



# Information

for adult social care providers

CORONAVIRUS  
**PROTECT  
YOURSELF  
& OTHERS**

 Leicestershire  
County Council

## Bulletin 85 – 5 May 2021

Dear Colleagues,

Please find below the most up to date information on COVID-19 related matters for your information and action where appropriate.

### **Updated guidance: outdoor visits from care homes**

Enjoying trips outside of the care home is recognised as important for residents' health and wellbeing.

National guidance has again been updated to enable residents to leave their care homes, to spend time outdoors, without the need to isolate on their return. This can be found at <https://www.gov.uk/government/publications/arrangements-for-visiting-out-of-the-care-home/visits-out-of-care-homes-supplementary-guidance>

From 4 May 2021, residents should be enabled to leave their care home to spend time outdoors without subsequent isolation in the following circumstances:

- residents may be accompanied by:
  - a member of care home staff
  - one or both of their nominated visitors
  - their essential care provider (where applicable)
- care homes should discuss arrangements with residents' nominated visitors, or essential care provider, in advance
- visits should take place solely outdoors, except for the use of toilet facilities
- there should be no visits to indoor spaces (public or private)
- the exception to this is that residents will be able to access polling stations
- visits should not involve the use of public transport

Visiting a polling station is permitted and would not require subsequent isolation. However, residents should be accompanied to the polling station by a member of care home staff to facilitate a safe journey, observing social distancing measures in place at the polling stations. Providers should take reasonable steps to support this.

An emergency proxy vote can be obtained by 17.00 on polling day if adhering to coronavirus advice or guidance would prevent a resident from going to the polling station.

However, spending time with others outside the care home will increase the risk of exposure to COVID-19 for the resident and potentially to other vulnerable residents on their return. It is possible to mitigate and manage infection risks within the controlled environment of the care home – including by testing anyone coming into the home – but it is not possible to control the environment outside of the care home in the same way. This means that there is still the need for some measures to manage the risk of residents returning from visits bringing infection into the care home environment.

### **Visits to care homes of non-NHS contractors - advice from Public Health England**

Contractors who are non-NHS staff are required to take tests daily in line with the care home visiting guidance, when working in care homes. Care home staff should be aware that the default position is that contractors are tested 'at the door' of the first care home they visit each day. However, care homes should be allowed to grant workers access with a negative lateral flow test that day, including a home test, if not doing so carries potential service provision or patient safety implications.

### **Patient safety support for care homes**

[East Midlands Patient Safety Collaborative](#) (PSC) is part of a network across England delivering five National Patient Safety Improvement Programmes. These are a key part of the [NHS Patient Safety Strategy](#), aiming to continually enhance patient safety and quality care by working across the health and social care system on quality improvement and building a positive safety culture.

The PSC is currently working with care homes across the East Midlands, focusing on the management of deterioration, advance care planning, and administration of medication:

- Reduce medication administration errors by introducing changes including safety huddles and improving the learning from errors, near misses and excellence.
- Understand current practices regarding frailty, managing deterioration and advance care planning to build an East Midlands overview.
- Support timely recognition and management of deterioration in residents' health, using managing deterioration tools and safety huddles.
- Support personalised, quality end-of-life care through the adoption and spread of advance care planning and other approaches.
- Improve the capacity and capability for quality improvement by providing a programme of support to care home staff including medicines safety champions, quality improvement coaching and care home webinars.

- Assess and evaluate safety culture so care homes increase their understanding of what is going well and what could be improved upon.
- Establish a regional Care Home Patient Safety Network.

This work is being delivered as part of the [National Patient Safety Improvement Programme](#). If you would like to find out more or are interested in getting involved, please contact [natalie.riley@nottingham.ac.uk](mailto:natalie.riley@nottingham.ac.uk).

Two officers from the team will be presenting at the care home conference call on Monday 10 May, 11.00-12.00. To join the call please see <https://resources.leicestershire.gov.uk/adult-social-care-and-health/working-with-you-during-coronavirus/provider-teleconferences>

### **‘Five things to stop the spread’ for home care, supported living and extra care**

Thank you to all our community adult social care providers for your sustained efforts in tackling the virus and protecting service users. We all need to continue to do everything we can to drive down the number of positive cases and protect ourselves, the people we care for and our families.

Health and social care organisations and provider representatives across LLR have developed a ‘top tips’ graphic which is available at <https://resources.leicestershire.gov.uk/sites/resource/files/field/pdf/2021/4/29/Five-things-you-can-do-to-help-stop-the-spread.pdf> to highlight five things that community providers and workers can do to make sure that you are protecting each other and your service users, including:

- Vaccinations
- Testing
- Hands, face, space, fresh air
- Infection prevention and PPE
- Self-isolation

Please use the graphic in your communications with your staff.

### **World Hand Hygiene Day 2021: seconds save lives – clean your hands!**

Today, Wednesday 5 May, is World Hand Hygiene Day. The World Health Organization (WHO) is calling on health care workers and providers to achieve effective hand hygiene action at the point of care. The point of care refers to the place where three elements come together: the patient or service user, the health care or social care worker, and care or treatment involving contact with the person or their surroundings.

