

## Rural Needs Impact Assessment

### Section 1: Define activity subject to Section 1(1) of Rural Needs Act (NI) 2016

#### 1A. Short title describing activity being undertaken that is subject to Section 1(1) of the Rural Needs Act (NI) 2016:

The Winter Service Delivery Plan for the Belfast Health & Social Care Trust (BHSC) is covering the period from October 2021 to March 2022 as part of an incremental staged approach requested by the Department of Health following a COVID-19 surge during a world pandemic.

Our Plan takes an integrated approach to surge and Winter planning. This includes:

- managing pressures arising from COVID-19 and flu;
- managing other unscheduled pressures;
- maximising delivery of elective care.

The Plan has been developed with a focus on the combined pressures of Winter and a further surge of COVID-19 that will challenge our services over the next 6 months. It outlines the approach the Belfast Trust will adopt in working to address the anticipated seasonal increase in demand and any further waves of COVID-19, whilst also considering regional priorities.

#### 1B. Are you Developing, Adopting, Implementing or Revising a Policy a Strategy or a Plan? (Underline or Circle) Or are you delivering or designing a public service? (Underline or Circle) What is official title of this Policy, Strategy, Plan or Public service (if any)?

**Title is :** Winter Service Delivery Plan, Belfast Health and Social Care Trust, October 2021- March 2022

#### 1C. Give details of the aims and/or objectives of the Policy, Strategy, Plan or Public Service:

**Aim** of this plan is **to** describe how the Trust will deliver increased resilience through this challenging Autumn and Winter period with specific reference to three things:

1. Winter Pressures for both adults and paediatrics including our estimated bed projections, actions to secure the appropriate level of suitably trained staff and our response to the influenza virus and to respiratory syncytial virus.

2. COVID-19: This sets out across key service areas the actions required to meet the demands of the pandemic whilst continuing to apply the key regional planning principles of equity of access for the treatment of patients, minimising the transmission of COVID-19 and protecting the most urgent services.

3. The delivery of key regional priorities for Unscheduled Care, Elective Care, Cancer Services, Adult Social Care, Children's Services, Mental Health and Physical Disability Services.

Plan **Objectives** include:

- To ensure optimum service availability within the current constraints from October 2021 to March 2022
- To ensure the continued safety of our patients, service users, carers and staff as we respond to the health and social care needs of our population, while remaining alert for a further COVID-19 surges
- To prioritise and focus on treating the most urgent cases first
- To continue to focus on the delivery of services to the most vulnerable people in our community and those people who urgently require acute care, planned cancer surgery and time-critical surgery in a safe environment
- To continue to provide safe, effective and compassionate care to all those who need it, even if this means delivering services in a different way because of social distancing.
- To build on new ways of working to continue to provide safe, effective and compassionate care by working closely with our partners and key stakeholders particularly in terms of the many 'lessons learned' over the previous few months.
- To continue to care and support the health, wellbeing and resilience of staff including ensuring our staff have the opportunity to take leave during the Summer.
- To meet our legal equality, PPI and rural duties.

The **purpose** of this plan is to provide reassurance and detail in terms of how the Trust is adopting the following set of planning principles in preparing for forthcoming Winter pressures and anticipated COVID-19 surge, mindful of regional priorities as outlined in the Regional COVID-19 Pandemic Surge Planning Strategic Framework (1 September 2020) namely:

- **Patient safety** remains the overriding priority.
- **Safe staffing** remains a key priority and Trusts will engage with the Trade Union side on safe staffing matters in relation to relevant surge plans.
- Trusts should adopt a flexible approach to ensure that '**business as usual**' services can be maintained as far as possible, in line with the Rebuilding HSC services Strategic Framework. This should allow Trusts to adapt swiftly to the prevailing COVID-19 context.
- It is recognised there will be a fine balance between **maintaining elective care services and managing service demand** arising from COVID-19 and Winter pressures. Addressing COVID-19 and Winter pressures will take priority over elective care services, although the regional approaches announced such as day case elective care centres will support continuation of elective activity in the event of further COVID-19 surges.

