

# NHS Shetland

<b>Meeting:</b>	<b>Shetland NHS Board</b>
<b>Meeting date:</b>	<b>12 December 2023</b>
<b>Agenda reference:</b>	<b>Board Paper 2023/24/50</b>
<b>Title:</b>	<b>Winter Plan for Ensuring Service Sustainability including the Festive Period 2023-24</b>
<b>Responsible Executive/Non-Executive:</b>	<b>Kathleen Carolan, Director of Nursing &amp; Acute Services; Jo Robinson, Acting Director of Community Health &amp; Social Care</b>
<b>Report Author:</b>	<b>Prof Kathleen Carolan, Director of Nursing &amp; Acute Services</b>

## 1 Purpose

Please select one item in each section and delete the others.

**This is presented to the Board/Committee for:**

- Decision

**This report relates to:**

- Annual Operating Plan
- Emerging issue
- Government policy/directive
- Legal requirement
- Local policy
- NHS Board/Integration Joint Board Strategy or Direction

**This aligns to the following NHSScotland quality ambition(s):**

- Safe
- Effective
- Person Centred

## **2 Report summary**

### **2.1 Situation**

The Winter Plan 2023-24 describes the health and social care service provision and special arrangements that will be put in place during the festive season by NHS Shetland and Shetland Islands Council and through the winter period.

The Plan has been developed jointly by the Director of Nursing & Acute Services and the Director of Community Health & Social Care with input from Scottish Ambulance Service (SAS) setting out the patient transport arrangements that underpin effective planned and unscheduled care services.

It will be presented to the Board and the Integration Joint Board for approval.

Sections shown in yellow have not yet been agreed or validated and further changes will be added as information is received, recognising this is a dynamic plan and an operational document. The escalation arrangements are also in draft until the scenario planning exercise has been completed. The Appendices may be further updated following the scenario planning exercises and reflect our current escalation arrangements without specific adaptation to manage pressures this winter or new/emerging guidance.

### **2.2 Background**

The Scottish Government directs winter planning, and it is the responsibility of Health Boards and Councils to ensure that there are robust and effective plans in place to ensure the continuity of service provision over the winter months, and especially over the festive season. This year, the plan continues to address the need to maintain services where respiratory pathways are required but much of the COVID specific guidance has been removed.

### **2.3 Assessment**

The Winter Plan will be communicated/enacted by both the Council and NHS and sits alongside the national winter campaigns co-ordinated by NHS 24, which will be locally advertised to ensure our residents know what services are available over the festive season, and how to access them.

#### **2.3.1 Quality/ Patient Care**

There is a particular emphasis on ensuring that elective services are sustained through the winter months and there is forward planning in January 2024 to deal with any backlog from the festive period (e.g. increasing surgical capacity, outpatient services, diagnostics, availability of patient transport, and care packages to support timely discharge). The plan describes the arrangements over the festive period and notes the need to monitor demand for services and develop plans to address them.

We will hold a scenario planning exercise to test the plan prior to the festive period.

### **2.3.2 Workforce**

We have developed rosters for winter months early so that we can try and mitigate any key workforce gaps to ensure that we have robust arrangements in place to address winter service pressures. This is particularly the case over the festive period where we will have more limited service provision. We also have theoretical plans in place for mutual support across agencies if the need arises.

### **2.3.3 Financial**

Unscheduled care, delayed discharge, redesigning urgent care and access target allocations have been aligned to support the delivery of the plan.

### **2.3.4 Risk Assessment/Management**

Consideration has been given to the need for business continuity planning associated with the potential for industrial action from healthcare unions as well as other industrial action proposed/ongoing which may impact on logistics/procurement.

Enhanced monitoring of service performance are in place with the review of daily measures to support effective service delivery and patient flow. We have also introduced in 2022, whole system huddles to discuss system pressures in real time to help manage and mitigate risks.

### **2.3.5 Equality and Diversity, including health inequalities**

The aim of the plan is to provide an ongoing response to winter pressures, to ensure that service provide where possible a 'business as usual' level of response and where that is not possible, an escalation plan to deliver 'safe' levels of care whilst working through system pressures. The aim of this is to ensure that we do not build up further backlogs and compound the pre-existing health inequalities and/or further reduce services through crisis management approaches.

### **2.3.6 Other impacts**

Nil

### **2.3.7 Communication, involvement, engagement and consultation**

The plan has been developed by Directors, Heads of Service across the whole system, including Local Authority and other NHS service providers such as NHS24 and the Scottish Ambulance Service (SAS). Various iterations of the plan have been shared with the Hospital Management Team and the Health & Social Care Partnership Management Team.

### **2.3.8 Route to the Meeting**

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

- Executive Management Team, 6 December 2023

## 2.4 Recommendation

The Board is asked to:

- 1) Approve the winter 2023-24 plan
- 2) Note that planning is a dynamic process and any emerging issues will need to be addressed. Any significant changes will be brought to the Board's attention.

## 3 List of appendices

The following appendices are included with this report:

Appendix 1	Winter Plan 2023-24
Appendix A	Escalation Protocol: Hospital Patient Flow
Appendix B	Surge Capacity Protocol: Additional Acute Beds
Appendix C	Escalation Protocol – Safe Staffing
Appendix D	Patient Placement Protocol
Appendix E	Adverse Weather Plans & Transport Disruption



# WINTER PLAN

## CAPACITY MANAGEMENT PLANS FOR THE PROVISION OF SERVICES OVER THE WINTER PERIOD 2023-24

**Version 1 created 20/11/2023 template**

**Version 2 created with contributions from Heads of Service**

**Version 3 created 05/12/23 using lessons learnt following table top exercise for BCP testing on 04/12/23**

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1. **Introduction**

NHS Shetland, along with its statutory agency partners in Shetland, coped well during the winter of 2022-23 but there were significant challenges as a result of multiple instances of adverse weather, island wide communications outage, COVID sickness in our workforce and the impact of that across the whole system. Winter 2023-24 has the potential to also be challenging as we continue to manage the increasing demand for emergency care and delays to planned care across the whole system.

This winter plan for 2023-24 has been developed from critically appraising what went well and what lessons were learnt from previous winters, both from within the organisation and from debriefing with other health boards as part of the Scottish Government Health Directorate’s winter planning programme for the NHS, which also includes representation from local authorities. This year, we have also taken learning from our response to the various major incidents that occurred in 2022 into our business continuity planning processes for 2023.

2. **Primary Care Services**

a) **Shetland non OOH Co-operative – 4 practices – 3,500 patients**

The OOH arrangements for the 4 practices (Unst, Yell, Whalsay and Hillswick) shall be as per normal over the winter and festive period, with each individual practice providing their own out of hours cover. Access to District Nursing services for patients registered with the Hillswick practice is via the District Nursing service for Brae which is included in the OOH co-operative section. No additional resources or capacity is planned. Each practice will have in place their own contingencies for any increased demand over the coming months with Board level support offered if services become overwhelmed due to epidemic or staff absence. Those areas would then be covered by the OOHs GP Co-operative, locums and patients transferred to the Gilbert Bain Hospital.

On the islands of **Yell, Unst and Whalsay** the Community Nursing services will continue to provide a service over the winter and festive periods as noted below:

Date	Day	Daytime Provision	OOHs Provision
December 23 <sup>rd</sup> 2023	Saturday (weekend)	<b>On call and Essential visits only</b> by one nurse contacted via community nursing answer phone	One nurse On-call on each island contact via information on health centre community nursing answer phone
December	Saturday	<b>On call and Essential</b>	One nurse On-call on

24 <sup>th</sup> 2023	(weekend)	visits only by one nurse contacted via community nursing answer phone	each island contact via information on health centre community nursing answer phone
December 25 <sup>th</sup> 2023	Monday (PH)	Essential visits by one nurse, can be contacted via Community nursing answer phone	Normal on call service provision
December 26 <sup>th</sup> 2023	Tuesday (PH)	<b>On call and Essential visits only</b> by one nurse contacted via community nursing answer phone	One nurse on call on each island contact via community nursing answer phone
December 27 <sup>th</sup> 2023	Wednesday (normal working day)	Normal Working day	Normal on call service provision
December 28 <sup>th</sup> 2023	Thursday (normal working day)	Normal Working day	Normal on call service provision
December 29 <sup>th</sup> 2023	Friday (normal working day)	Normal Working day	Normal on call service provision
December 30 <sup>th</sup> 2023	Saturday (weekend)	<b>On call and Essential visits only</b> by one nurse contacted via community nursing answer phone	One nurse on call on each island contact via community nursing answer phone
December 31 <sup>st</sup> 2023	Sunday (weekend)	Essential visits by one nurse, can be contacted via Community nursing answer phone	Normal on call service provision
January 1 <sup>st</sup> 2024	Monday (PH)	Essential visits by one nurse, can be contacted via Community nursing answer phone	Normal on call service provision



January 2 <sup>nd</sup> 2024	Tuesday (PH)	<b>On call and Essential visits only</b> by one nurse contacted via community nursing answer phone	Normal on call service provision
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District Nursing teams on Mainland Shetland will operate a weekend level service on 23, 24, 25, 26 and 31 December with a normal working days on 28,29, 30 December.

This work pattern will be repeated for 1, 2 and 3 January 2023 with normal working services resuming from Wednesday 4 January 2023.

Normal oncall arrangements are in place for the entire festive period. Clinical Team Leaders will also be on duty during the festive period.

**b) Shetland Out of Hours Co-operative Area – 6 practices – 18,750 patients**

The Board’s normal OOH arrangements will continue throughout the winter period for 6 practices (Bixter, Brae, Walls, Lerwick, Levenwick and Scalloway) with a single GP on call for home visiting, dual response and GP advice for the co-operative area.

