

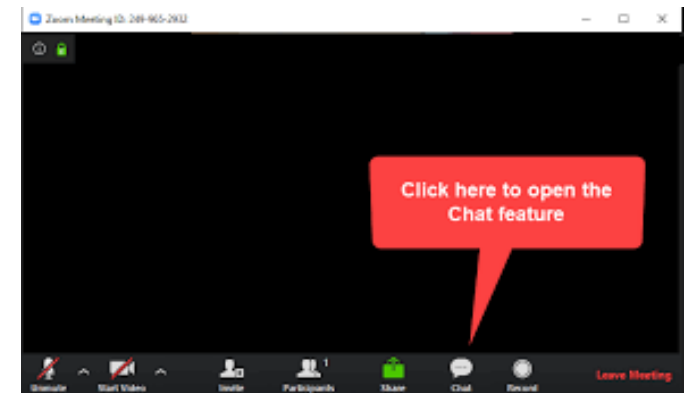
# Please follow the instructions below

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 7**

Wednesday 2<sup>ND</sup> December 2020  
10.30 -11.30 am

Julie Armstrong Wilson & Ginny Allen,

# Plan

## 1. Welcome and Introduction

## 2. Update –

- Covid-19 data
- Transmission
- Management of Covid-19
- Vaccinations
- Impact on care workers

## 3. Wellbeing

## 4. Next Support Call

# Media Headlines



Getty Images

## Covid: Family to visit care homes at Christmas after negative test

2 hours ago | UK

Relatives of people living in care homes in England will be able to visit over Christmas if they test negative for Covid-19, the government has said.



## New Covid tier system comes into force in England

4 hours ago | UK



Coronavirus



UK



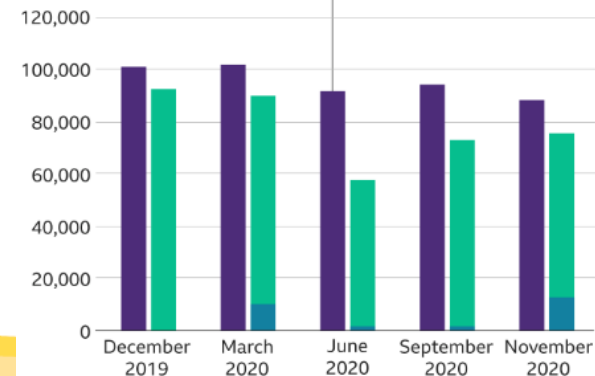
Getty Images

## Covid: Does the NHS really need protecting?

### How full are hospitals in England?

■ Total beds available ■ Beds occupied ■ Covid patients

Bed numbers reduced to limit spread of coronavirus infection



Source: NHS England

BBC

# Media Headlines



## Covid Pfizer vaccine approved for use next week in UK

By Michelle Roberts

Health editor, BBC News online

58 mins ago | Health

**The UK has become the first country in the world to approve the Pfizer/BioNTech coronavirus**

### 1. Vaccine approved and ready for roll-out

A hugely positive bit of news to wake up to this morning. **The UK has become the first country in the world to approve a coronavirus vaccine for widespread use.** The government says the Pfizer/BioNTech jab will start being made available across the UK from next week. The UK has already ordered 40m doses - enough to vaccinate 20m people, with two shots each. About 10m doses should be available soon. Experts have drawn up a provisional priority list, targeting people at highest risk. Top are care home residents and staff, followed by people over 80 and other health and social care workers.

# WHO- Global view 27<sup>th</sup> October 2020

## WHO Coronavirus Disease (COVID-19) Dashboard

Data last updated: 2020/10/27, 3:11pm CET

[Back to top](#)

Globally, as of 3:11pm CET, 27 October 2020, there have been 43,341,451 confirmed cases of COVID-19, including 1,157,509 deaths, reported to WHO.

