

TIP 3

# Newham Care Settings Assurance Checklist and System

Adeola Agbebiyi, Consultant in Public Health, LBN

Samantha Lewis, Head of Brokerage, LBN

Brian Jopling, WEL CCGs

Lydia Drummond, Adults Commissioning, LBN

Mick Jones, Contracts Manager, LBN

Katherine Mutsvangwa - WEL CCG

Julia Panayiotou, WEL CCG

Jeanette Weismann, WEL CCG

Justin Roper, WEL CCG

Claire Greszczuk, Public Health Consultant, LBN

# Overview

- From April 20<sup>th</sup> 2020 Newham has operated system processes and a checklist to protect care home residents, staff and the care home market from COVID-19.
- A care home action plan group stopped admissions on 20/4/20 pending the activation of mechanisms to reliably implement a strategy informed by policy, evidence and local analysis
- We had observed that, despite early implementation of advice, PPE and guidance on isolation, outbreaks continued in most settings in the UK (PHE 23/4/20)

# Care Home Strategy & Action Plan

- Overarching ambition: **to keep Newham's care sector Covid free\***
  - “COVID free, clean and green”.
- Care home actions set within a whole system approach
  1. Care home IPC: policy, process and preparedness
  2. Hospital Discharge and Home admission: processes, pathways and capacity
  3. Testing: pre-admission and surveillance in homes
  4. Other market and contractual supports, e.g. funding for sick pay, for agency staff, for 1:1 needs
  5. Local (outbreak) COVID Management Plan: outbreak processes
  6. Monitoring and evaluation: integrated quality assurance process

# The Partnership Team

- GP care home leads: each home covered by a practice team
- CCG teams Out of Hospital & Quality, inc. IPC nurse for borough
- Adult social care: commissioners, contract managers and brokerage
  - Close contact via sit reps and call between homes and contract managers
- Input from care home managers
- Public Health in Local Govt and advice from PHE
- Advice from microbiology NEL regional testing pilot

# Checklist Objectives & Benefits

- Have an overview and understanding of the COVID preparedness and ability to manage for all care settings
- Create a robust system of support and infection surveillance from pre- admission to discharge
- Support homes to deliver quality person-centered care in safe settings
- Understand capacity needs for staffing and locations for protective isolation
- Weekly or more contact by small team facilitating relationships and understanding - approach also seen in Redbridge
- Systematic recording of strengths weaknesses and issues from that contact
- As NHS capacity tracker developed, data could be pulled into checklist
- Prompts for settings to adopt good policy and practice e.g. on uniform laundry and testing

# Checklist creation

- Analysis of the three March & April outbreaks interviews with managers and the PHE research showed factors linked with outbreaks:

## Staffing Capacity

- Staff numbers & care ratios
- Long term staff vs agency staff

## IPC Processes

- IPC knowledge and skill
- Zoning skill
- PPE stock and skill

## Isolation

- Physical Layout -
- Self contained/shared

## Testing

- Staff
- Residents inc. pre-admission

## Staff incentives

- Pay during isolation

## Leadership and safeguarding

- Present
- Of a quality

# Checklist format

Two sections:

- Home checklist – with the domains from previous slide
  - Scoring system simple points
  - Deductions for red flags
- ‘Sit rep’: details like capacity/occupancy/cases/isolations in staff and residents – set to a low sensitivity: 1 or more cases triggers actions
  - Prompts to notify LCRC and Newham public health and red flag on the home
  - Linked to process to trigger LCRC call and possible investigation, testing, review of risk assessment and suspension of admissions
- Final score colour coded to reflect preparedness to manage COVID Cases and to match with in-patient COVID ward coding and home/temp home destinations

