

Health Update- Covid Recovery

General Practice

Mental Health Services

Hospital Services

Community Services

General Practice – Initial Covid response

- ▶ Practice Preparedness
- ▶ Total triage model
- ▶ Digital first primary care
- ▶ Covid “Hot” Clinic and Acute Visiting Service
- ▶ PPE enabled delivery
- ▶ Reconfigured service model for resilience
- ▶ Priority Pathways
- ▶ COVID testing
- ▶ CCG ways of working

Phase 3 response – the ask of Primary Care & next steps

- ▶ Network recovery plans
- ▶ Preparations and winter planning
- ▶ Resumption of normal service levels across the system
- ▶ Lessons learned incorporate effective covid driven change into normal business
- ▶ Primary Care Inequalities plan
- ▶ Flu Programme
- ▶ Reformed access model

Mental Health Recovery

- Most mental health services remained open
- Anticipate increase in demand and acuity
- Provider Recovery Planning Groups set up
- Increase in support to those seriously ill in the community
- All age 24/7 helpline
- Mental Health Urgent Care Centres
- Increase use of telephone and digital platforms
- Reducing demand on inpatient services

Hospital Recovery

- Elective programme ceased at start of pandemic
- Focus on recovery of elective, diagnostic and cancer activity
- Key challenge is reducing long waits and expect > 52 week waits to rise from 3,241 in July to 5,998 by the end of March
- Urgent care activity significantly reduced during the lock down period – now returning to pre-pandemic levels
- Focus on new delivery model for urgent care
- Second wave modelling – GM approach

Community Recovery

- Prioritised services required for the immediate Covid response (national guidance)
- Majority of services have restarted
- TLCO Recovery Board established to oversee the safe stand up of services (October QFP Committee to receive presentation from TLCO setting out their recovery plans in detail)
- Rapid Response and Urgent Care Therapy pathways were redesigned - aimed at supporting discharge and rehab in community; these pathways remain in place following review at Recovery Board
- OSRC has moved to a 7 day working model to support discharge at weekend without interruption to equipment provision
- Where clinically appropriate online consultations continue