

Report to: Date of Meeting: Report by:

# Social Work Resources Committee 19 August 2020 Director, Health and Social Care

Subject:

# **Care Homes – Change in Guidance**

# 1. Purpose of Report

- 1.1. The purpose of the report is to:-
  - provide an update to Committee in regard to Care Homes for Older People highlighting:-
  - the announcement by Scottish Government on 17 May of new requirements in regard to enhanced professional clinical and care oversight of Care Homes
  - the current position and supportive engagements around Care Homes within South Lanarkshire
  - the publication by Scottish Government of Visiting Guidance for Adult Care Homes in Scotland
  - commencement of unannounced inspections by the Care Inspectorate and fortnightly reporting of this programme to Scottish Government
  - the announcement by Scottish Government of required medical practitioner reporting of COVID or suspected COVID related death of Care Home resident and investigation by Covid Death Investigations Team.

## 2. Recommendation(s)

- 2.1. The Committee is asked to approve the following recommendation(s):-
  - (1) that the change in guidance and support monitoring arrangements in respect of Care Homes be noted; and
  - (2) that the lead remits of the Council and Health and Social Care Partnership, including incorporation of the Chief Social Work Officer in oversight arrangements of Care Homes, be noted.

## 3. Background

- 3.1. Government correspondence estimates that over 40,000 residents live in the 1083 adult Care Homes across Scotland. The majority of adult Care Homes are for older people (75%) and 75% of these Care Homes are run by the private sector, with the remainder run by voluntary sector and local authority/health board sectors. Adults living in Care Homes often have multiple health conditions and complex care needs. Many are inevitably at greater risk of poorer outcomes if they were to contract COVID-19 due to conditions such as frailty, multiple co-morbidity, pre-existing cardio-respiratory conditions or neurological conditions.
- 3.2. On 11 March 2020, the World Health Organisation declared the Coronavirus to be a pandemic. On 23 March 2020, the UK Government introduced measures to minimise the spread of the virus by directing people to remain at home, with the

exception of very limited purposes, stopping all gatherings of more than two people and closing a number of non-essential businesses.

3.3. Legislative changes were introduced in recognition of the challenges facing organisations to meet their statutory duties and align their services to meet areas of priority. The Scottish Government Coronavirus (Scotland) Bill received Royal Assent on 6 April 2020 and complemented and regulated the use of emergency powers given to Scottish Ministers under the UK Parliament's Coronavirus Act 2020.

#### 4. Lanarkshire Command Structure and Support response

- 4.1. South Lanarkshire Council and NHS Lanarkshire both responded to COVID-19 challenges by the Council implementing a Corporate command structure, and NHS initiating Gold Command groups led by Directors and Silver and Bronze subgroups to drive the response.
- 4.2. The Health and Social Care Partnership (HSCP) has been a full participant in both Corporate Leadership and NHS Gold Command structures and at all levels below, supporting a coordinated approach across the whole system. The Bronze COVID-19 Command Group Primary Care/HSCP established a multi-agency Care Homes subgroup convening twice weekly to determine Care Home sector support during the pandemic alongside continuing interpretation and implementation of national guidance requirements. SLHSCP and Council are represented on the bronze group.
- 4.3. A Care Home Assurance Group (CHAG) was established on 23 April comprising representation from Director of Public Health (Chair), Nurse Director HSCP, Consultant Public Heath, Care Inspectorate, HSCP South and HSCP North representatives, IPC Lead, with membership latterly including Chief Social Work Officer (CSWO), Chief Officers of HSCP and Medical Director. In meeting daily this group has overseen risk prioritisation and engagement visits to all older adult Care Homes in Lanarkshire providing support and have escalated concerns to Care Inspectorate where required.
- 4.4. SLHSCP has held daily calls for key operational professional leads to coordinate activity and log all decisions taken. These leadership briefings allowed for the dissemination of real time information during the evolving period of pandemic where national guidance and requirements were being regularly updated. The daily morning situational briefings have been invaluable in providing overview of this emerging situation, mapping out next steps required, clarifying roles and responsibilities for participants and assisting in forward planning. COVID-19 Briefings with organisational response updates have also been established for elected members.
- 4.5. The programme of individual engagement visits to Care Homes in South Lanarkshire in May 2020 involved representation from SLHSCP, Public Health and Care Inspectorate. A thematic analysis was also undertaken with the Care Homes to identify common concerns. This analysis has highlighted training and educational needs in relation to:
  - access to updated Health Protection Scotland (HPS) guidance
  - management of an outbreak
  - standard infection control precautions such as PPE, hand hygiene; Uniform Policy; management of clinical waste
  - staff support: mental health and wellbeing

