



Information

for adult social care providers

CORONAVIRUS
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YOURSELF
& OTHERS**



Bulletin 83 – 23 April 2021

Dear Colleagues,

Please find information below on a number of COVID-19 related matters.

COVID-19 outbreaks in Leicestershire care homes: thank you

We are very pleased that for the last two working weeks there has been either one or zero COVID-19 outbreaks within Leicestershire care homes. This is entirely the result of your relentless vigilance with infection prevention and control, your efforts in answering your workforce's queries about the COVID-19 vaccine, and in your staff accepting their invitations to have their vaccination.

This is a reassuring position for people living in care homes in the county, and their loved ones. We cannot express enough our gratitude to you and your colleagues, and ask that you please maintain your high standards, and encourage staff to take up their second vaccine dose – and their first dose where relevant.

Thank you also to all other adult social care providers for their work to maintain infection prevention and control and in promoting vaccination.

COVID-19 staff vaccination for care homes with older adult residents: national consultation

We reported in the last bulletin that a 5-week consultation had just been launched by the DHSC to explore whether staff in care homes with older adult residents in England should be required to have a COVID-19 vaccine to protect residents and staff from the virus. The closing date has now been announced, which is 21 May 2021.

The consultation document and link to the response survey can be found at <https://www.gov.uk/government/consultations/making-vaccination-a-condition-of-deployment-in-older-adult-care-homes>

How to Work Safely - new PPE guidance for home care (April 2021)

The following is a quick reference to key information from the guidance [COVID-19: how to work safely in domiciliary care in England](#) requested through the last home care provider conference call. Please refer to the guidance for greater detail and note that staff should still maintain well-established IPC, social distancing, vaccination and testing measures.

Where staff are working within 2 metres of a client and carrying out direct personal care or domestic duties they should wear the following:

Disposable gloves (vinyl or nitrile)	Yes
Disposable plastic apron	Yes
Fluid-repellent surgical mask (Type IIR)	Yes
Eye protection (where there is a risk of contact with body fluids)	Yes

These recommendations apply:

- whenever you are within 2 metres of anyone (including the client or household members) irrespective of whether they have COVID-19 symptoms or have tested positive
- to all personal care, for example, assistance to use the toilet, changing dressings, and when unintended contact with clients is likely (for example, when caring for clients with challenging behaviour)
- whatever your role in providing care (these recommendations therefore apply to all staff including care workers, managers and supervisors and cleaners, for example)
- regarding eye protection, when you have risk assessed there is a risk of splashing of body fluids (including respiratory secretions) into the eyes.

A fluid-repellent surgical mask must be single use and disposed of at the end of each homecare visit and a new fluid-repellent surgical mask applied when entering a different client's house.

Eye protection can either be a face-shield (visor) or goggles. It may be designed for single use or designed to be used more than once if decontaminated and dried correctly (following manufacturer's instructions or local IPC policy) between uses. Eye protection such as visors provide a barrier to protect eyes from respiratory droplets (e.g. produced by a client with respiratory symptoms), and from splashing of secretions (e.g. of body fluids or respiratory excretions). Eye protection should cover the eye or face completely - prescription spectacles are not enough. It should be used in conjunction with a fluid-repellent surgical mask and should not be worn instead of a mask - prescription glasses are not a substitute.

Good practice guidance for professionals visiting LLR care homes during COVID-19

The COVID-19 pandemic has created unprecedented challenges for care homes to keep some of the most vulnerable individuals in our society safe. Whilst there is national guidance for care homes to receive visitors, there has been a wide range of actions and requests by care homes across Leicester, Leicestershire and Rutland in relation to professional visitors, including health, social care, Care Quality Commission, Paid Personal Representatives, etc. These visits to care homes will have been reviewed and agreed as necessary by all parties to provide essential care and services.

The aim of this guidance, which is based on both national and local directives, is to provide assurance regarding the amount of information that care homes are required to gather from professional visitors who are employed by statutory organisations and are required to visit residents for care interventions. Also included is a reminder of the appropriate use of PPE, on entering and exiting the care home. Whilst acknowledging that care homes are independent providers, it is also hoped that this guidance assists in creating a consistent approach across LLR for visiting professionals.

