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Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	08 March 2022	Agenda Item	3.1
Report Title	A proposal for how Swansea Bay Health Board can help tackle the issue of bed poverty within our region.		
Report Author	Amanda Davies, Service Improvement Manager, Capital Planning		
Report Sponsor	Darren Griffiths, Director of Finance and Procurement		
Presented by	Kier Warner, Head of Procurement		
Freedom of Information	Open		
Purpose of the Report	<p>The Health Board will be decommissioning the Bay Field Hospital this year.</p> <p>There will be a large number of surplus beds that are unsuitable for the acute or community health sector and these could be ideal to donate to families and those people in greatest need within our community.</p> <p>This paper offers a proposal of how Swansea Bay University Health Board can help tackle the issue of bed poverty within our region by distributing the beds to those in greatest need within our community.</p>		
Key Issues	<p>The aim of the Field Hospitals was to increase the capacity of the health and care community in Swansea and Neath Port Talbot and enable it to care for all its residents during the pandemic.</p> <p>Bay Field Hospital was intended to care for post Covid 19 recovery ambulant patients, who required additional support or rehabilitation prior to their discharge home.</p> <p>On behalf of Welsh Government who directly supplied the funding, the national procurement team in Wales was responsible for the purchasing of sufficient equipment which included beds, lockers tables and chairs which was to enable the field hospitals to function.</p> <p>At the time all NHS bodies were looking to purchase the same equipment to commission their field hospitals, demand was high, supply was low. Nationally there was insufficient equipment to meet the demand. National companies responded by producing temporary emergency style equipment. This equipment was never intended for</p>		

	<p>permanent acute hospital use. Specifically, this included a high number of Covid 19 emergency response beds which were never used and were not designed to be robust enough or of a high enough technical standard to be utilised for general use within the NHS. However, they are perfectly adequate for use in a domestic setting.</p> <p>This paper sets out a proposal to engage with our partners and local community networks, to co-produce a solution to find a use for these beds. The suggested solution involves providing surplus beds to local families in need and who are experiencing income and or housing poverty as identified by Neath Port Talbot, Swansea local authorities and Community Voluntary Services</p> <p>The paper details the approach to be taken and sets out the community engagement, logistical considerations required. The proposal provides a model that can be replicated across Wales and is informed by discussions with the Welsh Government, Local Authorities and Community Voluntary Services.</p> <p>As part of the Health Boards Integrated Medium Term Plan (IMTP), reducing health inequalities remains a priority.</p> <p>The BBC recently reported on the issue of bed poverty for children in Leeds. As a direct result some emails were sent to our partners to see if this is reflective within our community of Swansea Bay University Health Board. The response was a resounding ‘yes’.</p> <p>This has been discussed with Welsh Government who are supportive of the proposal.</p>			
<p>Specific Action Required <i>(please choose one only)</i></p>	<p>Information</p>	<p>Discussion</p>	<p>Assurance</p>	<p>Approval</p>
<p>Recommendations</p>	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE the contents of the paper and the work that has been undertaken to date • APPROVE the distribution of the surplus beds to those in greatest need living within our community with immediate effect. • APPROVE that the Health Board launch a campaign requesting staff support this initiative with donations on new or good quality bedding to accompany the beds • NOTE: This proposal has strategic alignment with our Integrated Medium Term Plan, Welsh 			

	Government Policies. The Wellbeing Future Generations Act (2015), Review of Adverse Childhood Experiences (ACE) policy 2021, and Child Poverty Strategy 2015.
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A proposal for how Swansea Bay Health Board can help tackle the issue of bed poverty within our region.

1. INTRODUCTION

Reducing Child Poverty in Wales remains a key priority of the Welsh Government. Working through public sector partners there is a strong emphasis on poverty reduction in planning, resourcing and delivering effective services.

The Well-being of Future Generations Act (2015) requires public bodies in Wales to think about the long-term impact of their decisions, to work better with people, communities and each other, and to prevent persistent problems such as poverty and health inequalities

The Covid pandemic, has required Health Boards to source additional capacity to meet the rising inpatient and emergency demand since 2020. However, with a successful vaccine roll out, the demand for additional capacity is now minimised. As a result, Swansea Bay University Health Board are scoping out opportunities to contribute to the wider community wellbeing and circular economy by making surplus beds available for those most in need.

This paper sets out a proposal to engage with our partners and local community networks, to co-produce a solution that will support local families, who may be experiencing income and or housing poverty. The proposal will provide surplus beds to local families who face financial hardship. It has been guided by Welsh Government and community partners.

The paper sets out the context of child poverty. It then details the community engagement, logistical considerations, provides assurance and delivers a model that can be replicated across Wales.

2. CHILD POVERTY RESEARCH AND PROVISION OF BEDS

Welsh Government's Child Poverty Strategy estimates that over 200,000 or 1 in 3 children in Wales live in poverty.¹ This is supported by research from the children's charity Buttle which evidences how almost 30% of families on low incomes struggled to afford beds for their children in 2020².

