

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

This paper has been prepared by Sharon Murray, Associate Nurse Director, Care Home Assurance and Support, 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.

#### 3.1 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.

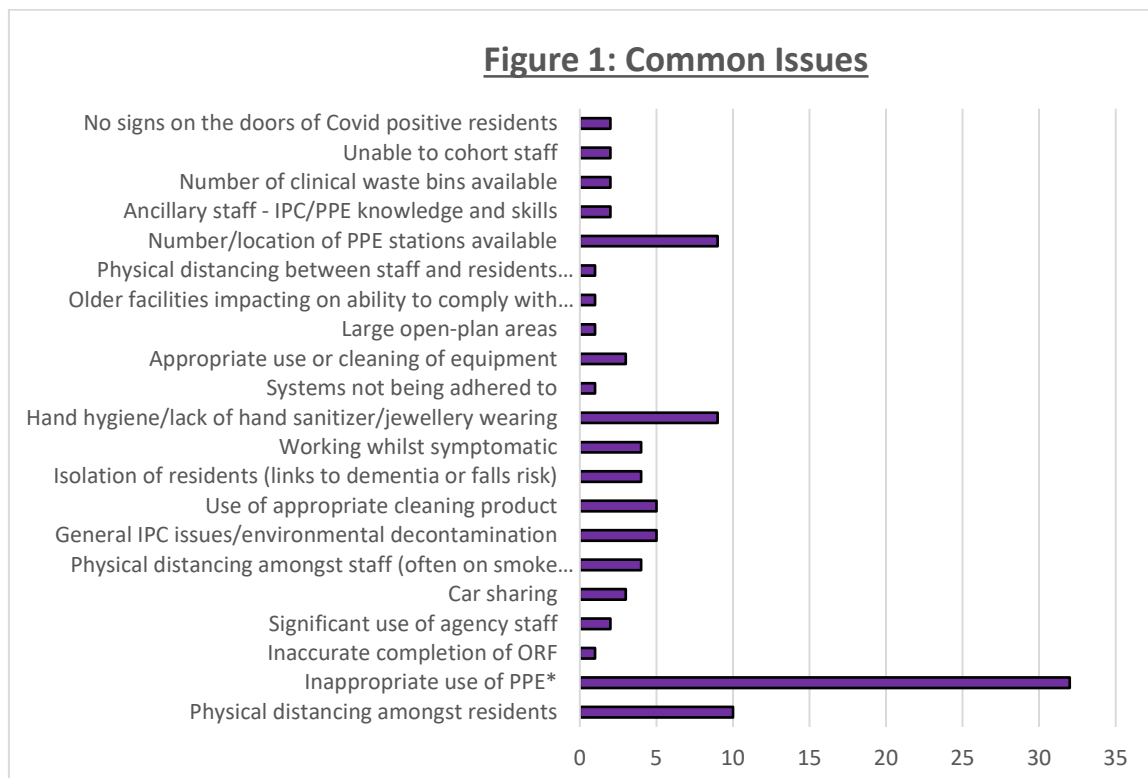
This extension of roles and responsibilities has now been extended until June 2021 and funding has now been extended to support this work.

### 3.2 Current Outbreaks

As of 5 pm on 19<sup>th</sup> January there was currently 21 outbreaks in care homes across Lanarkshire. This reflects the increase in community prevalence across our localities. We are beginning to see more staff test positive via increased routine testing and more asymptomatic residents test positive via weekly surveillance sampling.

#### Common issues identified during IPC care home outbreak visits

Care Home Outbreak Oversight Group was established in November 2020 to provide oversight of all active outbreaks and is chaired by Ashley Goodfellow. Fifty-six care home outbreaks have been recorded to date and 37 IPC outbreak supportive visits have been undertaken by IPC specialist nurses. 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. Feedback from these outbreak visits is provided to the Oversight Group and common themes (number of instances occurring) recorded (see Figure 1 below). This supports the targeting of messaging, education and support for care homes.



### **3.3 Covid Vaccination**

The planned schedule for the first dose of the vaccine is completed in 92 care homes, there is 1 care homes with a current outbreak that cannot be vaccinated. This is reviewed at the outbreak management group and they will advise when appropriate to immunize.

The overall compliance of residents who have received the vaccine is 80% with staff's compliance approximately 70%. The Care Home Assurance Team are reviewing individual care home compliance of staff and residents and supporting individual homes to improve compliance although. There are a few care homes compliance that is approximately 50% this is due to staff who have been Covid positive in the past 28 days & perceived concerns around safety. Further information around concerns has been sent to ensure staff can make an informed decision about vaccination and we continue to engage with these care homes to improve vaccination rates.

### **3.4 Staff Testing**

All staff continue to be offered weekly staff testing via a combination of social care portal and NHS Lanarkshire. All care homes have access to weekly asymptomatic PCR staff testing through either the social care portal or NHS laboratory testing. There are still some concerns over the delay in results being received by care homes from the social care portal and these continue to be escalated to NSS and the Scottish Government. South Lanarkshire homes will begin transfer to the national portal and NHS testing (regional hubs) in January 2020.

In addition to weekly PCR testing care home staff are now also requested to undertake twice weekly LFT There is some confusion around LFTs and care homes are raising concerns about the time taken in supporting lateral flow testing requirements and processes.

### **3.5 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). All care homes have been provided with improvement plans and return visits are prioritised to those that have been RAG rated red. The next cohort of supportive visits will be a collaborative visit with Social Work and Care Home assurance and will commence end of January 2021 however the staff that were undertaking these supportive visits will be required to support delivery of 2<sup>nd</sup> dose of vaccine to care homes therefore there may be some delay in supportive visits for those RAG rated amber and green.

### **3.6 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. Variation in reporting has been shared with Scottish Government and further training of staff has been requested.

### 3.7 Quality Improvement

A thematic analysis has been undertaken of all supportive visits and outbreaks to date which has identified a number of areas for quality improvement. These are leadership, record keeping, standard infection prevention control precautions, falls and pressure ulcers. Sub groups have been established for each of these areas to progress this work and report to the care homes operational group.

### 3.8 Staff well being

The Care Home Staff Wellbeing short life working group aims is to promote wellbeing and improve access to resources and information. A care home staff wellbeing survey was completed and the analysis is being used to inform the group.

The group launched a designated telephone line for care homes to access the “All of Us” wellbeing support service. This will be 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. The group have been working in collaboration with The Haven to provide resilience training and support for families of residents, pilot homes are currently being recruited for this initiative.

### 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 14<sup>th</sup> 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 these care homes.

When any sanctions have been placed by the Care Inspectorate follow 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 have 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

Lanarkshire has moved in to Level 4 restrictions which means only essential care home visiting is permitted, alongside window and garden visits if deemed safe by the Director of Public Health. Essential visits continue to be encouraged where appropriate and guidance on what constitutes an essential visit has been shared widely.

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

The Board is asked to derive assurance from the report and note that the following actions are being progressed

1. Note the extension of support and funding until 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;  
and
4. Continue to review indoor visiting on a weekly basis with the Director of Public Health.

## 13. FURTHER INFORMATION

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

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