

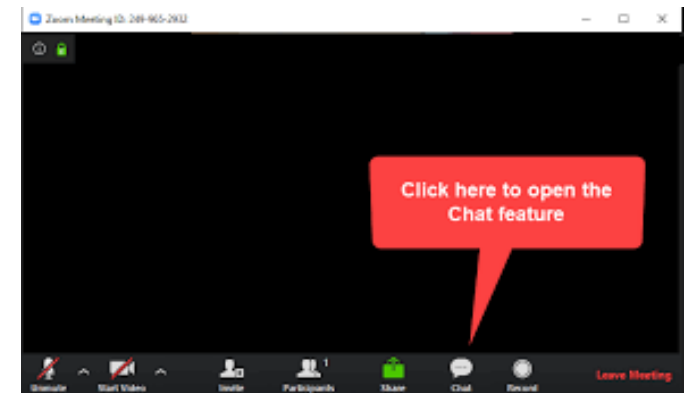
Please follow the instructions below

Please can you make sure you are on **mute** as you join the call



Write in the **chat room** your name, your care home and location

The care home support call will start promptly at **10.30** am





GSF Care Homes COVID -19 Support Call 9

**Monday 12th April 2021
10.30 -11.30 am**

Julie Armstrong Wilson & Ginny Allen,

Plan

1. Welcome and Introduction

2. Update –

- Covid-19 data
- One Year On
- COVID-19 in relation to sleep and burnout
- Vaccinations
- Long COVID
- Bereavement

3. Wellbeing

4. Next Support Call

Media Headlines

Vaccine confidence fears as under-30s in UK offered AstraZeneca alternative

Experts warn of impact after advice changes blood clot cases out of 20m vaccinations

- Jab fears may play into hands of anti-vaxx
- Coronavirus - latest UK updates

Covid wave intensifies in Europe

© 10 March



Fauci says new Covid-19 variants as the US is primed for a surge

There's a lot of debate about vaccine options, but would they work?

A year of trauma: More than 3,600 US deaths



On Tuesday a Czech patient arrived in Poland for treatment

The number of patients in intensive care has reached a new high in the Czech Republic, as several Central European countries struggle with a new wave of

Covid-19: India reports record surge in cases amid vaccine shortages

World wrap: New Zealand suspends travel from India, Italy plans for Covid-free islands

© about 7 hours ago | Updated: about 6 hours ago



A woman gets a dose of a Covid-19 vaccine in New Delhi, India. Some 11 million have received two doses in India as the country tries to build immunity to protect its population of nearly 1.4 billion people. File photograph: EPA

India has recorded its highest-ever number of daily Covid-19 cases as its fight to curtail a renewed wave of infections is beset by vaccine shortages in several states and cities, including Mumbai.

New coronavirus cases in India hit a daily record of 126,789 on Thursday, as prime minister Narendra Modi got his second vaccine dose and urged others to follow suit, saying "vaccination is among the few ways we have to defeat the virus".

518
SHARES

infection are asymptomatic
get AstraZeneca vaccine

Media Headlines

Bolsonaro refuses to address record daily

total of Covid de

President remains fiercely oppo

Under
insta

View

about 22 hours ago

Tom Hennigan in São Paulo



Canada's Ontario issues
order as COVID surges

Canada's largest province declares st
coronavirus infections and hospitalis



Ontario has seen a rapid rise in COVID-19 infections, spurred in part by new variants of the virus, as well as intensive care unit admissions [Chris Helgren/Reuters]

Coronavirus

●Live/ Coronavirus: Bangkok warns outbreak could take two months to control; India reports record new cases



'Think of others'
Elderly people in Zimbabwe dispel scepticism on Covid vaccine

European Union
Brussels urges unity over Oxford jab

New Zealand
Country suspends travel from India after jump in Covid-19 cases



On Wednesday, the country reported 940 new cases, taking the total number of positive cases to more than 186,000 since the start of the pandemic [Srowkat Shafi/ Al Jazeera]

out of the store de
Live/BPM MEDIA

mask becau
or not coveri

WHO- Global view

Globally, as of 4:03pm CET, 1 March 2021, there have been **113,820,168 confirmed cases** of COVID-19, including **2,527,891 deaths**, reported to WHO.