The report states how families and children are sleeping on floors for periods of time because they don't have their own bed. Children are sleeping on old mattress' or cushions on the floor because parents can't afford a frame, often these mattresses or cushions are infested with bed bugs. The research has shown that disadvantaged children are already 18 months educationally behind their peers. Lack of sleep, due to not having a bed leads to poor concentration levels and lower educational

¹<https://gov.wales/.../child-poverty-strategy-2019-progress-report.pdf> · PDF file

² [The State of Child Poverty 2020 - Buttle UK](#)

<https://buttleuk.org> › Our Research › Research Reports

attainment which in the long term will only widen the inequalities gap that exists within our community.

The impact of Adverse Childhood Experience's (ACEs) are well understood to be a barrier to giving children the best start in life and the opportunity to achieve their potential. The Report on the 5th Annual Child and Family Poverty Surveys 2021 by Children In Wales highlighted poverty and the impacts of poverty which clearly affects children, young people and their families. The reality is that sadly many children within our community are hungry and families are in debt. Children are trapped in intergenerational cycles of lifelong hardship and disadvantage.³

By being proactive the Health Board can play its part in preventing childhood adversity and mitigating its impact alongside individuals and members of our communities. The Health Board will shortly be decommissioning the Bay Field Hospital and have a large number of beds that are unsuitable for the acute sector. However, they are sturdy enough for use in domestic settings, and would be ideal to donate to families and those people in greatest need within our community.

Allocating these beds to people in greatest need within our communities is likely to realise positive health outcomes by changing a child's or a person's life and their future life chances.

3. AVAILABILITY OF AND DEMAND FOR BEDS

The aim of the Field Hospitals was to enhance the ability of the health and care community in Swansea and Neath Port Talbot to care for all its residents during the pandemic by temporarily increasing the Health Board's bed capacity in readiness to respond to the anticipated surge of patients.

Bay Field Hospital was intended for post Covid 19 recovery ambulant patients, who required additional support or rehabilitation prior to their discharge home.

All NHS bodies throughout the UK were looking to purchase the same equipment to commission their field hospitals, demand was high, supply was low.

Nationally there was insufficient equipment to meet the demand requirements. Procurement lead in times were at least 6 months or longer. Advice at that time was that the Health Board only had 6 weeks build and to commission.

In response National companies responded to the unprecedented demand by producing equipment that would meet our short term needs. This equipment was never intended for long term hospital or community NHS use.

Along with other items companies begun producing what was referred to as emergency Covid beds (appendix 1).

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End Child Poverty Network - Children in Wales <https://www.childreninwales.org.uk> › our-work › end-c...

These would be best described as robust metal domestic style beds, they were only intended for short-term emergency use, they cannot be used in acute wards or community health settings as they do not meet the required technical design properties required for NHS beds.

However, they are sturdy enough for use in domestic settings, and would be ideal to donate to families and those people in greatest need within our community.

Welsh Government have a warehouse and distribution centre known as IP5 located in Newport. Much of the equipment purchased for the field hospitals was purchased directly by Welsh Government, stored in IP5 and was then distributed throughout Wales.

Swansea Bay University Health Board were initially allocated 595 of the emergency covid 19 beds which included waterproof mattresses. As the pandemic progressed and availability of beds increased the Health Board were able to place orders for electric profiling beds. Within Bay Field Hospital there are in excess of 1000 beds of varying styles which range from the basic emergency covid bed right up to electric profiling hospital beds.

Following the successful vaccine rollout, it has become apparent that hospitals throughout Wales would be able to manage covid patients within our acute environments. As part of their contingency planning, Welsh Government requested that Health Boards retain 330 beds within the field hospital as part of a super surge facility. These beds are to be retained until Welsh Government confirm with the Health Board that we can decommission the Field Hospital, which is expected to be received within the next couple months. To note the 595 surplus beds being discussed in this paper do not form part of the 330 beds that are to be retained.

Welsh Government have stated that they do not want the equipment back as storage would be an issue and the equipment now belongs to the Health Board. There is no National directive as to what to do with them.

Within Swansea Bay we became aware of a press release that spoke about a charity in Leeds that was tackling the issue of bed poverty for children (appendix 2). If this was an issue in Leeds, the author herself a former Health Visitor believed, it would be an issue happening within our own Health Board.

To test this hypothesis, some speculative emails were sent to Local Authorities, A Housing Association and the voluntary sector. The response received was unexpectedly overwhelming and demonstrated high demand for the beds.

Examples were given of how children are sleeping on floors or sharing single beds with other siblings and of women escaping domestic abuse who have sought refuge and are being rehoused. Social Housing properties are let unfurnished and prospective tenants are often facing financial hardship. Affordable Housing not that affordable and there are high levels within our community of what is referred to as 'in work poverty', that is families who work for minimum wages and therefore either do not qualify for benefits or will have access to very little additional financial assistance.

It is families such as these who are using foodbanks to feed their families and make ends meet. They cannot afford furniture to furnish their homes.

