



Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board



Meeting Date	24 September 2020	Agenda Item	3.1
Report Title	Update on Field Hospital Provision		
Report Author	Manager Primary Care & Com	Ruth Tovey, Planning Manager (deployed as Planning Manager Primary Care & Community Services Delivery Unit and Strategic Planning Manager for Field Hospitals)	
Report Sponsors	Darren Griffiths, Interim Director of Finance & Performance Chris White, Chief Operating Officer, Deputy Chief Executive Officer and Executive Director of Therapies & Health Sciences Hilary Dover, Primary Care & Community Services Delivery Unit Director		
Presented by	Darren Griffiths, Interim Directo	or of Finance & Perfor	mance
Freedom of Information	Open		
Purpose of the Report	This paper provides an update Hospitals in Swansea Bay Univ to provide assurance to Board of the Field Hospitals.	versity Health Board (	SBUHB)
	It outlines for the Board the ke associated timelines to deliver Field Hospital, which the Hea super-surge bed capacity as contingency response arrange	a single site model at Ith Board is able to us per the agreed CC	the Bay itilise as
Key Issues	Modelling assumptions for CC were issued on the 24 <sup>th</sup> June 2 requirement for the Health Boa	2020. These reduced	
	As a result of changing Wels lockdown, social interaction, became evident that the Healt consequential losses as a resu Llandarcy Field Hospital.	exercise and educ	ation it to incur
	An option appraisal was und Board's Field Hospital Establis revised future Field Hospital re	hment Group to deterr	mine the

	delivered from Chair's Action to support the decommission transfer of a re Transfer of se Field Hospital Primary Care 8 took place 28 <sup>th</sup> Notice to vaca NPT County Co process and a contract curre acceptable sole Positive progre Field Hospital model and buil	te Llandarcy se ouncil on 28 <sup>th</sup> Au rrangements for ntly in discussi ution for all partie ess made with o Clinical Model a ding works asso	tal. d given on 13 <sup>th</sup> lel which would ndarcy Field odel to Bay Field ndarcy Field Ho services in Lla vices operational rved by the He gust 2020. Dec date of formal on to establishes.	August 2020) result in the Hospital and d Hospital. ospital to Bay andarcy from al perspective alth Board to ommissioning termination of n a mutually oment of Bay ion of oxygen
Specific Action	compliant solut		A	Ammanal
Specific Action	Information	Discussion	Assurance	Approval
Required (please choose one only)				
Recommendations	maintair	asked to: he update on F hing capacity   d capacity	• •	

## UPDATE ON FIELD HOSPITAL PROVISION

## 1. INTRODUCTION

This paper sets out the key events and activities undertaken in order to deliver a consolidated single site Field Hospital model, to ensure SBUHB remains in a position to be responsive and reactive to a potential second wave associated with the COVID-19 pandemic.

## 2. BACKGROUND

As outlined in the Health Board Quarter 2 Operational Plan, the need to maintain access to field hospitals remains a key part of our COVID-19 contingency arrangements. The approach has moved towards the delivery of a single site field hospital model, in summary due to:

- Letter from Welsh Governance received 24<sup>th</sup> June 2020 halving our COVID bed need.
- Changes in Welsh Government guidance bringing hospitality, education and fitness activities back online from August 2020, increasing our risk of consequential losses associated with Llandarcy Field Hospital due to the impact on the Llandarcy Academy of Sport.

On 16<sup>th</sup> July 2020, a paper was presented to the Field Hospital Establishment Group to outline current options available in relation to the ongoing leasing and use of both Llandarcy and Bay Field Hospital sites (**Appendix 1**).

The Field Hospital Establishment Group supported in principle the recommended option set out in the paper, this being **Option 4: Decommission Llandarcy and retain Bay with the decant of all services and workforce from Llandarcy into Bay with or without the provision of oxygen.** 

A Table Top exercise was convened by the Field Hospital Operational Team on 21<sup>st</sup> July 2020 with the aim of assessing the feasibility of a 'like for like' move from Llandarcy to Bay, scoping all pathways/systems/equipment to give a 'go/no go' response as to whether it was indicated as possible to relocate to Bay Field Hospital. The outputs of the Table Top Exercise enabled the Field Hospital Establishment Group to support in principle the proposed like-for-like move from Llandarcy based on the confirmed feasibility of service areas to transfer to Bay.

Subsequently, the Field Hospital Establishment Group supported the undertaking of a series of key activities, summarised as follows. These events have led to the current status of the Field Hospital provision in the Health Board, i.e. the single site Field Hospital model in Bay Field Hospital, of which delivery of the final model is ongoing as we move into Quarter 3/4. The Board was advised of the emerging positon at its July meeting and this paper updates the Board on the activities that have taken place in this regard.

#### • Activity 1: Decant Llandarcy Field Hospital to Bay Field Hospital

Transfer options paper presented to Field Hospital Establishment Group on 30<sup>th</sup> July 2020 outlining a feasibility assessment of the equipment decant in line with preferred deadline for exit of Llandarcy, as indicated by Llandarcy Academy of Sport (17<sup>th</sup> August 2020).

In summary, the paper (Appendix 2) described:

- There is sufficient space within Bay site for the equipment, including beds, to be transferred from Llandarcy.
- Removal of equipment by professional removal company at cost to the Health Board was supported to facilitate the move within the set timescale.

Chair's Action was agreed on 13<sup>th</sup> August 2020 to action the decant.

