

# Metro North Health Pandemic (COVID-19) Surge Workforce Response Plan

This appendix provides a summary of the surge workforce response for Metro North Health. The Metro North COVID-19 Response Plan has outlines actions required at each Tier including workforce responses.

	Tier 0	Tier 1	Tier 2 As Tier 1 plus	Tier 3 As Tier 2 plus	Tier 4 As Tier 3 Plus	Tier 5 As Tier 4 plus
<b>Planned responses</b>	Business as usual	<ul style="list-style-type: none"> <li>enact staff management plans</li> <li>activate COVID-19 HR hotline – hours as demand indicates</li> <li>Refresh/ activate Outbreak management as required</li> <li>Reallocate staff to frontline roles as demand dictates</li> <li>Increase capability in casual pools</li> <li>Prepare processes to enable suspension of non-urgent planned care when advised to deploy these staff to COVID -related care including extra COVID inpatient wards, virtual ward, fever clinics etc</li> <li>Increase virtual care</li> <li>Increase HITH capacity including virtual capability</li> <li>Increase use virtual models for outreach services where able</li> <li>Identify locations outside of the outpatient clinic to provide virtual clinics</li> <li>Discretionary suspension of non-essential training where they impact on clinicians' time to respond to COVID-19</li> <li>Essential training to be delivered virtually where able</li> </ul>	<ul style="list-style-type: none"> <li>Continue to re-allocate staff to frontline as demand dictates</li> <li>Continue to recruit and deploy casual staff to frontline services</li> <li>Develop an expedited fast tracked credentialling process for priority positions</li> <li>Develop a register of nurses in the HHS with critical care experience and progress upskilling program</li> <li>All virtual outpatient appointments unless not clinically appropriate</li> <li>Increase virtual ED capacity as demand requires</li> <li>Outsource activity as able</li> <li>Only urgent elective surgery and procedures to deploy these staff to COVID -related care including extra COVID inpatient wards, virtual ward, fever clinics etc</li> <li>Increased scope of services to private sector</li> <li>Suspension of non-essential training</li> <li>Orientation for new starters online</li> </ul>	<ul style="list-style-type: none"> <li>Activate EOI portal for registered non practising clinicians to support response</li> <li>Redirect clinical staff where appropriate to support COVID activities</li> <li>Support staff to return to work if interested e.g. maternity leave</li> <li>Implement alternate models of care based on staffing availability</li> <li>Develop a register of staff working in non-frontline areas who may be redeployed to assist with frontline roles e.g. concierge</li> <li>Collaborate with Department of Health on surge workforce and/or panel providers to assist where possible e.g. vaccination programs</li> <li>Increase graduate nurse intake where possible</li> <li>Reduction of planned care to deploy these staff to COVID -related care including extra COVID inpatient wards, virtual ward, fever clinics etc</li> <li>No face to face training, essential training delivered virtually</li> </ul>	<ul style="list-style-type: none"> <li>Consider recruitment of non-clinical staff to assist with clinical load where appropriate</li> <li>Emergency and category 1 and 4 planned activity only – to deploy staff to COVID-related care and to manage with furloughed staff</li> <li>Utilise private hospitals for surge capability</li> <li>At the elbow education support in clinical areas to support junior staff</li> </ul>	
<b>Workforce engagement and communication</b>		<ul style="list-style-type: none"> <li>Develop and maintain a COVID response extranet page</li> <li>Twice weekly incident controller broadcast messages</li> </ul>	<ul style="list-style-type: none"> <li>Daily incident controller messages</li> <li>Weekly all staff vidcast</li> <li>Regular directorate staff forums or equivalent</li> </ul>	<ul style="list-style-type: none"> <li>Daily incident controller incident messages</li> <li>Twice weekly vidcast</li> <li>Regular Directorate staff forums or equivalent</li> </ul>	<ul style="list-style-type: none"> <li>Daily incident controller incident messages</li> <li>Twice weekly vidcast</li> <li>Regular Directorate staff forums or equivalent</li> </ul>	
<b>Staff wellbeing programs</b>	Business as usual employee assistance programs	<ul style="list-style-type: none"> <li>BAU</li> </ul>	<ul style="list-style-type: none"> <li>Publishing COVID-19 supports (including useful websites, tips for coping and mental health wellbeing telephone support) on the Metro North Health extranet</li> </ul>	<ul style="list-style-type: none"> <li>Benestar fact sheets and resources including a factsheet on COVID-19: Achieving Wellness</li> </ul>	<ul style="list-style-type: none"> <li>COVID staff psychology support including staff psychology open door sessions for facility staff</li> <li>COVID-19 HR hotline</li> </ul>	
<b>Planned Workforce strategy meetings</b>		<ul style="list-style-type: none"> <li>Twice weekly Metro North IMT meetings comprising clinical directorates, clinical streams, professional leads, business units and external partners (QAS, Brisbane North PHN and consumers) convened based on need</li> </ul>	<ul style="list-style-type: none"> <li>IMT daily</li> </ul>	<ul style="list-style-type: none"> <li>IMT daily</li> <li>Three times weekly workforce planning meeting with professional leads</li> </ul>	<ul style="list-style-type: none"> <li>IMT daily</li> <li>Continue monthly strategic workforce committee meeting convened by ED, HR with all professional leads, COO, Strategy and Planning representatives and workforce planning representatives</li> <li>Three times weekly workforce planning meeting with professional leads</li> </ul>	