

Kent Adult Social Care Provider Bulletin



Thursday 1 April 2021

Shielding update for people who are clinically extremely vulnerable

The Department of Health and Social Care have announced that [clinically extremely vulnerable people in England will no longer need to shield from 1 April 2021](#).

This means that those on the shielded patient list can begin to follow the national restrictions alongside the rest of the population. However, these people are still advised to take extra precautions to keep themselves safe from COVID-19. From 18 March and over the next two weeks, people on the shielded patient list will receive an advice letter that sets out practical steps on how to reduce their risk of catching the virus.

These include:

- continuing to maintain strict social distancing
- keeping overall social contacts at low levels
- continuing to work from home where possible.

Click the image below to read the latest guidance in full.



COVID guidance: residents on the shielded patient list

Being on the Shielded Patient List (SPL) does not prevent a care home resident from receiving visitors in the same way as other residents.

As long as visiting is delivered in line with the arrangements set out in this guidance (including robust testing arrangements, PPE use and in the context of good IPC throughout the care home environment), this will provide an appropriate level of risk mitigation and management for people on the SPL list.

As discussed above, individualised risk assessments should be completed for residents where necessary, including in respect of specific vulnerabilities set out in the resident's care plan. This may mean that some individuals should sensibly take a different approach to visiting – but this would be on the basis of individual clinical

advice. Being on the SPL does not in itself necessitate an individualised risk assessment.'

More information can be found here:

<https://www.gov.uk/government/publications/visiting-care-homes-during-coronavirus/update-on-policies-for-visiting-arrangements-in-care-homes>

Covid-19 vaccination schedule 2nd dose

When the second visit for Covid-19 vaccinations is arranged at a home, any staff members who are working or on site will be vaccinated at the same time. Homes have the option of advising their staff when second doses are taking place and staff, including those currently not on shift at that time but still on site, will be offered their second dose. For those who miss the 2nd dose through this route, the advice is that you should call 119 to organise booking of a 2nd dose.

Symptom free testing for Covid-19

Please continue to undertake the regular testing which guidance advises for both staff and residents. Testing is one of the tools in identifying the virus and reducing transmission. Vaccination of staff and residents does not preclude the need to test regularly.

Fertility and COVID 10 vaccine

The RCOG document <https://www.rcog.org.uk/en/guidelines-research-services/coronavirus-covid-19-pregnancy-and-womens-health/covid-19-vaccines-and-pregnancy/covid-19-vaccines-pregnancy-and-breastfeeding/> states that:

- 'Women trying to become pregnant do not need to avoid pregnancy after vaccination and there is no evidence to suggest that COVID-19 vaccines will affect fertility.'

Covid-19 vaccination: Support for managers

The Skills for Care locality Manager, Pia Rathje-Burton, can offer resources and support for managers on how to have difficult conversations with your staff on vaccine uptake.

Please contact Pia Rathje-Burton Pia.Rathje-Burton@skillsforcare.org.uk for more information.

Kent Care Hub Masterclass: Ideas to start improving staff well-being now

Thursday 29 April 2021 (1pm - 1:45pm)



Presented by Thomas Jeffs, Changing Minds Kent CIC

Tom Jeffs from Changing Minds Kent CIC is a Positive Psychology Coach and Trainer. In this webinar he shares 3 things you can start doing now to help improve the mental wellbeing of staff. From how to start generating a more supportive work environment to improving empathic connection and taking stock of stress and developing healthier coping strategies.

This is a 30 minute presentation followed by questions.

To book your free place please email ellie.reynolds@kica.care

Briefing for care providers (in residential care homes, supported living or individuals own homes)

EU settlement scheme: Helping EEA nationals with Care and Support needs apply for settled status (to be allowed to stay in the UK and access benefits and the NHS)

This briefing is for Care Providers who provide support to adults on behalf of KCC.

A reminder of the context:

Very simply put, since the UK left the EU, resident EEA nationals (see annex 1 for a list of countries concerned) Swiss citizens and their families must apply for the UK immigration status (known as “settled status”) in order to remain in the UK (this will entitle them to access benefits and the NHS).



They have until **30 June 2021** to do so and the application is free. The application is a digital application process.

What does this have to do with you?

You may be employing staff who are EEA nationals or you may be providing care/support to an individual who is an EEA national (see what this means in annex 1 below). You may know their nationality because they have told you so or it is in their care records. Ask them if they need to apply for settled status and whether they have done so.