Global Situation

113,820,168

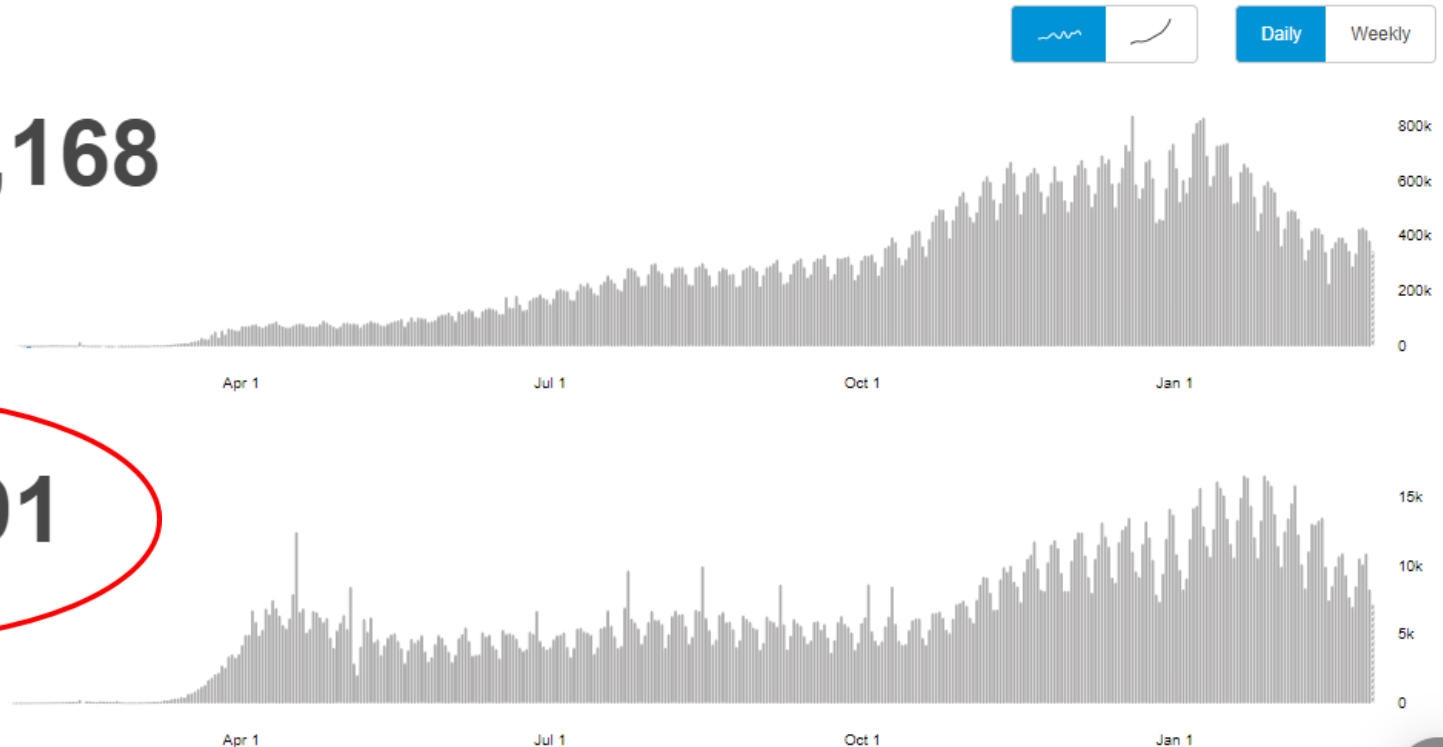
confirmed cases

2,527,891

deaths

Source: World Health Organization

Data may be incomplete for the current day or week.



WHO- Global view

Globally, as of 2:08pm CEST, 11 April 2021, there have been 134,957,021 confirmed cases of COVID-19, including 2,918,752 deaths, reported to WHO. As of 8 April 2021, a total of 669,248,795 vaccine doses have been administered.

Global Situation

134,957,021

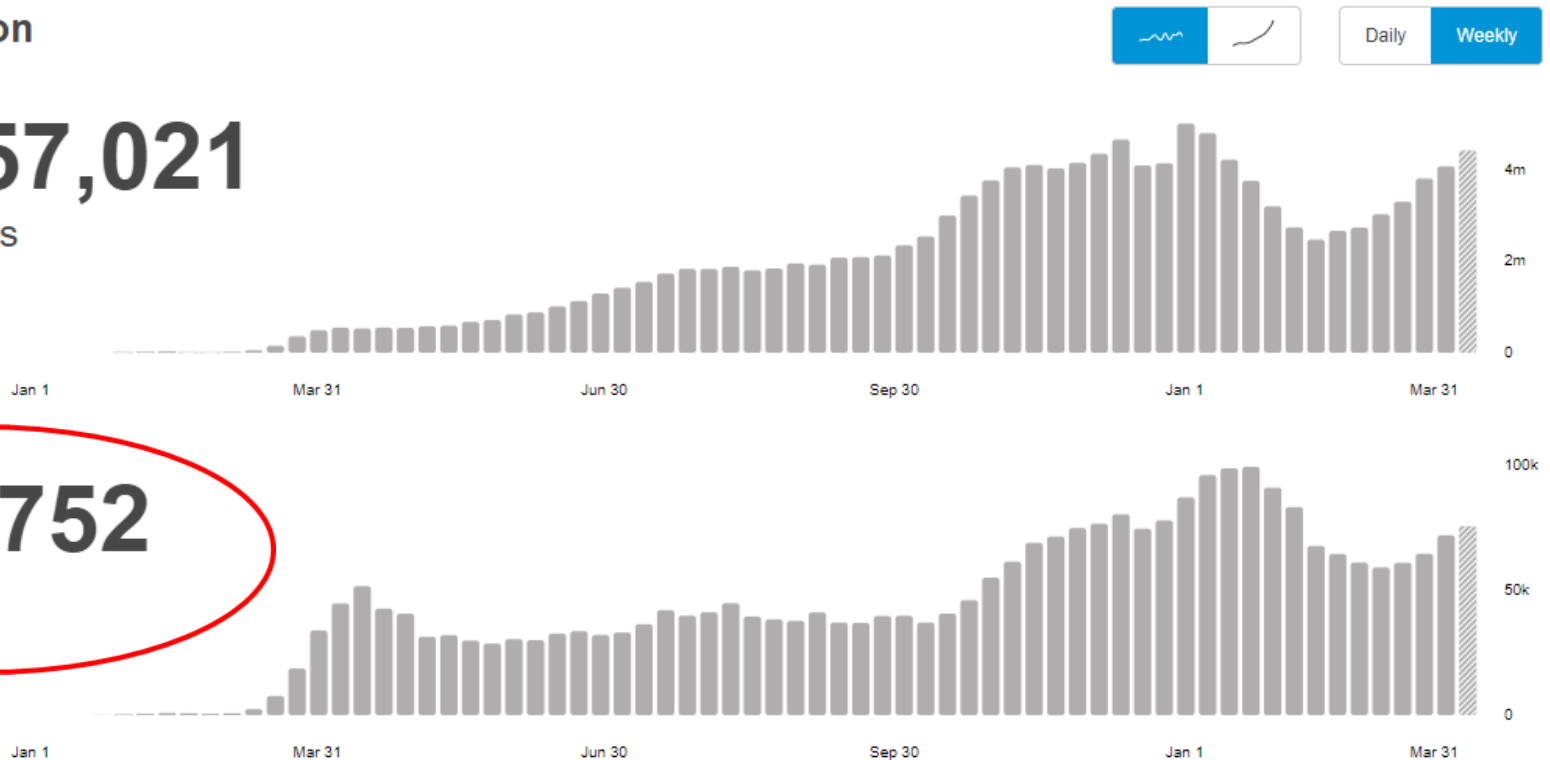
confirmed cases

2,918,752

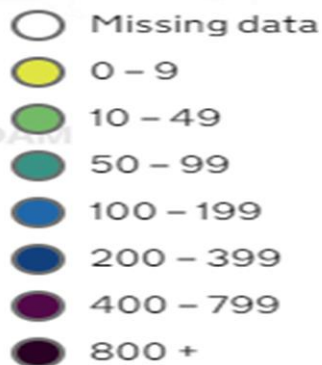
deaths

Source: World Health Organization

Data may be incomplete for the current day or week.