The decant action plan setting out the transfer of all loose equipment including beds and portable IT devices from Llandarcy to Bay Field Hospital was formally agreed by the Field Hospital Establishment Group and was implemented from W/C 18<sup>th</sup> August, with final completion on Friday 21<sup>st</sup> August 2020.

• Activity 2: Building works to Bay Towers Ward to return Scaffolding Centre to Trinity St David's College

Works to Bay Field Hospital Towers Ward for re-site of welfare facilities to allow hand back of Scaffolding Centre to the College, in order to avoid the Health Board incurring consequential loss costs (estimated £15k per month to the College from September 2020), were commissioned in August 2020. TRJ were instructed to complete the works and at the time of writing this paper, it is reported they are on track for completion of works by contract end date of 21<sup>st</sup> September 2020.

• Activity 3: Developing the 'like for like' service model for Bay Field Hospital, including building works to facilitate the provision of oxygen and refining the clinical model to align with this.

Use of oxygen in Bay Field Hospital was not factored into the original brief due to the agreed low acuity clinical model for the site. As the Llandarcy clinical model was predicated on availability of piped / VIE in the high acuity wards (Afan ward = 59 beds) in order to provide a like-for-like clinical model in Bay, the need to devise a technical solution from a fire engineering perspective has been a significant undertaking during this period.

The progress made to date with developing the fire code compliant model is summarised below:

Higher Acuity Ward Fire Strategy Principles developed by Fire Engineers and presented to Field Hospital Establishment Group 30<sup>th</sup> July 2020. These demonstrated a fire compartmentation solution that would enable the provision of piped oxygen in higher acuity wards within Bay. It was confirmed that on a clinical model like for like basis, this would equate to 6 wards within the Bay Field Hospital Pennard Ward.

- The technical solution is subject to fire evacuation times from each bay (determining the number of beds per bay as either 8 or 10, allowing for safe evacuation of patients and staff) and enhancing the management control plan.
- Due to the highly technical solution to compile the specification, drawings and obtaining buy in from the Senior Fire Advisor in Specialist Estates Services, the Health Board was in the position to hand over information to Swansea Council to obtain costs and a construction programme on 21<sup>st</sup> August 2020. At that stage, indicative timelines were outlined as;
  - 4-6 weeks to obtain cost and programme from Swansea Council
  - 2-4 weeks to secure approval from Health Board
  - Appoint contractor and undertake works, 3-4 months estimate to complete due to technical nature of the work.
  - Anticipated works completed and commissioned by end of February 2021.
- In view of this timeline, on 27<sup>th</sup> August Field Hospital Establishment Group agreed the proposal to facilitate provision of piped oxygen was not feasible to proceed with. As the Health Board is currently planning for COVID-19 second wave in December 2020, having the single site Field Hospital out of action due to ongoing building works would present a significant risk to the Health Board's ability to enact contingency /super surge capacity response to COVID-19.
- Ongoing discussions are taking place regarding the use of portable oxygen cylinders which would provide oxygen bottles for 10 trolleys in triage & treatment areas using a risk management approach using oxygen sensors in rooms, with no further passive/active precautions required. In addition, options for oxygen concentrator model are also being worked up as it is acknowledged that concentrators present a preferred solution in terms of storage and would reduce the workforce requirement to change cylinders frequently in the event of an unwell patient awaiting transfer.
- Scoping of oxygen model options are being concluded, with recommendation due to Field Hospital Establishment Group meeting 17<sup>th</sup> September 2020 for final decision on approach to be taken forward.
- The clinical model will be shaped around the final decision reached on the oxygen model. A workshop has been arranged for 28<sup>th</sup> September in order to visualise and operationalise the clinical model and associated pathways & processes for Bay Field Hospital, aligned with the oxygen model.

#### • Activity 4: Signing of Collaboration Agreements

It is confirmed that the Llandarcy and Bay Collaboration Agreements between the Health Board and respective Local Authorities have been signed and formally received by all parties. The process for signing the Llandarcy Collaboration Agreement concluded with NPT County Council on 7<sup>th</sup> August 2020 and Bay Collaboration Agreement with Swansea City & County Council on 11<sup>th</sup> September 2020.

• Activity 5: Primary Care & Community Services exit from Llandarcy Primary Care & Community Services element was agreed by Field Hospital Establishment Group to exit fully from Llandarcy on 28<sup>th</sup> August 2020, forming the official release date enabling triggering of the termination clause. It was noted that the remaining decant is from an estates/capital perspective of brick/mortar fixtures which can be repurposed, therefore it was also agreed that while the official handback date is being negotiated between parties, on site security / maintenance will continue to be provided by the Health Board. Confirmed that Capital Planning and Estates team will retain responsibility for the Llandarcy site in the intervening period, to protect assets while Llandarcy remains our responsibility.

• Activity 6: Chairs Action Decision and formal triggering of Llandarcy termination clause

Chairs Action Decision dated 13<sup>th</sup> August 2020 concerning the transfer of Llandarcy Field Hospital to the Bay Field Hospitals identified that the return of the building by the end of August 2020 to the local authority will eliminate the need for a number elements to be activated and will reduce the consequential risk to the Health Board. Statements of consequential losses are being received by the Health Board and the interim Director of Finance is assessing these and considering the appropriate route for scrutiny of the statements and independent handling of these given their novel nature. The Board will be advised of the outcome of this work in due course. **Note that Board members have been asked to ratify this decision as part of Ratification of Chairs Action Agenda Item at the Health Board meeting 24<sup>th</sup> September 2020.** 

Following receipt of Chairs Action, on 28<sup>th</sup> August 2020 the Health Board served notice to terminate the Llandarcy collaboration agreement early and engage with the contractors to start reinstatement works required to decommission the site.

