

# South Gloucestershire Covid-19 Care Home Support Plan



# Introduction

This document outlines the support available to care homes in South Gloucestershire and areas for further development for each of the following key support areas

1. Infection prevention and control
2. Stepping up NHS Clinical Support
3. Comprehensive Testing
4. Oversight and Compliance

## 1 Infection prevention and control

### 1.1 Training

**Lead: CCG Director of Nursing**

	Support in Place	Further action	Timescale
1.1.1	The Tactical IPC Cell is operational 7 days a week from 8am till 5pm to provide advice and guidance to any care provider in the BNSSG system on any aspect of infection prevention and control including the use of PPE. They work closely with LA PH colleagues and the community provider and also proactively support providers that are identified as vulnerable including those who are experiencing an outbreak. In those instances they will undertake a risk assessment based on the Incident Management Tool attached		

	Support in Place	Further action	Timescale
	<p>and then provide a range of advice, guidance and training as needed. They will also signpost to the guidance in the shared resource library hosted on the CCG and Sirona websites. Follow up calls are undertaken as needed and further online or face to face training can be arranged as needed. The cell is operated by admin and experienced nurses who then have IPC specialist on a 7 day a week rota to provide specialist support.</p> <p>The System Strategic cell receives issues escalated by the Tactical Cell as well as discussing issues relating to COVID 19 that have a system impact to ensure a system response to issues such as PPE availability, outbreak management and the impact of recommencing non-urgent activity.</p> <p>See attached wrap around support SOP.</p>		
1.1.2	<p>National training programme, locally led through LRF/CCG.</p> <p>First wave of training will be completed by 29<sup>th</sup> May.</p>	<p>CCG Director of Nursing accountable for the rollout, daily reporting in place</p> <p>A second wave of training will be planned from 1<sup>st</sup> June and will include isolation and limiting staff movement.</p>	22 <sup>nd</sup> June

	Support in Place	Further action	Timescale
1.1.3	Online resource library of guidance, diagrams, videos, posters etc in place – agreed by Clinical Reference Group, (reporting to Clinical Cabinet)	Under continual review and BNSSG clinical reference group can be stood up as required.	

## 1.2 PPE

**Lead: Head of Financial Management & Business**

Supported by

**Procurement: Head of Corporate Procurement**

**Distribution of supply to care homes: Commissioning Service Manager**

PPE is coordinated through the following groups

- a) SGC PPE decision group  
This group governs stock levels, consumption rates and authorises new orders.
- b) SGC PPE cell  
This group oversees processes and access to PPE

	Support in Place	Further action	Timescale
1.2.1	LRF distributions via SGC		
1.2.2	Additional supply procured to support providers with less than 72 hours' stock. Records of distributions kept.	Decision made to procure through BWCP in future.	

	Support in Place	Further action	Timescale
		Review of governance and process in progress, including process map for decision making, storage and quality assurance. Interim process approved by PPE cell 20/05/202 for assessing requests for emergency supply used to reinforce regular and planned order processes and identify any issues. Commences week beginning 25/05/2020	
1.2.3	Providers asked to confirm they have read the latest guidance and implemented it appropriately	89% complete, missing returns being followed up  Will repeat this exercise 3 weeks after completion of the mandated training to ensure confidence levels and compliance has increased.	22 June
1.2.4	Local SG provider survey conducted re scale of PPE used on a weekly basis to gauge scale of use in SG. This is used together with PPE information on the NHS Tracker and the scale and regularity of access to the Council's emergency supplies to assess whether homes (and other providers) appear to be consuming PPE at the right rate to be compliant and any concerns are discussed with the home/provider and/or referred to IPC to offer support.	Missing survey responses being followed up but we may also re-run the survey for care homes post training completion to assess whether scale of estimated use of PPE has changed.	End June

	Support in Place	Further action	Timescale
1.2.5	Good links in place with CCG Logistics.		
1.2.6	Good links with partners, NHS Providers support sector with PPE on discharge and mutual aid		

### 1.3 Reducing workforce movement between care homes and minimising risk for care workers

#### Lead: Head of Commissioning

This will be particularly important for the smaller homes that support people with learning difficulties where some workers may have been working across homes within the organisational group. There will also be a challenge of minimising external agency supply which will be supported through the testing programme and through the work under way to explore alternative worker supply through mutual aid from acute and community providers' staffing banks. The additional funding may enable providers to consider arrangements such as providing separate accommodation for their workers, or offering additional shifts as overtime to reduce dependence on agency workforce

	Support in Place	Further action	Timescale
1.3.1	Letter of confirmation of Infection Prevention & Control funding to care home will raise the profile of this issues. This is reinforced through commissioners' conversations with homes and support from the CCG's IPC team.	Sector discussion to follow once market assessment via NHS tracker completed.  We have started work with the local market via a provider representative the care association to understand issues in and opportunities to reduce movement	Work already in train, to be completed by 15 June 2020.