It is in everyone’s interests to check whether the person has applied for settled status. It means they can access benefits (which in turn means they may be able to contribute towards the cost of their care) and they can access the NHS.

If they have not applied for settled status, and they are able to do it themselves, direct them to <https://www.gov.uk/settled-status-eu-citizens-families>

If they are not able to do it themselves (because they are not digitally competent) but they have the capacity to consent to someone else helping them to apply, either (if you are a care home manager) check whether anyone in their support network is willing to support them to do so and direct them to <https://www.gov.uk/settled-status-eu-citizens-families>

Or you may be able to direct them to one of the support organisations you can find when entering a postcode on this webpage: <https://www.gov.uk/help-eu-settlement-scheme>

If you are a contracted home care or Supported Living provider, contact the relevant Adult Social Care locality team to let them know the person will need support to apply. If they do not have the capacity to make the decision to apply, then the principles of MCA come into play and the applicant’s legal representative should make an application on their behalf. This means either an LPA or a Deputy appointed by the court of protection.

For full details please consult:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/953873/main-euss-guidance-v9.0ext.pdf

Annex 1. Who can apply?

If you’re an EU, EEA or Swiss citizen, you and your family can apply to the EU Settlement Scheme to continue living in the UK after 30 June 2021. You can also apply if you’re the family member of an eligible person of Northern Ireland.

There are 27 EU countries:

Austria, Belgium, Bulgaria, Croatia, Republic of Cyprus, Czech republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain and Sweden.

The EEA (The European Economic Area) includes EU countries and also Iceland, Liechtenstein and Norway. It allows them to be part of the EU's single market. Switzerland is not an EU or EEA member but is part of the single market. This means Swiss nationals have the same rights to live and work in the UK as other EEA nationals.

You must have started living in the UK by 31/12/2020.

Extra Care and Supported Living testing update: Rapid Lateral Flow Testing available to support visits in and out of settings



Department of Health & Social Care

This announcement is for Extra Care and Supported Living settings in England only.

The Department of Health and Social Care are pleased to announce that visits in and out of extra care and supported living settings can now be supported by rapid lateral flow testing. Both 'high risk' and 'wider' settings (as defined by the extra care and supported living testing risk-based criteria) will be able to order rapid lateral flow tests for this purpose. Testing is one tool that can be used to help mitigate the risks to identify asymptomatic visitors who are likely to be infectious before they visit so they are able to self-isolate immediately.

For full guidance on visits in and out, please follow the link below:

<https://www.gov.uk/government/publications/supported-living-services-during-coronavirus-covid-19/covid-19-guidance-for-supported-living>

For the on-site testing rapid lateral flow test guidance, please follow the link below:

<https://www.gov.uk/government/publications/coronavirus-covid-19-lateral-flow-testing-in-adult-social-care-settings>

To learn more, please join one of our webinars for full details about testing, including to support visiting. Our next webinar is on Wednesday 31st March at 11am, and a recording made today can also be watched on demand using the same link:

https://event.webcasts.com/starthere.jsp?ei=1380165&tp_key=dfecd07a9d

Key messages:

- Extra care and supported living settings will be able to access rapid Lateral Flow Tests (LFTs) to support safer visits from today
- Managers can place an order for tests using their Unique Organisation Number (UON) from the standard test kit ordering portal
- Each setting will receive four test kits per person living in the setting per week which can be used to support both visits in and visits out
- Setting managers may decide to use some of their additional rapid lateral flow testing allocation for testing of the person being supported to support safer visits at their discretion and with the consent of the person being supported

- All testing for visitors and people receiving visits should be conducted on site assisted by trained staff. Test kits must not be given out for self-testing.
- Testing and PPE should be viewed as a tool to mitigate risk, rather than a requirement for people to visit settings or receive visitors. Managers may wish to provide visitors with appropriate PPE where visiting is judged to be high-risk and the PPE can be tolerated by both the visitor and the person being visited
- In the event of an outbreak, managers should take advice from the local health protection team who will undertake a risk assessment and determine subsequent next steps. Your HPT might recommend some visiting restrictions, these should continue until such time as it is understood that the outbreak has been brought under control

Top tips to prepare for visitation:

- Communicate testing offering and expectations to the people living in these settings, families, and visitors
- Prepare staff for visitation, including appropriate training and reading the guidance for rapid lateral flow testing in adult social care settings
- Have devices available if visitors require assistance registering their result

Visitor testing is a tool to help mitigate the risks of visiting.