A visiting professional is defined as anyone visiting the care home to provide essential care or services. The current guidance around testing states that for NHS professionals, care homes should see evidence from the professional of a negative rapid lateral flow test within the last 72 hours, which shows they are following the NHS staff testing regime. This evidence can be provided by showing the lateral testing message on their work phone. If visiting professionals are unable to show evidence of lateral testing, they will be required to take a lateral flow test on arrival at the care home.

Like care home staff, visiting professionals are exempt from testing for 90 days following a positive PCR test, unless they develop new symptoms. For individuals who have tested positive for COVID-19 and are within 90 days of their initial illness onset or positive test date, these individuals will have completed their 10-day isolation and appropriately returned to work following no new symptoms and are not considered to pose an infection risk. They therefore do not have to be re-tested. Professionals will be asked to provide evidence of positive PCR test and date of test to confirm 10 days has elapsed. This can be provided via the text receipt on their phone.

- Required contact details: visiting professional's name, role, organisation, contact telephone number and who they are visiting. For COVID-19 contact tracing purposes, the telephone number for LPT Community Health Service Nursing and Therapy Staff should be HCP line: 0300 300 1000. Specialist staff will provide their appropriate centralised hub telephone number.
- COVID-19 related questions: all visiting professionals and their employer have a responsibility to ensure they are working within the relevant guidance and are fit to work. This means that as there is an employing organisation that has

this oversight, it is not necessary to ask a list of COVID specific questions or require signing of disclaimer documents. A single question based around whether the visiting professional is experiencing any COVID-19 related symptoms at the time of visiting is sufficient.

- PPE: On entering a care home, a visiting professional is required to be wearing an appropriate fluid resistant mask and either wash their hands or use anti-bacterial hand gel. An apron and gloves are required as single use only where the visiting professional is providing a care intervention or where social distancing is not able to be complied with. This PPE can either be supplied by the care home or visiting professional, but it should not be put on prior to entering the care home. On completion of the care intervention with the individual resident, the apron and gloves must be removed and disposed of in line with the relevant guidance. As a sessional item of PPE, the visiting professional will remove their mask on exiting the Care Home.

COVID-19 considerations for care home residents voting in local elections

Please remind care home residents about the option of registering for proxy voting, which will enable them to avoid the 14 day isolation requirement for any visit out of a care home as per current guidance.

There are now less than two weeks until the country goes to the polls on Thursday 6 May 2021. The deadline to apply for a proxy vote – where someone nominates another to vote for them as long as they are also eligible to vote - is 27 April, although emergency proxy votes will be available up until 17.00 on election day if voters need to self-isolate.

For more information please see <https://www.gov.uk/government/collections/proxy-voting-application-forms>

What to do with waste including PPE

Waste should be placed in a refuse bag and can be disposed of as normal domestic waste unless the client has confirmed COVID-19 or symptoms of COVID. Waste (including PPE) from people with symptoms or confirmed COVID-19 should be put in a plastic rubbish bag and tied when three-quarters full. The waste can be disposed of in domestic waste 72 hours later. Do not put any items of PPE (or face coverings of any kind) in the recycling bin.

Workforce Capacity Fund

Providers have received two Workforce Capacity Fund (WCF) payments; one which was in recognition of the work undertaken by providers to support and encourage staff vaccination, and the other, the general payment, which providers could use to fund activity, within the grant conditions, that best fit their individual requirements.

This week the DHSC published the final report template for the WCF, so we now know what information we need to collect from providers to report to the DHSC in May. In respect of the general payment we will need you to report:

- The activity funded, e.g. overtime payments, recruitment activity, etc
- Expenditure on that activity
- Service type, i.e. residential care, home care or other
- The number of extra staff hours generated
- The number of extra people recruited
- The extent to which the benefit of that activity is ongoing e.g. not likely, likely, etc.

We will publish an online form with guidance and further information will follow.

Provider teleconferences

We run regular COVID-19 focused teleconferences for adult social care providers to discuss key issues, understand challenges, and as a regular forum for question and answer sessions with the authority's officers.

Please join us on these open calls, which are presently scheduled until July 2021, including now those for supported living providers. We welcome questions from providers sent to us ahead of each call. Further details on how to join us can be found [here](#).

Yours sincerely,

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The archive of all previous COVID-19 provider bulletins released since March 2020 can be found at <https://resources.leicestershire.gov.uk/adult-social-care-and-health/working-with-you-during-coronavirus>