UTLA rate



Gateshead

Seven days to 24 February 2021

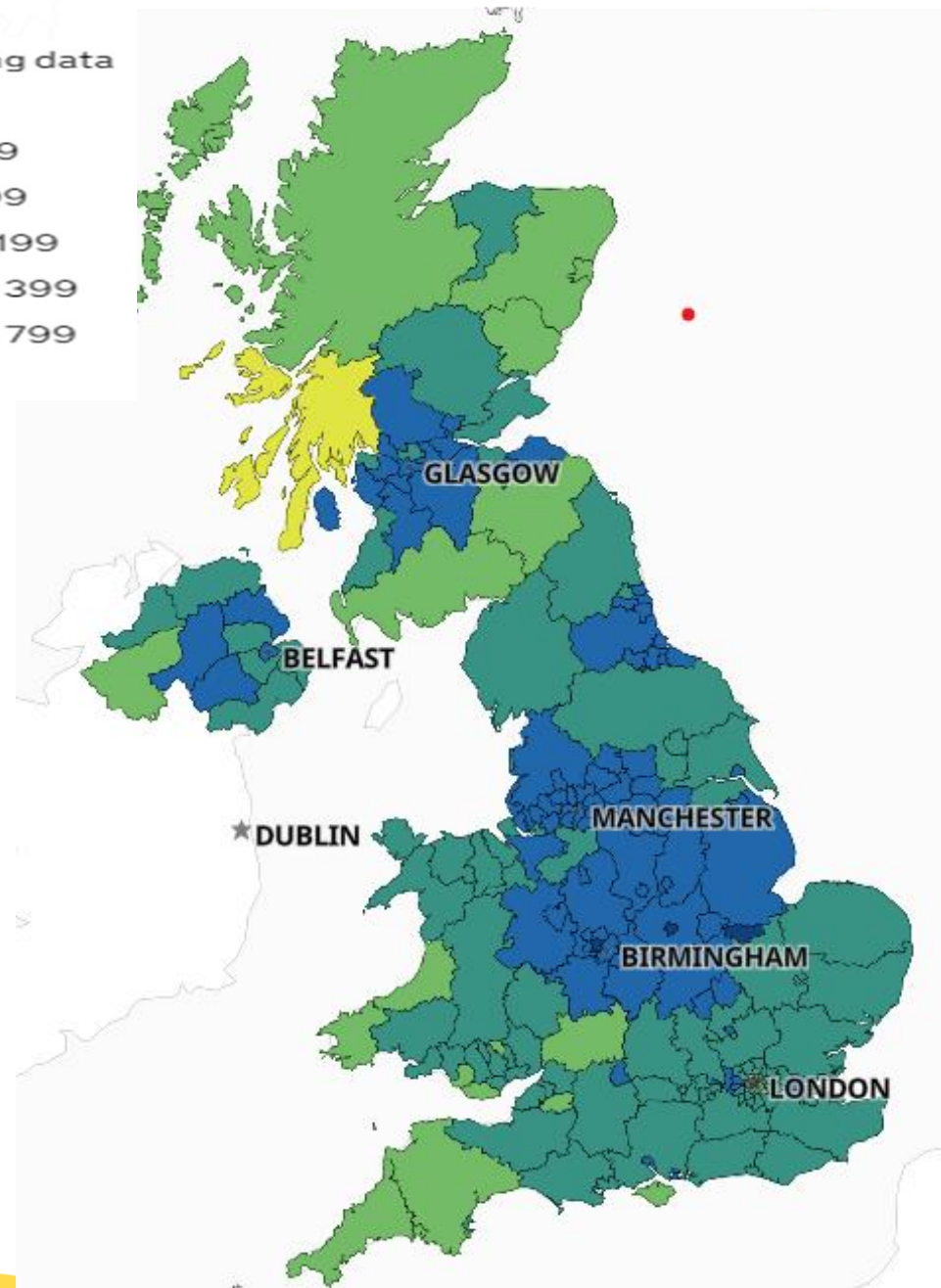
Total cases

204 ↓ -21 (-9.3%)

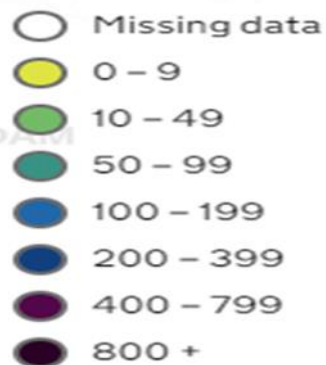
Rolling rate

101.0

Case rate compared to
the UK average



UTLA rate



Gateshead

Seven days to 06 April 2021

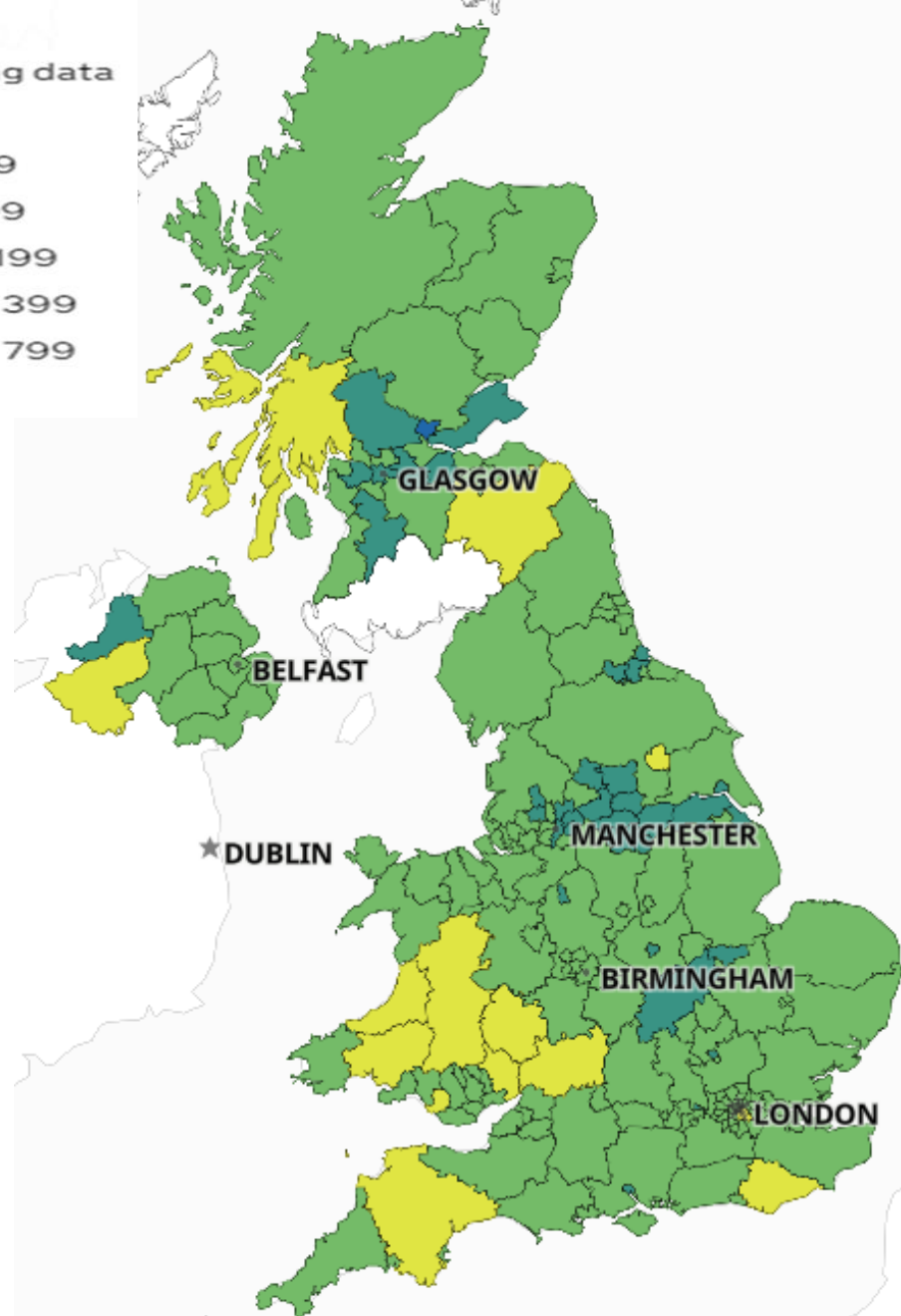
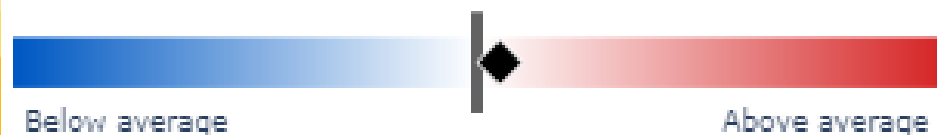
Total cases