• Activity 7: Llandarcy Decommissioning and official handover to NPT County Council

Discussions between the Health Board, NPT County Council and their contractors are ongoing to establish the earliest possible date for the official termination of the Health Board's ownership of the Llandarcy site in order to reduce the Health Board incurring incidental costs. At present it is proposed that Llandarcy can revert to NPT 'ownership' on the 21<sup>st</sup> September 2020 to allow early commencement of the reversion works by the contractor Andrew Scott Ltd. Capital Planning are currently in the process of establishing a full programme of works including indicative costs and timelines from the Contractors which will enable the Field Hospital Establishment Group to reach a final decision on the termination date at their meeting 17<sup>th</sup> September 2020.

The current estimate of the cost to revert the Llandarcy Field Hospital to Llandarcy Sports Academy are currently estimated to be circa £450k. This is an estimate. Should the final account come back in excess of £500k the matter will require Board approval and the Board will be advised of this as it is known.

#### 3. GOVERNANCE AND RISKS

The update above addresses the main points of governance, along with the ratification of Chair's action paper for the consideration of the Board. The Health Board has also

received the final report in relation to the Field Hospital Assurance Review undertaken by the Welsh Health Integrated Assurance Hub. This report and an early stage action plan were considered by the Audit Committee in September and further updates will be provided to that Committee. The follow up review of the actions in relation to this review is scheduled for 12<sup>th</sup> October 2020.

## 4. FINANCIAL IMPLICATIONS

The financial implication of this report are set out above. The precise calculation of decommissioning costs and consequential loses is currently under consideration. There has also been a revenue benefit in terms of the Health Board's earlier release of Llandarcy Field Hospital which has reduced the forecast revenue deficit of the Health Board.

## 5. NEXT STEPS

The Field Hospital model remains a critical part of the Health Board's response plan to managing the increased demand associated with COVID-19. The movement to a single site model at Bay Field Hospital is positive in terms of prudency and financial exposure and is based on the most viable, cost effective option available, whilst ensuring we continue to have capacity to respond to any future increase in acute/ inpatient demand if there are subsequent waves of COVID-19 admissions to hospitals.

The key next steps for delivery of the single site Bay Field Hospital Model include the finalisation of the clinical model in line with decisions made on the oxygen model. Following this it will be necessary to ensure all elements of the patient journey have been tested to ensure robustness of clinical and non-clinical model. Following the Clinical Model Workshop on 28<sup>th</sup> September, arrangements will be made undertake a 12 hour live exercise in Bay Field Hospital, likely to take place in mid-late October 2020.

## 6. **RECOMMENDATION**

Members are asked to:

• **NOTE** the update on Field Hospital provision whilst maintaining capacity preparedness in line with modelled capacity

Governance and Assurance				
Link to	Supporting better health and wellbeing by actively	promoting and		
Enabling	empowering people to live well in resilient communities	-		
Objectives	Partnerships for Improving Health and Wellbeing			
(please choose)	Co-Production and Health Literacy			
	Digitally Enabled Health and Wellbeing			
	Deliver better care through excellent health and care servic outcomes that matter most to people	es achieving the		
	Best Value Outcomes and High Quality Care			
	Partnerships for Care			
	Excellent Staff			
	Digitally Enabled Care			
	Outstanding Research, Innovation, Education and Learning			
Health and Ca	re Standards			
(please choose)	Staying Healthy			
	Safe Care	$\boxtimes$		
	Effective Care	$\boxtimes$		
	Dignified Care	$\boxtimes$		
	Timely Care	$\boxtimes$		
	Individual Care			
	Staff and Resources			
Quality, Safety	and Patient Experience			
<ul> <li>have a d</li> </ul>	ransferred out of acute care and / or; confirmed COVID-19 infection and do not require acute o self-care at home	care, but are		
Financial Impl	ications			
	pplications associated with the decommissioning of Llar	ndarcy Field		
	ansfer of services to Bay Field Hospital are detailed in the			
of the paper. On balance what has been undertaken to date presents the most				
viable and cost effective option available to the Health Board.				
Legal Implicat	ions (including equality and diversity assessment)			
	ard has acted in line with required legal obligations an	d followed du		
process in order to formally terminate the Llandarcy Colloboration Agreement with				
NPT County Council.				
Staffing Implic	ations			
There are no st	affing implications associated with this paper.			
Long Term Im		FEuturo		
<b>A</b>	plications (including the impact of the Well-being of	rulure		
	Wales) Act 2015)			
Briefly identify				

- Long Term The field hospital will enable the Heath Board to meet the short term challenge presented by COVID-19, by ensuring that there is sufficient additional capacity, to limit any further impact on the long term delivery of core services, e.g. cardiac surgery, cancer surgery.
- Prevention The field hospital will ensure that the Health Board is able to admit all patients with COVID-19 who require inpatient treatment, and thus prevent any further deterioration of their condition, and reduce the risk of the spread of infection across the wider community.
- Integration The field hospital will link with acute services as well as social care, and ensure that patients are able to be discharged home as soon as clinically appropriate.
- **Collaboration –** The field hospital model has been developed through a collaborative approach with local authorities and other partners.
- Involvement Training will be provided to ensure that staff within the field hospital are able to deliver effective patient care taking account of the diversity of the area which the body serves.

