NHS Board Meeting 28 April 2021

Lanarkshire NHS Board Kirklands Fallside Road Bothwell G71 8BB



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SUBJECT: CARE HOMES UPDATE

1. PURPOSE

The purpose of this paper is to provide Board Members with oversight and assurance of delivery of additional assurance and support as requested by Scottish Government on 17th May 2020. Board Members had previously requested monthly updates it is requested that this frequency now be reviewed.

2. ROUTE TO THE BOARD

This paper has been prepared by Trudi Marshall, Nurse Director, H&SC North Lanarkshire, on behalf of Eddie Docherty, Executive Director NMAHP's.

3. SUMMARY OF KEY ISSUES

There are 92 care homes registered with the Care Inspectorate to provide adult care in Lanarkshire. Roles and responsibilities include:

- To provide professional oversight and clinical leadership and support ensuring health needs of care home residents are met.
- Outbreak management
- Recently a whole system approach to a sustainable vaccination programme was included.
- Oversight of testing and review of test results, and supporting the development and implementation of a range of testing approaches for care homes.
- Conduct assurance visits and monitor information trends from safety huddle providing professional and clinical advice on provision of health care needs.
- Support compliance with IPC whilst monitoring trends and escalations via safety huddle.
- Support education and training in care homes in IPC measures.

This update provides an overview of the current situation and support being provided.

3.1 Background

Executive Nurse Director roles and responsibilities until June 2021 are detailed above, these include the SG request that Executive Nurse Directors and their officers support the Directors of Public Health to review the safety huddle information required to be submitted by care homes, identify specific issues and support the development and implementation of solutions to ensure residents are provided with safe high-quality services.

A letter from Cabinet Secretary on 23rd June requested that this support be extended until at least March 2022.

3.2 Professional Oversight and Leadership

The care home assurance team have established a strong network with HSCP's, Public Health and Care Inspectorate via daily safety huddle and weekly care home forums with HSCP'S. On a daily basis the compliance of the safety huddle is reviewed focusing on staffing or dependency escalations and outbreak status.

Since January 2021 the safety huddle has utilised the early warning flags for all care homes to provide additional support to the care home by discussing their early warning flag with care home manager and if required undertaking an IPC review, this would be to prevent or minimise an outbreak and ultimately improving resident's and staff's outcomes.

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 are 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. Variation in reporting continues to be shared with Scottish Government.

3.3 Current Outbreaks

As of 5 pm on 15th April there were two Covid 19 outbreaks in care homes across Lanarkshire. This reflects the reducing community prevalence across our localities alongside the completion of the second dose of the vaccination schedule for care home residents and staff.

Care Home Outbreak Oversight Group was established in November 2020 to provide oversight of all active outbreaks and is chaired by Consultant in Public Health, 28 care home outbreaks have been recorded since 01/11/2020. As an outbreak is declared the care homes assurance team deploy an IPC nurse to support the care home manager to review practice and identify any immediate issues. This is in addition to routine IPC audits and support visits.

3.4 Covid Vaccination

The planned schedule for the second dose of the vaccine is completed in all homes. Follow up for those individuals that could not be vaccinated due to recent positive Covid status continues.

The overall compliance of the vaccination is.

	First Dose	Second dose
Resident's compliance	95%	92%
Staff's Compliance	84%	74%

The Care Home Assurance Team is reviewing individual care home compliance of staff and residents and supporting individual homes to improve compliance. Some staff accessed vaccination via Salus or vaccination centers and so are not coded as working in care home therefore these staff figures could be higher.

3.4 Staff Testing

All care homes have access to weekly asymptomatic staff testing which have all have now been transferred to NHS Scotland regional lab testing facility. Week Commencing 5th April all 92 care

homes submitted data with 4482 staff submitted PCR tests and only 28 staff declining.

In addition to weekly PCR testing care home staff are now also requested to undertake twice weekly lateral flow testing (LFT). The Care Home Assurance Team continue to support around the implementation of LFT. A SLWG has been developed to provide additional support to homes who are early adopters and allow the care homes to share any lessons and their improvement work. Last week 59/92 Care Homes submitted LFT data, there were a total of 2563 tests for staff and 997 visitor tests uploaded to the portal over the last week. There is currently underreporting as many homes have informed the team that they are unable to upload all results on to the portal due to time constraints. It is hoped that as TURAS is adapted to allow bulk upload, this process will become more efficient and compliance will improve.

Potential outbreak testing continues to be undertaken in NHS Lanarkshire testing facilities and sample screening was also recommenced on 22nd March 2021.

W/C 5/4/21

Testing	Care Homes	Residents	Positive	Staff Sampled	Staff Positive
Regime	tested	Sampled	residents	_	
outbreak	6	87	0	0	0
Sample	12	247	0	0	0
Surveillance					

3.5 Collaborative Assurance 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 was developed based on Standard Infection Prevention and Control measures (SIPC). All care homes have been provided with improvement plans and return visits are prioritised to those that have been RAG rated red. Improvement plans and RAG ratings are shared with Care Inspectorate. Three homes are now RAG rated green with no outstanding actions, 84 amber with ongoing actions and 5 red who are being provided with significant support.

The second cohort of supportive visits commenced in February 2021, this is a collaborative visit with Social Work, IPC and Care Home assurance. It is anticipated that these visits will be completed by mid-June 2021.