50 ↓ -40 (-44.4%)

Rolling rate

24.7

Case rate compared to
the UK average



Healthcare Patients admitted

Latest data provided
on 23 February 2021

Daily

1,112

Last 7 days

8,460

↓ -2,406 (-22.1%)



All healthcare data

Healthcare Patients admitted

Latest data provided
on 6 April 2021

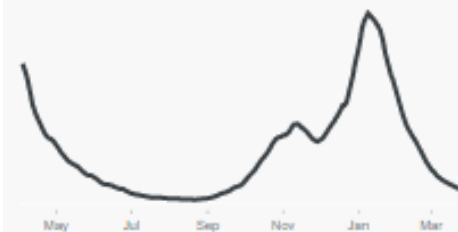
Daily

221

Last 7 days

1,606

↓ -428 (-21%)



All healthcare data

P.H.E. data from our last call/and today's date - deaths



People vaccinated

First dose total
32,121,353

Second dose total
7,466,540

Vaccinations given

Total
39,587,893

People who have received 1st dose vaccinations, by report date ☒ UK total ☐ By nation

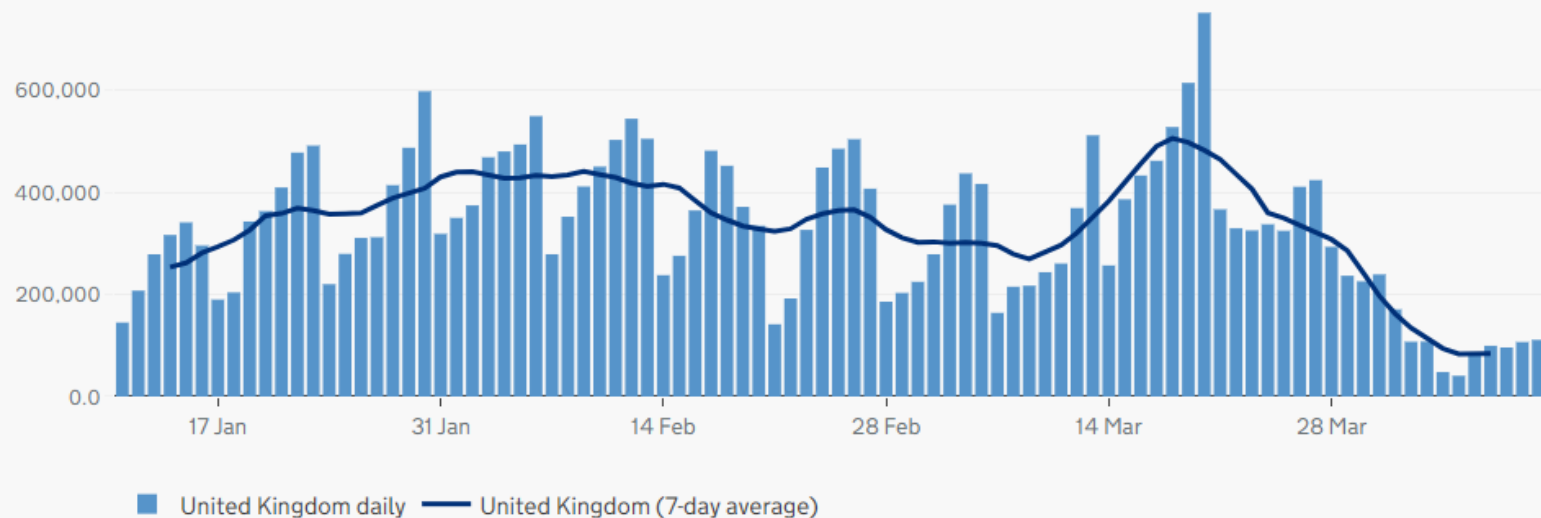
The number of people who have received a first dose COVID-19 vaccination, shown by date reported. Daily figures include all vaccines that were given up to and including the date shown, and that were entered on the relevant system at the time of extract.

Daily

Cumulative

Data

About



One Year on From the Start of a Pandemic

- In the 12 months since then, the UK, like the rest of the world, has experienced what public health experts had feared for decades
- 2020 began with the scientific and medical communities knowing almost nothing about the mysterious virus afflicting the Chinese city of Wuhan
- In-between we witnessed the daily toll of tragic deaths that rose from the first in Berkshire in early March last year.



