

**All Wales paediatric OPEL Levels  
(October 2021)**

| <b>Status</b>                      | <b>Paediatric Intensive care</b>   | <b>Paediatric High dependency care</b>  | <b>Paediatric ward care</b>   |
|------------------------------------|--|---|---|
| <b>OPEL 1 -<br/>NORMAL</b>         | <ul style="list-style-type: none"> <li>• Service is able to meet all paediatric critical care capacity requirements without impact on other services.</li> <li>• Working within PIC baseline bed capacity</li> </ul>   | <ul style="list-style-type: none"> <li>• Service is able to meet all paediatric high dependency capacity requirements without impact on other services.</li> <li>• Working within HDU baseline bed capacity</li> </ul>                  | <ul style="list-style-type: none"> <li>• Service is able to meet all paediatric high dependency capacity requirements without impact on other services.</li> <li>• Working within HDU baseline bed capacity</li> </ul>  |
| <b>OPEL 2 –<br/>Low Surge</b>      | <ul style="list-style-type: none"> <li>• Service’s bed capacity across the region is becoming limited</li> <li>• Units within a single network are operating at maximum capacity including mutual aid (Bristol supporting Cardiff/Cardiff supporting Bristol, Alder Hey supporting Manchester/ Manchester supporting Alder Hey)</li> <li>• All elective routine surgery ceased</li> </ul>  | <ul style="list-style-type: none"> <li>• Needing to utilise additional beds (quasi HDU beds)</li> <li>• Impacting on ability to staff ward beds</li> <li>• All elective routine surgery ceased</li> </ul>                               | <ul style="list-style-type: none"> <li>• Needing to utilise additional beds</li> <li>• Impacting on ability to staff ward beds</li> <li>• All elective routine surgery ceased</li> </ul>  |
| <b>OPEL 3.1 –<br/>Medium Surge</b> | <ul style="list-style-type: none"> <li>• Actions at OPEL TWO failed to deliver the required capacity</li> <li>• PIC Surge Capacity <b>+20%</b> across the region is being utilised and staff ratios at maximum capacity</li> <li>• Adult critical care units caring for children aged 12years and over if capacity available</li> <li>• Transport teams have children that require beds and are unable to place them (identify bed) within 6 hours</li> <li>• One PICU across the South supra-region utilising <b>+50%</b> surge capacity in their area – need to prepare to trigger OPEL 3B</li> <li>• Urgent surgery continuing</li> </ul> | <ul style="list-style-type: none"> <li>• Actions at OPEL TWO failed to deliver the required capacity</li> <li>• Urgent surgery continuing</li> <li>• Needing to call on mutual aid for staff from neighbouring Health Boards</li> </ul> | <ul style="list-style-type: none"> <li>• Actions at OPEL TWO failed to deliver the required capacity</li> <li>• Urgent surgery continuing</li> <li>• Needing to call on mutual aid for staff from neighbouring Health Boards AND/OR</li> <li>• Divert unscheduled care admissions to a neighbouring unit</li> </ul> |

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|                                    |  |   |   |
|------------------------------------|--|---|---|
| <p><b>OPEL3.2 – High Surge</b></p> | <ul style="list-style-type: none"> <li>• Actions at OPEL 3.1 failed to deliver the required capacity</li> <li>• Urgent surgery ceased- emergency surgery only</li> <li>• PIC Surge Capacity <b>+50%</b> across the region is being utilised and staff ratios at maximum capacity</li> <li>• Adult critical care units caring for children aged 12years and over if capacity available</li> <li>• Transport teams have children that require beds and are unable to place them (identify bed) within 6 hours</li> <li>• One PICU across the South supra-region utilising <b>+100%</b> surge capacity in their area – need to prepare to trigger OPEL 4</li> </ul> | <ul style="list-style-type: none"> <li>• Actions at OPEL3.1 failed to deliver the required capacity</li> <li>• Urgent surgery ceased- emergency surgery only</li> <li>• Needing to divert unscheduled care admissions to a neighbouring hospital</li> </ul>   | <ul style="list-style-type: none"> <li>• Actions at3.1 failed to deliver the required capacity</li> <li>• Urgent surgery ceased- emergency surgery only</li> <li>• Needing to divert unscheduled care admissions to a neighbouring hospital</li> </ul>  |
| <p><b>OPEL 4 – Emergency</b></p>   | <ul style="list-style-type: none"> <li>• Actions at OPEL3.2 failed to deliver the required capacity</li> <li>• PIC surge capacity across the region and supra-region is at maximum capacity and units are unable to accept new referrals within 6 hours</li> <li>• Resources overwhelmed. Possibility of triage by resource (nonclinical refusal or withdrawal of critical care due to resource limitation)</li> <li>• This must <b>only</b> be implemented on national directive from Welsh Government and</li> </ul>   | <ul style="list-style-type: none"> <li>• Actions at OPEL3.2 failed to deliver the required capacity</li> <li>• Paediatrics across the region is at maximum capacity</li> <li>• Resources overwhelmed. Possibility of triage by resource (nonclinical refusal or withdrawal of critical care due to resource limitation)</li> <li>• This must <b>only</b> be implemented on national directive from Welsh Government and in accordance with national guidance</li> </ul> | <ul style="list-style-type: none"> <li>• Actions at OPEL3.2 failed to deliver the required capacity</li> <li>• Paediatrics across the region is at maximum capacity</li> <li>• Resources overwhelmed. Possibility of triage by resource (nonclinical refusal or withdrawal of critical care due to resource limitation)</li> <li>• This must <b>only</b> be implemented on national directive from Welsh Government and in accordance with national guidance</li> </ul> |

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|--|---|---|--|
|  | <p>in accordance with national guidance</p> <p>NHSE/I Regional Medical director (in hours) / On-call Director (out of hours) to discuss and agree declaration and escalation to OPEL 4 - final responsibility lies with NHSE/I for the Network status as a whole.</p> |   |  |
| <b>Staff declaration: OPEL level SHOULD BE FURTHER CATEGORISED A, B or C</b> |   |   |  |
| <b>A</b>   | <u>Unit staffed as per PICS standards, Nurse in charge remains supernumerary</u>  | <u>HDU beds staffed as per PICS standards (1:2 for high flow, 1:1 for CPAP)</u> | <u>Ward beds staffed as per safe staffing acuity ratios</u>  |
| <b>B</b>   | <u>Ratios stretched to 1 PIC nurse to 2 ITU children but supported by a qualified nurse (non-PIC) to maintain PICS standards</u>  | <u>HDU ratio being maintained with non HDU staff and therefore at risk</u>      | <u>Ward staffing stretched from acuity ratio but remains within normal child to staff numbers with staffing from alternative areas</u> |
| <b>C</b>   | <u>Ratios below that recommended in PICS standards. Nurse in charge required to nurse a patient, unit at significant risk</u>   | <u>Inability to maintain HDU ratios as per PICS standards</u>                   | <u>Ward staffing compromised beyond accepted ratios, risk of compromise of patient care</u>  |