COVID19 Care Home Support > Implementation Status

Local Authority: North East Lincoinshire

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Total number of CQC registered care homes in your area: 52

Please submit local plans (covering letter and this template) to CareandReform2@communities.gov.uk by 29 May

Complete

		number of registe	red Care Homes in your local area, where the corresponding action or s	upport is in place
COVID19 Support Actions for Care Homes	*Number of Care Homes (Please see note above)	Would additional support be helpful to progress implementation further? (Yes/No) If Yes, please offer a brief description of the type of support that would be helpful		Please indicate any issues that you would like to highlight (optional)
us 1: Infection prevention and control measures 1. Ability to isolate residents within their own care homes 1)	51	No	Care homes are confident on this topic	This has been especially challenging for homes with dementi residents who have a tendency to wander. Not all homes are purpose built and do not have en-suite or in room hand washin of acilities.
Actions to restrict staff movement between care homes 2)	50	No	Care homes are confident on this topic	Homes appear to have taken appropriate measures to restri footfall inc staff movement e.g. re-locating staff so that inste of working across one or more homes they are dedicated to one location.
Paying staff full wages while isolating following a positive test	17	No	Receipt/ distribution of the infection control fund is likely to suffice	A no of homes are paying statutory sick pay. This is having an impact on some of the smaller homes
ion complete				
us 2: Testing				
2. Registration on the government's testing portal	33	No	Homes are generally clear on the testing process	One home has had initial difficulty accessing the portal (getti error messages)
2. Access to COVID 19 test kits for all residents and asymptomatic staff	16	No	Plans are in place to ensure effective commulcation on this topic (NB low rates of infection in NEL has resulted in some homes feeling that testing is less valuable)	More promotion is required as not all homes are yet accessi this. Most are clear on the National Guidance but this needs be supplemented with pending local guidance.
Testing of all residents discharged from hospital to care homes	42	No	Care homes are largely confident on this topic	There are occasional issues which are picked up via the CCG Quality Team and rapidly responded to
ion complete				
us 3: Personal Protective Equipment (PPE) and Clinical Equipment				
3. Access to sufficient PPE to meet needs 1)	51	No	After initial difficulties, access to PPE has improved	A small no of homes are indicating they are "amber" of the Capacity Tracker for individual PPE Items but are r within 72 hours of running out and all continue to procure through regular suppliers at present, supporte by CCG stocks
Access to medical equipment needed for Covid19 2)	43	No	Receipt/ distribution of the infection control fund is likely to contribute	The CCG identified what medical equipment care homes already have and is in the process of ordering further suppl
ion complete				
us 4: Workforce support				
Access to training in the use of PPE from clinical or Public Health teams 1)	48	No	Care homes are largely confident on this topic	Homes report that they have access to infection control nur- routinely and upon request. There are discussions over the phone for quick support or queries
Access to training on use of key medical equipment needed for COVID19	37	No		As part of intelligence gathering on equipment, training nee were also identified. Training is in the process of being accessed
Access to additional capacity including from locally coordinated returning Bealthcare professionals or volunteers	31	No	Plans are in place to coordinate increased clinical help and a new scheme is being trialled re volunteers	A majority of homes have repeatedly reported themselvs confident in their workforce capacity. Some homes have reported anxiety re the impact of track and trace, in terms of the number of staff who may be required to isolate
ion complete				
us 5: Clinical support				
5. Named Clinical Lead in place for support and guidance 1)	43	No	Named clinical leads are in place; communications are ongoing	Existing support to care homes provided alignment to adult social care and community teams; as part of this care homes have a professional point of contact
Access to mutual aid offer (primary and community health support)	51	No	Care homes are confident on this topic	Two homes have had an outbreak of COVID. However there was a wrap around approach to support those facilities with specialist input regarding end of life, IPC practice, use of PPI staff training, clinical input and testing. These facilities have now progressed through the isolation phase and are out the