The Community Nursing service provides a 24/7 service via a combination of shifts covering the time period 0830-2130hrs, with an on call service overnight from 2130-0800hrs each day.

A&E continues to be available 24/7 with normal staffing levels. Patients will be encouraged to see their primary care practitioner where that is appropriate.

The resources available to the Board will match the predicted demand forecast by NHS 24 and our own forecasts based upon last year’s activity levels. If demand levels change, then the Primary Care Capacity Challenge Escalation Strategy will be invoked. Decisions to invoke will be taken by the Director of Community Health & Social Care, with the wider Health & Social Care Partnership huddle membership.

### Arrangements for the Festive Holidays for the Out of Hours Co-operative

All items in **bold** are additional provision that the Board is intending to put in place locally to help manage the situation. All these additions are agreed locally and all GP shifts have now been filled. (N.B. Out of Hours arrangements run from 5.30pm to 8.00am the following day 365 days per year and during the day at weekends and public holidays).

Date	Day	Daytime Provision	OOHs Provision
December 23 <sup>rd</sup> 2023	Saturday (weekend)	<b>NHS24 triaged to PCEC at Gilbert Bain Hospital between 12.00 – 16.00</b>	24 hour cover by OOH GP via NHS24
December 24 <sup>th</sup> 2023	Sunday (weekend)	<b>NHS24 triaged to PCEC at Gilbert Bain Hospital between 10.00 – 14.00</b>	24 hour cover by OOH GP via NHS24
December 25 <sup>th</sup> 2023	Monday (PH)	<b>No clinic</b>	24 hour cover by OOH GP via NHS24
December 26 <sup>th</sup> 2023	Tuesday (PH)	<b>NHS24 triaged to PCEC at Gilbert Bain Hospital between 10.00 - 18.00</b>	24 hour cover by OOH GP via NHS24
December 27 <sup>th</sup> 2023	Wednesday (normal working day)	Normal working day	One GP on call overnight via NHS24
December 28 <sup>th</sup> 2023	Thursday (normal working day)	Normal working day	One GP on call overnight via NHS24
December 29 <sup>th</sup> 2023	Friday (normal working day)	Normal working day	One GP on call overnight via NHS24
December 30 <sup>th</sup> 2023	Saturday (weekend)	<b>NHS24 triaged to PCEC at Gilbert Bain Hospital between 10.00 – 14.00</b>	24 hour cover by OOH GP via NHS24
December 31 <sup>st</sup> 2023	Sunday (weekend)	<b>NHS24 triaged to PCEC at Gilbert Bain Hospital between 10.00 – 14.00.</b>	24 hour cover by OOH GP via NHS24
January 1 <sup>st</sup> 2024	Monday (PH)	<b>NHS24 triaged to PCEC at Gilbert Bain Hospital between 12.00 – 18.00.</b>	24 hour cover by OOH GP via NHS24
January 2 <sup>nd</sup> 2024	Tuesday (PH)	<b>NHS24 triaged to PCEC at Gilbert Bain Hospital between 10.00 – 1600</b>	24 hour cover by OOH GP via NHS24

### 3. Patient Transport & Ambulance Services

Date	Day	Daytime Provision	OOHs Provision	Patient Transport Service (PTS)
December 23 <sup>rd</sup> 2023	Saturday (weekend)	2 x A&E On Shift	1 X On Shift 1 X On Call	No PTS
December 24 <sup>th</sup> 2023	Saturday (weekend)	2 x A&E On Shift	1 X On Shift 1 X On Call	No PTS
December 25 <sup>th</sup> 2023	Monday (PH)	2 x A&E On Shift	1 X On Shift 1 X On Call	1x AM 1x PM
December 26 <sup>th</sup> 2023	Tuesday (PH)	2 x A&E On Shift	1 X On Shift 1 X On Call	1x PM
December 27 <sup>th</sup> 2023	Wednesday (normal working day)	2 x A&E On Shift	1 X On Shift 1 X On Call	1x AM 1x PM
December 28 <sup>th</sup> 2023	Thursday (normal working day)	2 x A&E On Shift	1 X On Shift 1 X On Call	1x PM
December 29 <sup>th</sup> 2023	Friday (normal working day)	2 x A&E On Shift	1 X On Shift 1 X On Call	1x AM 1x PM
December 30 <sup>th</sup> 2023	Saturday (weekend)	2 x A&E On Shift	1 X On Shift 1 X On Call	No PTS
December 31 <sup>st</sup> 2023	Sunday (weekend)	2 x A&E On Shift	1 X On Shift 1 X On Call	No PTS
January 1 <sup>st</sup> 2024	Monday (PH)	2 x A&E On Shift	1 X On Shift 1 X On Call	1x AM 1x PM
January 2 <sup>nd</sup> 2024	Tuesday (PH)	2 x A&E On Shift	1 X On Shift 1 X On Call	1 X pm

\*PTS on shift for PH but usually no scheduled care activity, however work activity could be negotiated locally.

Should the hospital reach alert status, then patient transport to discharge patients from hospital can be requested through the normal channels by contacting the

Scottish Ambulance ACC (Ambulance Control Centre) by calling 0300 123 1236 where a controller will place the request on the system providing the patient passes the PNA (Patient needs Assessment) whereupon a day controller will call back within the hour to confirm if this request can be accommodated or not.

There will be no reduction in the provision of emergency ambulance services over the holiday period. There is one fully equipped A&E ambulance vehicle with 4x4 capability based in Lerwick as well as other 4X4 equipped vehicles on the islands of Skerries and Fetlar.

NHS Shetland also provides patient transport OOHs, to support access to primary care and emergency care services, located at the Gilbert Bain Hospital.

Throughout this period there will be an Area Service Manager on duty and on call for day-to-day queries and a senior manager available in and oohs for strategic requests via the ACC.

Traditionally activity and demand in Shetland over the festive period has not shown an increase and there has never been a necessity to increase SAS cover. The SAS air assets will be operating as normal throughout the festive period to provide their support and emergency retrieval capabilities to Shetland.

If the hospital is on 'red' see appendix A. The PTS service should be contacted via the email below so that PTS services can fast track patient transfers [sas.ptsnorthsupervisor@nhs.scot](mailto:sas.ptsnorthsupervisor@nhs.scot)

#### 4. Dental Services

The Board delivered Emergency Dental Service will continue to operate throughout the winter including the holiday period. This provides 24/7 access to emergency dental care every day of the year in conjunction with the normal weekday service.

Over the festive season normal and emergency services will be provided as follows:

23/12	24/12	25/12	26/12	27/12	28/12	29/12	30/12	31/12	01/01	02/01

**Emergency On-Call Phone – 07827 283762  
(direct dial – NOT FOR PATIENT USE)**

## 5. Pharmacy Services

The community pharmacies in Lerwick, Brae and Scalloway will be closed on the December 25<sup>th</sup> and 26<sup>th</sup> and January 1<sup>st</sup> and 2<sup>nd</sup>. A rota with reduced hours is agreed for the 27<sup>th</sup> December (1300-1600, Laings Pharmacy, Kanterstead) and the 2<sup>nd</sup> January (1300-1600, Boots Pharmacy, Lerwick). On the 3<sup>rd</sup> of January Boots Pharmacy, Lerwick, will be open normally, with all other pharmacies closed. From January 4<sup>th</sup> onwards, all Pharmacies will be open as normal.

As part of the pre-Christmas publicity campaign NHS Scotland is undertaking, advice for patients on how to best utilise their community pharmacists will be provided, including the availability of the Pharmacy First service from community pharmacies in Shetland. Patients accessing NHS 24 will be sign-posted to community pharmacy services where appropriate.

The hospital pharmacy will be closed on 25<sup>th</sup>-27<sup>th</sup> December and 1<sup>st</sup>-3<sup>rd</sup> January but open with reduced staffing on the 28<sup>th</sup> December and 4<sup>th</sup> January. The on-call service will be available throughout the festive period.

Appropriate stock levels to cover the extended period of closure will be allowed in each ward and department. However if significant shortages become evident the on-call service can be contacted.

Adequate oxygen will be kept within the hospital to accommodate the festive period and possible interruptions due to weather. Dolby Medical supplies all domiciliary oxygen and high use patients have oxygen concentrators. In addition concentrators are available for use in the hospital and high flow oxygen treatments are monitored and regularly reviewed.

Weather conditions are regularly monitored by the pharmacy team over the winter period and stocks are routinely adjusted accordingly

<b>Date</b>	<b>Day</b>	<b>Hospital Provision</b>	<b>Community Provision</b>
December 23 <sup>rd</sup> 2023	Saturday (weekend)	On call provision	No service
December 24 <sup>th</sup> 2023	Saturday (weekend)	On call provision	No service
December 25 <sup>th</sup> 2023	Monday (PH)	ON call provision	Boots 10.30am -1.30pm
December 26 <sup>th</sup> 2023	Tuesday (PH)	Limited service 9am-5pm	Laings, Lerwick, 1300-1600
December 27 <sup>th</sup> 2023	Wednesday (normal working day)	Normal service	Normal Service
December 28 <sup>th</sup> 2023	Thursday (normal working day)	Normal Service	Normal Service
December 29 <sup>th</sup> 2023	Friday (normal working day)	Normal service	Normal Service
December 30 <sup>th</sup> 2023	Saturday (weekend)	On call service	No service
December 31 <sup>st</sup> 2023	Sunday (weekend)	On call service	No service
January 1 <sup>st</sup> 2024	Monday (PH)	On call service	Boots, Lerwick, 1300-1600
January 2 <sup>nd</sup> 2024	Tuesday (PH)	Limited service 9am-5pm	Boots, Lerwick – open normal hours 0900-1730 All other pharmacies closed

