

Jean

From: [Name Redacted] <[Name Redacted]@gov.wales>
Sent: 12 January 2021 17:00
To: White, Jean (HSS - Chief Nursing Officer) <Jean.White@gov.wales>
Cc: Jones, Chris (HSS-DPH-Population Healthcare) <Chris.Jones@gov.wales>, [NR] HSS-DPH-Population
[Name Redacted]
Subject: RE: HSJ article on critical care staff

Jean

Sorry for the delay in replying on Monday for example, 11 of the 13 ICU units were on a 'stretched nursing ratios 1:2 for level 3 patients'. Redeployed staff have been moved to critical care to help out these units. However, given the whole hospital strain and vast number of patients in critical care, redeployment hasn't actually been 100% enough for all critical care patients / units in Wales. Uncertainty around the impact of this on the quality of care and ultimately to the outcomes of the patients.

I raised staffing ratios in the critical care network meeting they were off the opinion particularly as in many units there are not redeployed staff to support stretched 1 critical care nurse to 2 patients, we should only further stretch this by exception if the required levels of redeployed staff were available.

Happy to discuss

Thanks

[Name Redacted]

Tim Polisi Gofal Iechyd Seiliedig ar Werth - Value Based Healthcare Policy Team
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Os hoffech dderbyn ohebiaeth yn yr iaith Gymraeg neu os hoffech dderbyn unrhyw ohebiaeth yn y dyfodol drwy gyfrwng y Gymraeg, gadewch i mi wybod.

If you wish to receive correspondence in the Welsh language, or you wish any further correspondence to be in the Welsh language, please let me know.

From: White, Jean (HSS - Chief Nursing Officer) <Jean.White@gov.wales>
Sent: 11 January 2021 17:29
To: [Name Redacted] <[Name Redacted]@gov.wales>
Subject: FW: HSJ article on critical care staff

Is there anything I should be saying back to Andrew re dilution of staff in our units. Can you give me a summary position

Thanks
Jean



In a letter sent on 9 January to the boards of all trusts in the region, national leaders said they needed to “dilute nursing ratios beyond the current ask of 1:2” to achieve the significant increase in capacity.

In November, all trusts in England were told they could dilute staffing ratios in critical care from the standard one nurse to one patient ratio, to one nurse to two patients.

Informal reports from around the country suggest some trusts have already had to move beyond these ratios.

The letter said trusts had already been asked to surge capacity to 150 per cent of the normal baseline on 6 January, and were expected to be at 175 per cent today. But it said some units were still not achieving this and the region was “transferring patients to other regions.”

It added: “In addition to this, you need to have well developed plans in place that can be rapidly activated to surge to 200 per cent of baseline, which may need to be enacted in the coming days.

As a region, we will be expected to potentially support the decompression of units in other areas, primarily in London and the South East over the coming days and weeks.”

It comes a few days after *HSJ* reported internal data suggesting demand for critical care units in the Midlands would greatly exceed capacity within two weeks.

As of last week, Good Hope Hospital in Birmingham was already working at 200 per cent of its normal baseline, while seven hospitals had declared CRITCON 3 - the second highest alert level for critical care.

Dr Andrew Goodall