

Management and escalation plan for COVID19 patients in Ward 20 ICU

1 COVID19 Patient

- Manage in Ward 20 ICU **Bedspace 8** with negative pressure on
- Enhanced PPE within room
- **Bedspace 7** closed and used as Donning area for bedspace 8
- **Bedspace 2-6** can be used as normal but can **only** be used for patients requiring mechanical ventilation via ETT
- PPE removed as per SOP and handwashing at basin as indicated by floor markings
- Bedspaces 9-16 can be used as normal with doors closed between bedspaces 8-9

2 COVID19 Patients

- Manage Patient 2 in Ward 20 ICU **Bedspace 1** with negative pressure on
- Enhanced PPE within room
- **Bedspace 2** closed and used as Donning area for bedspace 1
- **Bedspace 3-6** can be used as normal but can **only** be used for patients requiring mechanical ventilation via ETT
- PPE removed as per SOP and handwashing at sink as indicated by floor markings
- **Visitors to all patients in Bedspaces 1-8 to stop from this point until further advice from IPCT**
- Bedspaces 9-16 can be used as normal with doors closed between bedspaces 8-9

3 COVID19 Patients

- At time of referral and acceptance of 3rd COVID19 patient, the following people should be informed to enact surge capacity plan:
 - On-call anaesthetic consultant
 - Will liaise with theatre co-ordinators
 - Site management team
- If not already occurred, **all** elective operating should stop at the WGH at this point with only emergency surgery to continue
- **All Non-COVID19 patients in Bedspaces 3-6 must be moved from ICU area *before* admission of 3rd COVID19 patient**
 - Dependent on unit capacity at that time:
 - Move non-COVID patients in spaces 3-6 to any empty bedspaces from 9-16
 - Discharge any appropriate patients to SHDU(58)/NH DU area or ward area within WGH
 - Review Critical Care capacity and transfer to any available bedspace within SJH or RIE
 - If above not possible or time pressure, enact surge capacity plan and transfer patients to

recovery area within WGH. (This will default to main recovery in the first instance; decision by on-call Anaesthetic Consultant who will co-ordinate patient movement)

---- Patients will be managed by Anaesthetic team, theatre/recovery staff with input from ICU Medical and Nursing staff.

---- As detailed above, patients can then be moved from recovery area to ward/HDU/Lothian ICU area

- Close temporary barriers at both ends of ICU side of Ward 20
- Manage Patient 3 in Ward 20 ICU **Bedspace 4**
- ICU side of Ward 20 is now considered a 'COVID19 area'
- **Enhanced PPE now required in all of ICU side of Ward 20**
- All non-essential items removed from ICU side of Ward 20
- PPE donning and doffing at entrance of ICU side of ward 20 in temporary vestibule area
- Bedspaces 9-16 can be used as normal with barrier closed between bed-spaces 8-9

4-8 COVID19 patients

- These can be managed in the ICU side of Ward 20
- Suggested order of ICU bed use:
 - Patient 4- Bedspace 5
 - Patient 5- Bedspace 3
 - Patient 6- Bedspace 6
 - Patient 7- Bedspace 7
 - Patient 8- Bedspace 2
- **Enhanced PPE now required in all of ICU side of Ward 20 as above**
- Bedspaces 9-16 can be used as normal with barrier closed between bed-spaces 8-9

- Critical Care patients not able to be managed within Ward 20 will continue to be managed in the Theatre recovery areas (Main/DCN) by Anaesthetic team, theatre/recovery staff with input from ICU Medical and Nursing staff. Ward 58 may be used for appropriate patients including Medical/Haematology L1/2 patients.

9-16 COVID19 patients

- Move all Non-COVID19 patients from Bedspaces 9-16
- As per above Surge Capacity plan: Move patients to recovery areas

- **All of ICU/Ward 20 is now considered a 'COVID19 area'**
- **Enhanced PPE now required in all of ICU /Ward 20**
- **Estates to construct second temporary vestibule at entrance to HDU side of Ward 20**
- **All non-essential items removed from HDU area**
- PPE donning and doffing in areas at entrance/exit to ICU areas as directed by senior nursing staff
- Patient 9 to be admitted to Bed-space 9
- Patients 10-16 to be admitted to Bed-space 10-16
 - Anaesthetic machines from theatres may be required