shut on the 4 Public Holidays over the Christmas and New Year period with NHS 24 taking over the emergency OOHs cover. Between Christmas and New Year one NHS Orkney clinic, at least, will be open with spaces left for 'day time toothaches'. Callers will be signposted to their own dentist in the first instance. However if they are not registered will be directed to one of the Independent Dental NHS Practices who will have their own arrangements over this period. Following this contact if patients are still unable to access emergency appointments will be accessed by calling King Street Dental Clinic on 01856 875348. A minimum of 2 NHS Orkney dentists will be working between Christmas and New Year to ensure cover should one of them become ill.

### **3.5 The Scottish Ambulance Service**

The Scottish Ambulance Service (SAS) are responsible for patient transport including transfer from the outer isles to hospitals on the Scottish Mainland and will decide on the most appropriate form of transport based on patient priority. The SAS air desk co-ordinates with a range of agencies such as the coastguard and if necessary the military in order to source available air assets. In severe weather when flying is beyond safe limits, the OIC Harbours Department can be contacted re the use of the inter isles ferries. Similarly in extreme cases Shetland Coastguard has lifeboat assets based Kirkwall, Stromness and Hoy which may be available to transport patients from the outer islands.

### **3.6 Community Health and Social Care Services**

Adult, Children's and Criminal Justice Social Work services will commence the festive season out of hours period at 4.00pm on 24 December 2018, and reopen for business at 9.00am on 3 January 2019. Emergency out of Hours social work services can be contacted through Balfour Hospital on 888000 for the duration of the holiday period.

On 27, 28 and to 31 December a duty worker for social work and social care services will be contactable on 01856 886470 between 9am and 1.30pm each day: the ASW duty worker will liaise with care home and hospital colleagues and allocate any available vacancies. Referrals to the Telecare service will be checked for urgent new requirements once per day on 27, 28 and 31 December also. The Responder and Homecare services will operate as normal, throughout the festive period. The Selbro Community Equipment Store will be staffed from 9.00am till 1.30pm on 27, 28 and 31 December 2018 for urgent referrals. There is a small supply stock of essential equipment items held in the Selbro porch that are accessible to Community nursing staff and a small amount of pressure relieving equipment is held in all GP Practices. For all Home Care enquiries please contact 01856 888390. Working arrangements will return to normality on 3 January 2019.

Mainland community nursing services will continue to provide 24 hr cover however there will be reduced staff on the public holidays. The level of staffing required will be reviewed by the Clinical team Lead who will arrange cover to cope with the forecast demand, this will be between 4 and 6 staff over the two teams. Weekend arrangements are unchanged as are Isles community nursing arrangements over the festive period.

## **SECTION 4. PREPARE & IMPLEMENT NOROVIRUS OUTBREAK CONTROL MEASURES**

### **4.1 Infection Prevention and Control Team Preparedness**

The Infection Prevention and Control Team (IPCT) have embedded the Health Protection Scotland Guidance 2015 in their everyday work practices and have promoted this within the organisation as the model for good practice through the NHS BLOG. IPCT can access information leaflets for staff, carers and the wider public. The Health Protection Scotland website [www.hps.scot.nhs.uk](http://www.hps.scot.nhs.uk) is a good source for additional information.

Training sessions are also provided for staff as part of the induction process. This includes an input from IPCT around infection control and personal responsibilities about the need to be absent from work for a clear 48 hour period following the last symptom of diarrhoea and vomiting.

### **4.2 Engagement with other Services**

Residential and supported accommodation services are well versed in how to deal with infection control outbreaks, however to embed this further Infection Control Service NHSO IPCT are developing a timetable of engagement with residential care homes and supported accommodation in order to further raise information awareness with staff members around norovirus, flu, urinary tract infections as well as effective decontamination products and processes. In addition advice and signposting will be given re the flu vaccine. This is designed to proactively reduce the level of hospital admissions through basic control and information sharing measures.

### **4.3 Norovirus Information**

IPCT have monitoring processes in place recording patient's infection status as well as signage for staff and relatives to raise awareness around infection control measures. In addition the IPCT are part of the morning safety huddle to assist with advice and guidance and patient placement so that stakeholders are fully sighted on the current infection status. This includes information on environmental decontamination processes post discharge.

### **4.4 Outbreak Control Meetings & Reporting**

The Public Health Department will be monitoring all areas affected by norovirus both in the community and hospital. The number of cases and number of departments closed within the hospital are captured and notified in collaboration with the IPCT to Health Protection Scotland (HPS). In the event of an outbreak meetings will take place daily and more frequently if the circumstances dictate. On a weekly basis Public Health will provide a routine statistical return for HPS on normal business. As well as notifying the Senior Management Team, liaison will also take place with OIC and other bodies or agencies as soon as the local trigger factors indicate such to a response is appropriate.