	Support in Place	Further action	Timescale
		and support them to minimise the risk of new outbreaks. We will encourage all care homes with more than one local home to have a plan as to how they reduce workforce movement between their homes, to share that plan with us and to make it available to residents and their families on request.	

## 1.4 Quarantining

### Lead: Head of Commissioning

As a health and social care system, through the wrap around support offer to providers (see SOP at Appendix 1) , we provide support to care homes to identify how they are able to effectively quarantine residents through use of separate floors/wings, designated workers, etc. Support is also available from the Avon & Wiltshire Mental Health Partnership Trust's Care Home Liaison Team, the community nursing LD team and resources available on the BNSSG CCG website to support the management of residents who are unable to understand the need to be quarantined. Where a resident is due to return home from hospital to a home that is unable to quarantine the individual either through physical layout of the home or through the behaviours of the individual, alternative temporary placements would be considered. We continue to use our knowledge of our local market to understand opportunities to block purchase additional care home beds that can provide ring-fenced CCG funded capacity for hospital discharge so that we can flex supply to meet needs.

	Support in Place	Further action	Timescale
1.4.1	94% of SG homes consider themselves able to adequately quarantine residents.	For those unable to quarantine, the CCG has purchased additional P3	Already in place

	Support in Place	Further action	Timescale
	<p>Wrap-around support team advice available to homes on effective isolation of residents for quarantining from</p> <ul style="list-style-type: none"> <li>- Community nursing and LD teams</li> <li>- CCG IPC</li> <li>- AWP Care Home Liaison team</li> <li>- On-line library of resources</li> </ul> <p>Confirmation that quarantining can take place takes place as part of the discharge process.</p>	capacity and continues to monitor demand vs supply.	
1.4.2	Ability to use of Pathway 3 or other spot-purchased beds in care homes that can support quarantine where this is not possible as an interim measure	We are exploring an opportunity with a new care home to be able to supply a quarantine facility within part of the home.	From May 2020

## 1.5 Building our scientific understanding and sharing good practice across the sector

### Lead: Public Health and BNSSG Care Provider Cell

The South Gloucestershire Evidence Performance and Intelligence (EPI) Cell leads the development of intelligence, evidence, and supporting local resources and guidance.

A BNSSG virtual library of resources, including accessible resources, has been created to provide care providers with guidance and resources to help deal with the COVID-19 outbreak. The virtual library is accessible via:

Sirona Care & Health



<https://www.sirona-cic.org.uk/advice-information/covid-19-resources/information-for-care-providers>

BNSSG

<https://bnssgccg.nhs.uk/clinicians/resources-care-providers-during-covid-19/>

On-line training and education sessions are offered to care providers as part of the wraparound support offer.

	Support in Place	Further action	Timescale
1.5.1	Good practice shared weekly in communications and in direct work with homes by PH, IPC and Community health service.		
1.5.2	Relationship established with Care & Support West with attendance at their weekly webinar for care providers, shared across BNSSG		
1.5.3	SGC and CCG are members of the SW Care Sector Co-ordination Group led by NHSE/I		
1.5.4	There is a BNSSG care home dashboard reviewed weekly at the BNSSG care provider cell with data broken down by LA	Further development of the BNSSG care home dashboard	
1.5.5	Multi-disciplinary management of outbreak monitoring and support review meetings in place. Agreed IMT tool used across partners.	Development of central facility for all relevant parties to access data and documents	

## Stepping up NHS Clinical Support

### 1.6 NHS Clinical Support

**Lead: Medical Director of Commissioning and Primary Care**

Submission made for BNSSG on 15 May confirming that all required elements of the Primary and Community Care Support to care homes are in place through combination of LES/Sirona/Wrap.

	Support in Place	Further action	Timescale
2.1.1	<p>All 79 care homes in South Glos have an allocated, named clinical lead and receive a weekly 'check-in' from the community health team.</p> <p>Baseline assessments of 97 care homes carried out by community nursing. This has enabled the level of support required by care homes to be agreed. Wraparound team are proactively contacting these homes weekly. Homes can access additional support via the Single Point of Access (SPA). The SPA will triage the call and resolve the issue or direct the call to the wraparound support team or any other service as appropriate. Wraparound team followed up homes in response to other MDT members raising concerns about individual care providers. The South Gloucestershire Community Team for Learning Disabilities is proactively calling LD homes on a weekly basis as part of the wraparound team. Team linked in to other agencies such as the AWP Care Home Liaison Service who are also contacting homes weekly. Key themes emerging from the weekly contact are PPE,</p>	<p>Homes reporting that they do not know who their named lead is are being contacted to ensure they are aware who it is and asked to update the tracker.</p> <p>Planning has begun for an evaluation of the wrap-around service</p>	<p>End May</p> <p>End June</p>

