

Meeting:	NHS Grampian Board
Meeting date:	2 December 2021
Item Number:	5.3
Title:	The Grampian Operational Pressure Escalation System (G-OPES) and Operation Iris
Responsible Executive/Non-Executive:	Professor Nick Fluck (Medical Director)
Report Author:	Professor Nick Fluck

1 Purpose

This is presented to the Board for:

- Assurance
- Approval

This report relates to:

Operation Iris and RMP4

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective
- Person Centred

2 Report summary

2.1 Situation

The next six months is widely recognised as potentially one of the most challenging times for the NHS and our health and care system. We expect to face high levels of unscheduled care activity including COVID and Non-COVID conditions; traditional winter pressures including influenza are likely to be higher than usual; we have significant numbers of people waiting for time-critical planned interventions and COVID has constrained our whole system operational capacity.

Operation Iris is NHS Grampian's organisational approach to managing these complex pressures over the next six months. It was endorsed by the Board on 4 November 2021, and was effective from 8 November 2021.

The Grampian Operational Pressure Escalation System (**G-OPES**) has been developed to support Operation Iris and to enable delivery of RMP4 (Remobilisation Plan Version 4). G-OPES is an enhanced approach to managing the operational pressures as a unified health and care system. Operation Iris is being considered at today's NHSG Board meeting and progress on G-OPES is presented to offer detail on one of the key mechanisms supporting its delivery.

2.2 Background

Business continuity and escalation planning has been central to our approach to winter planning for many years. Throughout the pandemic we have developed a number of new escalation models and systems to respond to the surges in COVID activity.

Operation Rainbow (March – June 2020) was almost entirely focused on responding to a COVID surge and brought in the concept of a 'Tactical Operating Model' that provided capacity ahead of demand. This was expanded to include consideration of additional winter pressures that see a predictable increase in all unscheduled activity and was refined in Operation Snowdrop (January – March 2021). This was again revised during the onset of the 'Third Wave' where unscheduled demand remained at usual winter levels with an increasing backlog of critical planned care and progressive workforce fatigue.

We have taken this learning into the development of a whole system escalation response model to manage the expected range of service pressures that will be experienced over the next six months. Consideration has been given to expected high levels of unscheduled care activity as well the specific surges in COVID, Respiratory Syncytial Virus (RSV) or other infectious disease. It also accounts for the staffing and resource pressures that will threaten the delivery of both unscheduled and planned critical services at the specified protected level.

It looks to be whole system in scope and to become aligned with the new Portfolio management arrangements and the System Leadership model. It will be refined in light of our experience using it and we intend that it will form the basis of our long term whole system pressure management. The details of the system are set out in **Appendix 1** together with a progress assessment on operational readiness **Appendix 2**.

2.3 Assessment

An enhanced approach to operational pressures is needed as we are no longer able to manage increasing unscheduled health and care needs for our population using the traditional levers of adding new capacity (no available additional staff and limited infrastructure) or pausing non-critical planned care (current capacity is needed to meet time critical planned activity).

The intent is that G-OPES will address this difficult situation by offering:

- A single approach to evaluate pressure across health and care system
- A system view focusing on pathways of care supported by Portfolio leadership
- Goal orientated actions informed by our learning from COVID
- Options to increase capacity through risk/pressure based derogations of some standards
- A whole system approach to share risk and offer internal mutual aid
- Clarity for staff
- Transparency
- Specific protection of time-critical planned care

2.3.1 Quality/ Patient Care

G-OPES is designed to maintain critical services when the system is facing high levels of enduring pressure related to levels of need. In that respect it should enhance access to care which represents one dimension of quality. Specifically, it should protect time-critical planned activity which traditionally has been compromised by our usual response systems to surges in unscheduled care activity. However, to achieve this the system relies on a number of derogations that might impact on both safety and experience of care which are two further dimensions of quality. In this respect we are balancing three dimensions of quality of care against each other and using our risk and ethical based approach to reach a better overall position.