Report History	N/A
Appendices	Appendix 1 – Options Paper Field Hospitals
	Appendix 2 – Transfer of Llandarcy to Bay Options





Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board



Meeting Date	16 July 2020		Agenda Item	3.1
Report Title	Options pape	er for Field Hos	pitals	
Report Author	Lisa Chess, Project Lead Llandarcy Field Hospital Emily Davies Interim Head of Nursing Field Hospital Development Anjula Mehta Interim Unit Medical Director Sally Bloomfield, Project Lead Bay Field Hospital			
Report Sponsor	Hilary Dover, Operational Lead, Field Hospitals			
Presented by	Hilary Dover	Hilary Dover		
Freedom of Information	Open			
Purpose of the Report	The purpose of this paper is to outline current options available to Swansea Bay University Health Board (SBUHB) in relation to the ongoing leasing and use of both Llandarcy and Bay Field Hospital sites. These options must be considered in line with current modelling data to ensure SBUHB remain in a position to be responsive and reactive to a potential second wave associated with the COVID-19 pandemic.			
Key Issues	<ul> <li>Heads of Terms for Llandarcy Field Hospital under renegotiation, use of main buildings agreed until 23<sup>rd</sup> October 2020.</li> <li>Recognised ongoing risks associated with workforce, building regulations, Health &amp; Safety and Oxygen provision in relation to both Field Hospital sites.</li> <li>Cost implications of maintaining both Field Hospital sites and the feasibility of extending current Lease agreements for both Bay Field Hospital (BFH) and Llandarcy Field Hospital (LFH).</li> <li>Financial, risk and timeframe burdens associated with the decommissioning of LFH and transferring the current clinical model to the BFH site.</li> </ul>			
Specific Action	Information	Discussion	Assurance	Approval
Required (please choose one only)				
Recommendations	4 (A or B) dep Table Top exe The Field Hos	spital Operationa bendent on the o ercise on the 21 <sup>s</sup> spital Establishm	utcome of the Fi <sup>st</sup> July 2020. ent Group is ask	ield Hospital
	options.	recommendatior	i in light of avalla	

## 1. INTRODUCTION

As a consequence of the Covid-19 pandemic it was envisaged that Swansea Bay University Health Board (SBUHB) would need to significantly increase its bed capacity thereby increasing patient flow and 2 field hospitals, Bay and Llandarcy, were commissioned to operate as temporary health and care facilities.

The Health Board's approach is to maximise capacity within its three main hospitals – Morriston, Singleton and Neath Port Talbot, and only when this is exhausted will the Field Hospitals come into operation.

The initial 6-month contract for Llandarcy Field Hospital is due to end on 23<sup>rd</sup> October 2020 whereas and the Bay Field Hospital has a sub-lease agreement for 12 months with Welsh Government approval.

The demand within the Health Board however has not to date increased to such a level that this additional capacity has been required.

The task now therefore is to agree the most viable, cost effective options available to SBUHB in relation to the Field Hospital sites to ensure we continue to have capacity to respond to any future increase in patient demand if there are subsequent waves of Covid-19 admissions.

## 2. BACKGROUND

The Field Hospitals enhance the ability of the health and care community in Swansea and Neath Port Talbot as part of a response to a super surge scenario where acute sites have maximised their capacity. The Field Hospitals provide additional to care for all its residents during the Covid-19 crisis by temporarily increasing bed capacity, thereby optimising patient flow and ensuring active treatment. This ensures that the Health Board can:

- deliver the most appropriate care to those in most need, and thereby save more lives
- rehabilitate and discharge patients as quickly as possible
- care appropriately for those at the end of life and for their loved ones

The Health Board's approach is to maximise capacity within its three main hospitals – Morriston, Singleton and Neath Port Talbot, and only when this is exhausted will the Field Hospitals come into operation. The need to do this may occur quickly, with the requirement to operationalise Field Hospital capacity within a maximum of 72hours if the escalation policy hits super surge.

It is very difficult to predict capacity demands given the current trajectory and modelling assumptions for the pandemic, however the initial 6-month contract period for Llandarcy Field Hospital is now approaching its end, so a decision needs to be made with regards to the immediate future.

## **Clinical Modelling**

Based on Public Health Wales initial clinical modelling it was estimated that Swansea Bay University Health Board (SBUHB) would require up to 2000 additional beds to manage Covid-19 if it reaches its projected peak.

The 2 field hospitals have been designed to meet the Covid-19 emergency levels of care as described below (Table1)

## Table 1: COVID-19 Emergency Levels of Care

	Swansea Bay COVID-19 Levels of Care	COVID-19 Care Descriptor	Care Location
Level 1	Level 1 Intensive Care	Patients needing advanced respiratory and therapeutic support of multiple organs	Critical Care Level 3
Level 2	Level 2 NIV / 1 Flow O2	Patients in acute respiratory failure, requiring non-invasive ventilation or respiratory support using CPAP or BIPAP Frequent de-saturations on high flow oxygen	Critical Care Level 2: Hospital identified CPAP ward
	Level 3 COVID Ward O2 Dependent	O2 dependent - Patient requiring non-invasive ventilation or respiratory support requiring close observation for complications	Hospital Ward
Level 3	Level 3 COVID Ward NOT O2 Dependent	O2 required intermittently e.g. on exertion, not needing O2 at rest	Consider LLandarcy Field Hospital
		No O2 required	Consider Bay Field Hospital

The Level 3 Covid Ward is sub divided into oxygen dependent and non-oxygen dependent patients. Patients who may require oxygen intermittently e.g. on exertion will be identified and transferred to Llandarcy Field Hospital.