## 6. Healthcare Science, Public Health and Allied Health Professions

### Diagnostic Services

Date	Day	Medical Imaging	Labs	Audiology	Physiological Measurements
December 23 <sup>rd</sup> 2023	Saturday (weekend)	On Call XR/CT Only	0900-1200, then on call	Closed	Closed
December 24 <sup>th</sup> 2023	Saturday (weekend)	On Call XR/CT Only	0900-1200, then on call	Closed	Closed
December 25 <sup>th</sup> 2023	Monday (PH)	On Call XR/CT Only	0900-1200, then on call	Closed	Closed
December 26 <sup>th</sup> 2023	Tuesday (PH)	CT/Xray 0800-2030 then On-call Ultrasound 0800-1730	0900-1200, then on call	Answering phone messages only NO REPAIRS SERVICE	Inpatient Service Only
December 27 <sup>th</sup> 2023	Wednesday (normal working day)	CT/Xray 0800-2030 then On-call Ultrasound 0800-1730	08.30-17.00, then on call	Answering phone messages only NO REPAIRS SERVICE	Inpatient Service Only
December 28 <sup>th</sup> 2023	Thursday (normal working day)	CT/Xray 0800-2030 then On-call Ultrasound 0800-1730	08.30-17.00, then on call	Answering phone messages only NO REPAIRS SERVICE	Inpatient Service Only
December 29 <sup>th</sup> 2023	Friday (normal working day)	On Call XR/CT Only	08.30-17.00, then on call	Closed	Closed
December 30 <sup>th</sup> 2023	Saturday (weekend)	On Call XR/CT Only	0900-1200, then on call	Closed	Closed
December 31 <sup>st</sup> 2023	Sunday (weekend)	On Call XR/CT Only	0900-1200, then on call	Closed	Closed
January 1 <sup>st</sup> 2024	Monday (PH)	On Call XR/CT Only	0900-1200, then on call	Closed	Closed
January 2 <sup>nd</sup> 2024	Tuesday (PH)	Normal Service Resumes	0900-1200, then on call	Answering phone messages only NO REPAIRS SERVICE	Normal Service Resumes

## Podiatry Services – Service Provision & Staffing Levels

DATE	SERVICE	STAFFING
December 23 <sup>rd</sup> 2023	Weekend -No service	
December 24 <sup>th</sup> 2023	Weekend -No service	
December 25 <sup>th</sup> 2023	PH – No service	
December 26 <sup>th</sup> 2023	PH – No service	
December 27 <sup>th</sup> 2023	Normal hours	Reduced staffing - AL
December 28 <sup>th</sup> 2023	Normal hours	Reduced staffing - AL
December 29 <sup>th</sup> 2023	Normal hours	Reduced staffing - AL
December 30 <sup>th</sup> 2023	Weekend – No service	
December 31 <sup>st</sup> 2023	Weekend – No service	
January 1 <sup>st</sup> 2024	PH – No service	
January 2 <sup>nd</sup> 2024	PH – No service	

Prior to this period, those patients who are assessed as requiring ongoing treatment over the festive period will be allocated appointments onto days when staff are in and working.

Community nursing will be contacted for other patients who require dressings on days when there is no Podiatry service.

A number of appointment slots will remain un-booked to allow for emergencies on 27<sup>th</sup>, 28<sup>th</sup>, 29<sup>th</sup> and 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup>.

## Dietetic Services – Service Provision & Staffing Levels

Date	Day	Hospital DT	Community DT
December 23 <sup>rd</sup> 2023	Saturday(weekend)	No Service	No Service
December 24 <sup>th</sup> 2023	Sunday (weekend)	No Service	No Service



December 25 <sup>th</sup> 2023	Monday (PH)	On call 08:30-16:30	On call 08:30-16:30
December 26 <sup>th</sup> 2023	Tuesday (PH)	On call 08:30-16:30	On call 08:30-16:30
December 27 <sup>th</sup> 2023	Wednesday	Normal working day	Normal working day
December 28 <sup>th</sup> 2023	Thursday	Normal working day	Normal working day
December 29 <sup>th</sup> 2023	Friday	Normal working day	Normal working day
December 30 <sup>th</sup> 2023	Saturday (weekend)	No Service	No Service
December 31 <sup>st</sup> 2023	Sunday (weekend)	No Service	No Service
January 1 <sup>st</sup> 2024	Monday (PH)	On call 08:30-16:30	On call 08:30-16:30
January 2 <sup>nd</sup> 2024	Tuesday (PH)	On call 08:30-16:30	On call 08:30-16:30

### Occupational Therapy Services – Service Provision & Staffing Levels

Acute Occupational Therapy Services as below.

DATE	SERVICE	STAFF AVAILABLE
December 23 <sup>rd</sup> 2023	Weekend -No service	
December 24 <sup>th</sup> 2023	Weekend -No service	
December 25 <sup>th</sup> 2023	PH – No service	
December 26 <sup>th</sup> 2023	PH – No service	
December 27 <sup>th</sup> 2023	Reduced service	1 OT
December 28 <sup>th</sup> 2023	Reduced service	1 OT
December 29 <sup>th</sup> 2023	Reduced	1 OT
December 30 <sup>th</sup> 2023	Weekend – No service	
December 31 <sup>st</sup> 2023	Weekend – No service	
January 1 <sup>st</sup> 2024	PH – No service	
January 2 <sup>nd</sup> 2024	PH – No service	

## Physiotherapy Services – Service Provision & Staffing Levels

DATE	SERVICE	STAFF AVAILABLE
December 23 <sup>rd</sup> 2023	Weekend -No service	
December 24 <sup>th</sup> 2023	Weekend -No service	
December 25 <sup>th</sup> 2023	PH – No service	On call cover for wards
December 26 <sup>th</sup> 2023	PH – No service	On call cover for wards
December 27 <sup>th</sup> 2023	Normal hours	Urgent seen and vetting
December 28 <sup>th</sup> 2023	Normal hours	Urgent seen and vetting
December 29 <sup>th</sup> 2023	Normal hours	Urgent seen and vetting
December 30 <sup>th</sup> 2023	Weekend – No service	
December 31 <sup>st</sup> 2023	Weekend – No service	
January 1 <sup>st</sup> 2024	PH – No service	On call cover for wards
January 2 <sup>nd</sup> 2024	PH – No service	On call cover for wards

Prior to this period, those patients who are assessed as requiring ongoing treatment over the festive period will be allocated appointments onto days when staff are in and working.

Urgent slots will be available as usual on these dates 28<sup>th</sup>, 29<sup>th</sup>, 30<sup>th</sup>, 4<sup>th</sup>, 5<sup>th</sup> and 6<sup>th</sup>.

Community physiotherapy will be provided on a needs based assessment however there will be a reduced service to enable ward cover but all essential visits and contacts will be made.

## Speech and Language Therapy – Service Provision & Staffing Levels

DATE	SERVICE	STAFF AVAILABLE
December 23 <sup>rd</sup> 2023	Weekend -No service	
December 24 <sup>th</sup> 2023	Weekend -No service	
December 25 <sup>th</sup> 2023	PH – No service	
December 26 <sup>th</sup> 2023	PH – No service	
December 27 <sup>th</sup> 2023	Normal hours	Reduced staffing – Ward Cover available
December 28 <sup>th</sup> 2023	Normal hours	Reduced staffing – Ward Cover available
December 29 <sup>th</sup> 2023	Normal hours	Reduced staffing – Ward Cover available
December 30 <sup>th</sup> 2023	Weekend – No service	
December 31 <sup>st</sup> 2023	Weekend – No service	
January 1 <sup>st</sup> 2024	PH – No service	
January 2 <sup>nd</sup> 2024	PH – No service	

### Public Health

There will be the usual Public Health (health protection) support available 24/7 over the festive period. During normal working hours the Shetland Health Protection Team will be contactable via the Public Health Office ext 3340 or Montfield reception ext 3060 as usual, with in –hours competent person/consultant cover from the NHS Shetland Director of Public Health until 29th December, and from a locum consultant in public health medicine from 3<sup>rd</sup> – 10<sup>th</sup> January. During the public holidays and out of hours, the usual on –call rotas will apply: with the 1<sup>st</sup> on-call person being Shetland based, and the 2<sup>nd</sup> on-call person being one of the Island Board consultants (providing Public Health Act etc (Scotland) 2008 ‘competent person’ cover). On-call staff are contactable through the GBH switchboard.

The Vaccination Team will run clinics for people who are eligible for autumn /winter vaccinations but still not been vaccinated, and for those still eligible for primary doses of COVID vaccination until the week before Christmas.

Over the festive period there will be no planned vaccinations clinics but urgent vaccinations can be arranged by emailing the Vaccination Team on [shet.vaccination@nhs.scot](mailto:shet.vaccination@nhs.scot) (e.g. COVID vaccination for a patient due to start on immunosuppressant therapy, or public health requested post exposure vaccinations)

## 7. Facilities

The Estates Team operates an on call rota which can be accessed via the GBH switchboard and this is in place 24/7. A procedure for determining the priority for on call requests out with Lerwick is held on the senior manager on call shared drive.

Details setting out deliveries (e.g. supplies) and collections (e.g. specimens) during the festive period will be circulated by the Estates Team.