Testing is not a requirement for visiting and managers should not refuse visits to visitors who have not taken a test unless they are symptomatic or should be self-isolating for another reason (e.g. if they are a contact of someone who has tested positive). We recommend visitors participate in on the door testing to reduce risk of introduction of infection through asymptotically infected people, in particular for higher risk settings with shared living accommodation spaces which have more potential for outbreaks.

Registering LFT results.

All LFT results (negative, positive, or void) must be registered online and this can either be done by the visitor themselves or a staff member.

You should register all LFT results at: <https://www.gov.uk/report-covid19-result>
Registration should be done within 24hrs to help NHS Test and Trace understand results. This is crucial for us to understand the prevalence of coronavirus in care homes across the country and be able to support the care sector appropriately. It is therefore especially important that you have made the necessary arrangements to make sure that all LFT results are registered online.

Funding

We are aware that expanded rapid lateral flow testing may place additional resource burdens on extra care and supported living settings. The Department of Health and Social Care announced an additional £138.7 million grant to support rapid testing on 18th March, to succeed on top the £149 million Rapid Testing Fund announced in December. We will publish the full grant conditions shortly.

Webinars

Please join our next Extra Care and Supported Living webinars, our next webinar is on Wednesday 31st March at 11am, for further information on how rapid lateral flow testing can support visiting. You can sign up for the webinars here:

https://event.webcasts.com/starthere.jsp?ei=1380165&tp_key=dfecd07a9d

These webinars last 60 minutes and give detailed information about all aspects of extra care and supported living testing. The session will include a live Q&A with representatives from the national extra care and supported living testing team, who will be able to answer your questions and address any concerns in the session.

If you are not able to attend the webinars, please sign up and a recording of the session will be made available to you after the webinar has been completed.

Stephen Lawrence day

A legacy for change.

Thursday 22 April 2021
1pm – 2pm

On what will be the 28th anniversary of the murder of Stephen Lawrence in a racially motivated attack whilst waiting for a bus in Eltham, this event will explore the lasting legacy of his death. Marking Stephen Lawrence day is even more important at a time where we are still in the midst of the Covid-19 pandemic which has had a disproportionate impact on BAME communities, and the ongoing impact of Black Lives Matter.

There are a range of speakers from the community, cultural, policing and charity sectors.

(Programme) Guest speakers include:

- Michelle Bramble – Chair, North Kent Caribbean Network
- Gurminder Sandher – Artistic Director, Cohesion Plus
- Sunder Katwala – Director, British Future
- Tim Smith – Deputy Chief Constable, Kent Police
- Errole Francis – Artist Director, Culture
- Matthew Dunkley CBE – Corporate Director, Kent County Council

To learn more and register, please follow this link:

<https://www.cohesionplus.com/stephen-lawrence-day/>

Live Well Kent expansion into Medway

The mental health and wellbeing service, Live Well Kent (LWK) is expanding into Medway. LWK supports people aged 17+ with:-

- Housing support and guidance
- Managing money, including debt and benefits advice
- Improving relationships and social inclusion
- Lifelong learning, employment and accessing volunteering
- Brief advice and signposting to healthy lifestyle support
- Evidence based activities shown to improve health and wellbeing

Following the success of the model and the positive impact the LWK service has had in Kent, both Strategic Partners, Shaw Trust and Porchlight were approached by Kent and Medway Clinical Commissioning Group to look at expanding LWK into Medway for the first time. Following consultation with Medway stakeholders including residents, two online events were held in January to increase understanding about the help already on hand and what more could be offered.

Live Well Kent services in Medway will be led by the two Strategic Partners. The two charities will be appointing delivery partners to the Live Well Kent network through a tendering process. The service goes live in April 2021. More information regarding LWK can be found here: <https://livewellkent.org.uk/>

Providers who would like to talk to the Strategic Partners about becoming involved can reach them as follows: Info@livewellkent.org.uk

Provider Surveys – All Residential & Nursing Care Homes

KCC Commissioning are sending out emails to all care home providers shortly (this week). KCC Commissioning periodically send out these surveys to the care home market to better understand what each home is able to provide, both physically as a building (accessibility) and the staff team (training).

There is one survey for those homes focussing their services at Older People, and another for those focussed on Disability provision (learning disabilities, mental health, physical disabilities). You do not need to complete both, just the one most suited to your home.

Even if you have completed this survey in the past for your home, could you please take the 15-20 minutes to complete it again, as we haven't been sending the surveys out regularly due to the impact and workload for all of the pandemic.

