

# Suspected Coronavirus Care Pathway - Residential and Nursing Care Residents

## Suspected Cases

Consider COVID-19 infection in a resident with any of the following:

- New continuous cough, different to usual
- High temperature ( $\geq 37.8^{\circ}\text{C}$ ), shivery, achy, hot to touch

Care home residents may also commonly present with non-respiratory tract symptoms, such as new onset/worsening confusion or diarrhoea and other subtle signs of deterioration.

Record observations where possible: Date of first symptoms, Blood Pressure, [Pulse respiratory rate](#) and Temperature (refer to Thermometer instructions) – Remember to [Maintain fluid intake](#)

**For more support**, call the residents **GP** in the first instance  
Call **111\* Star 6** for urgent clinical advice, or if the GP is not available – this will put you in contact with a Clinician in NHS 111

## Isolation for people who walk around for wellbeing (dementia, learning disabilities, autism)

Use standard operating procedures for isolating residents who walk around for wellbeing ('wandering'). Behavioural interventions may be employed but physical restraint should not be used.

When caring for, or treating, a person who lacks the relevant mental capacity during the COVID-19 pandemic, please follow [government guidance](#).

## Communication with the NHS

- Use [Restore2](#) (a deterioration and escalation tool) if you have been trained to do so
- Where appropriate please ensure that residents are offered advance care planning discussions and that their wishes are recorded on [Coordinate My Care \(CMC\)](#). Make sure you have easy access to the residents CMC or Ceiling of Treatment plan when you call NHS 111 \*Star Line (or 999)

## Do you have NHS Mail?

Send emails directly to your GP, Community Team and Hospital  
Contact [hlp.londonchnhsmailrequests@nhs.net](mailto:hlp.londonchnhsmailrequests@nhs.net) to get an **NHS.net email** set up

- Please [register](#) and use **Capacity Tracker** to support hospital discharge planning. Continue to complete the [Market Insight tool](#) if you normally do.

## Isolate and Monitor

Resident to be isolated for **14 days** in a single bedroom. Use [Infection Control guidance](#)

Care for resident using PPE ([what to use](#) and [how to wear and dispose](#))  
Due to sustained transmission PPE is to be used with all patients. Additional PPE is required for Aerosol Generating Procedures as described in the [table](#).

Use correct Handwashing technique ([video](#))

Consider bathroom facilities. If no en-suite available.

- Designate a single bathroom for this resident only
- Use commode in room

**If Resident deteriorates at any stage – Escalate to 111\* Star 6 or 999**  
**Be explicit that COVID-19 is suspected and ensure you have easy access to the residents CMC plan**

## What to do in case of an outbreak?

An outbreak is defined as **two or more residents** in the care home diagnosed with symptoms compatible with COVID-19.

**Contact** the Public Health England London Coronavirus Response Cell in the event of an outbreak

**Phone Number:** 0300 303 0450

**Email:** [LCRC@phe.gov.uk](mailto:LCRC@phe.gov.uk)

**Update:** Capacity Tracker, your Local Authority and RIDDOR

**Guidance:** [Admission and Care of Residents during COVID-19 Incident](#)

## How to access Personal Protective Equipment (PPE):

- Order PPE through your normal supplier. If this isn't possible arrangements have been made with seven wholesalers to provide PPE to the social care sector.
- Contact your Local Authority if you are still unable to get PPE provision.
- [Guidance for Residential Care Providers](#)

## Resources and Support for Care Home Staff

- [Guidance on Home Care Provision](#)
- [COVID-19 Care Platform](#)
- Queens Nursing Institute [Facebook Page](#)
- [RIDDOR reporting of COVID-19](#)