

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 Sharon Murray, Associate Nurse Director, Care Home assurance & Support, 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. A further letter from CNO on 24/05/21 confirmed that the funding to ensure the provision of advice, support and guidance in relation to nursing issues and the requirements in relation to Infection Prevention & Control within adult and older people care homes will be ring

fenced until March 2023.

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 twice weekly 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 11th June there are 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, 31 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	96.5%	93.1%
Staff's Compliance	90.9%	88.8%

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 31st May, 91/ 92 care homes submitted data with 43832 staff submitted PCR tests and 58 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. Last week 72/92 Care Homes submitted LFT data, there were a total of 2194 tests for staff and 1079 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.

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

W/C 31 /05/21

Testing Regime	Care Homes tested	Residents Sampled	Positive residents	Staff Sampled	Staff Positive
outbreak	2	75	3	0	0
Sample Surveillance	11	215	0	0	0

3.5 Collaborative Assurance Visits and RAG rating

The second cohort of supportive visits commenced in February 2021, this is a collaborative visit with Social Work, IPC and Care Home assurance these visits will be completed by 15/06/21. 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. Overall there has been an improvement from the first supportive visits as detailed below:

RAG rating	First Cohort	Second Cohort to date
Red	16	10
Amber	77	53
Green	0	25
Total	93	87

The main improvements have been noted in staff's knowledge and education in cleanliness of general care environment and care equipment

3.6 Knowledge and Application of IPC

The IPC knowledge of staff and managers and their ability to apply HPS guidance into practice – videos and telephone advice do not appear to be adequate. Not all care homes have the ability to self-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 includes recruitment of IPC nurses to provide support to care homes in their knowledge and practical application of IPC measures.

The IPC Care Home Working Group involving care home managers, CI and Scottish Care, continues to promote the Scottish Infection Prevention and Control Education Pathway (SIPCEP). Delivery of care environment and equipment education continues to be progressed to care home staff including domestics and maintenance staff. To date, 28 care homes involving a total of 180 staff members have received education. A PPE video has been developed and shared with care home staff highlighting the importance of doffing PPE using the correct order and technique.

The IPC team are supporting all care homes with the launch of the National Infection Prevention Control Manual on 24 /05/21

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.

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

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.

Scottish Government recent guidance document *Open with Care – additional guidance to support residents’ with outings away from the care home* was launched on 17/05/21. This document supports *Open with Care* provides guidance on reintroducing meaningful contact between care home residents and their loved ones. Care Home Assurance Team have worked closely with care homes to support them in implementing this guidance. This document was supported with a further version of *Open with Care: supporting meaningful contact and activities in and away from care homes* which was launched on 03/06/21 to provide supplementary information: answers to practical questions and concerns.

On 10th June 2021, 88 of 92 care homes were noted to be open to indoor visiting. Two homes were closed due to an outbreak and two had temporary restrictions as potential outbreaks were being investigated. The assurance team will continue to support safe and meaningful contact with families as national restrictions are eased.

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"/>		<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 checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" 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 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	<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

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	<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"/>

13. FURTHER INFORMATION

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

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