Other Facilities services will have a modified service over the festive season and availability is shown below:

Date	Day	Daytime Provision	OOHs Provision
December 23 <sup>rd</sup> 2023	Saturday (weekend)	Domestic – as normal weekend rota Serving – Open Kitchen – Skeleton Staff Laundry – 8am – 2pm	Pager Support 7pm-5am
December 24 <sup>th</sup> 2023	Sunday (weekend)	Domestic – as normal weekend rota Serving – Closed Kitchen – Skeleton Staff 6am - 2pm Laundry - Closed	Pager Support 7pm-5am
December 25 <sup>th</sup> 2023	Monday (PH)	Domestic - Normal working day Serving – Closed Kitchen – Skeleton staff 6am -	A&E only Pager Support 9pm-

		2pm Laundry - Closed	5am Additional cleans should be authorised by Silver Command
December 26 <sup>th</sup> 2023	Tuesday (PH)	Normal working day	A&E only Pager Support 9pm- 5am Additional cleans should be authorised by Silver Command
December 27 <sup>th</sup> 2023	Wednesday (normal working day)	Normal working day	A&E only Pager Support 9pm- 5am Additional cleans should be authorised by Silver Command
December 28 <sup>th</sup> 2023	Thursday (normal working day)	Normal working day	A&E only Pager Support 9pm- 5am Additional cleans should be authorised by Silver Command
December 29 <sup>th</sup> 2023	Friday (normal working day)	Normal working day	A&E only Pager Support 9pm- 5am Additional cleans should be authorised by Silver Command
December 30 <sup>th</sup> 2023	Saturday (weekend)	Domestic – as normal weekend rota	Pager Support 7pm- 5am

		<p>Servery – Open</p> <p>Kitchen – Skeleton Staff</p> <p>Laundry – 8am – 2pm</p>	
<p>December 31<sup>st</sup> 2023</p>	<p>Sunday (weekend)</p>	<p>Domestic – as normal weekend rota</p> <p>Servery – Closed</p> <p>Kitchen – Skeleton staff 6am - 2pm</p> <p>Laundry - Closed</p>	<p>Pager Support 7pm- 5am</p>
<p>January 1<sup>st</sup> 2024</p>	<p>Monday (PH)</p>	<p>Domestic -Normal working day</p> <p>Servery – Closed</p> <p>Kitchen – Skeleton staff 6am - 2pm</p> <p>Laundry - Closed</p>	<p>A&amp;E only</p> <p>Pager Support 9pm- 5am</p> <p>Additional cleans should be authorised by Silver Command</p>
<p>January 2<sup>nd</sup> 2024</p>	<p>Tuesday (PH)</p>	<p>Normal working day</p>	<p>A&amp;E only</p> <p>Pager Support 9pm- 5am</p> <p>Additional cleans should be authorised by Silver Command</p>

## 8. Community Mental Health Services

### Mental Health OOHs Rota

The Community Mental Health Team have arrangements in place to manage mental health needs during the festive period and psychiatric emergencies will be actively managed. Community Psychiatric Nurse rota is in place for the festive period and held at the GBH reception. Assistance from Royal Cornhill Hospital in Aberdeen is also available to hospital based Consultants and the on call CPN/Psychiatrist (who will be contacted by CPN if necessary) as required.

The local team have clear protocols in place for the management of mental health presentations to the hospital and in the community. The team will provide their day time operating hours and include on call during the weekends and overnight, so in effect providing a 7 day service. The on call rota has a backup system in place to cover any potential covid related issues or sickness.

### Community Psychiatric Nurses (CPNs)

Date	Day	Daytime Provision	OOHs Provision
December 23 <sup>rd</sup> 2023	Saturday (weekend)	On call CPN	On call CPN
December 24 <sup>th</sup> 2023	Sunday (weekend)	On call CPN	On call CPN
December 25 <sup>th</sup> 2023	Monday (PH)	On call CPN	On call CPN
December 26 <sup>th</sup> 2023	Tuesday (PH)	On call CPN	On call CPN
December 27 <sup>th</sup> 2023	Wednesday (normal working day)	Business as usual	On call CPN
December 28 <sup>th</sup> 2023	Thursday (normal working day)	Business as usual	On call CPN
December 29 <sup>th</sup> 2023	Friday (normal working day)	Business as usual	On call CPN
December 30 <sup>th</sup> 2023	Saturday (weekend)	On call CPN	On call CPN
December 31 <sup>st</sup> 2023	Sunday (weekend)	On call CPN	On call CPN

January 1 <sup>st</sup> 2024	Monday (PH)	On call CPN	On call CPN
January 2 <sup>nd</sup> 2024	Tuesday (PH)	On call CPN	On call CPN

## 9. Surge Capacity Hospital Services

As a result of the ongoing system pressures we have put in place specific arrangements for the winter of 2023-24.

The narrative below sets out how we intend to manage emergency and elective patient flow in line with the requirements to maintain acute, elective and respiratory pathways.

### Acute General Beds

Our core bed capacity for general acute service provision is 41 beds, plus 2 higher dependency (level 2) beds. The beds are arranged across two acute units (medical ward has 21 beds and the surgical ward has 20).

As part of winter preparedness, we can increase our general bed capacity by 2-3 to support surge requirements. There is an infectious disease bay (three beds) to ensure we have a long term facility in place to support patients with an airborne infectious disease. Gender segregation may not always be possible.

### Intensive Care (level 3)

We will retain a shadow rota for staffing to support patients who require invasive ventilation via the respiratory pathway. An operational plan, setting out how the Consultant Anesthetists will open a respiratory theatre (and consequences for elective care provision) is available on TEAMS in the winter planning folder.

### Higher Dependency Care (level 2)

As part of our core capacity we have a 2-3<sup>1</sup> bedded HDU which is situated in the acute surgical unit and we have maintained this area to support patients with non-respiratory illness. In addition to this, we have identified a respiratory HDU pathway which is part of the respiratory unit. This will be staffed by our HDU team working on a buddy system with the nurses supporting the acute medical ward. Additional training has been provided to enable us to provide additional HDU nursing capacity across the Hospital site.

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<sup>1</sup> We can depending on the needs of the patients, support up to three HDU patients in the unit but that would be as part of an escalation plan rather than the usual operating/staffing arrangements



## Emergency Care

Ensuring we effectively manage our emergency care flow is critical in being able to continue to offer elective and planned care in all settings and across the whole system. Primary Care Emergency Centre (PCEC) presence in the ED at weekends and on PHs will be available. These approaches will enable us to schedule some of the emergency care activity and increase the number of patients who can access a telehealth consultation via the Highland Flow Navigation Hub. GPs and/or ANPs will provide a PCEC in ED on Saturday and Sunday (and Public Holidays over the Festive season)<sup>2</sup>.

Symptomatic patients who require admission to hospital will receive a PCR test and assumed to be a presumptive respiratory infection until a negative test is confirmed. Patients will be admitted to a side room or empty bay if their respiratory symptoms are the main reason for admission. If they have been admitted with an acute surgical problem, then they will be risk assessed and admitted to the surgical unit (with transmission based precautions) once a negative PCR test has been confirmed.

## Respiratory Illness and Children

Children will be assessed and if necessary admitted to hospital with RSV. The Consultant Paediatrician will provide support post admission, to help with treatment planning for children who do not meet the criteria for transfer to RACH. Similarly, the Specialist Paediatric Nurses will also provide support to the acute unit teams when children are admitted so that we have a 'virtual ward' approach.

## **Maintaining effective care and safe staffing levels**

We do not have plans to employ extra staff to cover the winter period, although we have the facility to utilise extra clinical and non-clinical staff as required through flexible working and bank arrangements. Rosters will be put in place for November 2023 and January 2024 including shifts for the festive period and ongoing through the winter months.

We look to use all of our beds and staff flexibly as and when required to ensure that we can continue to provide safe staffing levels and safe and effective patient care, particularly where there may be peaks in demand for services and/or reduced access to key staff e.g. because of challenges in recruitment etc. All staff co-operate in this type of arrangement to ensure that we can provide continuity of care for patients with acute presentations and ongoing care requirements whilst in hospital.

The safe staffing escalation plan is shown in Appendix C.

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<sup>2</sup> Please note that the PCEC may not be open for between 4 and 8 hours depending on the date, it may be open for shorter periods of time, depending on staff availability

## Monitoring whole system patient flow

We closely monitor patient flow, particularly as we move into winter planning activities to ensure that we have the capacity available to provide hospital based care, including acute rehabilitation.

The data modelling from Public Health Scotland (PHS) sets out a number of scenarios so that we can understand the impact of demand on our system during winter.



WSM Shetland WP  
Model Outputs Upd

Bed occupancy is reviewed at least twice daily, with known elective demands and planned dates of discharge (PDD) identified when services are on amber/red from a capacity perspective, so that managers can ensure that elective activity can continue safely throughout the period. Severe weather reports are cascaded to all Heads of Department.

If demand for inpatient services exceeds the bed base available, then silver command (Acute and Community) will be contacted to consider options available, including calling a health and social care major alert and setting up contingency plans.

Patients who are ready for discharge may not have discharge medicines organised but patients can still transfer into the community if they have an up to date Intermediate Discharge Letter (IDL) which is shared with the receiving care team/care home first. This can be used to transcribe key medications onto the MARS sheet. These discharge arrangements are only necessary if the hospital is on 'RED' for capacity and it is an agreed action following a review of the PDDs for patients in the hospital and the patient flow escalation plan is followed.

The patient flow escalation plan is in place to ensure that we effectively manage emergency and elective admissions throughout the hospital, which is shown in Appendix A. The protocol for 2023, reflects the need to consider patient placement for clinical specialty and the requirement to consider the patients respiratory status. An additional escalation plan to support decision making for patient placement has been developed and is shown in Appendix D.

In addition to this, if required, a critical care huddle will be instigated in the week before Christmas (following on from the morning Hospital huddle) to assess and understand patient acuity across the Hospital system and will form part of the risk assessment as to whether any services or elective activity needs to be stood down.

Waiting times monitoring meetings will take place on December 21st and December 28<sup>th</sup> 2023 (virtually) to ensure that appropriate monitoring of shared services and pathways will continue seamlessly, including the organisation of cancer pathways.

Daily reporting will be used to identify any trends/forecast future pressures, although in reality it is easy to spot special cause variation in such a small system through routine root cause analysis of ED breaches.