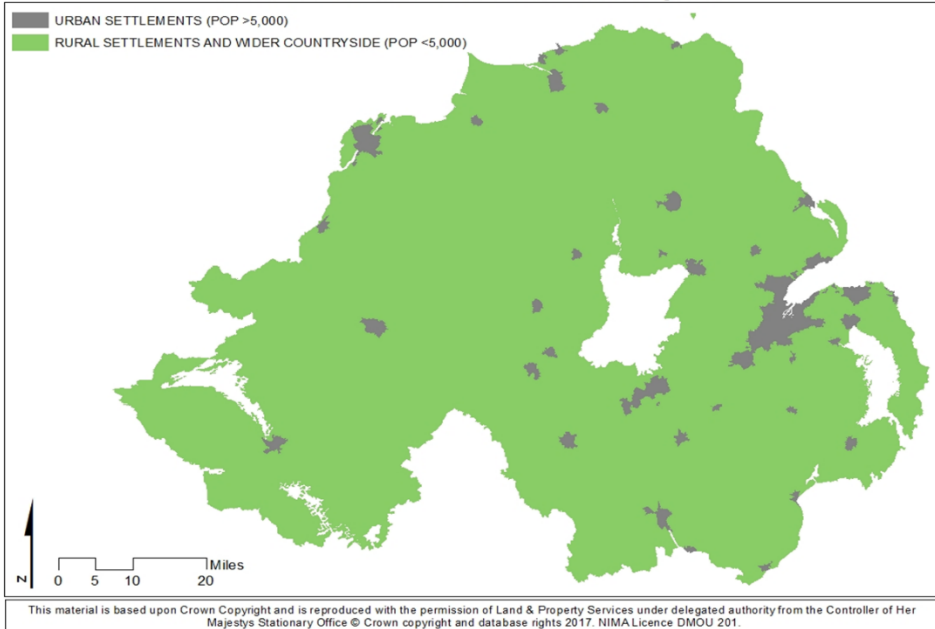
- Community services are continuing to manage routine and urgent work – whilst also required to support hospital discharge and responding to urgent work
- The HSC system will consider **thresholds of hospital COVID-19 care**, which may require downturn of elective care services.
- Trust's Service Delivery Plans, whilst focusing on potential further COVID-19 surges, should take account of **likely Winter pressures**.
- Trusts should plan for further COVID-19 surges within the context of the **regional initiatives** outlined in Section 7 of this document.
- Trusts should as far as possible **manage COVID-19 pressures within their own capacity first**.
- The Department, HSCB, PHA and the Trusts will closely monitor COVID-19 infections, hospital admissions and ICU admissions to ensure a **planned regional response** to further COVID-19 surges. This will support continued service delivery.
- The Department will, if COVID-19 infection rates and other indicators give cause for action, **recommend further tightening of social distancing measures to the Executive**.

**1D. What definition of 'rural' is the Trust using in respect of the Policy, Strategy, Plan or Public Service:**

Definition used is that provided by the Inter Departmental Urban Rural Definition Group (2015) which stated that 'Rural' meant

'Settlements with fewer than 5,000 residents and open countryside'. In light of this, please see analysis below in terms of NI rural settlement profile.

### Rural settlements and wider countryside



## Section 2 - Understanding impact of Policy, Strategy, Plan or Public Service

2A. Is the Policy, Strategy, Plan or Public Service likely to impact on people in rural areas?

Yes No ☒ If response is NO Go To Section 2E.

2B. How is it likely to impact on people in rural areas?

2C. If the Policy, Strategy, Plan or Public Service is likely to impact on people in rural areas differently from people in urban areas, please explain how it is likely to impact on people in rural areas differently?