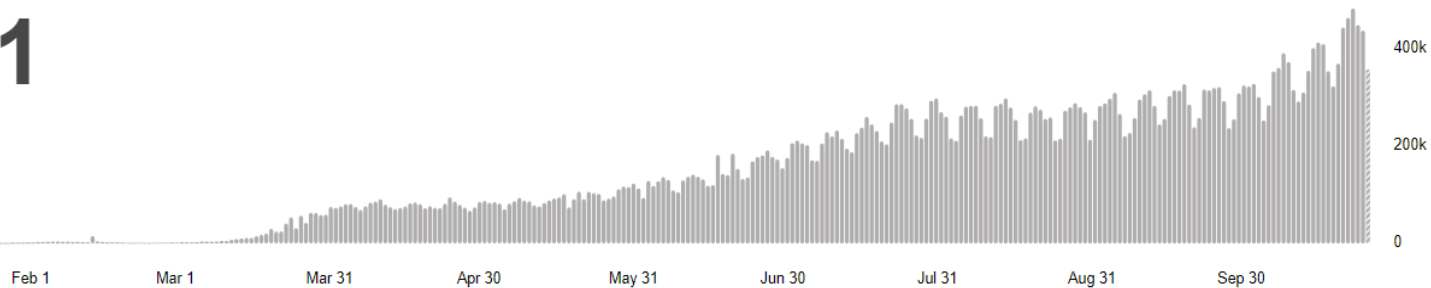
### Global Situation



Daily Weekly

# 43,341,451

confirmed cases



# 1,157,509

deaths



Source: World Health Organization



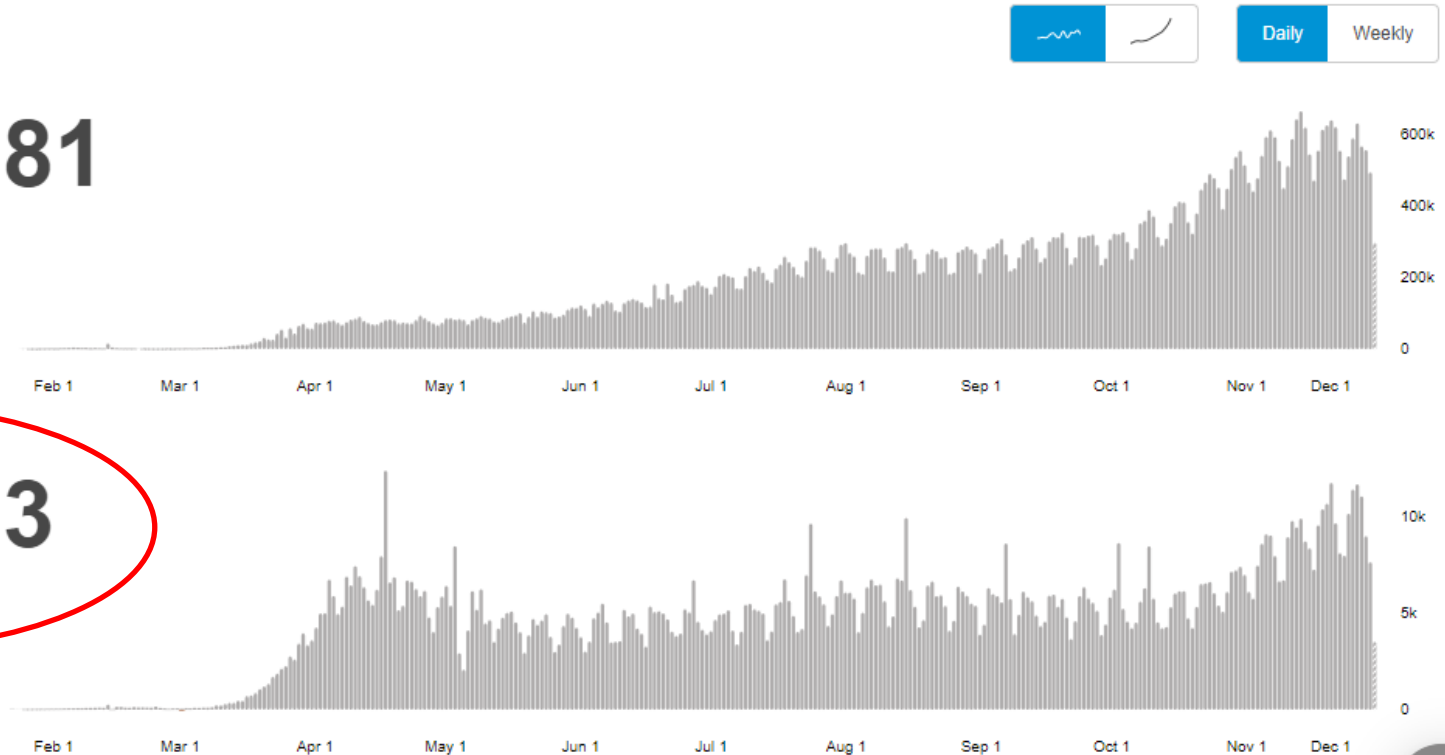
# WHO- Global view 1<sup>st</sup> December 2020

Globally, as of 11:17am CET, 1 December 2020, there have been **62,662,181 confirmed cases** of COVID-19, including **1,460,223 deaths**, reported to WHO.