### **4.5 IPCT Festive arrangements**

Whilst there are no formal on-call arrangements for IPCT over the festive period, Public Health provide advice and guidance through the 24/7 on-call system. The Public Health on call is currently provided through a tripartite agreement between the three island boards. Clinicians have access to the on-call microbiologist in NHS Grampian for specific infection and guidance on antimicrobial prescribing.

## **SECTION 5. SEASONAL FLU, STAFF PROTECTION & OUTBREAK RESOURCING**

### **5.1 Staff Vaccination Scheme**

The Scottish Government Health Department Circular SGHD/CMO (2015)12 advises that free seasonal flu immunisation should be offered by NHS organisations to all employees directly involved in delivering care. Social care providers should also consider vaccinating staff.

The Occupational Health Department work collaboratively with the Public Health Department and are actively involved in promoting and delivering the seasonal flu vaccine to key healthcare workers. NHSO is committed to ensuring staff are offered and encouraged to take up the seasonal flu vaccine, and making the flu vaccine as accessible as possible. This is done by making drop-in clinics available in the work place and early morning clinics are arranged to make sure staff can attend prior to the start of a shift or at the end of a night-shift. As well as the drop-in clinics within the hospital, staff can also drop-in or make an appointment at the Occupational Health Department. A range of engagement techniques will be utilised including email, posters, offering appointments, drop in sessions and notice of flu season entered into individual pay slips. Established dates for daily immunisation clinics will also be widely circulated on staff information platforms. The flu programme will run from 1 October 2018 to 31 March 2019.

### **5.2 Predicted surge of flu activity**

Throughout the UK, the target for immunising those aged 65 and over against seasonal influenza is 75%, the uptake target for the under 65 at-risk group is 75%. The seasonal flu vaccine uptake in 2016/17 in Orkney for people 65 and over was 75.3% (as at end March 2017) and was 74.3% nationally. NHS Orkney will develop the programme and further publicise the benefits of immunisation through the local media. We aim to be above the Scotland average in 2017/18. Orkney Disability Forum will be informed of the dates of flu clinics so that they can arrange for extra buses to help increase uptake of the flu vaccine at GP practices.

The child flu immunisation programme is for all children aged 2-5 and those in P1-7 will be offered a nasal flu vaccine unless contra-indicated. In 2018/19 pre-school children will be offered immunisation through primary care and a school based programme will be arranged via Public Health for older children. At risk children of all ages are eligible for immunisation and will be included in programme delivery through Primary Care. Any primary school child who misses their school session will have their absent notification & consent form forwarded to the respective primary care practice. GPs will then send out invitations to parents/guardians to arrange appointments. Health Protection Scotland provides weekly updates to Occupational Health and the HR Services showing the current uptake of vaccine within the different healthcare disciplines.

### **5.3 Staff Absence**

There has been a continued decline in the uptake of the flu vaccine amongst frontline staff and admin staff effectively increasing the risks to staff and patients health and service delivery.

2014/15 Frontline staff 37.5%	Admin staff 42.2%
2015/16 Frontline staff 49.3%	Admin staff 44.7%
2016/17 Frontline staff 32%	Admin staff 56.9%
2017/18 Frontline staff 32.3%	Admin staff 40.5%

NHS Orkney and Orkney Island Council Community Social Services staff are encouraged to have immunisation against seasonal flu. Under the auspices of the Occupational Health and Safety Committee the Public Health and Occupational Health Departments (Occupational Health Services are provided by NHS Grampian as part of a service level agreement) are working together to promote and deliver a staff vaccination programme with the aim of increasing the number of staff vaccinated. The Human Resources Department monitor absence rates closely and have established policies to promote attendance at work.

Innovative approaches to increasing uptake and encouraging staff to be vaccinated will be utilised supported by role modelling by the Executive and Senior Management Team

FINAL

## **SECTION 6. RESPIRATORY CARE**

- 6.1** The care of patients affected by respiratory disorders is supported by off island secondary care provision in NHS Grampian via the Respiratory Medicine Unit. Referrals to this unit should be made via SCI Gateway. There is no local lead for Respiratory Medicine however clinicians are familiar with the local pathway for patients with different levels of severity of exacerbation and GPs can access advice from the hospital based Consultant of the week to aid decision via Switchboard on tel: 888000.
- 6.2** There is a Grampian based Respiratory Managed Clinical Network which has an active Facebook page providing regular updates and information. This can be accessed at <https://www.facebook.com/respiratorygramplan/>
- 6.3** Information about keeping warm and well in winter is available on the OIC and NHS Orkney website and given opportunistically by primary care and social care staff. NHS 24 leaflets with a one point of contact number and when to contact NHS24 are to be widely distributed via healthcare professionals over the coming months. A multi-agency action plan is in place to reduce fuel poverty. Currently up to 30% of families in Orkney are living in fuel poverty. Many at risk properties have been assessed for energy efficiency and insulation. Advice on grants to insulate houses and installation of energy efficient heating systems is available locally.