2D. Please indicate which of the following rural policy areas the Policy, Strategy, Plan or Public Service is likely to primarily impact on.

|                                      |  |   |  |                            |  |
|--------------------------------------|--|---|--|----------------------------|--|
| Jobs or Employment in Rural Areas    |  | Community Safety or Rural Crime               |  | Agriculture-Environment    |  |
| Education or Training in Rural Areas |  | Health or Social Care Services in Rural Areas |  | Other, please state below; |  |

|                                       |  |  |  |  |  |
|---------------------------------------|--|--|--|--|--|
| Rural Development                     |  | Broadband/Mobile Communications in Rural Areas |  |  |  |
| Poverty or Deprivation in Rural Areas |  | Rural Business, Tourism or Housing             |  |  |  |

**2E. Please explain why the Policy, Strategy, Plan or Public Service is NOT likely to impact on people in rural areas.**

BHSCT is committed to its statutory duty to have due regard to rural needs when developing, adopting, implementing or revising policies, strategies and Plans, and when designing and delivering public services. In so doing we will strive to ensure that we pay due regard to the social and economic needs of people in rural areas when carrying out the aforementioned activities.

Our Plan, BHSCT Winter Service Delivery Plan October 2021 to March 2022, is the next stage in our incremental approach to service delivery following a COVID-19 world pandemic.

On 11<sup>th</sup> March 2020, the World Health Organisation officially declared COVID-19 a pandemic due to the speed and scale of transmission. As a result, the Health and Social Care sector faced unprecedented pressures in their primary aims to:

- I. Safeguard lives by reducing the further spread of the COVID-19 virus; and to
- II. Prevent the HSC system from becoming overwhelmed due to the COVID-19 pandemic and the demands this is placing on the whole HSC system.

During the pandemic, measures were taken to try to best deal with the demands and consequences of COVID-19 and were undertaken with the utmost urgency to protect life and address urgent public health matters. Many services across Belfast Trust and beyond continued to operate throughout the pandemic, albeit on a reduced scale, while other services had to be stood down because of clinical, patient or staff safety, as well as physical and workforce capacity constraints.

The Trust recognises that there are a number of policy leads/decision makers across HSC who likewise must comply with the Rural Needs Impact Assessment duties in the development, implementation and review of the Minister for Health's "Strategic Framework for Rebuilding HSC Services" in NI and in the development and implementation of HSC Trusts Rebuild Plans. The Trust therefore commits to collaborate, as necessary, with all relevant HSC organisations in seeking to ensure the fulfilment of these statutory duties.

Please note the following factors considered when deciding that our policy is not likely to impact people in rural areas:

- This is an overarching rural screening to gauge the cumulative impact of the measures within our Winter Service Delivery Plan October 2021 to March 2022. The Trust is committed to monitoring those measures in the Plan over the next six months in terms of the impact on people in rural areas and further stand-alone rural screenings will be undertaken as appropriate.
- The measures within the plan constitute temporary changes to facilitate service delivery but also to facilitate an agile response to a further surge. The Trust remains wholly committed to engage, comprehensively impact assess and consult should we wish to make any of these changes

permanent. The Trust had a 'Learning from COVID-19' initiative which included listening to service users, patients and carers to influence our future service delivery Plans.