4.5.1. Care Home providers were briefed in advance of these engagement visits and feedback from Care Home providers indicates that these visits were well received. A number of recommendations were made in response to the themes, noting that many of these actions of support had already commenced in regard to Care Home engagements.

#### 5. Coronavirus (COVID-19): enhanced professional clinical and care oversight of Care Homes

- 5.1. On 17 May 2020, Scottish Government issued further correspondence to Chief Executives, Medical and Public Health Directors and Chief/Lead officers. The correspondence summarised what has been put in place already at a local and national level, including : the emergency Coronavirus legislation, an assortment of guidance, provision of PPE, commitments around workforce salaries and the real living wage; £50m of initial investment for provision of resilience and sustainability of services; roll out of testing for staff and residents and the establishment of a Care Home Rapid Action Group advised by a CMO/CNO led Care Homes Clinical and Professional Advisory Group.
- 5.2. The correspondence of 17 May 2020 also set out new arrangements to be put in place to ensure appropriate clinical and care professionals across Health Boards and HSCP take direct responsibility for the clinical support required for each Care Home in their Board area recognising that COVID-19 is a public health crisis in social care settings. Nurse and Medical Directors are required to take direct responsibility for the clinical support required for each Care in collaboration with Directors of Public Health. Nurse and Medical Directors, in conjunction with Healthcare Associated Infection leads, providing practical expert advice and guidance on infection prevention and control.
- 5.3. There is a requirement for all Health Boards to establish a Care Home Clinical and Care Professional Oversight (CHCCPO) team comprised of the following professional roles:
  - The NHS Director of Public Health
  - Executive Nurse lead
  - Medical Director
  - CSWO
  - HSCP Chief Officer
- 5.4. As of week commencing 18 May 2020 the CHCCPO team is required to assume a number of responsibilities including holding a daily discussion covering each home in their area with a focus on infection prevention and control and to provide appropriate responsive clinical support. A key remit being professional oversight, analysis of issues, and identification and implementation of supports to assist Care Homes sustain services during the pandemic. Joint inspection visits are also undertaken as required by the Care Inspectorate and Healthcare Improvement Scotland (HIS), working together to respond to priorities and concerns
- 5.5. Care Home Testing guidance in situ now means anyone in a Care Home having COVID symptoms will be tested (for normal outbreaks, testing is only done on a sample of potentially positive cases). Weekly testing arrangements for all Care Home staff are now also in place. Testing information reports are submitted weekly to Government.

- 5.6. Coronavirus (No.2) (Scotland) Act 2020 Powers to Intervene in Care. The Coronavirus (No.2) (Scotland) Act 2020 is emergency legislation which sets out a range of provisions that ensure swift interventions in Care Homes where there is a serious risk to individuals. These are:
  - <u>Emergency Directions</u> Health Boards can make specific asks of Care Homes where they believe there is a material risk to health within the Care Home.
    Where the Health Board believes they haven't been complied with, the Health Board can take steps to ensure they are carried out
  - <u>Emergency Intervention Order</u> Ministers may authorise a nominated officer to temporarily take over the operation of a Care Home if there is a serious threat to life, health or wellbeing within the home
  - Powers to purchase Care Home and care at home services Putting beyond doubt the powers available to Local Authorities to purchase a Care Home or Care at Home Services and Health Bodies to purchase a Care Home by agreement
- 5.6.1. The powers that have been put in place allow for public bodies to make the swiftest of interventions where required to do so. The powers are all related to COVID-19 and can only be used in a situation where coronavirus is a factor in the failure of service. They are also included in emergency legislation meaning that they are temporary powers during the current situation. The powers will be available for the duration of the Act, which is presently due to last for six months. It is anticipated that the circumstances in which these powers would be used are rare.
- 5.7. CSWO's have formally requested clarification on roles and responsibilities in relation to the Enhanced Professional and Clinical Oversight structures for Care Homes that were established on 18 May 2020. CSWO's have outlined the need to ensure a human rights based approach as the focus has to date appeared predominantly clinical. This has been acknowledged by the national Care Home oversight board who have informed further guidance will reiterate the distinctive role of the CSWO and additional resources will be made available to support CSWO with this role.

