

Interim Chief Executive, NHS Scotland

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To:Chief Executives, Territorial NHS Boards  
Chief Executive, GJNHCopied:Chief Executive, NHS 24  
Chief Executive, SAS

20 May 2020

Dear Colleagues

**COVID-19: MOBILISATION PLANS: NEXT PHASE OF THE NHS RESPONSE:  
ACUTE HOSPITALS: BED PLANNING ASSUMPTIONS**

In my letter of 14 May, which commissioned Health Board mobilisation plans for the next phase of the emergency response (for the period to the end of July), I undertook to write separately with guidance on what the Scottish Government expects Boards to maintain in terms of COVID-19 resilience for ICU and general acute beds. This letter sets out our expectations. This is informed by up to date activity tracking and modelling, and is designed to ensure the safe and incremental re-start of some paused activity, whilst maintaining appropriate COVID-19 resilience planning and protecting support for social care.

Acute general beds: from 1 June and until further notice, NHS Boards should ensure that COVID-19 provision is at least the number of confirmed cases in acute hospitals plus an immediately deployable contingency of an additional 50% available beds. NHS Boards should retain capability to reinstate their share of the original re-purposed 3,000 beds surge capacity within 7 days. The NHS Louisa Jordan retains capability for a further 1,000 COVID-19 patients, if required. The Scottish Government will continue its surveillance of COVID-19 demand on acute beds.

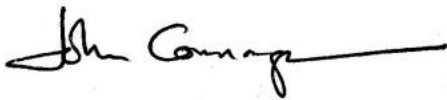
ICU beds: from 1 June and until further notice, NHS Boards should ensure that COVID-19 provision is at least the number of confirmed cases in ICU at that point plus an immediately deployable contingency of 50%. NHS Boards should retain capability to reinstate their share of the initial ICU surge capacity (585 beds) within 7 days. Further, NHS Boards should continue to develop contingency plans to put in place their share of the maximum ICU surge capacity (700+ beds). The Scottish Government will continue its surveillance of COVID-19 demand on ICU beds. Clearly you will need to decide at the local level what is a sensible de minimus figure to provide appropriate safe contingency, given there are various service configurations throughout our hospitals in Scotland.

I have also attached separately a template that should be completed and submitted alongside your next phase plan. This template will capture your planned weekly activity in a number of key areas in the period until the end of July.

I would ask that you ensure this updated guidance is fully reflected in your next phase plan which is **due with us by noon next Monday, 25 May**. Please also ensure that when your plan and activity template are submitted, they are copied to: [NHSAnnualOperatingPlans@gov.scot](mailto:NHSAnnualOperatingPlans@gov.scot).

I am happy to provide further guidance at the weekly Board Chief Executives call this coming Friday. If our planning assumptions on COVID-19 change, I will be in touch immediately.

Yours sincerely



**JOHN CONNAGHAN CBE**  
Interim Chief Executive, NHS Scotland