- It is noted that the majority of the Trust's services are delivered to people not from a rural community as defined by the Inter Departmental Urban Rural Definition Group (2015). The services that come within the remit of this assessment therefore are restricted to services delivered regionally by the Trust. We are also mindful that a Rural Needs Impact Assessment is proportionate to the scale of the potential impact and relevance of the activity being undertaken.
- When considering the impact on people from a rural community, the Trust is mindful that it is important to consider in full the potential impact on rural needs and that we are clear about what is a need and what is desirable. (In general, a need can be considered to be something that is essential to achieve a standard of living comparable with that of the population in general e.g. can the people in the rural area access key public services such as health and social care?).
- Our Plan (which involves some regional services) does not have a differential impact on people in rural areas because the proposals apply equally to people both in urban and rural areas. The aim of the plan is to make temporary changes to facilitate service delivery and to do this in a safe and compassionate manner, mindful of restrictions and challenges such as the need to be ready for further COVID-19 surges, the need to support the health and well-being of staff and the social distancing and infection control requirements.
- The plan is designed to help manage and meet enhanced demand on services, particularly our acute services, with the aim of retaining elective services where possible.
- Due to continued social distancing and infection control requirements, the Trust will continue to use telephone clinics and virtual IT solutions to triage and review patients, which will enhance the accessibility of regional services for people who live beyond Belfast. Telephone and Virtual clinics means that patients and service users can access a service without the need to travel, which certainly benefits those living in rural communities. However, the Trust is mindful of the need for good connectivity and so will continue to monitor this innovation through feedback from service users. The Trust will strive to provide a hybrid service delivery model and so face-to-face appointments for regional services may happen when it is clinically critical and where social distancing and infection control guidance permits.

Our plan focuses on:

- Winter Pressures Adult and Paeds: Bed Occupancy and Flu Activity.
- COVID-19 Pressures: Critical Care, Respiratory, Social Care, Long COVID-19, Vaccine Programme and Staffing.
- Delivery of Key Regional priorities: Unscheduled Care, Elective Care, Cancer Services, Adult Social Care, Children's social care including Disability and CAMHS, Paediatrics, Mental Health, Physical Disability.
- Accordingly, certain services continue to be limited. Clinically urgent patients will be assessed and treated.

- To ensure optimal resource use, the Trust continues to work with colleagues in other Trusts across Northern Ireland. Regular regional meetings and communication have been enhanced during the COVID-19 surge and will continue throughout the Winter Service Delivery Plan October 2021 to March 2022.
- Implementation of these measures and any associated impact are under daily review by the Trust's Executive Team.

If you completed 2E above GO TO Section 6

### SECTION 3 - Identifying Social and Economic Needs of Persons in Rural Areas

**3A. Has the Trust taken steps to identify the social and economic needs of people in rural areas, relevant to the Policy, Strategy, Plan or Public Service?** Yes ☐ No ☐ if the response is NO, GO TO Section 3D

**3B. Which of following methods or information sources were used by the Trust to identify these needs?**

Consultation with relevant stakeholders / Survey or Questionnaire / Research / Statistics / Publications / Other methods.  
Please provide details:

**3C. What social and economic needs of the people in rural areas have been identified?**

**3D Please explain why no steps were taken by the Trust to identify the social and economic needs of people in rural areas?**

### SECTION 4 - Considering Social and Economic Needs of Persons in Rural Areas

**4A. What issues were considered in relation to the social and economic needs of people in rural areas?**

### SECTION 5 - Influencing the Policy, Strategy, Plan or Public Service

**5A. Has the policy, strategy, Plan or public service been changed by consideration of the rural needs identified?**  
Yes ☐ No ☐ if the response is NO, GO TO Section 5C

**5B. If yes, how have rural needs influenced the policy, strategy Plan or public service?**

**5C. If no, why have the rural needs identified not influenced the policy, strategy, Plan or public service?**

### Section 6: Documentation:

**6A.** Please tick below to confirm that the RNIA Template will be retained by the Trust and relevant information on the Section 1 activity compiled in accordance with paragraph 6.7 of the guidance.



|  |                               |       |  |
|--|-------------------------------|-------|--|
| I confirm that the RNIA Template will be retained and relevant information compiled. |                               |       |  |
| Rural Needs Impact Assessment undertaken by:   | Caroline McMenamin            |       |  |
| Job Title/Directorate  | Planning and Equality Manager |       |  |
| Signature:   |                               | Date: |  |
| Approved by:   |                               |       |  |
| Job Title/Directorate  |                               |       |  |
| Signature:   |                               | Date: |  |