## 6. South Lanarkshire Position - Care Homes

- 6.1. In addressing the Coronavirus pandemic, Care Homes have experienced considerable pressures in supporting both COVID-positive and non COVID residents ensuring Health Protection Scotland (HPS) Guidance and Government requirements are adhered to in regard to both Care Home residents and the care workforce.
- 6.2. The Lanarkshire Partnership (South Lanarkshire Council, SLHSCP, North Lanarkshire Council, NLHSCP and NHS Lanarkshire) work with this provider sector has been characterised by a range of extensive activity including: encouraging review and update of Care Home Business Continuity Plans; Weekly Care Home teleconferences; Increased engagement and contact from locality staff with Care Homes and also by the Care Home Liaison Team (CHL); support management of any issues, for example, infection outbreaks, PPE availability; signposting and engagement around Staff health and wellbeing supports including "wobble rooms" and psychological supports.
- 6.3. Within South Lanarkshire there are seven Council registered and 41 Independent sector registered Care Homes for older people. Since implementation of Phase One lockdown in March 2020, a weekly Care Homes group telephone conference chaired by a social work manager within the SLHSCP is held with Care Home providers. Also in attendance are council representatives from Procurement and Finance, SLHSCP locality/fieldwork managers, NHS representatives and Care Inspectorate.

The conference call provides the opportunity to share and update information and signpost providers to emerging guidance and reporting requirements. Care Home Providers likewise can run through any issues they have regarding the impact of COVID-19 and pressures they are experiencing, and this is assisting develop a shared understanding of the Care Home sector and where particular support may be required.

- 6.4. Care Home providers have shared a range of examples of how residents, families and staff have been actively supported during the COVID-19 pandemic, for example, use of video calls for family chats; families emailing in letters which are then printed off and issued/read to residents; use of arts and crafts leading to fun games and competitions for residents within Care Homes such as t-shirt making; residents sharing experience of lockdown feelings and support including a resident sharing a poignant poem highlighting this aspect.
- 6.5. A key task for the Partnership set by the Scottish Government was to rapidly free up space in the acute hospitals in anticipation of a peak in COVID-19 related demand for beds. This has been successfully achieved and included:
  - purchasing additional Nursing Home beds;
  - the two former South Lanarkshire Council Care Homes, McWhirter's in Larkhall and Kirkton in Blantyre were temporarily recommissioned and staffed to support service users using an intermediate care approach, however to date Kirkton has not been required
  - HSCP staff (Nursing and Social Care) were deployed to support commissioning of a vacant wing of Bothwell Castle Care Home to temporarily accommodate service users. This arrangement has now ended as it is no longer required
- 6.6. These resources were required to deliver additional care at a point in time when the community workforce was depleted across the entire Social Care sector. McWhirters is primarily being used for people who should be at home but where there has been very limited capacity to start new Care at Home. Kirkton has been on standby should the numbers of referrals increase rapidly but to date has not been required. These three units have been staffed through a combination of redeploying residential staff, day service staff and using other council employees particularly from Leisure Services. NHS Lanarkshire and HSCP Managers have delivered training to support these employees into a Social Care role and to undertake vital signs monitoring to support the targeting of Primary Care Services for these residents.
- 6.7. Similarly, to other providers the South Lanarkshire Partnership has implemented all Scottish Government and regulatory procedures as detailed in the guidelines to safeguard residents and staff during this pandemic. Within the Council Residential Care Homes to date only two service users have been diagnosed with COVID-19. Service users have demonstrated great resilience and spirit during this difficult time and indeed many have taken the opportunity to boost morale within the Care Home for the other resident and staff and thus providing comfort for loved ones who cannot be with them at this time, for example, 98-year-old service user who raised funds for the NHS by playing the piano for 100 days in McClymont Care Home, featuring on Scottish news feature. Also, two resident veterans from David Walker Gardens who brought history to life for young children learning about VE day.

