



# To all care homes in Worcestershire

18<sup>th</sup> March 2020

Dear Care Home Manager/Owner

We are writing to you in response to the ongoing situation regarding COVID-19 (coronavirus) which we know will place significant strain on the health and social care system over the coming weeks. We want to let you know that the local Commissioners of Health and Adult Social Care, Primary and Community Health Services, Public Health and Infection Control services are all working in collaboration to support you to support care home residents.

### Working together and sharing information

Working jointly across the health and social care system, we have set up a website with information, which is regularly updated, at <u>www.worcestershire.gov.uk/coronavirus</u>. This includes all relevant national guidance.

In addition, the Council has a dedicated provider support email address to answer queries for all organisations that support people with care needs. The email address is (<u>coronavirusasc@worcestershire.gov.uk</u>). Providers can also contact the Adult Social Care Access Centre on 01905 768053 who will redirect calls as appropriate.

If you require advice because you have a confirmed or suspected case of coronavirus in your home / among your staff we would ask that you follow national guidance as available on the website linked above. The CCG's Infection Prevention and Control Team will also be able to support you.

### **Notifications**

If you have a confirmed case in the home you must, of course, make a CQC notification. Please also email <u>coronavirusASC@worcestershire.gov.uk</u> with the detail so that we can maintain a local record.

If you have an OUTBREAK (i.e. two or more confirmed cases) please notify the CCGs incident management team on 0333 555 0779 or email <u>Hw.covid19@nhs.net</u>.

The local Infection Prevention and Control Team at the CCG compiled a series of "action cards" for care homes. As advised in a previous email, these were uploaded to the Council's website last week (in a different format as required by the site). To go direct to this information please use this link:

http://www.worcestershire.gov.uk/info/20739/professionals\_partners\_and\_providers/2190/covid-19\_coronavirus\_advice\_for\_care\_providers.

Copies of the cards are attached with this letter for easy reference. However, please be aware that these may become "out of date" as the situation develops so you should access the website for up-to-date information.

## Developments to support you

GP surgeries are rapidly preparing for **remote consultations**. It is likely that reactive face-toface visiting will be reduced and that GP practices will provide support via telephone or video links. It is really important that you work with the GP practices in your areas in order to establish how the system is going to work in the weeks ahead. We will be liaising with Primary Care Network leads to make sure you all have the right contact information.

## To prepare for **remote consultations**:

The CCG's GP lead for care homes advises the following:

1. It is important that you have an ear **thermometer** (with replaceable ear pieces). One for each unit in larger homes

2. You should all have access now to **NHS net email addresses**. If you don't please see the guidance from <u>https://www.digitalsocialcare.co.uk/sharing-care-records-via-email/nhsmail-toolkit/</u> or attached resources. You are advised that you should have a generic account for the care home as well as up top 10 accounts for individual care staff eg manager deputy manager nurses or lead carers. This will enable you to communicate swiftly with GPs, Community pharmacies district nurses and hospital colleagues

3. Once you have nhs.net email set up please inform us so we can add you to our contact list.

4. You should have a device suitable for video consultation a mobile phone with enabled camera. When asking for advice for resident you will be asked for the mobile phone number to which the text will be sent. The video link is secure and no information is stored on the device after the consultation.

# ECHO (Extension of Community Health Outcomes) resource from St Richards Hospice:

St Richards Hospice have offered to host ECHO remote video-connected conversations with and between care home managers and staff, domiciliary home care managers and staff, GPs with an interest in Older People's care and those specialising in End of Life and Palliative Care services. The platform can be accessed from anywhere (work or home or in the car) so long as there is internet enabled device with a camera. A short powerpoint presentation is attached, which relates directly to the current coronavirus situation, you will find of interest.

This is a really easy system to use and will be accessible to ANY care home or domiciliary care agency staff who would value an opportunity to discuss complex health or end of life situations they are having to deal with. This will not replace your GP or District Nurse service and will not form a consultation platform about particular residents or clients. It will be a community of practice – with all of us learning together and supporting each other.

### Future Planning and ReSPECT forms

If you have not already done so, we would ask that you ensure the following arrangements are implemented in order to help you manage potential outcomes of coronavirus in the home:

# Advance Care Planning:

All residents should have a robust care plan with a clearly expressed preference for levels of intervention. What is important for that person? What do they want/what would they not want? Some homes may be having these conversations with residents and families themselves, others may be working with community and GP colleagues. Once the level of intervention in the event of deterioration has been agreed all residents must have ReSPECT form completed.

Please make sure you are aware of which residents have advance care plans in place. You must also know whether anyone has Lasting Power of Attorney for Health for all your residents. Keeping a spreadsheet of all your residents with all this information will highlight gaps and ensure measures are being taken to fill any. We will be developing some advice for care homes for them to support initiating these conversations if decisions are not already in place.

## "Just in case" medication:

If transfer to hospital is to be avoided then anticipatory medication should be available so that it is available quickly in the event of a sudden deterioration. Please prompt your GP colleagues if this is not being done. GPs have been advised about this in a mailing sent to them last week so they should be aware of this guidance.

### Other frequently-asked questions

## **Medication Stocks:**

Following queries from a number of homes regarding the potential to hold larger stocks of medications such as paracetamol we are advised by Public Health that there is currently no knowledge of any relaxation of regulations about stockpiling of medications. Obviously, this may change, but we must also be aware of the risk of an over-demand induced supply issue if that were to be the case.

# PPE:

We acknowledge that many homes are experiencing difficulties accessing sufficient supplies of PPE and we have received many enquiries in this regard. We shared with you, today, information from the Department of Health and Social Care. This has also been uploaded to the website. We will forward any further national guidance if / when published,. We are currently working with Public Health colleagues locally and nationally to ensure appropriate equipment supplies. More information will follow as it becomes available.

## Home Closures:

You may have made the decision already to close the home to (non-essential) visitors. We acknowledge that this decision is the responsibility of the home to make and manage and that there has not been any official guidance in this regard. The CCG's GP lead advises that you should, of course, bear in mind the increased social isolation felt by residents if visiting is denied for long periods and again should facilitate telephone or video calls for those relatives who would benefit from contact. Many homes are considering such activities already. In addition, we would trust that appropriate visiting arrangements are enabled, as far as possible, for any resident in receipt of end-of-life care.

We would suggest that for visitors, as well as care staff, a check should be done to assess whether they:

- are self -isolating or have been advised to
- have COVID symptoms (i.e. new continuous cough or a high temperature)
- are a confirmed case of COVID-19

If the answer to any of the above questions is "yes", the staff member/visitor should not enter the home/provide care.

Visitors should abide by strict hand hygiene rules when they enter the home.

We hope this provides you with the reassurance that we will do everything in our power to support you during this time. We will continue with work collaboratively over the days and weeks ahead and will be sending / publishing updates as the situation progresses

Yours sincerely

Elaine Carolan Interim Strategic Director for People

Dr Maggie Keeble CCG Clinical Lead for Care Homes

on behalf of the Worcestershire Care Home Support Team, including:

Elaine Carolan WCC Director of Adult Social Care Julia Chesterman WCC Lead Commissioner Dr Maggie Keeble CCG Clinical Lead for Care Homes Dr Clare Marley CCG Clinical Lead for End of Life and Pallative Care Emma Sneed CCG Infection Prevention and Control Lead Lin Allsopp CCG Associate Director of Nursing and Quality

Enclosed: Action cards, ECHO powerpoint