	Support in Place	Further action	Timescale
	<p>staff testing, Clinical advice Covid &amp; Non-Covid.</p> <p>Actions taken – signpost to other resources, provided advice and support.</p> <p>Feedback from providers has been positive</p>		
2.1.2	<p>Primary Care Support:</p> <p>Personalised care plans are in place for 78% of homes across BNSSG.</p> <p>Clinical pharmacy support is available to 40% of homes across BNSSG.</p>	<p>PCNs are aligning to all care homes to give full practice coverage, and proactive support is in place through the multi-disciplinary wrap-around support team coordinated by the community health service.</p> <ul style="list-style-type: none"> <li>○ As at 27 May 2020, 17 out of 18 PCNs have completed the submission. Data will be used to help align care homes to single PCNs to ensure appropriate support and reduced variation of coverage.</li> <li>○ Indications are that 90% of care homes in BNSSG have either LES in place or alignment to a PCN</li> <li>○ The review will assist in eliminating those homes where a support gap currently exists.</li> <li>○ Future provision will look to address a more equal distribution of homes across PCNs</li> </ul> <p>For those homes that are unallocated the CCG will commence a second stage of alignment. It is anticipated that this second stage will be completed by close of play Thursday 4 June 2020 for the majority of PCNs. This will then</p>	5 <sup>th</sup> June 2020

	Support in Place	Further action	Timescale
		<p>enable to demonstrate further progress for the sit rep due on Friday 5 June 2020</p> <p>Personalised care plans and clinical pharmacy support will be extended to all homes.</p> <ul style="list-style-type: none"> <li>○ EOL medicines supply in place through community pharmacy hubs and Sirona.</li> <li>○ Work to re-use medicines on-going.</li> <li>○ BAU medication review in progress.</li> <li>○ Risk stratification of patients being planned and undertaken.</li> <li>○ Development of rapid response pharmacy team to tackle outbreaks being explored, but will need resource.</li> <li>○ Pharmacists involved in the care home wrap around service to support care homes with medicine queries.</li> <li>○ Mapping gaps in pharmacy workforce.</li> <li>○ Collating proposals for educational resources to address workforce issues.</li> <li>○ Developing digital work to support sharing of COVID information, be able to do reviews virtually, improve supply process and share information across interfaces (e.g. on discharge).</li> <li>○ Working with PCNs &amp; GP practices to agree how they can support pharmacy reviews</li> </ul>	
2.1.3	The out of hours service reports a 47% increase in requests for support from care homes in April 2020 compared to April 2019 across BNSSG, with 206 out of 290 nursing homes in BNSSG having called over the last 12 months.	Agreed further analysis of this data with Severnside will be conducted	June 2020

	Support in Place	Further action	Timescale
2.1.4	CCG and regional activity underway for video consultations.		
2.1.5	Pulse Oximeters delivered last week to support remote monitoring	<p>Guidance on how pulse oximeters procured nationally are intended to be deployed.</p> <p>Primary and Community Care cell are developing local policy for training of care homes in their use of pulse oximeters and threshold for issue</p> <p>Scale of access to medical equipment within homes already not currently known</p>	June 2020

## Comprehensive Testing

### 1.7 Testing

**Lead: Director of Public Health**

	Support in Place	Further action	Timescale
3.1.1	South Gloucestershire prioritisation and testing process developed and operational – see SG COVID Testing Process for Care Homes	Data indicate that 50 of our care homes are currently registered on the testing portal. We have identified the need for further communications to them to support those who have not registered to do so.	5 <sup>th</sup> June 2020

	Support in Place	Further action	Timescale
		Communications with care homes will continue in order to target greater level of registration and uptake through clear messages and continue to follow up issues.	
3.1.2	Support to homes provided to facilitate delivery and collection of tests where difficulties are arising	Support available via LA Public Health team.	Ongoing

## Oversight, Compliance and Governance

### 1.8 Market oversight

**Lead: Head of Commissioning**

	Support in Place	Further action	Timescale
4.1.1	Daily huddle to review prioritised care homes (those with suspected and confirmed outbreaks, PPE shortages, staffing difficulties, lack of engagement, etc) identified through dashboards, NHS tracker and other local intelligence. Appropriate support then deployed: community nursing, IPC, safeguarding, commissioner support, PPE supplies, etc. Telephone calls for moral	All care homes to be reviewed over course of 2 weeks regardless of whether prioritised  Alignment or combination with a) the integrated daily wrap-around support team and b) weekly MDT meeting, c) clinical ward rounds	From 1 June 2020  Mid-June 2020