## 7. Care Home visiting

7.1. On 25 June 2020 Scottish Government published Visiting guidance for Adult Care Homes in Scotland. This sets out a four staged approach to the reintroduction of visiting. Stage one with the policy of essential visits only (End of Life Stress and Distress). As of 3 July 2020, in moving to stage two, Care Home residents will be able to receive an outdoor visit from a nominated Visitor on the basis the Care Home has been COVID-19 free for 28 days.

7.2. Locally, the Health Protection Team and the Clinical and Care Oversight group will have responsibility for supporting Care Homes and ensure risk assessments are in place and each home has introduced a revised visiting policy before approval for visiting by Public Health can commence for that Care Home.

## 8. Care Home Inspections

8.1. The Care Inspectorate have commenced a programme of unannounced inspections to Care Homes and are now submitting a fortnightly report to the Scottish Government on their findings from all recent Care Home inspections. More recent inspections have been graded against the revised Care Home quality assurance framework which asks an additional key question: 'How good is our Care and Support During the COVID-19 Pandemic?'

# 9. COVID-19- Deaths of Care Home Residents

- 9.1. In response to the significant public concern into the number of deaths from COVID-19 within Care Homes, the Lord Advocate has advised medical practitioners that from 21 May 2020 they must report deaths or presumed deaths of residents within Care Homes, due to COVID-19, to the Procurator Fiscal; reporting is also required for staff where there are reasonable grounds to suspect that they may have contracted the virus in the course of their employment or occupation.
- 9.2. The Crown Office and Procurator Fiscal Service (COPFS) has established a dedicated COVID-19 Death Investigation Team (CDIT) who are working closely with Police Scotland to obtain the information which it requires to identify and investigate these deaths. The COPFS CDIT has been established to investigate deaths, the nature and extent of that investigation will depend on the particular circumstances ranging from limited to more extensive investigations.

## 10. Employee Implications

10.1. There are no employee implications associated with this report.

## 11. Financial Implications

- 11.1. Communication issued by Health and Social Care Scotland and COSLA sets out the national principles for sustainability payments to social care providers during COVID19. This provided a consistent set of principles to ensure that the social care sector remains sustainable during the emergency response to COVID-19. These principles are based on commitment to meet reasonable additional costs to ensure sustainability. The most recent version of this guidance was issued on 12 June 2020 and are in place until the end of July 2020. The Director HSCP wrote to Care Homes on 25 June 2020 informing that the processes being established in South Lanarkshire reflect the current position reached between Scottish Government and COSLA regarding support arrangements around COVID-19 and will be subject to review where required.
- 11.2. The financial implications of the response to COVID-19 are estimated at this stage are included in the Mobilisation Plan submitted to the Scottish Government. £50m has been allocated Scotland wide and the HSCP has received £2.9m to date.

#### 12. Climate Change, Sustainability and Environmental Implications

- 12.1. There are no implications for climate change or the environment in terms of the information contained in this report.
- 12.2. Presently there are no immediate sustainability issues for Care Homes with guidance issued to providers regarding the submission of claims in regards to additional costs sustained through response to COVID-19.

#### 13. Other Implications

13.1. There are no other implications associated with this report.

#### 14. Equality Impact Assessment and Consultation Arrangements

- 14.1. There is no requirement to carry out an impact assessment in terms of the proposals contained within this report.
- 14.2. There is no requirement to undertake any consultation in terms of the information contained in this report.

#### Val de Souza Director, Health and Social Care

27 July 2020

## Link(s) to Council Values/Objectives

- Improve Later Life
- Deliver better Health and Social Care for all

## **Previous References**

none

## List of Background Papers

none

#### **Contact for Further Information**

If you would like to inspect the background papers or want further information, please contact:-

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