One Year on From the Start of a Pandemic



- In the last 12 months we have seen health services and staff under unimaginable pressure and stress, learnt what it was like to live in lockdown, washed hands while singing happy birthday, clapped for carers, discovered the meaning of furlough, home schooled our children, bought masks, familiarized ourselves with support bubbles and learnt more about eye testing in Barnard Castle.
- The Health Foundation estimated that up to 1.5 million potential years of life have been lost, with those who died losing up to 10 years of life on average. Almost three quarters of those who died were aged over 75, with people in this age group losing an average 6.5 years of life.

One Year on From the Start of a Pandemic

- Dr Susan Hopkins, Public Health England's strategic response director for COVID-19, said: "This virus has left no one untouched and it has been the most challenging time both personally and professionally that many of us have ever faced."
- Chief Medical Adviser Professor Chris Whitty was asked if the virus could be eliminated. He told a Downing Street briefing: "I regret to say that I think the chances of eradicating this disease, which means getting rid of it absolutely everywhere, are as close to zero as makes no difference."



The lost colleagues



No official list of COVID-related health and care staff deaths but there have been at least 247 frontline health and care worker deaths, according to the PA news agency.

Families of those who died in care homes in the last year remembered the lives lost to Covid-19

- Over 40,000 care home residents in England and Wales have Covid-19 recorded on their death certificate since the pandemic began.
- Care homes in Wales have turned their care home grounds into a sea of yellow in honour of those who died of Covid-19.



COVID-19 illness in relation to sleep and burnout

- Front- line healthcare workers (HCWs) are at high risk of COVID-19 infection, caused by SARS- CoV-2
- Sleep habits and stress have been shown to increase risk of infectious diseases
- In this study, exposed HCWs from six countries, longer sleep duration at night was associated with lower odds of COVID-19.



High level of burnout was associated with longer duration and severity of COVID-19- like illness.

Predictors of UK healthcare worker burnout during the COVID-19 pandemic

Conclusion of the study found that :-

Independent predictors of burnout were being younger, redeployment, exposure to patients with COVID-19, being female, and a history of depression



The authors said: "With burnout currently present in the majority (79%) of survey participants, employers risk losing staff during subsequent waves if not supported adequately. As current health and wellbeing interventions do not appear to be optimised, employers should aim to revise the support offered through thorough evaluation with intended service users and target future interventions to staff groups most at risk."

Ferry et al., 2021

Staff Quitting in 'No-win Cycle'

- An NHS Confederation report warns of a risk that thousands of NHS staff will leave unless they are given the time and space to recover from the pandemic.
- Commenting, Dr Sarah Clarke, Royal College of Physicians (RCP) clinical vice president, said: "Scheduled time off when the worst of the pandemic is over will give staff the strength to face the next challenge of tackling the immense backlog of non-COVID-19 care and may stop the NHS losing staff at this critical time."
- The Care Quality Commission's board met, and Chief Executive Ian Trenholm wrote in a report: "As the pressures on health and social care systems begins to ease, it is incumbent upon us to consider our role in supporting providers in developing recovery plans, taking into account the needs of teams in recovering from the pandemic, and patients waiting for treatment. It is essential that any recovery plan includes both factors."



Vaccine hesitancy

- Urged to offer COVID-19 jabs again to people who have previously refused, after a study suggested vaccine hesitancy has declined sharply since December.
- Researchers found that finding that 25- to 35-year-olds were almost nine times more likely to think about refusing a COVID-19 jab compared to people aged over 75.
- The study found that older adults in England and Wales were less likely to have concerns about safety of the vaccine, and more likely to be concerned about contracting COVID-19 than people in younger age groups.



Under 30's offered alternative to AstraZeneca Vaccine

- MHRA state evidence was 'firming up' of a link between the vaccine and extremely rare clots.
- The benefits of vaccination with the AstraZeneca COVID-19 vaccine continue to outweigh the risks for the vast majority of people.
- 79 cases of clots and 19 deaths have been reported in the UK after more than 20m doses of the AstraZeneca vaccine.



COVID-19 Vaccine AstraZeneca

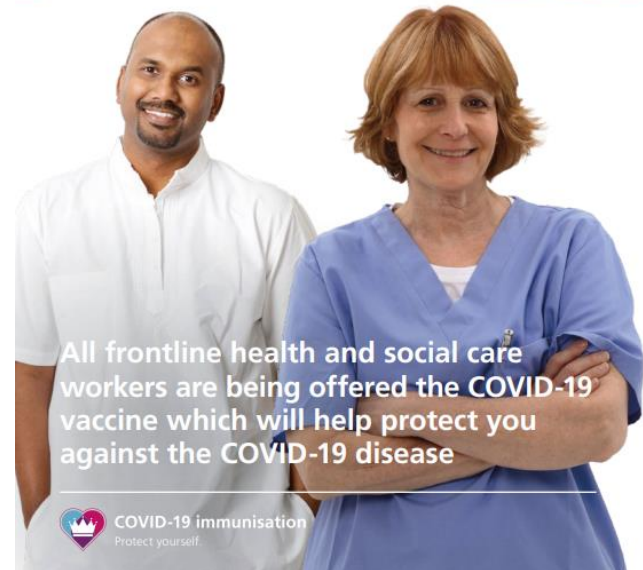
While the MHRA continues to investigate these cases, as a precautionary measure anyone that develops symptoms after vaccination is advised to seek prompt medical advice, such as:

- shortness of breath, chest or persistent abdominal pain, leg swelling
- blurred vision, confusion or seizures
- unexplained pin-prick rash or bruising beyond the injection site



Furthermore, anybody with new onset of severe or persistent headache that does not respond to simple painkillers starting four days or more after vaccination should speak to their doctor.

- All frontline social care workers are being offered the COVID-19 vaccine which will help protect you against the COVID-19 disease.
- This leaflet is for social care workers and includes information on the COVID-19 vaccine.
- Translated copies are available.



https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/951763/PHE_COVID-19_vaccination_guide_for_social_care_workers_English_v2.pdf

Resources to encourage and reassure staff about having the COVID-19 vaccine.




COVID-19 Vaccine Programme

Communications Toolkit to Support Vaccine Uptake in Adult Social Care

Last updated: 18/09/21

Please use this toolkit to encourage and reassure staff about having the COVID-19 vaccine. Additional information and resources can be also found on the [2020 COVID-19 and Public Health England website](https://docs.google.com/document/d/1EsrwYE3REE8-7glusFCbRmok4ZXkLV-B/edit?cldee=Z2lubnkuYWxsZW5AZ3NmY2VudHJlLnVr&recipientid=contact-3fa0309587f5e91180e0005056877cb9-a18b3a5304b84c6bbce0c71af9a10f86&esid=a4e83445-1592-eb11-b1ac-000d3a87020b). This toolkit is available regularly to new resources become available. All resources are free to use.