In addition to this, it is critical that we continue to initiate programmes to support community based services in parallel with the changes which are taking place in hospital so that we have a 'whole system' approach to older peoples care.

As a result of the development and extension of community based services over the last three years, we have seen a down turn in bed occupancy (17 % across the two acute units); particularly where it is associated with people requiring rehabilitation or other care that could otherwise have been delivered in the community. There is a multi-agency group that looks at discharge planning and there is close collaboration with the Council to try to prevent any undue delays occurring. Close working between Pharmacy, Community, Hospital and SAS is in place to ensure that planned discharges take place before 12 noon (whenever possible).

We have maintained lower numbers of people who are medically fit, but delayed in hospital through 2023-24. As noted in the winter plan, all community services have put plans in place to manage the needs of individual clients and so we are not predicting that the number of people delayed in hospital will increase during winter months.

We will follow the pre-discharge COVID 19 testing requirements for patients transferring to Care Homes from Hospital, as set out in the Adult Social Care Winter Plan<sup>3</sup>.

The Intermediate Care Team will continue to provide their normal service over the festive periods with specific arrangements in place for individuals on the caseload and due to be seen over the 2 holiday weekends. For operational reasons the Intermediate Care Team and Montfield Support Services will be working closely together to support individuals in either setting in order to continue to ensure that there is responsive whole system working across the care sector at this time.

## 10. Community Care Services

Hospital staff will continue to work closely with local authority partners, and through the H&SCP will meet the needs of patients in the community and ensure that hospital in patients are discharged appropriately in a timely manner back into the community with proper support. The single shared assessment process "With You For You" is now embedded into practice for health and social care staff.

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<sup>3</sup> [National Infection Prevention and Control Manual: Home \(scot.nhs.uk\)](https://www.scot.nhs.uk/nipcm/)

#### **(a) Social Work Service**

The Social Work Offices will be closed for the four public holidays over Christmas and New Year (25<sup>th</sup> and 26<sup>th</sup> December and 1<sup>st</sup> and 2<sup>nd</sup> January 2024).

#### **(b) Care Centres for Adults**

All care centres will be open as usual and can be contacted directly using the contact details in the Shetland Directory. During the festive season, the Social Care Service will use any spare capacity within the care centres to support the provision of emergency residential short breaks required throughout this period. This resource can be accessed via the duty social worker only over the festive period.

Work is ongoing to make best use of resources to either avoid an unnecessary hospital admission, or to expedite a speedy discharge from hospital. There is a daily bed state for care centre bed capacity, which is shared across community and acute services.

#### **(c) Care at Home**

This will operate as normal except where service users choose to get support from their families over the public holidays. Meals on wheels will not normally be provided on the public holidays but alternative arrangements will be made as required. Any queries about Care at Home during the festive period (excluding public holidays) should be addressed to the local Care Centre. **Contact on public holidays should be via the duty social worker.**

In the central area, Care at Home staff are contactable on 744313 (excluding public holidays). All requests for assessments should be made to the duty social worker.

#### **(d) Mental Health Community Support Service, Annsbrae House**

Annsbrae's services for adults with mental health problems will be provided in line with individual service users' care plans during the festive period. Tenants can contact staff out of hours by using their Community Alarm. Annsbrae out of hours service can be contacted via duty social work on 01595 695611.

#### **(e) Adult Services**

**Adult Services (LD & ASD) – Supported Living and Outreach**

Supported accommodation services will operate as normal (and within C-19 Guidance) during the festive period.

#### **Adult Services (LD & ASD) - Short Break and Respite Services**

**(Newcraigielea)** Reduced service delivery due to C-19 Guidance.

Individual families will be informed of the arrangements.

#### **Adult Services (LD & ASD) - Supported Vocational Activity**

**(EG@Seafield)**

Individual service users will be informed of the arrangements.

#### **Emergency Requirement**

Any emergency requirement should be referred to the Duty Social Worker on 01595 744400 or 01595 695611.

#### **f) Day Care – Community Care Resources**

Over the festive period Day Care services may reduce or cease and will not be provided on public holidays. Individual service users will be consulted about their plans. Alternative services will be made available to meet assessed needs e.g. Care At Home or short breaks.

When Day Care is closed enquiries about existing service users should be directed to the relevant care centre (Newcraigielea for adults with Learning Disabilities). If emergency day care is needed then Duty Social Work should be contacted.

## **11. Access to Clinical Information Systems**

The Key Information Summary (KIS) system is in place. The eKIS should provide key information to partner agencies e.g. Scottish Ambulance Service (SAS), as well as to NHS employees in primary and secondary care in the out of hours period and therefore will support the delivery of more appropriate care for individuals in the out of hours period.

All eKIS records should contain current information relating to the patients:

- Medical condition and treatment
- Main carer - their name and contact number
- Wishes which they may have about their care and treatment; and
- Preferred place of care

During 2020 in preparation for COVID an extensive programme of Anticipatory Care Planning (ACP) was carried out with all individuals who were identified due to their medical conditions to be on a shielding list having a contact from their GP practice and an ACP put in place. This has increased the number of people who have preferred place of care information available on eKIS.

NHS IT Services during the festive period can be accessed via a telephone service on the normal weekdays (not the usual helpdesk number). This number will be communicated to staff via the weekly newsletter and the intranet before the festive period. On the public holidays and out of hours the department operates an on-call service for urgent issues. This can be accessed via GBH reception. Calls OOHs will be triaged by Silver Command for Acute or Community Services.

## 12. Bad Weather Contingencies

In the case of severe weather, which may restrict patient and/or staff movement, the primary care services will be managed locally with each individual practice covering their own area and patients. Care at Home is already managed on a locality basis with Care Centres acting as hubs.

Community Nursing Services also operate a locally based service in times of severe weather with staff working from their local Health Centre and providing essential visits as weather and staffing numbers permit. This would continue for the duration of the adverse weather.

Staff will be able to access accommodation if needed during adverse weather. Staff wishing to remain in Lerwick who reside out with the town for the duration of a shift pattern will be entitled to the provision of accommodation and meals from the vending machine<sup>4</sup>, which will be managed by the Facilities Manager.

A decision whether to invoke the Board's Inclement Weather Policy will be taken by Gold command. The most recent national advice is shown in DL (2022)35<sup>5</sup> which can be found on the Scottish Government website. Entitled: NHS Scotland: Interim National Arrangements for Adverse Weather.

For council employees the SIC Adverse Weather Policy should be followed. Information about transport services and adverse weather can be found in Appendix E.

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<sup>4</sup> Staff will be provided with basic provisions e.g. tea, coffee etc and access to the emergency snack vending machine as required. Staff will need to report to Reception to access petty cash for the vending machine.

<sup>5</sup> [https://www.sehd.scot.nhs.uk/dl/DL\(2022\)35.pdf](https://www.sehd.scot.nhs.uk/dl/DL(2022)35.pdf)

Rooms are available in NHS staff accommodation as part of the Inclement Weather Policy and allocation of these rooms over the Festive period will be via Silver Command. Keys are held at Gilbert Bain Reception.

If emergency accommodation is required to support a member of staff who needs to self-isolate due to COVID (e.g. a visiting clinician) then this can be organised via the Facilities Team who will also provide basic supplies and access to LFD kits as needed.

Any additional spend associated with invoking the Inclement Weather Policy should be attributed to the following job code: ZWINTER.

Business continuity plans are in place for all key Clinical Services. Decisions would be taken to invoke multi-agency support via Shetland Multi-agency Response Plan or to deal with pressures beyond normal local capacity in the NHS via the Board's Major Emergency Plan.

Council and NHS staff are reminded before each winter to ensure that their vehicles are prepared for inclement weather, and all Council and NHS owned vehicles are prepared in the same way.

The cost of winter tyre replacement should be identified by Heads of Service and discussed with the respective Directors responsible that that service area.

### **13. Preparation and Implementation of Norovirus Outbreak Control Measures & Influenza Planning**

The Infection Prevention & Control Team has been expanded to manage the increased workload due to COVID and the provision of additional support to Care Homes, Support Services and Health Centers (Using Collaborative Care Home Support funding).

Capacity within the Health Protection Team has also been increased since the pandemic to manage increased workload including preparedness for and management of incidents and outbreaks.

Adequate IPC cover across the whole of the festive holiday period will be in place from the IPCT during working hours, with on call Microbiology /Infection Control Doctor input if required.

There is 24/ 7 Public Health cover over the whole festive period as usual , including an on call rota in place to provide health protection advice and management for incidents and outbreaks in the community and support for outbreaks in healthcare settings.

## **In Healthcare settings**

NHS Shetland is prepared for rapidly changing situations and this will be assessed on a daily basis at the Hospital Huddle with additional bed management meetings put in place in conjunction with the IPCT/ HPT as and when required e.g. the closure of multiple bays/ ward.

There is now a purpose built three bedded bay on Ward 3 specifically dedicated for the management of infectious cases.

NHS Shetland follows Antimicrobial Resistance Healthcare Associated Infections (ARHAI) guidance in the National Infection Prevention & Control Manual (NIPCM).

- Chapter 3 “Healthcare Infection Incidents, Outbreaks and Data Exceedance” in the NIPCM is available via a hyperlink in the “Outbreak Folder” on the Infection Control Portal on the Intranet and provides all the necessary guidance to be followed.
- The Outbreak Folder contains additional localized protocols and flowcharts for use in the management of an outbreak. These generic resources support the management of any infectious disease outbreak including COVID, Norovirus and influenza.
- The previous respiratory pathways have been discontinued with a move back to business as usual.
- Appendix 21 COVID-19 Pandemic Controls for Acute NHS settings including Scottish Ambulance Service (SAS) and dental services and Appendix 22 Community IPC COVID-19 Pandemic have been added to NIPCM. These appendixes aim to summarize the remaining pandemic measures which exist in addition to the NIPCM and provide links to helpful resources, guidance and policy documents.