3.6 Knowledge and Application of IPC

The IPC knowledge of staff and managers and their ability to apply Public Health Scotland guidance into practice using videos and telephone advice do not appear to be adequate. Not all care homes recognise limitations in their knowledge and need for expert advice. We have established a service model to respond to the Scottish Government directive on clinical and care assurance which included recruitment of IPC nurses to provide support to care homes in their knowledge and practical application of IPC measures.

A short life working group has been set up to work with care home managers in order to better understand their training and educational requirements regarding infection prevention and control. This is being supported by the Care Inspectorate and Scottish Care. Four modules from the Scottish Infection Prevention and Control Education Pathway (SIPCEP) have been identified as key

priorities and three care homes have currently registered and are trialing these. A plan is in place to promote and roll this out further.

Care environment and equipment education is currently being delivered to care home staff including domestic and maintenance staff. To date 20 sessions have been delivered to 13 care homes with plans to deliver this to all homes by June 2021. The SLWG's next step is to focus on supporting and improving compliance of PPE practice.

3.7 Quality Improvement

A thematic analysis has been undertaken of all supportive visits and outbreaks to date which has identified several areas for quality improvement. These are leadership, record keeping, standard infection prevention control precautions, falls and pressure ulcers. Subgroups have been established for each of these areas to progress this work and report to the care homes operational group. Membership of all SLWG include Scottish Care, Social Work, Care Inspectorate, Practice Development Centre, Care Home Managers and Care Home Assurance Team.

The Care Home Assurance Team are focused on admission avoidance to Acute Hospitals and prevent non-essential Emergency Department attendance by ensuring that residents have an Anticipatory care plan. There is an increase in the use of digital technology such as 'Near Me' consultations currently being utilised for GP's, Tissue Viability & Podiatry services. There is a plan to promote this approach in all care homes.

3.8 Staff well being

Care home members of the wellbeing group and providers continue to report that staff are physically and mentally exhausted, care home managers are concerned around their staff wellbeing. The group has launched a designated telephone line for care homes to access the "All of Us" wellbeing support service. This was communicated via a newsflash to reach a wide audience on social media as well as credit card size laminated cards with the number and posters giving further information. Care Home Assurance Team supported the launch by distributing laminated cards to all staff who were being vaccinated and highlight the support available to all staff.

The wellbeing group are focusing on promoting psychological first aid (PFA) to provide peer support to staff. A video clip of a carer who has completed the PFA course and has taken on this role in the care home where she works. The video clip will be shared on social media sites and will also promote the dedicated Helpline for Lanarkshire care home staff and other national wellbeing supports.

North Lanarkshire has set up a care home forum for managers to meet, discuss issues and gain peer support in a safe place. This is initially being facilitated by the partnership. South Lanarkshire is looking at also setting up a similar support system.

3.9 Care Inspectorate and Chief Social Worker Officers

The Care Inspectorate have developed a new COVID 19 Scrutiny Assessment Tool (SAT) which replaced the previous risk assessment tool in care homes from the 14th of August 2020. The Link Inspector for Lanarkshire routinely joins the weekly Care Home Assurance Team (CHAT) meeting, at which time they share the plans for any upcoming inspections and seek the views of the assurance group on any visits that may have been conducted to care homes. When any sanctions have been placed by the Care Inspectorate following an inspection for example, improvement notices or moratoriums they have worked not only with commissioning services and the care home but also with the assurance group and the wider HSCP to ensure we have the correct supports in place. The

CHAT has also escalated concerns to the Care Inspectorate as required. This working relationship continues to evolve and develop within the revised COVID professional responsibilities.

3.10 Care home visiting

Scottish Government recent guidance document *Open with Care* provides guidance on reintroducing meaningful contact between care home residents and their loved ones, beginning with indoor visiting up to twice a week. Care Home Assurance Team have worked closely with care homes to support them in implementing this guidance. On 6th April 2021, 83/92, care homes were noted to be open to indoor visiting. Two were closed due to outbreaks and five had temporary restrictions as potential outbreaks were being investigated. The remaining two are short term respite homes and have advised they would support families to visit if they wished but had recorded this incorrectly within TURAS. The assurance team will continue to support safe and meaningful contact with families as national restrictions are eased.

Further guidance – *Open for Care* – was launched w/c 12 April 2021 to support a staged reintroduction of visiting professionals into care homes for non-urgent care and wellbeing services. Urgent and essential care is provided as necessary.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	AOP	Sovernment policy	
Government directive	Statutory requirement	AHF/local policy	
Urgent operational issue	Other		

5. CONTRIBUTION TO QUALITY

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

Three Quality Ambitions:

Safe	\boxtimes	Effective		Person Centred	
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Six Quality Outcomes:

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

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 the support team until June 2021 and a new funding bid is being considered by CMT. 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 care 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	Effective partnerships	Governance	and	\boxtimes
		accountability		
Use of resources	Performance	Equality		
	Management			
Sustainability				
Management				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT / FAIRER SCOTLAND DUTY

Not Applicable.

11. CONSULTATION AND ENGAGEMENT

The team consult with care homes on an ongoing basis through weekly conference calls, weekly supportive calls and short life working groups.

12. ACTIONS FOR THE BOARD

Approve	Endorse	Identify further actions	
Note	Accept the risk identified	Ask for a further report]

13. FURTHER INFORMATION

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

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