Full Q&A card answers for moving forward	Professor Jonathan van Dorem, Deputy Chief Medical Officer, answers some of the most frequently asked questions about the COVID-19 vaccine. Link This card also use this Q&A to create your own content about the COVID-19 vaccine. Link More to come! guidance are based on advice from our policy experts. Link	
Infographic on vaccine uptake among social care workers	Here's how COVID-19 affected social media graphs and figures on how many social care workers in all care settings in England have received their vaccine, with accompanying infographic. Link	
Full the vaccination uptake staff and social care workers	Infographic showing the vaccine uptake for adult social care workers in all social care workers to get vaccinated. Link	

<https://docs.google.com/document/d/1EsrwYE3REE8-7glusFCbRmok4ZXkLV-B/edit?cldee=Z2lubnkuYWxsZW5AZ3NmY2VudHJlLnVr&recipientid=contact-3fa0309587f5e91180e0005056877cb9-a18b3a5304b84c6bbce0c71af9a10f86&esid=a4e83445-1592-eb11-b1ac-000d3a87020b>

Vaccination alone unlikely to control COVID-19 in the UK

- Vaccinating all adults in the UK is unlikely to achieve herd immunity and fully contain the virus, according to researchers at University of Warwick
- Measures, such as test, trace, and isolate, good hand hygiene, mask-wearing in high-risk settings, and tracing from super-spreader events, may also be necessary for some time
- Predictions from the study highlight the risks associated with early or rapid relaxation of non-pharmaceutical interventions. Although novel vaccines against SARS-CoV-2 offer a potential exit strategy for the pandemic, success is highly contingent on the precise vaccine properties and population uptake, both of which need to be carefully monitored.



<https://www.thelancet.com/action/showPdf?pii=S1473-3099%2821%2900143-2>

Jabs cut Care Home Infections

- Study found infections in elderly care home residents dropped by 62% from 5 weeks after a COVID-19 vaccine first dose, and 56% after 4 weeks.
- Vaccination reduces the total number of people who get infected, and analysis of lab samples suggests that care home residents who are infected after having the vaccine may also be less likely to transmit the virus.



The study also found any residents in England who were infected after having the vaccine may also be less likely to transmit the virus.

To curb socialising after vaccination

- Evidence of a rise in infections shortly after vaccination
- Among over 80s who had received their first dose of a vaccine in the previous three weeks, 41% reported having met up with someone other than a household member, care worker, or member of their support bubble indoors since vaccination, thereby breaking lockdown regulations.
- A You Gov survey in December suggested that 29% of people would follow pandemic related rules and restrictions less strictly once they were vaccinated

Day, March 2021



Adherence to the test, trace and isolate system

- Evidence suggests that men and younger age groups are less adherent to covid-19 restrictions
- Financial hardship, multiple deprivation, lower socioeconomic status, and having a dependent child in the household shows lower adherence to full self-isolation, not requesting a test, and poorer symptom recognition.
- Results indicate that about half of people know the symptoms of covid-19, and that adherence to each stage of test, trace, and isolate is low but improving slowly.



The main symptoms of coronavirus



Symptoms of Coronavirus

a high temperature – this means you feel hot to touch on your chest or back (you do not need to measure your temperature)

- a new, continuous cough – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual)
- a loss or change to your sense of smell or taste – this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal

Most people with coronavirus have at least 1 of these symptoms.

What to do if you have symptoms

If you have any of the main symptoms of coronavirus:

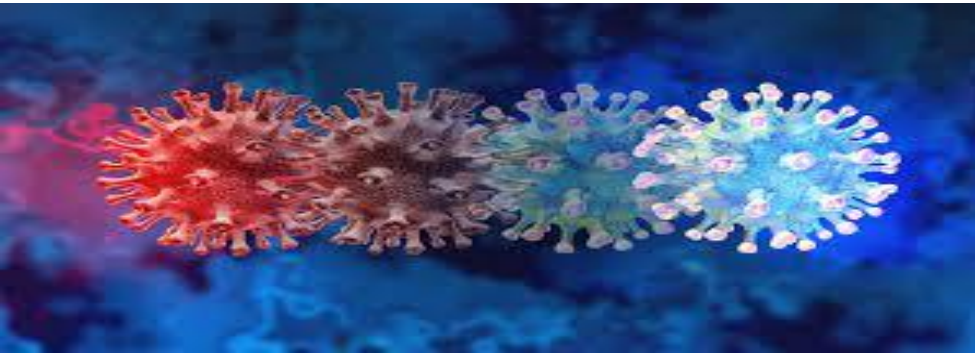


- Get a test to check if you have coronavirus as soon as possible.
- You and anyone you live with should stay at home and not have visitors until you get your test result – only leave your home to have a test.

Anyone in your support bubble should also stay at home if you have been in close contact with them since your symptoms started or during the 48 hours before they started.

Variants?

- A highly infectious variant of COVID-19 that has spread around the world since it was first discovered in Britain late last year is between 30% and 100% more deadly than previous dominant variants. Known as the B.1.1.7
- B.1.351 is the name of the variant found in South Africa
- P1 for the variant first detected in Japan but is circulating in Brazil
- India reported a novel variant of the coronavirus.
- A new coronavirus strain has been identified in Israel



Guidance

Discharge into care homes: designated settings

Updated 1 April 2021

Contents

1. Summary
2. Introduction
3. Locating and designating settings
4. Discharge arrangements
5. Clinical and social support and meeting care needs
6. Support for care providers and providers of designated settings
7. Information collection and

Please read this guidance with [national lockdown: stay at home guidance](#), which provides information about what you can and cannot do, now that England is in a new period of national lockdown.

Some of the rules on what you can and cannot do changed on 29 March. However, many restrictions remain in place. [Find out what you can and cannot do](#)

Contents

- Hospital discharge
- Designated settings
- 14 day isolation and preventing COVID-19 exposure
- 90 day timeframe and testing
- Severe immunosuppression
- COVID-19 symptoms in care home residents
- New variant
- Vaccinations
- Outbreaks in care homes
- Support for Care Homes



Discharge to Designated Settings / Care Homes –

Frequently Asked Questions

Issued on 25th February 2021

Long COVID

University of Leicester's [preprint](#) PHOSP-COVID study involving 1077 discharged COVID-19 patients found that at 6-month follow up:



- 29% felt fully recovered
- 20% had a new disability
- 19% experienced a health-related change in occupation

Factors associated with a failure to fully recover were:

- ☐ Female
- ☐ Middle-age
- ☐ White ethnicity
- ☐ Two or more comorbidities
- ☐ More severe acute illness



Long COVID & Multiorgan Dysfunction

COVID-19 patients discharged from hospital had increased rates of multiorgan dysfunction compared with the general population, according to a UCL study of 47,780 individuals published in The BMJ.