As the beds in the Bay are not being utilised and do not form part of the surge capacity, there is a real opportunity to make a positive difference to the lives of many Swansea Bay residents facing adversity. It is likely that people who are living without a proper bed to sleep in or who are sleeping on floors or sharing single beds will encounter health problems that only increases their likelihood of admittance into our hospitals thereby placing greater stress on our services.

A small working group has now been informally established on this that includes our Head of Communications. What has been discussed is that in addition to distributing these beds to those greatest in need, we launch an intranet campaign asking staff to donate new duvets or pillows, and also new, or freshly-laundered good condition, single sheets and duvet sets so that they can accompany the beds when distributed. If members of our community are not in a position to purchase a bed, then they are unlikely to be able to afford the bedding that goes with it, which is why staff will be asked if they can further support this project through voluntary donations.

Historically staff have responded extremely well to a similar annual health board campaigns to donate clothing and goods for people who are homeless, so it is hoped they will also support this.

Logistical work is currently underway as to how we will organise and co-ordinate the allocation and distribution of the beds.

4. GOVERNANCE AND RISK ISSUES

Welsh Government considered the proposal in January 2022 and was supportive of it. An email received on the 15th February 2022 stated that this has now gone to the Minister as this is something she would be very interested in supporting.

In addition, a further email from Welsh Government on the 17th February 2022 stated that the beds are the property of the Health Board (Appendix 3).

The proposal has had support from the Health Boards Bay Field Establishment Group and has been supported by the Health Board Director of Finance and Performance.

To ensure equity in the allocation of beds a process has been put in place with Local Authorities and interested organisations to ensure a fair and orderly distribution process.

Procurement colleagues have been consulted and are also very supportive of this scheme. For assurance we will be complying with regulation 7.13 of the Health Board's Financial Control Procedure. Procurement colleagues have already provided indemnity forms which the Health Board would need signed by recipients of the beds stating that once the beds have left our premises we are no longer liable for them.

5. FINANCIAL IMPLICATIONS

These beds are not Capital items as were purchased directly by Welsh Government. Therefore, by donating these beds at no cost, the Health Board will not incur any financial losses by allocating these beds to people within our community.

There is no national directive and Welsh Government do not want them back. Disposal of the Beds on an All Wales basis was going to be problematic for them.

Not that we would have as it would not have supported our sustainability agenda, we are aware that scrapping the beds costs would have cost £5 per bed, although the author has been advised by finance colleagues that this has already been accounted for in previous years' accounts.

By supporting this initiative there will be no cost to the Health Board other than some staff time. By donating the beds, we can intelligently manage our resources, to help those in greatest need.

6. RECOMMENDATIONS:

Members are asked to:

- **NOTE** the contents of the paper and the work that has been undertaken to date
- **APPROVE** the distribution of the surplus beds to those in greatest need living within our community with immediate effect.
- **APPROVE** that the Health Board launch a campaign requesting staff support this initiative with donations on new or good quality bedding to accompany the beds
- **NOTE** that this proposal has strategic alignment with our Integrated Medium Term Plan, Welsh Government Policies. The Wellbeing Future Generations Act (2015), Review of Adverse Childhood Experiences (ACE) policy 2021, and Child Poverty Strategy 2015.

Governance and Assurance		
Link to Enabling Objectives <i>(please choose)</i>	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
Health and Care Standards		
<i>(please choose)</i>	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input type="checkbox"/>
Quality, Safety and Patient Experience		
<p>Adverse Childhood Experience's (ACEs) are a barrier to giving children the best start in life and the opportunity to achieve their potential. We all have a role to play, as a Health Board, as individuals and members of our communities, in preventing childhood adversity and mitigating its impact. This begins with an understanding of the long term effect which childhood adversity can have and responding accordingly.</p> <p>By allocating these beds to people in greatest need within our communities we have an opportunity to see immediate health outcomes by changing a child's or a person's life and their future life chances.</p>		
Financial Implications		
<p>As discussed within the paper these beds have already been paid for by Welsh Government who do not want them back. These beds are unsuitable for the acute environment. By donating the beds to those in greatest need we would be supporting the circular economy. For assurance we will be complying with regulation 7.13 of the Health Board's Financial Control Procedure.</p>		
Legal Implications (including equality and diversity assessment)		
<p>Governance around the proposals has been sought and given from Welsh Government and is discussed within the paper.</p>		
Staffing Implications		
<p>As discussed within the paper a small working group has been established to work through logistics and the communications but also to work collaboratively with our partners to ensure equity of allocation and distribution of the beds.</p>		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
<p>This initiative ideally aligns itself with the WBFG Act 2015 and as discussed within the paper meets the 5 ways of working and 7 welling goals.</p>		

Report History	This is the first time this has been discussed.
Appendices	<p>Appendix 1 Photographs of available beds.</p> <p>Appendix 2 Link to Leeds Bed Poverty Press release</p> <p>Leeds charity Zarach uLeeds charity Zarach urges government to end child bed poverty - BBC News</p> <p>Appendix 3 Email from Ian Gunney 17th February 2022 stating that beds are the property of the Health Board.</p>