## SECTION 7. MANAGEMENT INFORMATION

- 7.1 Effective NHS Orkney reporting lines are in place to provide the Scottish Government with routine weekly management information and any additional information that might be required on an exception/daily basis. Information will be obtained from the Trakcare system following real time data entry in regards to admissions, transfers and discharges.

Effective reporting lines are also in place to provide the SG Directorate for Health Workforce & Performance with immediate notification of service pressures that will disrupt services to patients as soon as they arise.

### Balfour Hospital Overview – Festive Period

Date	Action
21 December 2018	Last elective list, extra surgical clinics for urgent cases will be scheduled as required.
22 December 2018 to 26 December 2018 and 31 December – 2 January 2019	Surgical Teams emergency cover only.
24 December 2018 to 3 January 2019	Out of Hours Duty Social Worker accessed via Balfour Hospital switchboard.
25 & 26 December 2018 and 1 & 2 January 2019	CDU will be closed. There will be one staff member available if required to process items if required.
31 December 2018	Day surgery trolleys available for Emergency Department if needed.
3 January 2019	Elective and emergency surgery resumes.
24 December 2018 to 3 January 2019	Bed management (huddle) meetings to be held daily and bed status checked/circulated three times daily.

### 7.2 Management of minor disruption/incident

There are occasions where incidents are anticipated to be relatively short lived and may not after consideration from the NHS Orkney Chief Executive/Medical Director/ Senior Manager on Call require the setting up of an Incident Management Team (IMT) in the Saltire Room of the Balfour Hospital. However it is good practice to establish a co-ordinating group from a core number of individuals whose service delivery may be affected by a disruption/incident.

Representation on this group will be on a case by case basis and will be located either within the Saltire Room, the Scapa Room or the Cubbie Room depending on which is available and least disruptive to normal business. Clear recording processes are essential and the group will ensure that Sit-Rep forms are circulated on an hourly basis initially to the Chief Executive, Medical Director, Director of Public Health and Senior Manager on Call so that Senior Management are fully sighted on any ongoing incidents relating to the Winter Plan and can thus make the decision to escalate to a meeting of the full IMT if required.

In addition the sub-group will follow a fixed agenda and be formally minuted. The group will compliment the IMT by gathering information and resolving lower level incidents. It should be noted that the IMT core and processes are documented within the NHSO Major Incident and Emergency Plan.

### 7.3 Risk Assessment

	Risk	Action	Lead and Timescale
1. Potential for patients to not know who to turn to in order to access services, particularly during the festive period.	<ol style="list-style-type: none"> <li>1. Emergency Department unable to manage increase in demand.</li> <li>2. Switchboard becomes overwhelmed in festive periods</li> </ol>	<ol style="list-style-type: none"> <li>1. External communications to increase awareness of services available and contact methods.</li> <li>2. Extra staff on standby to provide additional capacity and support if required.</li> </ol>	<ul style="list-style-type: none"> <li>- Head of Transformational Change &amp; Improvement</li> <li>- Head of Primary Care</li> <li>- Communications support via NHS Grampian</li> </ul> <p>Arrangements to be in place by end of October</p>
2. Balfour Hospital must be able to respond adequately to surges in demand.	<ol style="list-style-type: none"> <li>1. Secondary care services are not able to provide timely access to care potentially resulting in increased pressure on off island transfers and facilities.</li> </ol>	<ol style="list-style-type: none"> <li>1. Workforce planning to staff reconfigured areas to take into account winter preparedness and the timing of ward changes in maintaining surge capacity.</li> <li>2. Oversight and operational management to be provided by the HoHSS in liaison with clinical directors.</li> <li>3. Daily management of capacity via morning Huddles.</li> <li>4. Draft Surge Capacity Plan</li> </ol>	<p>Head of Hospital &amp; Support Services (HoHSS) Clinical Flow Co-ordinator</p>
3. Orkney Out of Hours Service covers a large geographical area of mainland and linked islands including both urban and rural areas.	<ol style="list-style-type: none"> <li>1. South Ronaldsay and Burray (linked isles) may become cut off from road transport in severe weather, which would result in the shutting of the barriers.</li> <li>2. Weather may cause difficulties for non-linked small isles air and boat transport. These isles are not covered by the OOH service, but have a 24hr service from a local, GP or Nurse Practitioner.</li> </ol>	<ol style="list-style-type: none"> <li>1. Additional cover from 2<sup>nd</sup> Out of Hours GP. In hours cover provided by GP practice on call arrangements via Switchboard.</li> <li>2. Arrangements have been made that if bad weather shuts the barrier, the practice in St Margaret's Hope will cover this area (SLA in place).</li> </ol>	<p>Head of Primary Care</p>
4. Epidemic of viral illness.	<ol style="list-style-type: none"> <li>1. System becomes overwhelmed by need to respond to epidemic.</li> <li>2. Large number of staff affected by viral illness.</li> <li>3. Staff remain at home to look</li> </ol>	<ol style="list-style-type: none"> <li>1. Activate Outbreak Plan (or Pandemic Flu Plan if appropriate).</li> <li>2. Ensure that arrangements are in place to make the flu vaccine as available as</li> </ol>	<p>Public Health Department</p>

