

NHS Board Meeting
31 March 20201

Lanarkshire NHS Board
Kirklands
Fallside Road
Bothwell
G71 8BB
Telephone: 01698 855500
www.nhslanarkshire.scot.nhs.uk



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 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 tests results
- 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
- Support the development and implementation of testing approaches for care homes

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 Scottish Government 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.

This extension of roles and responsibilities was extended until June 2021 and funding is currently being explored to extend to support this work until June 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 staff absence, any 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 a 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 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.

3.3 Current Outbreaks

As of 5 pm on 23rd March there are currently 2 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, 26 care home outbreaks have been recorded since 01/11/2020 and 48 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.

3.4 Covid Vaccination

The planned schedule for the second dose of the vaccine is completed in 90 care homes, there are 2 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 immunise.

The overall compliance of the vaccination is

	First Dose	Second dose
Resident's compliance	95%	81%
Staff's Compliance	84%	69%

The Care Home Assurance Team are reviewing individual care home compliance of staff and residents and supporting individual homes to improve compliance. The team continue to undertake vaccination sessions within care homes to provide the second dose to all those that were unable to receive the vaccine at time of visit to care home.

Many of the care home staff were concerned around the safety of the vaccine, in particular there were fertility concerns raised across all care homes. To ensure staff were making an informed

decision around the uptake of the vaccine, the communication team developed a supportive document with the frequently asked questions around vaccine safety. This provided reassurance and received very good feedback from staff across care homes.

3.4 Staff Testing

All care homes have access to weekly asymptomatic staff testing through either the NHS Scotland regional laboratory or NHS Lanarkshire laboratory testing. South Lanarkshire homes have been transferred to NHS Scotland regional lab testing and all of North Lanarkshire homes were transferred w/c 22 February 2021.

In addition to weekly PCR testing care home staff are now also requested to undertake twice weekly Lateral flow testing. 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 63/92 Care Home have submitted LFT data, there was a total of 1941 tests for staff and 881 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.

This concern has been feedback to TURAS who have since reviewed the method of recording results to allow care homes to upload several staff results together in the one entry. Care Home Assurance Team will continue to monitor weekly compliance.

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

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 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. The IPC team 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. Three modules from the Scottish Infection Prevention and Control Education Pathway (SIPCEP) have been identified as key priorities and 3 care homes have currently registered and are trialing these. A plan is in place to promote and roll this out further.

A power point presentation focusing on the care environment and care equipment has been developed for delivery to care home staff and sessions are currently in process. The SLWG's next step is to focus on supporting and improving compliance of PPE practice.

During the supportive visits it has proven to be a challenge to identify appropriate cleaning products, this has been escalated via national meeting requesting guidance. The National infection prevention Control Manual (NIPCM) for care homes is currently in the final draft and includes a national cleaning specification specific to care homes. The date for launching has yet to be confirmed.

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. 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 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 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 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

Scottish Government recent guidance document Open with Care provides guidance around reintroducing meaningful contact between adult care home residents and their loved ones, beginning with visiting up to twice a week. Care Home Assurance Team are reviewing the number of care homes who are not open to indoor visiting on a daily basis and are providing support to the care home to maximise safe and meaningful contact.

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 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 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 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"/>

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

1. Note the proposed extension of support and funding until June 2022
2. Continue to focus support on care homes in early stages of outbreak; and
3. Continue planned face to face visits to support delivery of outstanding action plans.

13. FURTHER INFORMATION

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

Eddie Docherty
 Director of Nursing, Midwifery & Allied Health Professionals
 NHS Lanarkshire