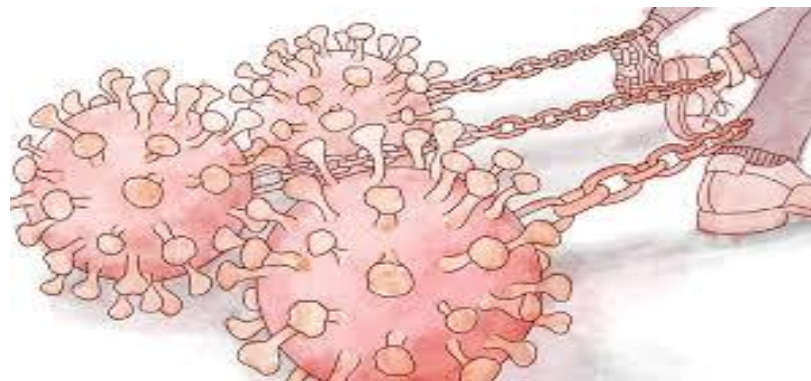
After 140-day follow-up:

29.4% were readmitted

12.3% died after discharge

Rates of respiratory disease, diabetes, and cardiovascular disease were significantly raised

Rates of multiorgan dysfunction were greater among patient's under-70 compared with over-70s, and higher in Ethnic Minority groups than in White patients



Bereaved relatives' end of life experiences during the COVID-19 pandemic

- Meeting the needs of relatives when a family member is dying can help facilitate better psychological adjustment in their grief.
- End of life experiences for families are likely to have been deleteriously impacted by the COVID-19 crisis.
- In the absence of direct physical contact, it was important for families to have a clear understanding of their family member's condition and declining health, stay connected with them in the final weeks/days of life and have the opportunity for a final contact before they died.



What is already known about the topic?



- The final weeks and days of life is a stressful period for the whole family.
- Families cope and adjust better in bereavement when they are involved in the end-of-life experience of a dying family member and are provided with detailed information from health and social care professionals about their relative's condition.

What this study found

- As a result of restricted visiting to hospital and care home settings during the pandemic, relatives relied on connecting virtually with their family in their final weeks of life, which could only happen when they were facilitated by health and social care professionals.
- Due to visiting restrictions imposed during the pandemic, relatives reported increased communication needs, such as more holistic information about their dying family member's wellbeing, and psychological support.



- Relatives highlighted their need for practical and emotional support when a family member was at end of life, however for some families this need often outweighed observing the lockdown restrictions that were in place as a result of COVID-19.
- As a result of restricted visiting to hospital and care home settings during the pandemic, relatives relied on connecting virtually with their family in their final weeks of life, which could only happen when they were facilitated by health and social care professionals.



The study made the following recommendations

- Prioritise connectedness between patients and relatives using video and telephone calls.
- Provide relatives with regular telephone updates about personal aspects of care.
- Offer advice and guidance on how to prepare children for the death of a loved one.
- Facilitate opportunities for relatives to say goodbye in person before death wherever possible.



Guidance

The use and regulation of pulse oximeters (information for healthcare professionals) – Published 26/03/2021

- All medical devices on the UK market must meet stringent requirements for safety and performance under the UK Medical Device Regulations 2002 (SI 2002 No 618, as amended). Pulse oximeters intended for clinical use are regulated as medical devices and should display a valid CE, CE UKNI or UKCA mark.

<https://www.gov.uk/guidance/the-use-and-regulation-of-pulse-oximeters-information-for-healthcare-professionals>



Factors which can affect the accuracy of pulse oximeters

- These devices work by shining a light into the skin and measuring how this is absorbed by the blood to estimate how much oxygen is present.

Factors that can alter the result produced include:

- it is possible that patients with lighter skin may have small differences in the result reported when compared to those with darker skin.
- low perfusion
- movement
- nail polish
- henna dye
- tattoos
- probe mispositioning
- ambient lighting hitting the sensor



Beat COVID, but keep the masks?

- Many Japanese citizens wear masks in public. They usually wear a mask when they are in a shared space such as trains, buses, or shops. They wear them when they aren't feeling well and want to prevent others from catching their sickness...
- The Japanese 'office for pandemic influenza and new infectious diseases preparedness and response' – 'Masking, washing hands, and avoiding crowds during the epidemic are required'
- Japan has the lowest rates of SARS-CoV-2 infections and deaths relative to most of the world.
- So, in global regions where community COVID lurks and during upper respiratory infection season, should we always "mask up."



https://www.medscape.com/viewarticle/948537?src=WNL_mdpls_210406_mscpedit_fmed&uac=401495PJ&spon=34&implID=3295788&faf=1

Coronavirus and work

On top of common difficult feelings about going into work, being in health/social care or the emergency services may pose further difficulties. For example, you may have to:



- **Make lots of tough decisions.** This could be about what or who to prioritise in your work, which can be difficult when you already feel stressed or tired.
- **Do extra, unfamiliar tasks.** These might not have been part of your normal work before coronavirus, which can feel hard.
- **Work in a completely new job or role.** This can feel overwhelming when you weren't expecting to do so.
- **Enforce coronavirus control measures.** If you're in the police, you might feel stressed by working with the public.

Coronavirus and work



Many of us are worried about ourselves and those close to us – the job involves caring for people who are very unwell – this includes providing end of life care.

Working in this environment can be distressing or traumatic and you may feel:-

- **Sad or depressed.** You might feel this way about what has happened, or what's currently happening.
- **Shocked and numb.** This may happen as your mind tries to protect you from pain or feeling overwhelmed.

Coronavirus and work

- **Panic and confusion.** This might be caused by sudden changes and news.
- **Overwhelmed.** You might be starting to wonder why you're going through this.
- **Worried.** You might worry about how you will cope with your work and your own wellbeing.
- **Anger, hostility or frustration.** You might be looking to blame something for what's happening, to help make sense of it.