	SCORES					Points For Question			
	4	3	2	1	0				
<b>Staffing levels</b>							<b>BOX A</b>		%
What percentage of permanent staff (inc domestic/ house keeping staff) are you below your full staffing level? [calculator in Box A]	<5%	<10%	<20%	<30%	>30%	4	Full permanent staff level	26	
Permanent to Agency ratio [calculator in Box B]	>5	>3	>2	>1	<1	1	Current level	25	4%
Do any staff (inc domestic/ house keeping staff) work in other homes/agencies where there are cases of C19?				N	Y	0			
<b>Home layout</b>							<b>BOX B</b>		
Are all residents admitted to a single room with its own toilet and washing facilities? [Toilet and hand basin essential]				Y	N	1	Permanent staff	Agency staff	
							16	9	
<b>Staff training on IPC</b>							<b>Ratio</b> 1.8		
Staff uniform - always put on at work policy? Strict uniform policy (Exercising IPC) • Provisions for staff uniform washing in place • Hair tied above neckline • Bare below elbow • Short nails and not painted • Jewellery limited to wedding band • No rings with stones • No wrist watches			All elements fully implemented by all staff	Partial - not all elements implemented in full or not all staff fully compliant	No policy/ policy not yet implemented	1			
Are all staff inc domestic staff able to confidently observe COVID-19 Positive - Red and COVID-19 Negative - Green zoning system / or working in Red/green teams?				Y	N	1			
<b>PPE</b>									
Do you have enough basic PPE for all staff for 1 week? [Aprons, gloves, IIR mask for C19, surgical masks, eye protection as required]				Y	N	1			
<b>Cleaning and Laundry</b>									
Is there a cleaning duty for staff on arrival / for their phones (phones should be locked away during working), all surfaces (inc communal areas) and home iPads?				Y	N	1	Add in staff uniform laundry		
<b>Safeguarding and leadership</b>									
How many staff are not compliant with safeguarding training?				<1	>1	1	Add in safeguarding CQC		
Do staff know how to escalate safeguarding concerns in the absence of a manager?				Y	N	1	<b>FINAL ADJUSTED SCORE (Inc Box I12)</b>		
<b>TOTAL SCORE</b>						<b>12</b>	10		
<b>Grey on IDH</b>	10 and below	Not able to accept- Home unsafe- eg outbreak							
<b>Green Only</b>	11 and above	Only cold Green admissions, only when home is completely cold/Green							
<b>Red</b>	14 and above	May manage recovering RED if > 7 days illness							
<b>Amber and Red</b>	16 and above	May manage amber and hot/red/blue admissions.							
<i>*This is not fixed and will be updated weekly (at least) with the sitrep</i>									



**Date** 11/05/2020

**Provider Name** Made Up Health care

**Home Name** Happy House

**Home details**

**Capacity when full** 81

**Nursing/Residential beds filled today** 26 Residential/55 Nursing 48 beds currently occupied 20 beds blocked booked by Borough Boro

**How many vacancies today?** 33

**How many C19 cases in home?** 3

**How many new C19 case in home? Within last 14 days** 1 confirmed on testing

**How many new staff self isolating with symptoms for C19?** 10 staff members self isolating or shielding no breakdown

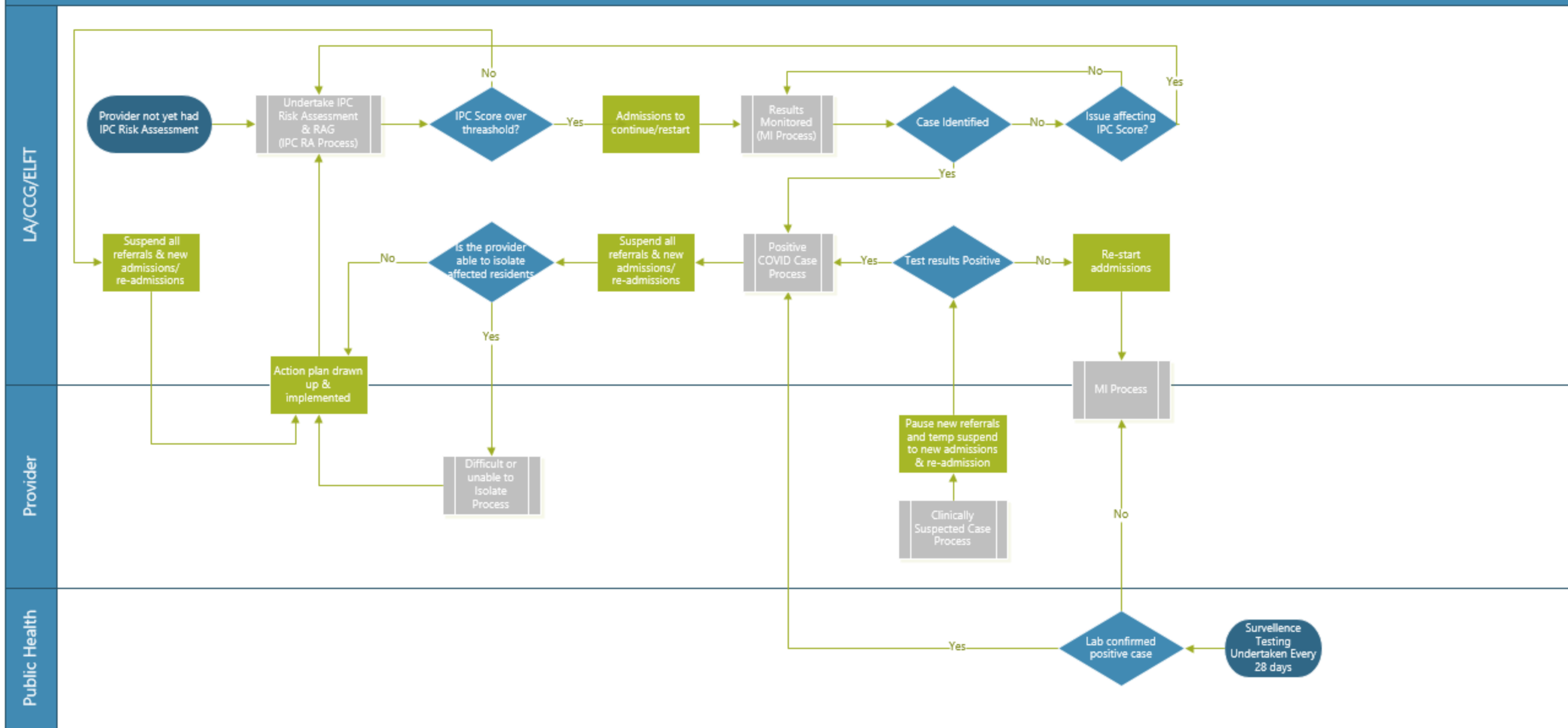
**How many staff Protectively self isolating?** As above