	Risk	Action	Lead and Timescale
	<p>after family members.</p> <p>4. All available bed space occupied.</p> <p>5. Low uptake of Flu vaccine amongst staff.</p>	<p>possible to staff.</p>	
<p>5. Pharmacy closed over festive period.</p>	<p>1. Unable to access required drugs in a timely manner.</p>	<p>1. Stock levels in wards &amp; departments are increased, where appropriate, in anticipation of extra winter demand.</p> <p>2. Emergency drugs cupboard accessible to all clinical areas and OOH GP services.</p> <p>3. Normal OOH procedures and access to medicines will be available for Balfour Hospital Staff.</p> <p>4. The Pharmacy department will be open on Bank holidays.</p> <p>5. Community Pharmacies will be open as normal on 24 Dec 2017 and a Kirkwall Community Pharmacy will be open for a pre defined and advertised period to dispense prescriptions as per section 3.3 above.</p> <p>6. Specialist Medicines Information and emergency supplies can be arranged via the on-call service NHSG as part of the SLA.</p> <p>7. NHS Orkney Pharmacists and Community Pharmacist's can be contacted through switchboard if required.</p>	<p>Head of Pharmacy</p>



	<b>Risk</b>	<b>Action</b>	<b>Lead and Timescale</b>
<b>6.</b> Severe weather threatens business continuity.	1. Risk to organisations ability to deliver services due to effects of severe weather.	<ol style="list-style-type: none"> <li>1. Severe weather guidelines in HR policies implemented.</li> <li>2. CEO or On Call Senior Manager to assess if should be treated as major incident and emergency plan brought into play.</li> </ol>	On Call Senior Manager
<b>7.</b> Managing Patient Flow.	1. Patients are delayed in hospital due to failures in systems, processes or the availability of support services.	<ol style="list-style-type: none"> <li>1. Multi agency Discharge Policy in place.</li> <li>2. Guesthouse available through Red Cross to support patients with no clinical requirement for admission (e.g. those attending for surgery from outer isles) or those who are medically fit for discharge.</li> <li>3. Arrangement with local hotelier also being explored to provide capacity out with hospital to deal with discharge challenges associated with travel disruption.</li> <li>4. Daily Huddles to oversee bed management, supported by daily and weekly MDT meetings to support discharge planning.</li> <li>5. Multi agency working to support discharge through local arrangements such as ARC and MDT meetings.</li> </ol>	Head of Hospital & Support Services and Chief Officer, Integrated Joint Board
<b>9.</b> Communications.	1. Limited communications on more remote locations Islands	1. Raised through Orkney Local Emergency Co-ordinating Group (OLECG). Some resilience provided via other attending agencies Police, Scottish Fire and rescue Service/Coastguard airwave access.	Head of eHealth and IT/Resilience Officer

	Risk	Action	Lead and Timescale
		2. Risk managed as part of Corporate Risk Register.	
10. Vulnerable groups.	<ol style="list-style-type: none"> <li>1. Very cold weather and significant snow may isolate residential care homes, people with physical or mental health problems and cause difficulties in accessing food and medicine deliveries.</li> <li>2. May also results in issues surrounding staff rotation and attendance.</li> </ol>	<ol style="list-style-type: none"> <li>1. OIC Winter Services Plan details response.</li> <li>2. IJB are in position to identify vulnerable service users who would benefit from home visit/health visitor/neighbour/relative.</li> <li>3. Care for People Plan via OIC implemented</li> <li>4. OLECG group stood up.</li> </ol>	OIC Development & Infrastructure/OLECG
11. The Ba.	<ol style="list-style-type: none"> <li>1. Significant number of people injured.</li> </ol>	<ol style="list-style-type: none"> <li>1. Balfour Hospital open and able to provide service/treatment.</li> <li>2. In the event of significant number of people injured consideration will be given Major Incident &amp; Emergency Plan into play.</li> </ol>	Head of Hospital & Support Services/On Call Senior Manager