The Infection Prevention and Control Team (IPCT) frequently review the appropriateness of procedures to prevent outbreaks when individual patients have “infectious” symptoms e.g. patient placement, patient admission and environmental decontamination post discharge. Procedures will be updated immediately if additional advice is received from ARHAI or other agencies that improve the management of such outbreaks.

A local Major Emergency Plan for the hospital and departmental business continuity plans which cover healthcare capacity

## **In Community settings**

Extensive work has been undertaken by the Infection Prevention & Control Team to support all Care Homes, Support Services and Health Centers in the provision of safe and effective care across all these environments. In addition there is a programme of Integrated Care Assurance Visits in place for the Care Home Sector. Support is provided to help teams implement guidance changes promptly and effectively.



There are now specific versions of the National Infection Prevention and Control Manual to support practice within Care Homes, Primary and Community Care settings. There is additional Infection Prevention and Control advice, support and training available to Care Homes, Primary and Community care teams via the Infection Prevention and Control team.

The Health Protection Team follows the current, national Public Health Scotland and Scottish Government guidance for management of covid, influenza, norovirus and other infectious diseases. National guidance has been shared with care homes, although updated flu and norovirus guidance for this year is still expected.

The Collaborative Care Home Support Team, led by the Director of Public Health has oversight of infection prevention and control activity in care homes.

### **Symptomatic Health and Care Staff**

Health and care staff will continue to be reminded of the need to remain absent from all health and social care work for the appropriate timeframes if symptomatic (as per NHS Inform guidance).

### **Surveillance**

The Health Protection Team and the laboratory monitor local infectious disease notifications and lab reports, and act on exceedances over expected prevalence.

The Health Protection Team receives and circulates the weekly infection pressure bulletin issued by Public Health Scotland, which keeps NHS Shetland up to date regarding the national influenza situation (and other seasonal / respiratory infections).

Two local GP practices are signed up for respiratory infections surveillance scheme.

### **Management of Outbreaks**

The response to any incidents and outbreaks within health settings will be led by the Infection Control Doctor (Microbiologist) and Infection Prevention & Control Team, supported by the Health Protection Team as required.

The response to incidents and outbreaks in social care settings and in the community will be led by the Health Protection Team supported by the IPCT for community care settings.

A Problem Assessment Group may be held initially to understand a situation; and if an incident or outbreak is declared, then an Incident Management Team will be called to subsequently manage the situation. The Chair of the PAG /IMT will decide who else needs to be involved or represented and this may include Public Health Scotland. A review will be held after any significant incident or outbreak to ensure system modifications to reduce the risk and impact of potential future outbreaks.

National Reporting Tools will be used to report any cases/ clusters/ outbreaks within the hospital setting to ARHAI. All incidents and outbreaks are recorded on the Health Protection Management System- HPzone.

The public will be informed about any visiting restrictions in health and care settings which might be recommended as a result of an outbreak.

### **Specific COVID prevention and control activity**

- Covid vaccination programme-see below
- There is continuing local publicity to encourage the public to take precautions to prevent the spread of all winter infections including Covid , flu and norovirus.
- The Health Protection Team works closely with Environmental Health in the identification and management of outbreaks, especially through Port Health.

### **The Autumn/Winter (Seasonal Flu and Covid) vaccination programmes 2023-24**

Since 1<sup>st</sup> April 2022 we have had a dedicated vaccination team to deliver adult flu, covid, pneumococcal and shingles vaccination programmes, ad hoc vaccines and support other services with their vaccination programmes. It is managed through the Public Health Directorate and supplemented by community and primary care nursing teams and bank staff (for this seasonal programme).

School Nursing / Child Health delivers the school based flu programme and Occupational Health works with the Vaccination Team to deliver the staff vaccination programme. There is also a dedicated team of staff scheduling appointments at the Vaccination Centre and other clinics, and administering the programme as a whole, supported by the primary care administration team and practices. The programme is also supported by significant staffing capacity from Public Health, Pharmacy, Maternity and Estates & Facilities. Staff training has been facilitated by staff development and public health and clinical team leaders, utilising the national training resources on Turas.

The autumn / winter flu and covid programme commenced at the beginning of September and will run until 22<sup>nd</sup> December. However there will be further catch up activity continuing until the end of the programme on 31<sup>st</sup> March 2024.

There has been considerable local public communications (social media local media, and via local businesses and organisations) for both the covid and flu vaccination programmes, led by the communication team and vaccination teams.

### ***Eligible Groups***

The following groups are being offered seasonal flu vaccination:

- All those aged over 50
- All children aged 2 -5, all school pupils

- People in clinical risk groups who have left school upto age 49 and babies aged 6 months to 2 years.
- Unpaid carers
- All pregnant women
- All NHS staff, all care staff who provide personal care, all pupil facing school staff
- Flu vaccine is also being offered to poultry and wild bird handlers who may be at risk of exposure to avian flu with the aim of reducing the risk of a new human /avian flu strain

The following groups are being offered a covid booster

- All those aged over 65
- People in clinical risk groups aged 6 months to 64 years
- Unpaid carers and people who live with someone who has a weakened immune system
- All pregnant women
- All frontline health and social care staff

Co-administration of flu and covid vaccines is done wherever possible.

### ***Venues and scheduling***

This season, invitations have primarily been via phone calls and prompt letters. We were unable to send appointment letters because of the changes in national policy and re-prioritisation at the beginning of the season . Most people over 75; those with weakened immune systems and children requiring covid vaccination were proactively telephoned. Others made appointment via the national booking portal by contacting the vaccination (admin) team, occupational health or their health centre.

Clinics are being / have been held for adults in the following settings:

- Unst, Yell and Whalsay and Hillswick Health Centres and non-doctor island clinics – all registered patients
- Levenwick, Scalloway, Bixter, Walls, Brae Health Centres - all over 75s and some other adults
- Temporary vaccination centre at Grantfield (SIC building) and other health board premises – Lerwick registered patients, some patients from other health centres, health and social care staff
- Care centres – residents and staff
- Community settings –outreach by Scottish Ambulance service for Levenwick and Bressay patients
- Occupational Health and workplaces –health and social care staff

Children are offered flu vaccine in school or at their GP practice; and covid vaccine at dedicated clinics usually in the Child Health Department.

In addition:

- Housebound people have been offered vaccination in their own home
- Patients requiring a hospital setting (due to risk of anaphylaxis etc) have been vaccinated in hospital clinics
- The vaccination team has worked with the Learning Disabilities nurse to offer appointments in the most appropriate setting for individuals.
- Pregnant women may have received flu vaccine from their midwife (if declined covid booster), but have been invited to attend the Vaccination Centre and practice clinics for covid vaccination and flu/covid co-administration.
- Walk in clinics are being held at the Vaccination Centre in December for anyone eligible

### **Uptake Rates**

All covid vaccinations and flu vaccinations (other than those given in maternity) are recorded on the Vaccination Management Tool which feeds into EMIS. Uptake is monitored weekly through national dashboards, Scottish Government flash reports and locally collected data

Uptake rates are available here: [PHS Vaccination Surveillance \(shinyapps.io\)](https://shinyapps.io)

By the end of November 61.4% of all those eligible for covid vaccination in Shetland had been vaccinated. This is less than last year (67%) but more than the Scottish overall uptake (48.6%). And 54.6% of all adults eligible for flu had been vaccinated, lower than last year (60%) but higher than the Scottish figure (46.3%). Figures have not been published for childhood flu vaccination, but it is higher in Shetland than the Scottish average.

### **Summary of local plans in place:**

- A local Public Health Outbreak and Incident Plan, based on national guidance
- A Hospital Outbreak Plan
- Hospital Emergency Plan
- Business continuity planning (both for NHS Shetland and other Community Planning partners) which includes consideration of staffing in the event of high absences
- Communication and media handling
- Surge capacity agreements

## **14. Disaster Recovery Plans**

There are business continuity plans for each area of health board business, designed to ensure that services continue to deliver and support patient care. In addition to this, Heads of Service have been asked to review all business continuity plans that are out of date to ensure they are fit for purpose given the expected winter pressures.

The Business Continuity and Resilience Officer is supporting Heads of Department to ensure BIAs and BCP are up to date. And there are two table top winter planning exercises are being run – one for acute settings and one for community settings to test BCPs.

Business continuity plans are also in place to manage water ingress into the Hospital (which is a risk to elective service delivery and access to A&E). The updated business continuity template has been circulated to Heads of Service for completion.

## **15. Escalation Procedures & Management Control**

The Health Board and the H&SCP has in place a Gold command on call Director who is able in real time to instigate any of the above contingencies. Gold command will be the first point of contact for local or national escalation procedures and will provide real-time feedback to partner organisations on the service delivery capacity locally.

Contact details for the Gold command are available to all partner organisations via switch. The Caring for People Plan must be invoked by the Director of Community Health & Social Care, if required as part of a wider major incident or in response to a health and social care related escalation plan.

Gold command will contact Corporate Services on call so that they can update messages to staff and patients if escalation plans need to be enacted.

The Council has an Emergency Planning and Resilience duty rota in place and the on – call person can be contacted via the GBH switchboard if there is a major alert escalation and multi-agency response is required.

## Mutual Staffing Support – unpredicted surge in demand or unexpected staff absence due to illness

In the case of a sudden unpredicted surge in demand or unexpected absence of medical staff in the hospital setting, the shifts will be covered by the other doctors available within the hospital with support from consultant colleagues and/or leave would be cancelled.

