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**To: Coventry Health and Wellbeing Board**

**Date: 12<sup>th</sup> July 2021**

**From: Phil Johns, Chief Accountable Officer, Coventry & Warwickshire CCG**

**Title: Restoration of non-COVID services in Coventry**

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## **1 Purpose**

- 1.1 To provide an update of the monitoring, recovery and restoration plans for non-COVID-19 services in Coventry

## **2 Recommendations**

- 2.1 The Board are asked to note the content of the report.

## **3 Information/Background**

- 3.1 In the first half of 2021 there have been two events which have had a significant impact on our restoration of services.

- We have had a second wave of Covid cases over December to February, followed by increasing Covid cases in the last few weeks in June related to the Delta variant.
- The system has been selected as a pilot site for NHS England's "Accelerator" programme which aims to accelerate the restoration of elective care services. The expectation of this programme is for pilot sites to undertake additional activity and transformation of services so that by the end of July 2021, elective care activity, as measured by value, reaches 120% of what it was in July 2019.

To support this pilot, the system has received £10m to support the expansion of capacity to deliver elective care. This is supported by the national Elective Care Recovery Fund (ERF) which provides additional revenue to systems who achieve delivering over 85% of activity levels seen in 2019-20.

Associated with this, the system has developed expansion plans for increasing diagnostic activity through community diagnostic hubs.

## **4 Key areas of Activity:**

- 4.1 Our focus remains on:
- 4.1.1 Recover the maximum elective activity including increasing electives including outpatients to at least 120% of 2019-20 levels by the end of July 2021.

- 4.1.2 Cancer delivery to restore cancer services including immediate management of 104+ day waits, reducing 62 day and 31 day waits.
- 4.1.3 Restoration of service delivery in primary care and community services, including backlog of childhood immunisations and cervical screening, programme of structured care home reviews, and all GPs to continue to offer face to face appointments as well as remote triage and video.
- 4.1.4 Expanding and improving MH/LD services including increasing investment in line with the Mental Health Investment Standard; allocation of funding to core Long Term Plan (LTP) priorities.
- 4.1.5 Preparation for management of any Covid resurgence and preparedness for general increase in emergency activity. We will do this by continuing to follow good Covid-related practice. We will also prepare for winter including
- utilising the independent sector,
  - expanding both Covid vaccination and seasonal flu vaccination programmes,
  - expanding the 111 First offer,
  - maximising the use of 'Hear and Treat' and 'See and Treat' pathways for 999 demands.
  - Continuing to work collaboratively with local stakeholders including voluntary sector and local authorities.
- 4.1.6 Reflecting on Covid lessons-learnt and embedding positive change and continuing to support staff, and continued action on inequalities and prevention: a People Plan 20/21 has been published with some specific objectives to address inequalities.

## 5 Overview of restoration of services

- 5.1 As a system, we are recovering our services well and, as of week of 21<sup>st</sup> June 2021, the majority of our services are at or above the levels from the same period in 2019-20, which is well above the activity seen last year during the first Covid surge.
- Almost 1.1 million covid vaccinations have been given across Coventry and Warwickshire by the end of June 2021. Initial data shows that this seems to be breaking the linkage between the rate of infection and the rate of hospitalisation, so whilst community infections have increased, the associated hospitalisation growth has so far been less than it was during the first and second waves.
  - Levels of diagnostic activity are back at or exceeding levels normally expected for this time of year, and referrals have returned to previous pre-COVID levels.
  - **Outpatients** - all services have been restarted and are increasing in line with provider operational plans to support the elective accelerator programme.
  - **Planned surgery** (Elective) - all services have been restarted and are increasing in line with provider operational plans to support the elective accelerator programme.
  - **GP Services:** Appointment levels are back at and exceeding levels seen in 2019-20.
  - **A&E attendances** – Overall these are lower than the same period last year, however, we are seeing high numbers of attendances at main casualty sites, and seeing an increase in admissions above numbers experienced pre-Covid. Part of this increase is a notable increase in attendances for children with respiratory illness, and part of the increase is a move towards more appropriate same day emergency care (SDEC) services and pathways.

