

NHS Board Meeting  
28 October 2020

Lanarkshire NHS Board  
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## SUBJECT: CARE HOMES UPDATE

### 1. PURPOSE

The purpose of this paper is to provide Board Members with an update on the support being provided to Care Homes in NHS Lanarkshire.

For approval	<input type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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### 2. ROUTE TO THE BOARD

This paper has been prepared by Trudi Marshall, Nurse Director, North Lanarkshire Health & Social Care Partnership, on behalf of Eddie Docherty, Director of Nursing, Midwifery & Allied Health Professionals.

### 3. SUMMARY OF KEY ISSUES

There are 93 care homes registered with the Care Inspectorate to provide adult care in Lanarkshire. During the first wave of the pandemic there was significant outbreaks and deaths across care homes in Lanarkshire. As community prevalence is increasing we are again experiencing a risk in the number of outbreaks across Lanarkshire. This update provides an overview of the current situation and support being provided.

#### Background

Lanarkshire began work to strengthen the management and oversight of outbreaks in care homes in March 2020, enhancing the supports we had offered routinely up until then.

These are noted below:

- Social Work Quality Assurance Section – existing contact
- Care home Liaison Team Support – existing weekly contact
- HPT Management of outbreaks – daily contact during outbreaks
- Weekly conference calls with sector by HSCP, established March 2020
- Established early contact with Care Inspectorate
- Care home Assurance Group, meets daily, established 23<sup>rd</sup> April 2020
- Bronze care home sub group, meeting twice weekly, established 24<sup>th</sup> April 2020
- Development of Care Home Strategy 23<sup>rd</sup> April 2020
- Access to staff bank to enable sustainable rotas with supporting governance framework
- Enhanced PPE recommendations that sector move to table 4 on 1<sup>st</sup> May 2020
- Prioritised programme of testing for care homes commenced 5<sup>th</sup> May 2020
- Workforce group established to support screening programme established 14<sup>th</sup> May 2020

Following communication from the Cabinet Secretary on 17<sup>th</sup> May 2020, which outlined the additional requirements regarding accountability for provision of nursing leadership, professional oversight, implementation of infection prevention control measures, use of PPE and quality of care, there was a significant work undertaken to map our current provision of support and ongoing workforce and resource requirements to deliver this new request.

This request for additional resource on 2<sup>nd</sup> June 2020 was approved and has allowed the development of a resource to support us to fulfil these requirements. An integrated team was therefore developed to allow us to provide additional nursing leadership support and specialist infection prevention and control (IPC) advice.

This extension of roles and responsibilities has now been extended until June 2021 and a review is underway to consider ongoing model of support and resource requirements.

### Support Visits and RAG rating

Initially support to care homes was provided via virtual support visits and many of the elements we reviewed were self-reported by the care home. However it has become evident that the self-reporting on IPC compliance differed from our assessment when undertaking face to face visits led by an IPC specialist nurse. Every adult care home in Lanarkshire has now had a face to face review by an IPC Specialist nurse. A RAG rating system has been developed based on Standard Infection Prevention and Control measures (SIPC). At present we have 15 care homes RAG rated red and 78 rated amber. All care homes have been provided with improvement plans and return visits are prioritised to those that have been RAG rated red.

### Huddle

All 93 care homes in Lanarkshire have registered to use the national safety huddle template hosted on TURAS. There is a daily safety huddle meeting involving social work, care inspectorate, health protection team and nursing staff where they review this information and respond to any escalations or concern's raised.

There continues to be variation in completion of the safety huddle template, particularly at weekends. All Care Home Managers have been contacted by Care Home Assurance team requesting that there is contingency plans within the care home to submit data at the weekends, failing this there is a requirement for this data to be submitted by 11am on a Monday morning.

### Staff Testing

All staff continue to be offered weekly staff testing via a combination of social care portal and NHS Lanarkshire. Uptake has been good with us consistently achieving our target of 3,800 per week.