## Ysbyty'r Y Bae/Bay Field Hospital

The hospital is comprised of:

- Phases 1 and 2 415 beds and 6 assessment beds.
- Phases 3 and 4 572 beds
   It has been agreed that phases 3 and 4 will not be commissioned at this current time and currently there is also no water provision in these areas.
- Phase 5 was stood down (and is shortly to be used to house the SBUHB PPE cell)
- A discharge lounge (4 bays with 84 chairs) which can easily be replaced with beds if required (n39).

The Field Hospital will provide

 A low acuity active management pathway for Level 3 patients who do not require oxygen and are predominantly self-caring and independent or require occasional assistance with some activities of daily living. These patients will be self-medicating.

## Staffing

The hospital will be nurse led with Allied Health Professionals, Health Care Support Workers, SSA and volunteers making up the staffing. A proposed service level agreement will be implemented with local GP practices/Clusters to provide Medical input for BFH inpatients should the site become operational.

Currently with the exception of volunteers, no staff have been identified for the Bay Field Hospital, as this requires a Health Board wide approach to deploy staff as required from all Units

## Ysbyty'r Maes Llandarcy / Llandarcy Field Hospital

The hospital is comprised of a triage Area (8 beds) and three wards:

- Afan (58 beds) higher level acuity
- Dulais (238 beds)
- Tawe (18 beds) palliative care

The hospital will provide

- A supportive care pathway providing active management for those recovering from Covid-19 and requiring Level 3 care. Patients **who may require oxygen intermittently** will be considered for transfer to Llandarcy Field Hospital. These patients will be transferred from the acute hospitals.
- The care pathway will also include those who need end of life care where it cannot be delivered in the person's home. This will be for patients who are both Covid-19 positive and negative.
- A "Front Door" at Llandarcy Field Hospital can accept appropriate referrals from GPs for patients if they have tested positive with Covid-19 and cannot be managed in the community. This could be an alternative to an acute admission provided the patient meets the admission criteria for Llandarcy Field Hospital.
- Step up patients from the Bay Field hospital who deteriorate and need a higher acuity of care.

## Staffing

The hospital will operate a medically led model, with Doctors, nurses, AHP's, HSCW's, SSA's and volunteers making up the staffing levels required. To date staffing has only been identified for Phase 1; Triage, Afan and Tawe wards, from staff working in Primary and Community Services Delivery Unit.

## **Dormancy and Reactivation Plans**

Llandarcy Field Hospital is now dormant and a 72hour reactivation plan has been developed and agreed, Bay Field Hospital is almost complete and also has an agreed 72hour reactivation plan. Bay is currently being used by the antibody service to deliver testing to identified members of staff across local authority and health services.

Other health agencies have also expressed interest in running their services from Bay Field Hospital, following completion and agreement of standard proforma, all with the understanding that they would have to leave the site should SBUHB experience a Covid-19 surge necessitating the reactivation of the hospital.

## 3. GOVERNANCE AND RISK ISSUES

All benefits and risks have been identified under each option.

## 4. OPTIONS and FINANCIAL IMPLICATIONS

A number of options have been identified, as detailed below:

Option 1: Keep both sites for duration of current contracts
---

Benefits	Risks
No change to current clinical models and capacity at both sites	Insufficient workforce identified to staff both sites.
	Short length of contract at Llandarcy and ongoing costs incurred
	No maintenance contract at Llandarcy
	Potential loss of roof structure integrity at Bay resulting in water ingress (mitigation in place to reduce potential damage)
	Body storage facility at Llandarcy will be removed on 20/7/20, and there is no body store area identified in Bay.
	Requirement to procure a costly maintenance contract with an external provider.

## **Financial Implications**

Llandarcy Costs	
Grounds maintenance	£23,250
College Students temp teaching space	£97,500 installation
"	£166,000 rental hire for minimum term
College Students sports facility hire	£20,000 rental September - December
Temporary Gym (commercial)	£10,000 installation
"	£3,000 per month rental
Temporary location for fitness classes	£4,500 per month
Temporary lights for pitch 2	£4,800 per month rental–minimum 6/12
Ospreys temporary training facility	£17,000 per month
External maintenance contract	£123,906 – 6 months
£123,906 – 6 months	
Potential Bay Costs if scaffold centre rem	ains
Business interruption costs per month	£15,537.98
Temporary facility indicative cost	£100k
Fees approx	£10k
Permanent replacement facility (approx)	£700k
After 12 months Roy would be entitled	£300 - £400k approx (plus VAT) –
to market value rent	(negotiable due to condition of building)
Cost of converting the 10 bays in	To be confirmed (mainly superficial
Towers ward (due to return of the	plaster board partition walls required

current staff area to the University) into: Staff showers/changing (2), staff rest areas with basic kitchen facilities and wellbeing area (4), medicines management hub (1) training rooms (1) thoroughfare to don and doff area (1)	and shower cubicles)
Administrative facility (1).	

# Option 2: Decommission both sites, Llandarcy and Bay Field Hospitals

Benefits	Risks
Financial Savings	This would result in a significant reduction in bed capacity, whereupon SBU may not be in a position to respond to a Covid-19 super surge.