## **6 Outpatient, Day-case, Electives activity**

- 6.1 **Outpatient:** As a System, Coventry and Warwickshire undertook approx. 26,000 first Outpatient attendances/month prior to Covid. Following the onset of the pandemic, the lowest point was approximately 12,000 attendances in May 2020, which was 40% of the same period in the preceding year.
- 6.2 The latest unvalidated weekly reported position in June 2021 shows the position has improved considerably with first Outpatient appointments at around **110%** of that at the same time in 2019.
- 6.3 **Day-case:** Approximately 11,000 day-case procedures took place in March 2020. In the immediate aftermath of COVID this reduced with the lowest point being in June 2020 with approx. 3,800 procedures.
- 6.4 The latest unvalidated weekly reported position in June 2021 shows the position has improved considerably with activity at **116%** of the same period in the preceding year.
- 6.5 **Inpatient Elective:** In March 2020, 1,400 elective procedures took place. This reduced to its lowest position in June 2020 of just under 400 operations.
- 6.6 The latest unvalidated weekly reported position in June 2021 the position has improved considerably with activity at **120%** of the same period in the preceding year.

## **7 Coventry and Warwickshire Cancer Services Restoration**

- 7.1 **Two Week Wait pathways** - With regards to patients on a two week wait suspected cancer pathway, we have seen the numbers being referred and waiting return to pre-Covid levels. The latest unvalidated weekly information for June 2021 indicates activity is **170%** of the level reported in the same week in June 2019-20 pre-Covid.
- 7.2 **Sixty-two day wait pathways** – After an initial fall when Covid started, the number of patients with cancer on a 62-day pathway has increased, reflecting the increase in referrals back to normal levels. The latest monthly information for April 2021 indicates activity is **100%** of the level reported in the same month in June 2019-20 pre-Covid.
- 7.3 It is important to note that a lot of patients chose to defer treatment in the first COVID wave, thus extending the period of time before treatment. This position is also improving.

## **8 Restoring and supporting access to GP Services**

- 8.1 The Covid Pandemic resulted in significant necessary changes to how Primary Care is delivered in Coventry.
- 8.2 As part of the NHS COVID-19 Phase 1 response, and in line with many areas across the country, a number of General Practice services were either fully or partially stopped in order to prioritise resources appropriately to respond to the national Level 4 Incident. The way in which other General Practice services were delivered needed to be radically changed in order to protect the health and wellbeing of both patients and staff.
- 8.3 The primary care operating model was rapidly adapted, in line with national guidance, to safely deliver primary care services to patients in Coventry and Warwickshire.

- 8.4 All practices in Coventry and Warwickshire undertook a wholesale move to a 'total triage' model with initial telephone triage of all patient contacts. Essential services are delivered in a tiered approach with a 'digital first' approach being implemented by practices for essential 'cold' consultations, this approach includes the use of telephone, video and online consultations.
- 8.5 All practices are open across Coventry. For those patients who need to be seen face to face, and are not potential COVID-19 positive or confirmed positive, face to face appointments are available at all practices in Coventry, following the initial telephone triage.
- 8.6 GP appointments back at or exceeding pre-Covid levels. Increased numbers of patients are having appointments on the day or the day after, with 63% occurring on the day or the day after, which is well above the national position of 55%.
- 8.7 Appointments are primarily during the working week (Monday to Friday). 50% of these appointments are face-to-face and 61% of the appointments are with GPs rather than other clinical staff, compared to a national position of 52%.
- 8.8 General Practice is continuing to deliver the vaccination programme in addition to seeing patients and restoring services
- 8.9 We are also working closely with our local practices to ensure that there remains an appropriate service for potential COVID-19 positive or confirmed positive patients who require a face to face consultation following clinical triage / consultation in an appropriate, safe Primary Care setting. These are known as "Hot Hubs" and ensure that patients are still able to seek the treatment they need or referred onward if urgent treatment is required.
- 8.10 Transport for those unable to make their own way to the Hub is also in place. We have surge and escalation plans in place to ensure appropriate capacity and capability in order to respond to the current pandemic demands.

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Enquiries should be directed to the above person.

**Appendices**

None