	Weekly Testing NHS	Testing North HSCP	Testing South HSCP
18-24 Sept	79/92 (85.8%)	27/33 (81.8%)	52/59 (88%)
25 – 01 Oct	86/92 (93%)	32/33 (97%)	54/59 (91.5%)
02 – 08 Oct	84/92 (91%)	30/33 (91%)	54/59 (91.5%)
12 - 18 Oct	85/92 (92%)	30/33 (91%)	55/59 (93%)

\*One care home in Lanarkshire has been wrongly allocated to another Health Board and awaiting this to be rectified.

### 3.4 Current Outbreaks

As of 5 pm on 26<sup>th</sup> October there was currently 15 outbreaks in care homes across Lanarkshire, 84 residents positive and 6 deaths attributed to covid 19. This reflects the increase in community prevalence across our localities. We are beginning to see more staff test positive via routinely weekly testing and more asymptomatic residents test positive via weekly surveillance sampling.

We continue to provide IPC support to all care experiencing an outbreak and escalate any concerns we have to the Care Inspectorate. As numbers increase however the amount of IPC specialist support we can provide to each care home becomes more challenging.

### Visiting

At present NHS Lanarkshire has been unable to provide approval for the care homes to move to indoor visiting due to levels of community prevalence and cluster outbreaks. This continues to be reviewed weekly with the Director of Public Health (DPH) and we continue to support care homes to consider application of criteria for essential indoor visits. There is concern about the impact this is having on residents and the feasibility of maintaining outdoor visiting over winter therefore this will be the focus over review and risk assessment over the next few weeks with the DPH.

### Adult Support and Protection (ASP)

The Chief Social Worker (CSW) and the care home assurance team have been monitoring ASP activity across the care home sector throughout the pandemic. We have seen fluctuations in ASP numbers throughout the period however over the past few weeks there has been some concern about quality of care across a number of care homes with care inspectorate also submitting a number of concerns to CSW. There are two active police investigation in Lanarkshire relation to ASP in care homes. CSW continues to monitor this situation closely and we continue to support them with specialist clinical and professional advice where required.

## 4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input checked="" type="checkbox"/>	AOP	<input checked="" type="checkbox"/>	Government policy	<input checked="" type="checkbox"/>
Government directive	<input checked="" type="checkbox"/>	Statutory requirement	<input checked="" type="checkbox"/>	AHF/local policy	<input type="checkbox"/>
Urgent operational issue	<input checked="" type="checkbox"/>	Other	<input type="checkbox"/>		

## 5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

### *Three Quality Ambitions:*

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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**Six Quality Outcomes:**

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input checked="" type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input checked="" type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

**6. MEASURES FOR IMPROVEMENT**

These are monitored on a weekly basis by the Support Team and issues escalated appropriately.

**7. FINANCIAL IMPLICATIONS**

Additional resources have already been committed to establish the support team until November 2020, additional funding is required to continue and enhance this support until June 2021. These funds are included in the additional COVID costs being incurred by the Board.

**8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS**

There is a significant risk if Nursing Homes are not fully supported, and for any reason are unable to continue to look after residents appropriately.

**9. FIT WITH BEST VALUE CRITERIA**

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance Management	<input type="checkbox"/>	Equality	<input type="checkbox"/>
Sustainability Management	<input checked="" type="checkbox"/>				

**10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT / FAIRER SCOTLAND DUTY**

Not Applicable.

**11. CONSULTATION AND ENGAGEMENT**

Not Applicable.

**12. ACTIONS FOR THE BOARD**

Approve	<input type="checkbox"/>	Endorse	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>	Ask for a further report	<input type="checkbox"/>

The Board is asked to note that the following actions are being progressed

1. Develop the model and support required to extend additional support to care homes to June 2021;
2. Continue to focus support on care homes in early stages of outbreak;
3. Continue planned face to face visits to support delivery of outstanding action plans;
4. Continue to review indoor visiting on a weekly basis with the Director of Public Health; and
5. Support the Chief Social Work Officer to monitor and investigate Adult Support & Protection concerns.

**13. FURTHER INFORMATION**

For further information about any aspect of this paper, please contact:

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