# Financial Savings and Costs

Llandarcy Savings	
Grounds maintenance	£23,250
College Students temporary teaching	£97,500 installation
space	
"	£166,000 rental hire for minimum term
College Students sports facility hire	£20,000 rental September - December
Temporary Gym (commercial)	£10,000 installation
"	£3,000 per month rental
Temporary location for fitness classes	£4,500 per month
Temporary lights for pitch 2	£4,800 per month rental – minimum 6
	months
Ospreys temporary training facility	£17,000 per month
Potential Bay Savings when scaffold cent	re is returned
Business interruption costs per month	£15,537.98
Temporary facility indicative cost	£100k
Fees approx	£10k
Permanent replacement facility (approx)	£700k
After 12 months Roy would be entitled	£300 - £400k approx (plus VAT) –
to market value rent	(negotiable due to condition of building)

## Option 3: Retain Llandarcy, decommission Bay

Benefits	Risks
Retain the higher acuity medical model without further costs	Insufficient workforce identified to fully staff Dulais ward.
	The current heads of terms for Llandarcy runs until 23 <sup>rd</sup> October 2020 and there is no guarantee of extension

Significantly reduced bed capacity (323 beds) across SBU to manage super surge
No maintenance contract at Llandarcy
No body store facility after 20/7/20 however it has been confirmed there is sufficient body storage available across Wales.
Requirement to procure a costly maintenance contract with an external provider.

## **Financial Implications**

Llandarcy Costs		
Grounds maintenance	£23,250	
College Students temporary teaching	£97,500 installation	
space		
"	£166,000 rental hire for minimum term	
College Students sports facility hire	£20,000 rental September - December	
Temporary Gym (commercial)	£10,000 installation	
"	£3,000 per month rental	
Temporary location for fitness classes	£4,500 per month	
Temporary lights for pitch 2	£4,800 per month rental – minimum 6	
	months	
Ospreys temporary training facility	£17,000 per month	
External maintenance contract	£123,906 – 6 months	
Llandarcy Savings		
Decommission of Body Store	TBC	

# Option 4: Decommission Llandarcy and retain Bay with the decant of all services and workforce from Llandarcy into Bay

4A: With Provision of oxygen

ufficient workforce identified to staff
1
r. ential loss of roof structure integrity Bay resulting in water ingress igation in place to reduce potential nage)
3

4B: Without provision of oxygen

Benefits	Risks
Bed capacity for phase 1 = 615 with possibility to commission and additional 560 beds	Insufficient workforce identified to staff Bay.
No ongoing costs for Llandarcy	Restricted referral criteria for patients transferred to field hospitals in event of super surge
	Potential loss of roof structure integrity at Bay resulting in water ingress (mitigation in place to reduce potential damage)
	The requirement to escalate patients in a timely way to acute site

# Financial Savings and Costs

Llandarcy Savings		
Grounds maintenance	£23,250	
College Students temporary teaching	£97,500 installation	
space		
"	£166,000 rental hire for minimum term	
College Students sports facility hire	£20,000 rental September - December	
Temporary Gym (commercial)	£10,000 installation	
"	£3,000 per month rental	
Temporary location for fitness classes	£4,500 per month	
Temporary lights for pitch 2	£4,800 per month rental – minimum 6	
	months	
Ospreys temporary training facility	£17,000 per month	
Bay Costs		
Llandarcy Decant costs to Bay	To be confirmed	
Cost of building alterations required for	To be confirmed	
oxygen provision		
Cost of converting the 10 bays in	To be confirmed (mainly superficial	
Towers ward (due to return of the	plaster board partition walls required	
current staff area to the University) into:	and shower cubicles)	
Staff showers/changing (2), staff rest		
areas with basic kitchen facilities and		
wellbeing area (4), medicines		
management hub (1) training rooms (1)		
thoroughfare to don and doff area (1)		
Administrative facility (1).		
Potential Bay Costs if scaffold centre remains		
Business interruption costs per month	£15,537.98	
Temporary facility indicative cost	£100k	

Fees approx	£10k
Permanent replacement facility (approx)	£700k
After 12 months Roy would be entitled	£300 - £400k approx (plus VAT) –
to market value rent	(negotiable due to condition of building)

# Option 5: Decommission Llandarcy and offer Bay as a regional field hospital asset.

As for option 4 however this option may also offer viable workforce sourced from neighbouring health boards and would provide an overall cost reduction pan Wales.

## Other considerations for retaining Bay Field Hospital

Whilst Bay Field Hospital remains unoccupied, i.e. SBUHB operates at usual capacity levels and escalation triggers remain stable, there is opportunity for SBUHB to generate income by entering into agreement with stakeholders to make use of the premises.

Some examples:

- Swansea University Medical School could rent a portion of the premises to run OSCE examinations
- SBUHB clinics where rental costs are currently paid could be run from Bay Field Hospital, e.g. GP OOH, wound clinics, these clinics would be stood down if the escalation policy was triggered.
- Cost savings incurred by staff working in above services who are required to park in Local Authority premises

## 5. RECOMMENDATION

The Field Hospital Operational Group recommends Option 4 (A or B) dependent on the outcome of the Field Hospital Table Top exercise on the 21<sup>st</sup> July 2020.

The Field Hospital Establishment Group is asked to consider this recommendation in light of all five options available.