If activity levels increase to such an extent that the usual patient flow management arrangements in the hospital or community are exceeded then we will move to an internal major alert planning which would facilitate the cancellation of leave for all staff required to support the emergency management plan. Daily briefings will be put in place leading up to the festive period and will continue if required for the first 4 weeks into 2024 if required.

In preparation for an enhanced winter pressures response across the organisation there are plans in place to provide staff mutual aid across hospital and community nursing and between nursing and the care sector. Specific individuals within Community/Primary Care Nursing with specialist skills and relevant experience, have been identified who augment the theatre team to support the care of critically ill patients if needed, particularly if we see a rise in the number of patients with severe respiratory illness<sup>6</sup>.

Specific individuals working within the Acute sector who have District Nursing experience would be released to support outbreak situations in the community. If there is additional support required in a Care Home setting to support an outbreak, then the District Nurse will be freed up in the locality from caseload holding duties to manage the clinical care of individuals in the outbreak situation with backfill being provided into their caseload and staff team. In extremis, nursing staff from the staff bank or other settings may be asked to volunteer to provide support in the Care Home setting.

These arrangements are reflected in both the the Care Assurance Framework to support the Care Home Resilience.

Other than during the festive period, requests for mutual support should be made to the Executive Directors for the H&SCP and/or Acute & Specialist Services who will then contact Bank Coordinators to start a search for staff. Over the festive, Silver and Gold Command can use the mutual aid arrangements to ensure that safe staffing levels are maintained and continuity of care is provided as part of the winter plan enactment.

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<sup>6</sup> Any staff providing mutual support will remain employed by their host employer for salary and indemnity purposes. Any staff working in new and unfamiliar settings will be provided with appropriate induction. The host organisation will cross charge the organisation which received mutual support, retrospectively

## 16. Publicity

The Council and NHS, in conjunction with service partners, will undertake a publicity campaign regarding winter preparedness and the festive period. This will describe steps people can take to help themselves such as ensuring prescriptions are ordered in good time, and ensuring they have at home some over the counter remedies for common ailments. It will also explain the arrangements for accessing care over the festive period, with specific information for patients on how best to use out of hours services. It will include details on when it is appropriate to use emergency services and when and how to use NHS Inform or NHS 24. Our website, which includes information about access to services and health information will also be included in promotional materials.

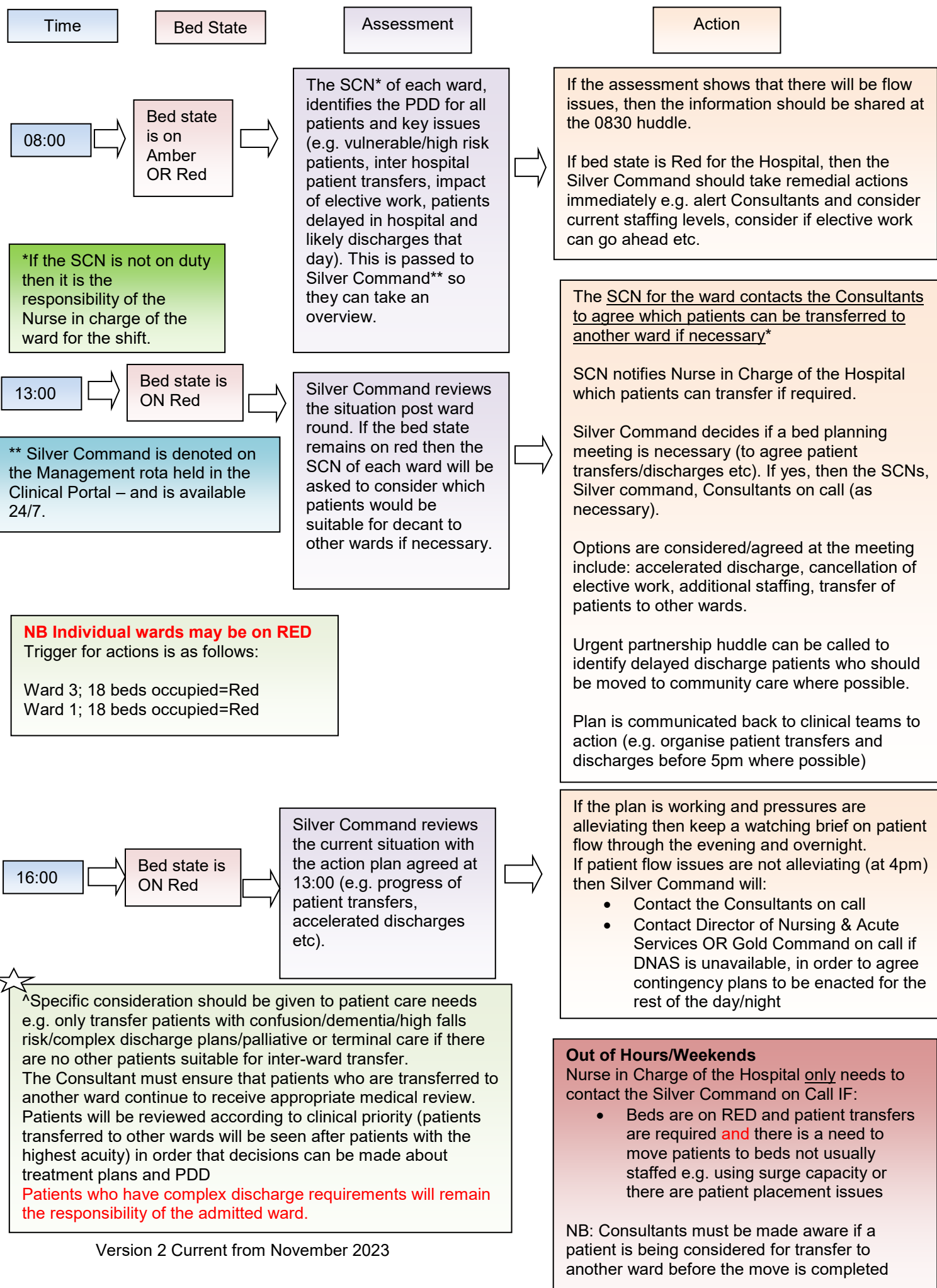
Right Care Right Place information on our website:  
<https://www.nhsshotland.scot/right-care-right-place>

Publicity will include social media posts and a full-page advertisement in the Shetland Times the week prior to Christmas; press releases; information at health centres; dental clinics and community pharmacies. The link to the festive opening times is shown below:

Corporate social media posts on Facebook and Twitter will be focussed on winter messaging with particular emphasis during the festive season over Christmas and New Year.

Local public health messages are also given out through the media and the Healthy Shetland social media account. In addition to this, NHS24 will contract with the local press and media to run a pre-festive publicity campaign.

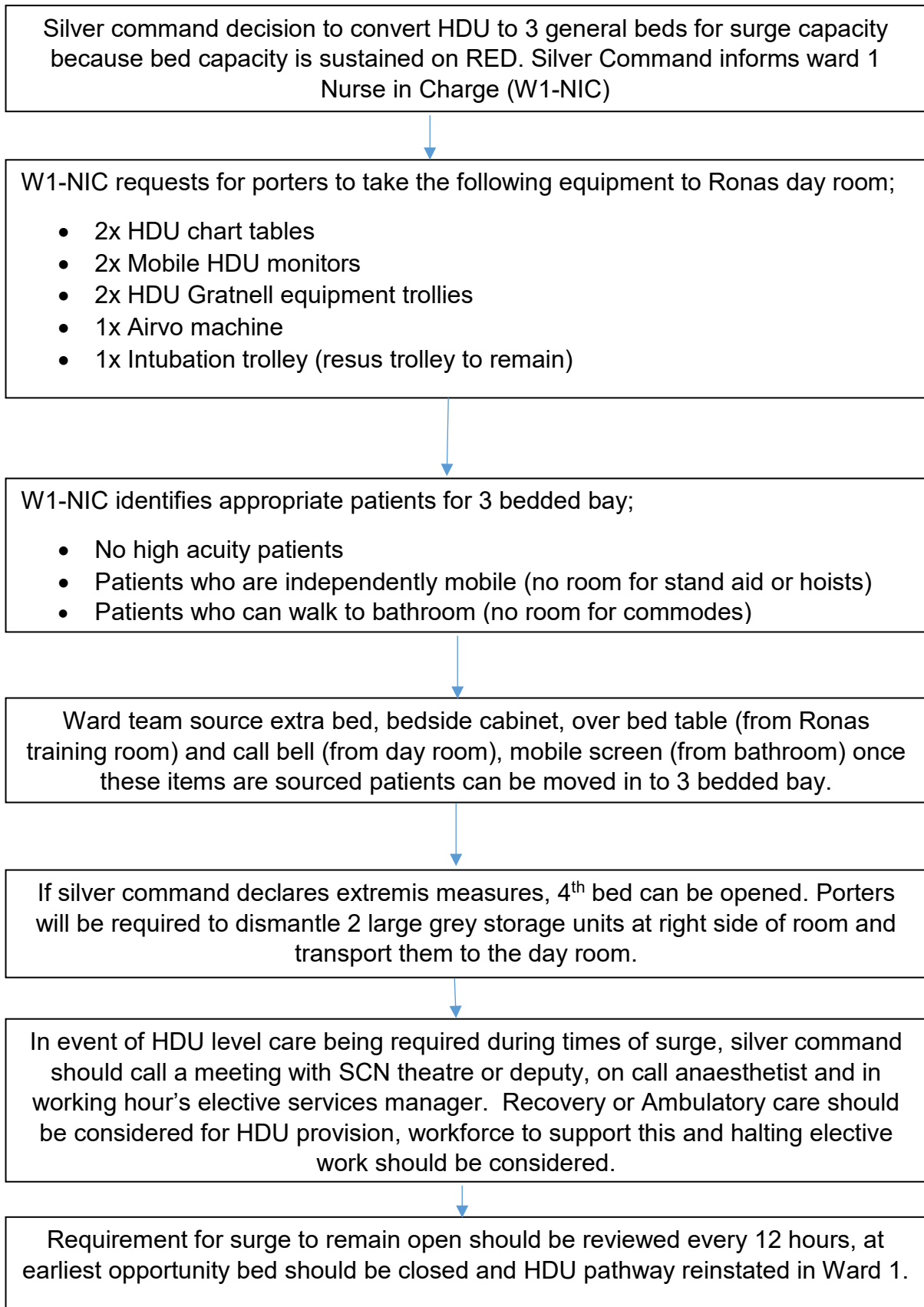
## Appendix A Patient Flow Escalation Plan (Acute Directorate) – NHS Shetland



