

NHS Board Meeting  
26 January 2022

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 Sharon Murray, Associate Nurse Director, Care Home Assurance, on behalf of Eddie Docherty, Executive Director NMAHP's.

### 3. SUMMARY OF KEY ISSUES

#### Outbreak Management

An increase in infection rates & outbreaks of Covid 19 (including Omicron variant) has been noted across the 91 care homes situated in both North & South Lanarkshire since late December 2021 and carrying into January 2022. This has resulted in an unprecedented demand on both the Health Protection and IPC teams, on 14/01/21 there was 63 care home outbreaks, this reduced to 43 on 19/01/22. The IPC team aim to visit all homes that have a declared COVID-19 outbreak to review practice and identify any issues in relation to outbreak management. IPC are working closely with the Health Protection team to prioritise visits ensuring homes of concern for example with high attack rates are visited in a timeously manner.

To fully support the care home outbreaks, the care home outbreak management oversight group now meet daily to ensure that all outbreak identified as a significant concern are discussed daily and all other outbreaks discussed twice weekly. At this meeting a risk assessment is undertaken around the home being allowed to be 'Open with Care' this is a balance of risk with Public health, Care Inspectorate & Care Home assurance ensuring that the psychological safety and human rights of each resident must be considered as we remember the care homes are the persons' actual home environment and care must be taken when any sanctions or restrictions are made to these vulnerable residents within Lanarkshire's care homes.

The Acute sites are experiencing significant capacity and staffing challenges. Work is ongoing across the whole system to respond to the demand challenges. Within the Acute sites there are patients who have been identified for discharge who are either delayed due to homecare not being available or awaiting the completion of their community care assessment. It is recognised that community services are experiencing the same staffing challenges as the acute settings and this is resulting in delays to discharge. Public Health are also carrying out risk assessments to enable the safe discharge of residents to homes during COVID-19 outbreaks.

### **Lateral Flow Device Test of Change**

Expanded testing is carried out in care homes following an assessment by Public Health/ the Health Protection Team when they are notified of COVID-19 positive resident/s and or staff where there is a possibility that other residents or staff members may have been exposed to an infectious resident (confirmed by PCR) or common source.

The tests are completed on the day of identification of positive case/s or as soon as possible after and again four or five days later. The purpose is to identify further cases and ensure the correct IPC measures are implemented immediately to reduce spread.

Due to the emergence of the highly transmittable Omnicom variant of COVID-19 and the associated increase in its community prevalence, there is a high demand for expanded testing in care homes. PCR test results can take 24-72 hours, during this time restriction are placed on care home resident's movement, visiting and admissions. The social isolation and restriction on movement has an effect on the health and wellbeing of residents.

Lanarkshire care homes are currently taking part in LFD testing for asymptomatic residents following a risk assessment by the Public Health Team and in collaboration with the care home managers, instead of PCR tests. LFD's are quick to complete and provide results in 15-30 minutes (depending on the device) therefore can provide a much more efficient way of completing the expanded testing which ultimately benefit the residents care journey.

A paper is being drafted and SOP produced outlining the rationale, guidance and processes involved in the PDSA.

### **Task and Finish Winter Improvement Projects**

The Care Home Assurance team continue to review the weekly Milan data which highlights care home attendees to ED. The team follow up on any presentations that may be considered as avoidable, discussing cases with care homes. It is anticipated that there may be opportunities to reduce general attendances to the ED's across Lanarkshire by providing education and training in areas such as continence, catheter care, deteriorating patient, realistic medicine and anticipatory care planning. This will allow the team to review any developing trends which will enable a structured and planned education and training program for the 6 -12 months.

The Care Home Assurance Team are involved in 3 key improvement projects over the winter to reduce ED presentations and ensure residents ACPs are considered when they become unwell. These projects are improving the quality and use of anticipatory care plans, direct access to radiology and care home MDT approach.

- The radiology project aims to reduce hospital waiting times for residents requiring non-emergency radiology tests
- The MDT project will involve residents having monthly reviews and MDT discussions with key stakeholders for all new/ deteriorating residents in the identified care homes
- The ACP project will ensure an improvement in the number of ACP details uploaded onto the GP's Electronic Key Information Summary (EKIS).

The ACP and MDT projects will focus on care homes that have been identified as having a higher than average number of ED attendances over the past 6 months

### **Vaccination Covid 19 booster and Flu Programme**

The vaccination programme commenced on 20<sup>th</sup> September and this year has been a combination programme for Covid Booster and Flu injection at the same time. The Housebound Vaccination Team continue to visit care homes to administer vaccines to residents.

Care home managers are being encouraged to upload staff and resident compliance onto the TURAS Care Management System. The team are currently collating the staff vaccination compliance rates from the care home managers as many care home staff attended clinics to receive their vaccines, therefore the data has not been available to the assurance team.

Please note the current compliance as below.

Staff figures are those who were vaccinated within the care homes.

	Residents	Staff
Covid Booster	91.91%	53.3%
Flu Vaccination	94.22%	49.47%

### **Collaborative Support Visits (Cohort 3)**

Cohort 3 of the scheduled collaborative visits involving Care Home Liaison, IPC and Social Work has currently been suspended due to the high number of COVID-19 outbreaks in care homes which peaked at 61 and has now fallen to 43. The associated workload pressures, staff shortages and the need to reduce footfall for resident and staff safety were all taken into account when making this decision. The situation is under constant review and visits will recommence as soon as it is safe to do so and resources allow.

There have been 22 visits undertaken to date. Written reports including recommendations for improvement are provided to care home managers following each visit with request for an action plan to be completed and feedback regarding visit. Action plans are reviewed by visiting team to ensure they are robust and align with the findings and recommendations

### **Proposed cancellation of Care Home's registration**

Following inspection by the care inspectorate there were concerns raised regarding the quality of care of residents were receiving within a North Lanarkshire Care Home. Despite support being provided, the home failed to engage and did not progress significantly with requirements given. The home was issued with a formal notice of proposal to cancel registration on 25<sup>th</sup> October 2021. An ongoing legal process is now underway with care inspectorate and provider; a multi-agency team is supporting this process. Due to multiple adult support and protection concerns a large scale investigation (LSI) was commenced on the 8<sup>th</sup> November. Due to the scale and complexity of these reviews it will take approximately 12 weeks for this investigation to be completed.

The Care Home Liaison Team are present within the home on a daily basis as a multidisciplinary approach to provide support throughout this process. They continue to escalate any concerns to care inspectorate and social work.

The care home is undergoing a care inspection.

#### 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 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 May 2023. 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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