Governance ar	nd Assurance		
Link to Enabling	Supporting better health and wellbeing by actively empowering people to live well in resilient communities	promoting and	
Objectives	Partnerships for Improving Health and Wellbeing	$\boxtimes$	
(please choose)	Co-Production and Health Literacy	$\boxtimes$	
	Digitally Enabled Health and Wellbeing		
	Deliver better care through excellent health and care services achieving the		
	outcomes that matter most to people		
	Best Value Outcomes and High Quality Care	$\boxtimes$	
	Partnerships for Care	$\boxtimes$	
	Excellent Staff	$\boxtimes$	
	Digitally Enabled Care		
	Outstanding Research, Innovation, Education and Learning		
Health and Care Standards			
(please choose)	Staying Healthy	$\boxtimes$	
	Safe Care	$\boxtimes$	

	Effective Care	$\boxtimes$
	Dignified Care	$\boxtimes$
	Timely Care	$\boxtimes$
	Individual Care	$\boxtimes$
Staff and Resources		$\boxtimes$
Quality, Safety	y and Patient Experience	
Financial Impl	lications	
	d to balance the ongoing costs of maintaining	Llandarcy Field
	d the agreed term in October against the cost	
	Bay Field Hospital.	
	costs and risks are not fully articulated and the	e paper asks the
	group to consider their preferred potential opti	
	n anticipated announcement from Welsh Gov	
	nking in regard to a future regional approach to	
Wales.		
egal Implicat	tions (including equality and diversity asse	essment)
	thin the legal Heads of Terms for both Field H	
fully considered		
	<i>A</i> .	
Staffing Implic	cations	
	force is one of the biggest risks for the field ho	ospitals, to date
	orce has only been identified for Afan and Ta	
	ere to decant to the Bay it is assumed this wor	
	ver site induction already completed at Llanda	
repeated in Ba	· · ·	
	y.	
	plications (including the impact of the Wel	II-being of Future
	Wales) Act 2015)	
	how the paper will have an impact of the "The	Well-being of Future
Generations (V	Vales) Act 2015, 5 ways of working.	
_	erm – It is envisaged that Field Hospital cap	pacity will be needed for
the length of time for the COVID 19 pandemic only		
• Prevention – The paper aims to outline how to prevent to risk of insufficient		
capacity to deal with the super surge		
<ul> <li>Integration – Close working has taken place and will be ongoing with Local</li> </ul>		
Authority and 3 <sup>rd</sup> rd sector		
	pration – as above	

• **Involvement –**as above.

Report History	Nil
Appendices	Decant plan

## Appendix 1: Llandarcy Decant Plan







Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board



Meeting Date	30 July 2020		Agenda Item	3.1
Report Title	Equipment Decant from LLandarcy Field Hospital to			Hospital to
-	Bay Field Hospital			
Report Author	Sally Bloomfield, Project Lead Bay Field Hospital			
Report Sponsor	Hilary Dover, Operational Lead, Field Hospitals			
Presented by	Hilary Dover	•	· · · · ·	
Freedom of	Open			
Information				
Purpose of the	Following agr	eement by the l	Field Hospital E	stablishment
Report			ndarcy Field Hos	
			I (BFH) the purp	
			ed plan for the i	
			k, removable fix	
	•		s will facilitate th	
			he earliest requi	
			ield Hospital Pla of losses by the	
	relation to the Welsh Government Plan to reopen gym and training facilities.			
Key Issues	Welsh Government Plans for the future of Welsh Field			
	Hospitals			
	Potential further costs to the LHB in relation to losses			
	incurred due to the potential reopening of gyms in Wales			
	form the 17 <sup>th</sup> August 2020 and ongoing costs associated			
	with LFH.			
	The timescale required to fully decommission and return to original state by the end of the lease date 23/10/2020.			
Specific Action	Information	Discussion	Assurance	Approval
Required				$\boxtimes$
Recommendations	The Field Hos	pital Establishr	nent Group is as	sked to:
	Consider the proposed plan for the immediate decant of			
	all equipment, stock, removable fixtures and fittings from			
	LFH to BFH.			
	Agree the option for the removals as outlines in section 4.			
	Note that finalised costs are awaited, paper will be			
	updated when these are received.			

## 1. INTRODUCTION

As a consequence of the Covid-19 pandemic, it was envisaged that Swansea Bay University Health Board (SBUHB) would need to significantly increase its bed capacity thereby increasing patient flow and two field hospitals, Bay and Llandarcy, were commissioned to operate as temporary health and care facilities.

The Health Board's approach is to maximise capacity within its three main hospitals Morriston, Singleton and Neath Port Talbot, and only when this is exhausted will the Field Hospitals come into operation. The demand within the Health Board however has not to date increased to such a level that the additional capacity provided by the two field hospitals has been required.

#### 2. BACKGROUND

The Field Hospitals enhance the ability of the health and care community in Swansea and Neath Port Talbot as part of a response to a super surge scenario where acute sites have maximised their capacity. The Field Hospitals provide additional to care for all its residents during the Covid-19 crisis by temporarily increasing bed capacity, thereby optimising patient flow and ensuring active treatment. This ensures that the Health Board can:

- deliver the most appropriate care to those in most need, and thereby save more lives
- rehabilitate and discharge patients as quickly as possible
- care appropriately for those at the end of life and for their loved ones

An option appraisal for the future of Llandarcy and Bay Field hospitals was provided. It was agreed by the Field Hospital Establishment Group on 20<sup>th</sup> July 2020 to proceed to decommission LFH and retain BFH as this option provided a prudent approach to the provision of required bed capacity to respond to any future increase in patient demand if there are subsequent waves of Covid-19 admissions.