Coronavirus and work

It may feel hard to take care of your physical health if you're feeling busy or stressed by work. But looking after your physical health can have a big effect on your mental health

Small changes you can try to improve your overall wellbeing:-



- Eat regularly
- Stay hydrated
- Get active indoors and outdoors
- Think about your sleep

Coronavirus and work

Getting support

If you're struggling with your mental health, it's ok to ask for help. There is often support available inside and outside of work.



- Support from your work
- Helplines or Listening services
- Support for trauma and Bereavement

<https://www.mind.org.uk/workplace/coronavirus-and-work/>

Coronavirus and work

Support for Health and Social Care Workers

- [The Care Workforce COVID-19 app](#) offers practical information, plus health and wellbeing support. It was created by the Department of Health and Social Care.
- [The Queen's Nursing Institute listening service](#) provides emotional support to registered nurses working in the community.
- [Open Change](#) offers visual resources about coronavirus for health and social care workers. It covers stress, resilience, hard conversations and care homes.
- [King's Health Partners](#) offer staff health and wellbeing resources for coronavirus.

Active April 2021

MONDAY



5 Eat healthy and natural food today and drink lots of water

TUESDAY



6 Turn a regular activity into a playful game today

WEDNESDAY



7 Do a body-scan meditation and really notice how your body feels

THURSDAY

1 Commit to being more active this month, starting today

8 Get natural light early in the day. Dim the lights in the evening

FRIDAY

2 Listen to your body and be grateful for what it can do

9 Give your body a boost by laughing or making someone laugh

SATURDAY

3 Spend as much time as possible outdoors today

10 Turn your housework or chores into a fun form of exercise

SUNDAY

4 Have a day free from TV or screens and get moving instead

11 Be active outside. Dig up weeds or plant some seeds

18 Make time to run, swim, dance, cycle or stretch today

25 Get active in nature. Feed the birds or go wildlife-spotting

12 Set yourself an exercise goal or sign up to an activity challenge

13 Move as much as possible, even if you're stuck inside

14 Make sleep a priority and go to bed in good time

15 Relax your body & mind with yoga, tai chi or meditation

16 Get active by singing today (even if you think you can't sing!)

17 Go exploring around your local area and notice new things

19 Have a 'no screens' night and take time to recharge yourself

20 Spend less time sitting today. Get up and move more often

21 Focus on 'eating a rainbow' of multi-coloured vegetables today

22 Regularly pause to stretch and breathe during the day

23 Enjoy moving to your favourite music. Really go for it

24 Go out and do an errand for a loved one or neighbour

26 Try a new online exercise, activity or dance class

27 Take an extra break in your day and walk outside for 15 minutes

28 Find a fun exercise to do while waiting for the kettle to boil

29 Meet a friend outside for a walk and a chat

30 Become an activist for a cause you really believe in



Crisis grants, emergency grants and free mental health support available from the Care Workers Charity

The Care Workers' Charity launched mental health support for people working in social care in February 2021. If you or members of your care team are struggling, they may be able to offer up to 10 hours of counselling with a qualified therapist. Application is quick and easy via the Care Workers Charity website.



https://www.thecareworkerscharity.org.uk/mental-health-support-fund/?_cldee=Z2lubnkuYWxsZW5AZ3NmY2VudHJILmNvLnVr&recipientid=contact-3fa0309587f5e91180e0005056877cb9-a18b3a5304b84c6bbce0c71af9a10f86&esid=a4e83445-1592-eb11-b1ac-000d3a87020b

COVID-19 Emergency Grant

The COVID-19 Emergency Grant is designed to support social care workers through the impact of the pandemic. If you or members of your care team are struggling as a result of lost income, illness, funeral or childcare costs related to COVID-19 - please apply via the Care Workers Charity website.

https://www.thecareworkerscharity.org.uk/covid-19-emergency-fund/?_cldee=Z2lubnkuYWxsZW5AZ3NmY2VudHJILmNvLnVr&recipientid=contact-3fa0309587f5e91180e0005056877cb9-a18b3a5304b84c6bbce0c71af9a10f86&esid=a4e83445-1592-eb11-b1ac-000d3a87020b



Crisis Grant

The Crisis Grant Fund is open to those employed in the UK social care sector in a role that is involved in or supports the provision of adult, elderly or disability care. Applicants must have experienced one of their qualifying circumstances in the past year that has caused significant financial impact. Find out more on their website.

https://www.thecareworkerscharity.org.uk/information-and-tools/apply-for-a-grant/?_cldee=Z2lubnkuYWxsZW5AZ3NmY2VudHJlLnVr&recipientid=contact-3fa0309587f5e91180e0005056877cb9-a18b3a5304b84c6bbce0c71af9a10f86&esid=a4e83445-1592-eb11-b1ac-000d3a87020b



the
care
workers'
charity



Free PPE extended

The Government is extending the provision of free PPE to health and social care providers until the end of March 2022. In order to protect the health and wellbeing of health and social care workers, as well as their patients and clients, the continued provision will ensure frontline workers can access rigorously tested and high-quality PPE.



Project ECHO

starting May 2021

Inviting all accredited GSF homes to
take part – providing ongoing
learning and support



Project ECHO Principles

Aim: Enhance decision making
by collaborative problem
solving



How does ECHO differ from a webinar or telemedicine?

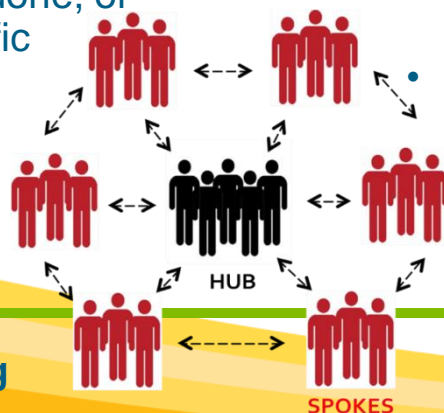
Webinar

- Online meeting/ presentation
- **Unidirectional** flow of information
- Single expert providing opinion
- Predetermined curriculum & schedule **set by lead**
- Usually one-and-done, or time-limited/specific

VS

ECHO

- A movement with an ethos & methodology
- Multidirectional flow of knowledge:
 - encourages **learning loops** where *everyone is a teacher, everyone is a learner*
- Based on **real-time experiences**
- Curriculum, schedule & frequency determined **guided by learners**
- Builds a '**Community of Practice**' and a safe space to learn and share



Any questions?

Next GSF Support Call

- Date: **MONDAY 24th May 2021**
- Do let colleagues and other non GSF homes know they are welcome to join the support calls
- Resources and power points will be put on the website following the Support Call

Thank you

Together we can make a difference !



Take care and be safe

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