

Kent Adult Social Care Provider Bulletin



Friday 22nd January 2021



Discharge into Care Homes for people who have tested positive for Covid-19: Note and flowchart for Care Homes



This document is based on guidance available on the date of issue. It will be updated as new guidance is published in line with the latest evidence.

OVERVIEW

- This note and flowchart has been created for care homes to simplify and clarify existing national guidance on discharge into care homes (published in December), particularly in relation to people who have tested positive for COVID-19.
- The current requirement is for hospitals to undertake a COVID-19 PCR test on all people discharged into a care home in the 48 hours prior to discharge. All individuals who test positive within this timeframe should be discharged into designated settings in the first instance. The outcome of tests should be shared with care homes prior to discharge and be included in the discharge summary information.
- An exception to this process is for individuals who have tested positive for COVID-19 and are within 90 days of their initial illness onset or positive test date. If these individuals have already completed their 14-day isolation period from onset of symptoms or positive test result (if asymptomatic) and have no new COVID-19 symptoms or exposure, they are not considered to pose an infection risk. They therefore do not have to be re-tested and can move directly to a care home from hospital (see flowchart overleaf).

KEY ROLES OF CARE HOMES AND HOSPITALS

Key roles of care homes	Key roles of hospitals (in the context of interacting with care homes)
Care home manager has the absolute discretion to accept or decline a resident depending on their local context and subsequently whether to isolate that individual on admission.	Hospital discharge team must not put undue pressure on a care home to accept a resident.
Care home manager should review the discharge summary information, in conjunction with NHS clinical support to care homes if required, to satisfy themselves that due process has been followed in the clinical assessment and decision-making.	Clinical team should ensure that the time-stamped reported COVID-19 test result of the individual is included in the discharge summary information.
If any information in the discharge summary information is missing or unclear, the care home manager should seek clarification from the hospital before accepting a resident.	Clinical team should provide detailed information about the clinical assessment and decision-making in the discharge summary information. This should state clearly whether or not the person is considered infectious and therefore whether or not it is necessary to discharge them to a designated setting. It should also include details of the individual's previous COVID symptomology (including date of onset of symptoms) and severity.
Care home manager should ensure the care home follows its own infection prevention and control procedures.	
Care home manager must ensure that the care home is operating within the margins of its organisation's indemnity insurance.	

Immunocompetent* individual in hospital who has received a positive PCR test for COVID-19, is within a period of 90 days from their initial illness onset or positive test date and is [clinically ready for discharge](#)

*Immunocompetence describes having a normal immune response.

Hospital clinical team, in conjunction with an infection specialist if required, should undertake a clinical assessment against the following questions:

QUESTIONS:

- Has the individual completed their [14-day isolation period](#) from their symptom onset or positive test result (if asymptomatic)?
- Has the individual **not** developed any new COVID-19 symptoms? [New COVID-19 symptoms](#) include a new continuous cough, high temperature and/or loss of, or change to, the individual's sense of smell or taste. Care home residents may not present with typical symptoms. A post-viral cough and/or loss of, or change to, normal sense of smell or taste is known to persist for several weeks in some cases.
- Has the individual **not** had a new COVID-19 exposure? A [new COVID-19 exposure](#) is close contact with a confirmed COVID-19 case – a risk assessment involving an infection specialist may be required.

NO (TO ONE OR MORE)

YES (TO ALL)

Individual may pose an infection risk so should be discharged to a suitable [designated setting](#) to complete their isolation period.

The total 14-day isolation period can be shared across the hospital and designated setting if infection prevention and control practices are not breached.

After the 14 days the individual may be moved to their care home without the need for further COVID-19 test.

Individual is considered **not** to pose an infection risk and may be discharged to any care home without having to enter and isolate in a designated setting.

Resident does not require a further COVID-19 test in the 48 hours prior to discharge.

Care homes should continue to receive clinical support for residents following hospital discharge as outlined the [framework on NHS clinical support to care homes](#).