2.3.2 Workforce

A clear and well led system will hopefully support staff through this period of enduring pressure. However, it is clear that derogations that involve staff ratios or working environments can be detrimental to staff wellbeing. This is explicitly considered in the risk and ethical approach to implementing these measures. Staff must receive enhanced support and involvement in longer term plans to bring us to a more stable position.

The Staff Wellbeing Paper at item 5.5 for this meeting provides additional detail of the support available to staff and the steps proposed to mitigate any risks to staff wellbeing.

2.3.3 Financial

No new financial commitments

2.3.4 Risk Assessment/Management

G-OPES and specifically derogations outlined that support its delivery have been reviewed using our new approach to risk analysis. The background details of this Risk approach are detailed in **Appendix 3**. At a high level, risk has been considered at

three levels. Firstly, in creating the framework around each derogation we have used a competing risk analysis approach reach a recommended position. Secondly, the 'Standard Operating Procedures' within each area of our organisation have been developed with an associated risk assessment. Thirdly the managerial decision to deploy a derogation still requires a live risk assessment and formal logged decision taking account of the specific circumstances relevant at that time.

2.3.5 Equality and Diversity, including health inequalities

The various elements of the OPES and Operation Iris documentation were available for Equality and Diversity Impact Assessment at different times. Hence, the pragmatic approach adopted was to Impact Assess each section as it became available in the drafting process. The Rapid Impact Assessment Checklist (RIC) approach was the most appropriate methodology, which also incorporated consideration of the Fairer Scotland Duty. A full EQIA approach was not required. The RIC is available on request.

2.3.6 Other impacts

Governance and Assurance

Decisions about the derogations applied using G-OPES will be taken by the system leadership, as outlined in the leadership paper on today's agenda at item 5.4. The daily or weekly meetings will confirm the G-OPES levels and the measures being applied, will record the rationale for the decisions as outlined in the paper on the agenda, and will escalate late more complex situations, or decisions where the risk lies outside the agreed tolerances, to the Chief Executive Team. Each week, the Chief Executive Team will receive a summary of the system operational decisions.

The Clinical Governance Committee will receive reports on the operation of G-OPES and the assessment of the effectiveness of the derogations used to maintain the system and continue patient care.

As stated above, G-OPES is being introduced to maintain system performance against the RMP4 objectives. Assurance on performance against the RMP4 objectives will be provided to the Performance Governance Committee.

Ethical Considerations

The derogations applied using G-OPES have been considered from an ethical perspective by NHS Grampian's Ethics Advice and Support Group. This has been set out in **Appendix 4**.

2.3.7 Communication, involvement, engagement and consultation

The Board has carried out its duties to involve and engage internal stakeholders where appropriate:

- Chief Executive Team – multiple meetings during October and November 2021
- Wider System Connect meeting – 29 November 2021
- GAPF 18 November 2021
- ACF via email 17 – 23 November 2021

Further detail of the proposals to continue stakeholder engagement throughout Operation Iris is given in paper 5.1 on this December 2021 Board agenda, at section 2.10.

2.3.8 Route to the Meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

- Thursday 14th October 2021 – informal briefing
- Thursday 21st October 2021 – informal briefing
- Thursday 4th November 2021 – closed Board meeting

2.4 Recommendation

The Board is asked:

1. To review and scrutinise the information provided in this paper and the appendices and confirm that they provide assurance that G-OPES is an appropriate system to manage sustained and exceptional pressure across NHS Grampian's services
2. Agree the governance and reporting to the Board Committees detailed in s2.3.6 above
3. Approve the use of G-OPES to manage sustained and exceptional pressure across NHS Grampian's services for the duration of Operation Iris.

3 List of appendices

The following appendices are included with this report:

- Appendix 1 - The Grampian Operational Pressure Escalation System (**G-OPES**)
- Appendix 2 - G-OPES Operational Readiness Assessment
- Appendix 3 – Approach to risk analysis and its application to G-OPES
- Appendix 4 – Approach to ethical consideration associated with G-OPES