

Irrelevant & Sensitive

From: Simon Barry (Cardiff and Vale UHB - Medicine) <Simon.Barry@wales.nhs.uk>

Date: Wednesday, 16 October 2024 at 14:42

I&S

Subject: Re: Field Hospitals etc

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I found it, my email from early april.

From: Chris.Jones@gov.wales <Chris.Jones@gov.wales>

Sent: Saturday, April 11, 2020 2:47 PM

To: Simon Barry (Cardiff and Vale UHB - Medicine) <Simon.Barry@wales.nhs.uk>

Cc: **NR** @gov.wales **NR** @gov.wales

Subject: RE: COVID

Hi Simon,

Thank you for this. This tallies with my sense of how things are feeling as well.

There has been tremendous uncertainty regarding the size of the peak and Andrew Goodall has made it clear that it is better to overplan (the normal approach to emergency planning) than to underplan.

The Health Boards have figures to aim for and we have I believe asked them to plan to deliver for a peak mitigated to 40% RWC scenario.

I would remind you though that the daily presentations are cumulative and the peak is bound to be broadened as well as reduced, so this will go on for some time, so a lot of capacity will be used than at present.

I think everyone is doing their best, this response is truly impressive and we cant step back now.

Thanks though for the heads up.

Best Wishes,

Chris

Professor Chris Jones

Dirprwy Brif Swyddog Meddygol/Cyfarwyddwr Meddygol, GIG Cymru

Deputy Chief Medical Officer/Medical Director NHS Wales

I&S

E-mail/E-bost: chris.jones@gov.wales

From: Simon Barry (Cardiff and Vale UHB - Medicine) <Simon.Barry@wales.nhs.uk>

Sent: 11 April 2020 12:55

To: Jones, Chris (HSS-DPH-Population Healthcare) <Chris.Jones@gov.wales>

NR

Subject: COVID

Dear Chris

I feel I need to send this email, just to relate what I see on the ground in Cardiff at least. I don't have access to the NWIS data on capacity elsewhere.

We have planned for 200 invasively ventilated patients and >100 on CPAP. Currently there are 45 COVID on ITU and 4 patients on CPAP. There is huge capacity in the system.

I write this because I am concerned about the huge amount of resources going into dragons heart. My prediction is that this will be an enormous white elephant. I fully understand that WG need to prepare for worst case scenarios, but I question whether this is necessary given what is happening on the ground.

I would make the following suggestions/observations.

1. I have never seen the hospital so empty. There is tremendous capacity in the existing hospital bed base
2. Capacity varies across wales. Rather than aiming to place patients in the millennium stadium which has enormous logistical problems, could they be transferred between hospitals (plus cottage hospitals)
3. Could staff also flow according to need between HB
4. ITU capacity can be alleviated by offering trachy weaning on respiratory wards. Many patients need invasive ventilation for 2 weeks and many need trachy. We could help support this on resp wards. We can help deliver all the training about this. Ive started a conversation about this with ITU colleagues
5. We (the NHS) are very good at deciding ceilings of care, rationing resources, and palliating where appropriate. I doubt whether that was the case in Italy (or will be the case in the US)

Im sure as ever I am being disruptive, but I worry greatly about how the NHS will survive the inevitable vast drain on its resources that the COVID response entails.

If my prediction holds over this BH weekend, perhaps there can be further discussions in WG about what is the best course of action. I think social isolation has been hugely successful in reducing cases. If it is gently relaxed, capacity is unlikely to be breached.

BW