Kent Fraud Alert System



TO STOP FRAUD™

Vaccine scams

Please be aware of fraudsters sending out emails and texts offering vaccines.

The following is an example of such a message that was received by a Kent resident in last couple of days –

“NHS: We have identified that you are eligible to apply for your vaccine. For more information and to apply, follow here:’

(there is a link provided)

The link takes you to a page with an official looking NHS heading on a blue background & headed ' We need to prove ownership of address'.

Please get a debit / credit card ready, you will need:

Sort Code –

Account Number –

Long card number -

We use this to verify billing address with the bank.

No payments are made during verification.

[There is a ' continue ' box.]”

If you receive this or anything similar, it is a scam. The NHS will never ask you for account details. PIN numbers etc. If you receive any messages like this, then please report to Action Fraud either online at –

<https://www.actionfraud.police.uk/reporting-fraud-and-cyber-crime>

Or by calling - 0300 123 2040

Additionally, if you think you may have fallen victim to this scam, then please contact your bank immediately.

Preventing fraud

Together,
let's stop
scammers.



Remember, ABC:

 never Assume

 never Believe

 always Confirm

Get the latest
scam advice:



@KentPoliceECU



**Kent
Police**

Contacting Kent Police

Report a non-urgent crime online www.kent.police.uk/report

Talk to us on LiveChat – available 24/7 www.kent.police.uk/contact

In an emergency, if crime is in progress or life is in danger call **999**










If deaf or speech impaired, text 'police' and your message to **60066**

www.kent.police.uk



COVID-19 (Coronavirus) Infection - Cleaning Care Homes

The following initial checklist should be used when cleaning in any Care Home where residents may have either suspected or confirmed Covid-19.

	<p>RISK</p> <p>Residents who have the Covid-19 infection can contaminate their hands when they cough as well as their immediate environment. They can also infect another person who is close to them (within two metres) through droplet spread when coughing or sneezing.</p> <p>Reduce clutter, unnecessary equipment, and items around the home to facilitate cleaning and store reusable equipment clean and behind closed doors.</p>
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%; text-align: center;"> <p>1 Perform hand hygiene before putting on PPE.</p>  </div> <div style="width: 33%; text-align: center;"> <p>2 Put on apron and tie at waist.</p>  </div> <div style="width: 33%; text-align: center;"> <p>3 Put on facemask – position upper straps on the crown of your head, lower strap at nape of neck.</p>  </div> <div style="width: 33%; text-align: center;"> <p>4 With both hands, mould the metal strap over the bridge of your nose.</p>  </div> <div style="width: 33%; text-align: center;"> <p>5 Don eye protection if required.</p>  </div> <div style="width: 33%; text-align: center;"> <p>6 Put on gloves.</p>  </div> </div> <div style="text-align: center; margin-top: 20px;">  </div>	<p>PPE</p> <p>All staff must be trained in how to put on and take off PPE safely.</p> <ul style="list-style-type: none"> • Gloves and aprons, single use for each room or area. Wash hands before wearing and again after removal. • Fluid repellent facemasks can be worn for a session of cleaning, then dispose. Wash hands before wearing and again after removal. Do not touch the mask while wearing. • Risk assess for wearing face shields/visor or goggles. Wear if likely to have splashing of body fluids or respiratory droplets onto face. Can be worn for a session and disposed if single use or decontaminated with disinfectant wipe (see below), if reusable.
	<p>Equipment</p> <p>Use</p> <ul style="list-style-type: none"> • Disposable cloths for each room or area, following National Colour Coding: (Blue=patient areas, Red=toilets/bathrooms, green=kitchens, yellow=infected areas) • Disposable mop heads (or launder daily last in the home's washing machine and thoroughly dry) • Chlorine based cleaning agent (1000ppm of chlorine) eg Chlor-Clean



or Actichlor Plus tablets follow manufacturer's instructions.