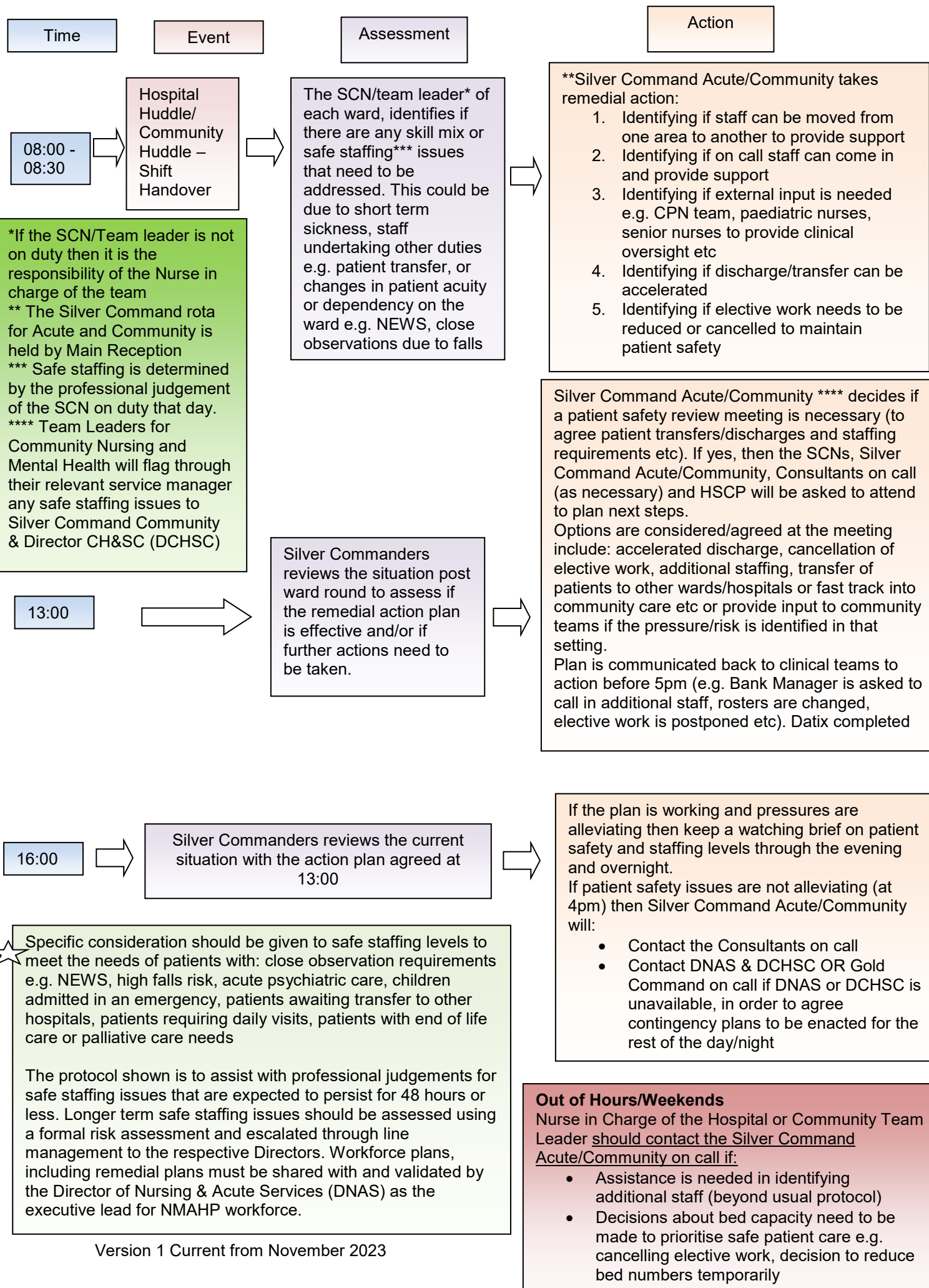


## Appendix B, Flow Chart

### Surge plan to create 1-2 additional acute beds, Gilbert Bain Hospital



## Appendix C Safe Staffing Escalation Plan – NHS Shetland



# NHS Shetland Appendix D – Patient Placement Plan

## Respiratory/Isolation Pathway for Emergency Admissions

Expected date of Discharge (EDD) to be recorded in Track on admission to ward.

Admit surgical patients to Ward 1. Patients requiring isolation should be admitted to Ward 1 side rooms. If a side room is not available, patient can be placed in an empty bay. Only confirmed cases with the same infection can be cohorted together.

Admit medical patients to Ward 3. Patients requiring isolation should be admitted to Ward 3 side rooms or the 3 bedded bay. If a side room is not available, patient can be placed in an empty bay. Only confirmed cases with the same infection can be cohorted together.

If Ward 1 is full, then start to admit into Ward 3 beds. Inform Silver command and follow the bed escalation plan.  
Organise Senior MDT review of elective surgery for next 24 hrs.

If Ward 3 is full, then start to admit into Ward 1 beds.  
Inform Silver command and follow the bed escalation plan.

If both wards are full –the bed escalation plan will be triggered. Silver Command will agree if the winter plan surge capacity should be used and additional beds will be opened (see below). Triggering this plan means we will need to identify supplementary staffing to open additional beds – this is an internal major alert response and planned elective activities will need to be stepped down. Silver command (H&SCP) will be alerted as fast track discharges may be needed.

If Ward 1 and Ward 3 are both full then the 1-2 extra beds can be placed in HDU.  
An urgent review of elective surgical and ambulatory care activity will be undertaken. Silver command will decide what planned care work can continue based on context.

### Respiratory/Isolation pathway

Side rooms should always be use for suspected or confirmed COVID.

Those with confirmed or suspected High Consequence Infectious Disease could be admitted to the isolation bay on ward 3. This room has negative pressure. IPCT advice should be sought.

Confirmed and suspected cases **cannot be cohorted together.**

2 suspected COVID pts **cannot be cohorted together**

## **Appendix E Information for managers on transport services and data to support adverse weather contingency planning**

The Winter Gritting Map provides a breakdown of gritting coverage.

Priority 1 & 2 routes are gritted any day required.

Priority 3 – only in the event of heavy snow or ice. The gritters will deploy at the request of one of the blue light services.

<https://www.shetland.gov.uk/roads-footpaths/winter-roads-treatment?documentId=406&categoryId=20061>

Forecasting and weather data is prepared on an hourly basis from Weather Stations that feed into the Met Office main algorithm. The Met Office website can be accessed at [Weather and climate change - Met Office](#) and the current and future weather at localities can be searched.

Up-to-date information regarding roads conditions can be obtained from Shetland Islands Council (01595 744109). Where there is widespread disruption information will be disseminated to staff via Corporate Communications and the Silver/Gold on call management teams.

Outside office hours Lerwick Police Station can provide the most up-to-date information regarding road conditions.

SIC Ferries - <https://www.shetland.gov.uk/homepage/73/ferry-status>

This link provides Service Information and Voicebanks for service disruption and news. This operates out-of-hours. For more detailed out-of-hours information contact MRCC Lerwick on 01595 692976.

For email or SMS updates email below:

[ferries.admin@shetland.gov.uk](mailto:ferries.admin@shetland.gov.uk)

### **Bad weather contingencies and ensuring staff movement of staff and supplies**

In the event of adverse weather incidents involving snow or ice, where the Inclement Weather Policy has been invoked; individual managers should risk assess which service activities can be delayed and staffing levels adjusted in line with their BCP arrangements.

Referring to staff contact lists, managers should establish where staff are traveling from and whether:

- The journey requires to be delayed or avoided
- Alternative staff can be identified and rostered
- 4x4 support requires to be sought from Police, Coastguard or SIC.
- Whether staff accommodation requires to be provided between shifts.

Managers should escalate to Silver Command (Acute or Community) or a relevant Director<sup>1</sup>.

The role of Silver Command during adverse weather incidents is to:

- Prioritise services
- Contribute to the risk assessment of journeys – staff or supplies
- Task 4x4 resources (SIC Building Services – 01595 744150 for SIC tasking, 01595 692976 for Coastguard, Police 101)
- Liaise with their counterpart in Community or Acute to avoid duplication of effort and risk
- Follow the patient flow and safe staffing escalation plans in Appendices A, B and C of the Winter Plan
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During extended adverse weather events, where ongoing 4x4 tasking is required, Silver Command should commence a log of any actionable requests, sharing the information between the hospital, CHSC services and Estates department.

Source of Request	Type of Request	From	To	When	Tasked to	Comments
Estates, Pharmacy, Primary Care etc	Staffing, Medication, Patient transport, Supplies				SIC HMCG Police Other	Contact details for staff

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<sup>1</sup> Silver Command rosters are in place to contact a senior clinician/manager 24/7 in the Acute and Specialist Services Directorate and the Community Health & Social Care Partnership. Staff in other Directorates should contact their line manager and follow the escalation arrangements that have been put in place in their Directorate to discuss the implications of bad weather on their work pattern.