**How many highly vulnerable residents?**

**Definition of highly vulnerable residents:** 1:1 support for hydration and feeding; pressure ulcers or grade 3 pressure lesions ; challenging behaviour; Falls in the last 4 weeks

	Name
<b>Completed by</b>	Julia Panayiotou
Home details and capacity data available from situation report	
<b>RED FLAGS</b>	
RF if>1	If >1 prompt - is this a new case? If the C19 case is new and the first in 14 days prompt the manager to contact LCRC@PHE.gov.uk for a risk assessment re future admissions. CALL LCRC
RF if>1	If both Lines 9 and 10 are Red Flagged await PHE risk assessment if score is 14 or above. Consider closing to admissions if 9 is redflagged and score is below 13.
<b>8%</b>	<b>Deduct 2 from TOTAL SCORE (g33) if this Box &lt;75%</b>

# Infection Prevention & Control Process – High Level - Care Homes



# The System

- Hospital discharge via Integrated Discharge hub
  - Testing and test outcome linked to colour coded rating: matched to home rating
  - Alternate protective isolation discharge locations for Covid-positive people
  - Yellow = uncertain status, e.g. community respite not tested on discharge = high-level for skills required
  - Green = negative covid test + completed 14 days' isolation
- Homes called and checklist completed
- Information shared with IDH held on dashboard
- Indication of schemes and settings unable to isolate
  - Flagged for local testing if not CQC registered
  - Alternative accommodation needs identified
  - Action plan for cases and outbreaks
- Development: adapted checklists for
  - MH and LD, Supported Living, Extra Care/RSL and Domiciliary Care providers

# SETTING RATING

<b>GREY</b>	14 and below	Not able to accept - insufficient C19 skill, home unsafe or outbreak
<b>GREEN ONLY</b>	15 and above	Only cold / Green admissions, after 14-day isolation, only when home is completely cold / Green
<b>ORANGE</b>	20 and above	Able to accept Green before 14-day protective isolation - or test on admission
<b>YELLOW</b>	<b>27 and above</b>	May manage Yellow and one case arising <b>If answers to lines 23 and 24 are YES</b>

\*This is not fixed and will be updated fortnightly (at least) with the sitrep

# DASHBOARD

<b>GREEN</b>	can accept COLD patients - those who have a negative test result and have completed 14 days' isolation prior to admission
<b>ORANGE</b>	can accept COLD patients - those who have a negative test result but have not completed 14 days' isolation prior to admission
<b>YELLOW</b>	can accept patients with an UNKNOWN Covid-19 status - those whose tests are outstanding or community referrals
<b>BLUE</b>	can accept HOT patients - those who are Covid-19 positive
<b>GREY</b>	cannot accept placements - not yet passed the baseline assessment or a re-assessment has been triggered following a concern

# Challenges

- Balancing best interest and personal choice with safety and risk of death by infection
- Deeply held cultural values in different teams around priorities
  - Discharge to home, the right to be at home
  - Support home to be safe, our duty to ensure that home is safe
- Time and resource: can take 30-60 minutes to complete the first time
- Resources to continue regular monitoring calls as other resourcing pressures are felt across the council
- Testing needs to be available and responsive for clinical assessment of symptoms and for managing high risk new admissions
  - Newham has a low volume GP wrap-around testing service for vulnerable residents. This service is flexing to cover rapid diagnosis in vulnerable settings and residents.

# Process pathways and Wave 2

- Options to add prompts as outbreak management groups uncovers common outbreak causes as behaviour changes
- Team to call, monitor and update dashboards and audit sheets
- Process maps to support outbreak and case management to ensure consistent approach and rapid response. All new cases usually managed within 1-2 hours
- Red flags and outbreaks/cases trigger an action plan – detailed in process maps
  - IPC nurse investigates
  - Contract team close to admissions and updates IDH dashboard
  - PH consultant liaises with PHE and ensures testing (with testing coordinator) occurs as needed
  - Follow up with IPC and PH to remedy causes of outbreak e.g. additional training, webinars
- Process to ensure isolation capacity if needed is prepared

# Questions?

## Q&A

Contact for correspondence

[Adeola.agbebiyi@newham.gov.uk](mailto:Adeola.agbebiyi@newham.gov.uk)

[Samantha.lewis@newham.gov.uk](mailto:Samantha.lewis@newham.gov.uk)