Agenda Item 5

Care Home Assurance during the Covid-19 Pandemic

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Falkirk IJB Clinical and Care Governance Committee

26 June 2020

Care Home Assurance during the Covid-19 Pandemic

For Noting

1. Executive Summary

- 1.1 This report outlines the process that Falkirk HSCP, NHSFV, Public Health and partners have established to ensure an enhanced oversight of care assurance, testing and support to care homes in the current Covid-19 pandemic.
- 1.2 The process that has been established is within current Scottish Government recommendations and guidance.

2. Recommendations

The Clinical and Care Governance Committee is asked to:

2.1 note the contents of the report.

3. Background

- 3.1 As part of Falkirk HSCP's Covid-19 Mobilisation Centre huddle, a daily data sheet and report from all the care homes was received and considered. As the requirement for care home scrutiny and support increased, the HSCP, dedicated a separate daily care assurance "huddle" specifically for care homes.
- 3.2 NHS Forth Valley and Falkirk and Clackmannanshire & Stirling Health and Social Care Partnerships set up the Care Home Strategy and Planning Group (CHSPG). The CHSPG undertakes and fulfils all the functions of the "Care Home Clinical and Care Professional Oversight Team" as described and requested by the Cabinet Secretary. The CHSPG currently meets daily, receiving reports from the partnership's local care assurance huddle.
- 3.3 The CHSPG reports directly to Scottish Government and the Forth Valley Assurance Group.
- 3.4 This ensures a high level of governance to Chief Officers, Directors and Chief Executives.

4. Care Home Oversight

- 4.1 The purpose of this enhanced oversight is in keeping with the Scottish Government's requirements to develop, design, implement and oversee comprehensive support arrangements, testing and outbreak management for care homes within Forth Valley. It is expected to ensure that appropriate clinical and care professionals across Forth Valley take direct responsibility for the professional support required for each care home in the Falkirk, Stirling and Clackmannanshire areas, providing enhanced clinical care and professional oversight.
- 4.2 The remit of the Care Home Strategy and Planning Group includes the following key requirements:
 - provide expert oversight and scrutiny of the data and information in relation to COVID-19 in all care homes in Forth Valley on a daily basis
 - ensure guidance on testing care home residents and staff from Scottish Government is implemented and updated as subsequent guidance is issued, with clear routes and responsibilities, providing timely access, reporting, analysis and response
 - ensure contact tracing is in place in response to residents and staff with positive test results
 - implement clear processes and a mechanism for monitoring each care home on a day by day basis. This data collection must identify homes at risk
 - ensure a reporting system is implemented that is clear and transparent to the Group and to their operational teams. This must enable all responsible leads to identify care homes which may require more input to manage residents' needs, to be clear about the actions required and to report on progress with specific actions
 - implement appropriate outbreak management arrangements, to maintain effective clinical standards which prevent outbreak or to manage an outbreak if it occurs
 - demonstrate that Infection and prevention control arrangements meet all relevant requirements including PPE and cleaning
 - provide assurance regarding the arrangements implemented including:
 - Care Home reviews and advice, which may require to be a mix of in person visits and remote reviews, where the care home remains stable.
 - education and training for staff
 - CHART team Clinical assessment and review
 - mobilising and deployment of temporary 'resilience' workforce resources

- Palliative and end of life care
- o data collection, analysis and dissemination to key stakeholders
- promote best practice in terms of decision making about care and treatment for residents, which should be on an individual basis, based on the person's best interests and in consultation with the individual or their families/representatives, taking account of any expressed wishes contained in their Anticipatory Care Plan
- identify requirements for staff support and well being and implement actions as appropriate.
- 4.3 Reports and recommendations are provided to the NHS Chief Executive and Systems Leadership Team, the Local Authority Chief Executives and the Health and Social Care Partnerships Chief Officers.
- 4.4 In addition to the Care Home Strategy and Planning Group, the Forth Valley Assurance Group has been established. The membership if this group is the Director of Public Health, Medical Director, Executive Director of Nursing, the Chief Social Work Officer and the Chief Officer.
- 4.5 The remit of the Assurance Group is to seek assurance regarding professional support and quality of care being provided to care homes. They will ensure the national reporting requirements and operational framework are being delivered by the Care Home Strategy and Planning Group.
- 4.6 Where the Care Home Strategy and Planning Group believes there is a significant issue that requires onward escalation i.e., which cannot easily be resolved through routine local reporting and support mechanisms, this is reported to the Assurance group. It can then be escalated by the Director of Public Health to the Chief Executives of the Health Board and Local Authority. Such issues will also be escalated to the Care Inspectorate and Scottish Government, and ultimately if required, to use emergency powers held by Ministers.
- 4.7 Every day all care homes reflect on the key safety parameters from a comprehensive template. The information from these safety huddles is fed back to the Care Homes Strategy and Planning Group via local health and social care departments. The template used within Forth Valley includes the key safety parameters: ICP; staffing; status of residents; status of staff, etc.
- 4.8 In addition, those homes with confirmed or suspected Covid-19 cases amongst residents are also contacted daily by Health Protection to ensure management of these cases from a Public Health perspective is maintained in as robust a manner as possible.
- 4.9 Information is collected each day from both the above processes, as well as from routine assurance visits; results from enhanced testing; and feedback from clinicians actively treating symptomatic residents is reviewed by CHSPG.

4.10 This provides robust information from all sources to ensure a clear picture and any actions required where necessary.

5. Conclusions

5.1 The Committee is asked to note the contents of this report and the work that is being undertaken to provide oversight, support and assurance to care homes during this pandemic.

Resource Implications

There are no resource implications from this report.

Impact on IJB Outcomes and Priorities

The work described in the report is in line with IJB outcomes and priorities.

Legal & Risk Implications

The work ensures the IJB and HSCP is compliant with legal and risk requirements.

Consultation

There is no consultation required for this report.

Equalities Assessment

There is no equalities assessment required for this report.

6. Report Author

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7. List of Background Papers

n/a

8. Appendices

None