As can be seen from the table below there are 9 more bed spaces available in the commissioned area of BFH which allows for the direct decant and replication of current equipment and layout of LFH.

Bed Capacity Bay	
Assessment area	6 (+ 4 treatment rooms)
Pennard	70
Baglan	80
Neath	96
Margam	84
Total	330
Phase 3 & 4 (not commissioned). Available for decant	562

Total	892

Bed Capacity Llandarcy	
Triage (Oxygen)	8
Afan ( Oxygen)	59
Dulais	235
Tawe (Palliative care)	19
Total	321

The four wards in the Bay can be decanted into phase 3 and 4 to facilitate a decant from Llandarcy as of Monday 3<sup>rd</sup> August 2020 or as early as required. It should be noted that the contents of Afan and a further 92 bed spaces will be stored in areas 4D and 4E in BFH until any works to install oxygen are completed in Pennard and the adjacent Baglan Ward also becomes available as this ward will most likely be needed to be empty to facilitate works Pennard.

The decant plan is being finalised on the 28<sup>th</sup> July 2020 (please see appendix 1 for draft plan) and support services have confirmed availability to commence in house decant as of Monday 3<sup>rd</sup> August 2020 to commence the process.

## 3. GOVERNANCE AND RISK ISSUES

Risks

- Afan ward bed capacity being required for use prior to the completion of works at Bay Field Hospital
- The provision of oxygen is not considered a viable option, which will then require a different medical model to be agreed and implemented which would restrict the current referral criteria for patients transferred to BFH in the event of super surge.

It should however be noted that the above two risks are only risks until the latest 23<sup>rd</sup> October 2020 when the lease expires at LFH and the facility is handed back as there is no option to extend and the second risk has already been considered as part of the decision to recommend the decommissioning of Llandarcy.

## 4. FINANCIAL IMPLICATIONS

There are four options for the provision of the decant which are described below:

Option Number	Option	Cost for beds only	Timescale in days	Costs for all equipment	Timescale in days
1	Professional removal				
	company				

2	In house (porters and SSA plus hire of 7.5 tonne trucks)		
3	Current contractors to undertake the work in conjunction with other works they are currently undertaking on site		
4	A blended approach of either option one and two or options two and three		

The above costs are currently being identified by capital planning and support services colleagues with the most cost effective option to be chosen.

The financial saving of early decommissioning are currently being identified corporately. The costs below are indicative of potential saving to be realised.

#### **Financial Savings and Costs**

Llandarcy Savings	
Grounds maintenance	£23,250
College Students temporary teaching	£97,500 installation
space	
"	£166,000 rental hire for minimum term
College Students sports facility hire	£20,000 rental September - December
Temporary Gym (commercial)	£10,000 installation
"	£3,000 per month rental
Temporary location for fitness classes	£4,500 per month
Temporary lights for pitch 2	£4,800 per month rental – minimum 6
	months
Ospreys temporary training facility	£17,000 per month
Bay Costs	
Llandarcy Decant costs to Bay	To be confirmed

#### 5. RECOMMENDATION

The Field Hospital Establishment Group is asked to consider the following recommendations:

A decant of all equipment from LFH to Bay Field Hospital commencing as of the 3<sup>rd</sup> August 2020.

Agree the option for the removals.

Governance and Assurance				
	Comparing better bestth and wellbeing by estively	nuomoting, and		
Link to	Supporting better health and wellbeing by actively empowering people to live well in resilient communities	promoting and		
Enabling	Partnerships for Improving Health and Wellbeing			
Objectives	Co-Production and Health Literacy			
(please choose)	Digitally Enabled Health and Wellbeing			
	Deliver better care through excellent health and care service	es achieving the		
	outcomes that matter most to people	<b>.</b>		
	Best Value Outcomes and High Quality Care	$\boxtimes$		
	Partnerships for Care			
	Excellent Staff			
	Digitally Enabled Care			
	Outstanding Research, Innovation, Education and Learning			
Health and Ca	re Standards			
(please choose)	Staying Healthy	$\boxtimes$		
	Safe Care	$\boxtimes$		
	Effective Care	$\boxtimes$		
	Dignified Care	$\boxtimes$		
	Timely Care	$\square$		
	Individual Care	$\boxtimes$		
	Staff and Resources			
Quality Safety	and Patient Experience			
Quality, Carety				
Financial Impli	inations			
•				
	avings to the LHB by early decommissioning of LFH ar	iu earry		
handover to Ne	0			
Cost to decant				
1 I I P (				
	ions (including equality and diversity assessment)			
None				
Staffing Implic				
Depending on c	option chosen six porting staff have been identified to a	ssist with the		
decant along wi	ith BFH and LFH staff.			
_				
Lona Term Im	plications (including the impact of the Well-being o	f Future		
	Vales) Act 2015)			
	now the paper will have an impact of the "The Well-beir	ng of Euture		
	/ales) Act 2015, 5 ways of working.	ig of Fataro		
Cenerations (Wales) Act 2013, 3 ways of working.				
• <b>Long Term</b> – It is envisaged that Field Hospital capacity will be needed for				
the length of time for the COVID 19 pandemic				
Provention The granded of an early depend will not import of the				
prevention of the risk of insufficient capacity to deal with the super surge				
• Integration – Close working has taken place and will be ongoing with local				
authorities	<i>/</i> •			
	ration – as above			
o Involver	nent –as above.			
-				
Report History	n Nil			

Draft Decant plan

Appendices

# Appendix 1: Draft Decant Plan

