Priorities for future COVID-19 wave planning
As our focus turns to resetting services and meeting unmet patient demand, we mustn’t waste the time available to the NHS and social care services to plan and prepare for future COVID-19 waves. It is crucial that we learn the lessons from the past 3 months, as well as considering the additional challenges that future waves may bring if they coincide with winter flu.

The RCP has identified six key priority areas that should be focused on in the coming weeks and months to ensure we are well prepared.
1. Estate

The NHS estate is a finite resource which has been flexed as far as possible during the first wave of COVID-19. As pressure recedes, local systems and NHS regional teams will be considering how they might manage further waves. They will also be trying to increase the number of non-COVID-19 services.

- The UK government and devolved governments should ensure that providers are able to access additional capital funding to implement these plans.
- The NHS should continue to have access to the resources of the private sector as has happened under the block contract arranged by NHS England.
- Plans should be based on the need to maintain ‘COVID-free’ sites or clinical areas to minimise risks to patients and staff.
- The additional bed capacity created by the Nightingale hospitals during the first wave should be maintained. How this bed capacity is provided should be decided following a review of the Nightingale model. Additional capacity must be fully staffed and adequately resourced.
- The NHS should work with local authorities to identify estate and facilities that may be appropriate to deliver services if needed.

2. Flu vaccine

COVID-19 is likely to remain in the community for the foreseeable future. It is therefore key that we review and escalate the normal winter flu vaccination plans. The flu vaccine has the potential to help build resilience in both the NHS and social care workforces, and in the general public.

- The normal NHS and social care workforce flu vaccination programmes should be brought forward. They should aim for 100% uptake using tried and tested methods to maximise take-up. The importance of the vaccine, particularly in light of COVID-19, must be widely communicated.
- Public Health England (PHE), Public Health Wales, the NHS and the UK government and devolved governments should quickly review the potential benefit of providing the flu vaccine to everyone in the clinically extremely vulnerable grouping.
- Considerations should be given to dedicated flu vaccination programmes in institutional settings such as prisons.
- If the evidence of potential benefit supports it, the UK government and devolved governments should seek to secure additional batches to maximise availability.
- If the UK government and devolved governments are able to procure enough vaccinations, the flu vaccine should be offered to everyone over 50.
- In the event that a COVID-19 vaccine becomes available around the same time as the annual flu vaccine programmes begin, it is key that the two programmes work together to effectively cover the population need.

3. Workforce

Staff across the NHS and social care have gone above and beyond throughout the pandemic. We must use the time available to us now to consider how we can bolster the NHS and social care workforces for future waves.

- The NHS should rapidly develop a ‘reservist’ workforce model. It should establish a group of people who can be deployed quickly to support the service. Individuals who sign up to the reservist workforce should be able to quickly access CPD opportunities and contractual issues should be dealt with in advance so that they can be deployed at speed. The reservist clinical workforce may include those who have recently retired, those who are taking a career break, clinical academics, and those who work outside of the NHS. They need to be recognised as valued additions to the NHS.
- Staff must be able to access a risk assessment framework and be deployed appropriately.
4. Personal protective equipment (PPE)

PPE has been one of the workforce’s biggest concerns during the first wave of COVID-19. There must be no repeat of PPE shortages that have plagued the NHS and social care.

- The UK government, working with the devolved governments, must rebuild the stock depleted by the pandemic, providing regular updates on stock levels.
- The UK government, working with devolved governments, must ensure that the NHS and social care can procure PPE kit rapidly when needed.
- The UK government, working with the devolved governments, must ensure that the logistical challenges faced during the first pandemic are fully resolved and stress tested.
- NHS and social care providers must ensure that staff are confident in the procedures for donning and doffing PPE. NHS providers should also ensure that fit testing capacity and procedures are improved.
- As the evidence around PPE and COVID-19 infection control develops, PPE advice from PHE should be reviewed in partnership with the professions.

5. Partnership working

The pandemic has once again highlighted how the NHS and social care are inextricably linked, with decisions in one affecting the other. Now is the time for local systems and providers in both the NHS and social care to come together to develop local plans for future waves based on national guidance. This should include local government partners.

- Each local system should develop plans for future waves that aid good communication between providers, escalation plans and a clearer understanding of the roles and responsibilities of different stakeholders.
- Social care must be given the resources it needs to effectively manage during future COVID-19 outbreaks and waves. From PPE to testing, and staffing to funding, it is key that social care is placed on a sustainable footing.

6. Testing

Like PPE, access to testing hasn’t always been as readily available as we would have liked. The Royal College of Pathologists (RCPath) recently published COVID-19 testing: a national strategy, which sets out a clear way forward to ensure that clinicians, patients and the public have the testing we’ll need in the event of future outbreaks and waves.

- The UK government and the devolved governments should implement the RCPath national strategy, ensuring that all necessary resources are made available to provide timely, accurate and reliable testing.