The information will be used by the purchasing/placements teams to better understand each home and ensure that referrals are as appropriate as possible. Commissioning use the information to understand which homes have particular specialisms, or where there may be gaps in the market in a local area for a certain need.

None of this information is made public or shared outside of KCC. If you complete the survey using the link below, you don't have to complete it again when the email arrives, they are the same surveys.

Both surveys will close on 30/04/2021.

Older Persons Homes.

https://forms.office.com/Pages/ResponsePage.aspx?id=DaJTMjXH_kuotz5qs39fkleHjRG9b3ZltZLi18fz-gtUNkhCN1dNVkIFUFNSWVFUUYVTc2QURUUi4u

Disability Homes (LD, PD, MH).

https://forms.office.com/Pages/ResponsePage.aspx?id=DaJTMjXH_kuotz5qs39fkleHjRG9b3ZltZLi18fz-gtUOFpUTjY0RDBTQ0VBVDNRWUZYQTdPRVt5QS4u

Enhanced Health in Care Homes (EHCH) framework

The Enhanced Health in Care Homes (EHCH) framework is centred on the needs of individual residents, their families and care home staff as part of a whole-system, collaborative approach of care.

The EHCH model has three principal aims:

1. delivering high-quality personalised care within care homes
2. providing, wherever possible, for individuals who (temporarily or permanently), live in a care home access to the right care and the right health services in the place of their choosing
3. enabling effective use of resources by reducing unnecessary conveyances to hospitals, hospital admissions, and bed days whilst ensuring the best care for people living in care homes

Requirements for the delivery of EHCH by Primary Care Networks (PCNs) are detailed in the Network Contract Directed Enhanced Service (DES) for 2020/21 (table 1 provides the details of care provided).

Table 1	
Care element	Sub element
1. Enhanced Primary Care support	<ul style="list-style-type: none"> • Each care home aligned to a named PCN which leads a weekly multi-disciplinary 'home round' • Medicine reviews • Hydration and nutrition support • Oral health care • Access to out of hours/urgent care when needed
2. Multi-disciplinary team (MDT) support including coordinated health and social care	<ul style="list-style-type: none"> • Expert advice and care for those with the most complex needs • Continence promotion and management • Flu prevention and management • Wound care – leg and foot ulcers • Helping professionals, carers and individuals with needs navigate the health and care system
3. Falls prevention, Reablement and rehabilitation, including strength and balance	<ul style="list-style-type: none"> • Rehabilitation/reablement services • Falls, strength and balance • Developing community assets to support resilience and independence
4. High quality palliative and end of life care, mental health and dementia care	<ul style="list-style-type: none"> • Palliative and end of life care • Mental health care • Dementia care
5. Joined-up commissioning and collaboration between health and social care	<ul style="list-style-type: none"> • Co-production with providers and networked care homes • Shared contractual mechanisms to promote integration (including Continuing Healthcare) • Access to appropriate housing options
6. Workforce development	<ul style="list-style-type: none"> • Training and development for social care provider staff • Joint workforce planning across all sectors
7. Data, IT and technology	<ul style="list-style-type: none"> • Linked health and social care data sets • Access to the care record and secure email • Better use of technology in care homes

Within the EHCH model, care providers work in partnership with local GPs, PCNs, community healthcare providers, hospitals, social care, individuals and their families, and wider public services to deliver care in care homes. Services are 'wrapped around' the individual and their family, who are connected to and supported by their local community. Proactive, personalised care and support becomes the norm. All care homes should now know which practice or primary care network they are aligned to and they should have met the team that will be supporting them. The team might include a GP, nurse, pharmacist, co-ordinator and other professionals. The care homes should have a named person to contact.

For further information on the EHCH framework - <https://www.england.nhs.uk/wp-content/uploads/2020/03/the-framework-for-enhanced-health-in-care-homes-v2-0.pdf>

KiCA: free membership for all CQC registered Adult Social Care providers in Kent

Following recent funding received from Kent County Council, KiCA are able to offer free membership to ALL CQC registered Adult Social Care providers in Kent until July 2021.



They represent all areas of the sector, residential homecare, Learning Disabilities and Mental Health. KiCA are your voice for care in Kent.

Do not miss this opportunity to join your local Care Association. For further information, please visit: www.kica.care or contact: louise.faulkner@kica.care

KiCA look forward to continuing to support you and your organisation through these difficult and challenging times.