	Support in Place	Further action	Timescale
	support also offered and referral to staff health and wellbeing information on the resources library	TOR to be developed  Risk assessment processes  Ensuring relevant data is available to all partners	End June 2020  End June 2020  Mid-June 2020
4.1.2	Weekly operational review of intelligence and activity from daily huddle (DDPH, DDASS, Commissioning, Safeguarding)	Community health and CCG partner memberships to be considered/organised.	From 1 June 2020
4.1.3	Weekly SG Strategic review of care providers, including feedback from the weekly operational review (DPH, DASS, DDPH, HoFM&B, Commissioner, Sirona)		Already in place
4.1.4	Twice weekly outbreak review meeting involving commissioner, public health, community nursing and IPC. Reviews action required for homes with outbreaks and others of concern	Review of whether this work can in part be covered by the daily huddle and instead individual Incident Management Team meetings should be set up as and when needed.	End June 2020
4.1.5	Weekly meeting with CQC involving SGC commissioner, CCG commissioner, SGC Organisational Safeguarding and CCG safeguarding representatives		Already in place
4.1.6	A BNSSG dashboard is available. We also produce regular reports which show: <ul style="list-style-type: none"> <li>Number of vacancies and occupancy % for each care home, this data is also</li> </ul>	We will share summary information with bodies who represent Care Home Providers to ensure a dialogue on any Covid-19 related viability concerns that	Already in place

	Support in Place	Further action	Timescale
	<p>drawn together to provide a South Gloucestershire sector wide position.</p> <ul style="list-style-type: none"> <li>• Excess deaths in care homes in placements we commission.</li> <li>• Trends in the number of new care home placements we are commissioning</li> </ul> <p>We consider the above information in our regular Reset meeting of senior officers.</p> <p>We also use the information to engage with individual care homes in relation to their position and the business and commissioning support that may be available to them (see also 4.1.9 below)</p>	<p>arise from excess deaths and consequent vacancies.</p> <p>This information also allows us to consider wider messaging to reassure existing and future care home residents about how care home support plans are meeting the challenge of Covid-19 in relation to care homes.</p>	
4.1.7	In addition to each LA work BNSSG multi-agency group is being established to look at market shaping in the medium to long term	Market Position Statement to be refreshed	Sept 2020
4.1.8	<p>We engage with the care home sector to listen to their views and concerns through the local care provider representative association and regularly attend their provider webinars.</p> <p>We are in regular contact with individual care homes through telephone calls.</p>	We will continue to listen to and engage with the care home sector through the existing mechanisms.	Already in place
4.1.9	We are monitoring the occupancy of all care homes in South Gloucestershire and proactively contacting those where occupancy is low and where Covid-19 outbreaks have	We will collate key issues for care homes with lower occupancy, consider any local responses we can make and escalate via the LGA and/or ADASS	Commenced 6 May 2020 and continuing on a



	Support in Place	Further action	Timescale
	occurred. We seek to understand the position of each care home, in particular their plans to remain viable and sustain services.	any issues requiring national consideration.  Gold Command is currently considering market issues across the BNSSG footprint and proposals for a strategic approach to care home support across BNSSG	fortnightly cycle.  10 June

## 1.9 Governance

**Lead: Director of Public Health and Director of Adult Social Services**

	Support in Place	Further action	Timescale
4.2.1	This action plan is managed by the S Glos Strategic Care Provider Cell.	Reporting to be arranged to <ul style="list-style-type: none"> <li>the Health &amp; Wellbeing Board as a regular item</li> <li>LRF Chairs via CExecutive</li> <li>Other stakeholders (LDPB, care home partnership, etc)</li> </ul>	Included on agenda of next meeting of HWBB - June 25 <sup>th</sup> 2020
4.2.2	Chief Executive Officer is informed of progress through Senior Leadership Team meetings		Already in place
4.2.3		Ensure attendance of an operational group representative at the Better Care	Already commenced –

	Support in Place	Further action	Timescale
		Support Team webinars to ensure we apply best practice locally etc.	first BCST webinar joined on 15 May 2020.

## Looking Forward

### 1.10 Planning for next steps

	Support in Place	Further action	Timescale
5.1.1		SG & BNSSG development of support to <ul style="list-style-type: none"> <li>• care homes supporting those with learning disabilities</li> <li>• those in supported living</li> <li>• domiciliary care</li> </ul>	
5.1.2	Support to homes provided to facilitate delivery and collection of tests where difficulties are arising		
5.1.3		Preparation for 2 <sup>nd</sup> and subsequent waves and for response to local outbreaks	

# Documentation

## 1.11 Supporting documentation

Appendix 1 – Wrap Around Support SOP (*to be attached*)