In support of hand hygiene day this message pack has been developed by NHSEI Infection Prevention and Control team to help you remind staff of the important hand hygiene:

<https://resources.leicestershire.gov.uk/sites/resource/files/field/pdf/2021/5/5/hand-hygiene-day-pack-2021.pdf>

## **Workforce Capacity Fund**

On 18 September 2020 the government made a commitment in the [adult social care winter plan](#) to support local authorities and social care providers to maintain safe staffing levels over the winter period and to continue working with the care sector to ensure there is sufficient workforce capacity across services.

The fund enabled local authorities to passport funds directly to a care provider to deliver measures, such as recruitment expenditure, overtime payments and staff bonuses / loyalty payments, that increase staffing capacity within their organisation. Leicestershire issued about 90% of the grant to external providers.

Please complete your return using the online form at:  
<https://surveys.leics.gov.uk/snapwebhost/s.asp?k=161916925629>

Providers have received two workforce capacity fund payments, the first was a general payment and the second was a payment in relation to vaccination. You should only report here activity and expenditure in relation to the general payment you received.

Please complete this report by 10 May 2021, detailing eligible activity, expenditure and the benefits obtained from the fund.

For more information please visit the [WCF pages at the DHSC](#).

By accepting the grant payment your organisation accepted the grant terms and conditions. If you fail to report or report ineligible expenditure, you risk having to return the grant payment.

## **National booking service re-opens for social care staff COVID-19 vaccinations**

If your staff have not yet had their first dose of the COVID-19 vaccine, it's not too late – frontline health and social care staff can book now by visiting the [national booking service](#), by calling 119, by contacting their local GP, or booking at a local hospital hub. All the booking details are available on the [local NHS website](#).

## **Vaccination options for under 30s**

Recently there have been reports of an extremely rare condition involving the Oxford/AstraZeneca vaccine and blood clots.

As a precautionary measure while this is being carefully reviewed, the Joint Committee on Vaccination and Immunisation (JCVI) has now advised that it is preferable for adults aged under 30, who don't have underlying health conditions that

put them at higher risk of severe COVID-19 disease, to be offered an alternative vaccine when it is their turn to be vaccinated.

For those in this age group who have already had their first dose of the Oxford/AstraZeneca vaccine and had no adverse reactions, they should still come forward for their second dose when invited.

If you are under 30 and have yet to book your first dose, the following options are available to you:

- Book via the National Booking Service: You will only be offered appointments for the Pfizer vaccine. There may be fewer appointments available or you may have to travel further.
- Contact your GP practice.
- Book via [Swiftqueue](#): You should only book for clinics offering the Pfizer vaccine. The booking system should prevent this but if you do book for an AstraZeneca clinic, you will be turned away when you arrive for your vaccination.

### **Importance of correct entries to the National Capacity Tracker**

Please ensure that the data that you input to the national capacity tracker is updated regularly and is accurate. In many cases the data which you enter to the tracker is the only or main measurable information available to central government and the Council about progress or challenges. Examples of areas to pay particular attention to are:

- Covid vaccinations – this now includes dose 2, as well as dose 1. A national team will be contacting managers of care homes with low take-up rates reported on the tracker to understand barriers and to offer support.
- COVID-19 recovery and testing – take care to include the correct data. Including incorrect information about the number of residents or staff with COVID-19 can result in the home being considered as being in an outbreak. If this information has not been reported to the local health protection team you may be contacted asking for more information.
- Workforce status – include all staff as this information allows the percentage of staff who have had the vaccination or who are tested or at work to be calculated. If the staff numbers input is wrong, this can give the incorrect figure for the number of staff who have had the vaccination or who have been tested. The staff numbers should be based on full time equivalents and should include staff who are on annual leave or not on shift. Only staff who are unwell or self-isolating should be recorded as off work.

### **Aerosol Generating Procedures (AGP) questionnaire**

During the COVID-19 response, government guidance identified that where AGPs were undertaken, additional safety equipment was required, including FFP3s. FFP3s require an assessment by a qualified person to ensure they are effective. To understand any issues across LLR we are carrying out survey. The results will be used to determine the support available to you going forward as it is unlikely that the requirement for FFP3s will change.

To enable us to make plans for the future I would be grateful if you could complete the questionnaire to be found here: [AGP Survey LLR](#). Please complete this even if you do not currently undertake AGPs within your service as it is possible that guidance or circumstances could change in the future. It will only take a couple of minutes - please note you will need to have available the model name/numbers of any FFP3s currently being used when you complete the survey.

The closing date for this survey is Friday 21 May 2021.

In accordance with GDPR the data collected will only be shared with LLR partners and then only when the sharing of such information is lawful and relevant. It will only be retained for the duration of time taken to compile the findings of this survey.

### **Right to work checks**

Advice for employers carrying out right to work checks during the COVID-19 pandemic is available [here](#). Temporary changes were made on 30 March 2020 and remain in place until 16 May 2021.

It remains an offence to knowingly employ anyone who does not have the right to work in the UK.

Yours sincerely,

Jon Wilson  
Director of Adults and Communities

Mike Sandys  
Director of Public Health

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>