- Disinfectant wipes eg Clinell Universal

If you use any other product it must comply with EN14776 for virus killing ability, check with manufacturer

- Discard dirty cleaning water in a designated low level sink/drain which is cleaned daily
- Clean mop handle, cleaning bucket and steam cleaner after each cleaning session



Process

Twice daily cleaning or more frequently of the practice if visibly soiled or known to be contaminated. Open windows to allow fresh air to circulate.

Residents' rooms:

- Clean all surfaces, especially frequent touch areas e.g toilet rails, door handles, bedrails. Clean rooms with known or suspected COVID last.

Where resident has died with Covid19

- Clean all surfaces, high level windows, ledges and sills, curtain rails, lower level windows, ledges and sills, furniture, fixtures and fittings, , door handles, light switches, soap & towel dispensers
- Clean all surfaces of mattress and /couch/bed, unzip mattress-check foam for strike through-replace if soiled.
- Mop hard floor surfaces and wipe clean chairs. If they have carpets and fabric chairs, shampoo carpet and fabric chairs or use a steam cleaner.



Waste Management

All waste should be removed daily. Waste from known or suspected Covid19 patients:

- discard as infectious (orange bag) waste stream.

If no infectious waste stream, double bag, store securely for **72 hrs** and discard as household waste.



Laundry

Laundry from suspected or known COVID patient should be treated infectious and ,

- Placed **directly** into an alginate (dissolvable) bag at bedside.
- Place this into an outer plastic bag outside the room.
- Can be laundered immediately at 60 degrees Celsius (or as hot as the fabric can take).
- Do not overfill washing machine with laundry.
- Bring laundry hamper close to the room, do not take into the room.
- Do not shake or sort linen and do not put used linen on the floor or other surfaces.

COVID-19 waste management standard operating procedure

Please see updated document below for details:



C0995-covid-19-waste-management-gui

General Updates

No return of PCR tests results

If you do not receive your care home PCR test results within four days please do a repeat test on all those staff or residents for whom a result has not been provided. Please ensure that all details are included on the sample labels and all documentation is completed as without appropriate labelling the samples cannot be tested.

Yellow card scheme – report your Covid vaccine side effects.

The yellow card scheme is a process for gathering information about the side effects experienced from the use of medicines or vaccines. The Covid vaccine is new and therefore it is important that any side effects are reported. You can access the card scheme through the yellow card app <https://www.nhs.uk/apps-library/yellow-card/> or the yellow card website <https://coronavirus-yellowcard.mhra.gov.uk/>

What to expect after Covid vaccination

A document to help answer some of a vaccinated individuals' questions.

<https://www.gov.uk/government/publications/covid-19-vaccination-what-to-expect-after-vaccination/what-to-expect-after-your-covid-19-vaccination>

Offering care homes access to urgent clinical advice and support via NHS 111 using Starline 6 (*6)

Please see below information relating to NHS 111 Starline 6 (*6) which is currently being rolled out across east Kent. This Nationally recognised route, available 24 hours a day & 7 days a week, offers staff and carers within care homes (who are not registered professionals) priority access via their telephone keypad to a Clinical Assessment Service (CAS)* clinician within the NHS 111 contact centre enabling the care home caller to bypass the initial triage.

*6 is available to staff and carers within your home who are not registered professionals when they need to access urgent clinical advice and support regarding a resident. By following the routing instructions callers will have priority access to a Clinical Assessment Service (CAS) clinician within the NHS 111 contact centre, bypassing the initial triage.



Starline 6
Presentation East Kent



Accessing Urgent &
Emergency Care from

The presentation above provides an overview of *6 and details of how you can sign-up. The bullet points below outline the two actions that you will need to take to sign-up and access this line.

1. Email Sean.Daisy@secamb.nhs.uk and stephen.allsope@nhs.net to confirm **all telephone numbers** your home will be calling from.
2. Sign the Memorandum of Understanding (MOU) and email it to Sean.Daisy@secamb.nhs.uk. *Please note these must be sent in **WORD** format only, please do not send as a PDF.*