## Global Situation

**62,662,181**  
confirmed cases

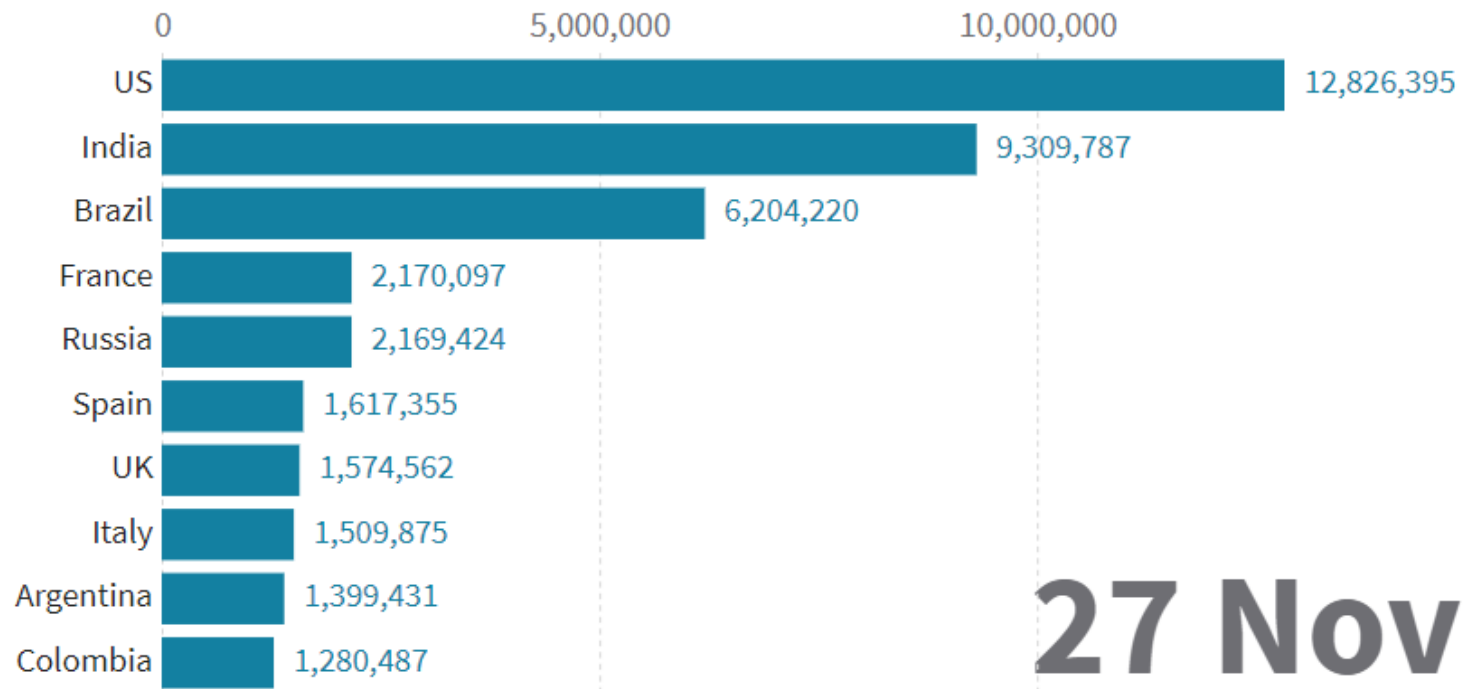
**1,460,223**  
deaths



Source: World Health Organization

Data may be incomplete for the current day or week.

## How confirmed cases of coronavirus have spread



27 Nov



Source: Johns Hopkins University, European Centre for Disease Prevention & Control

BBC



POSTCODE

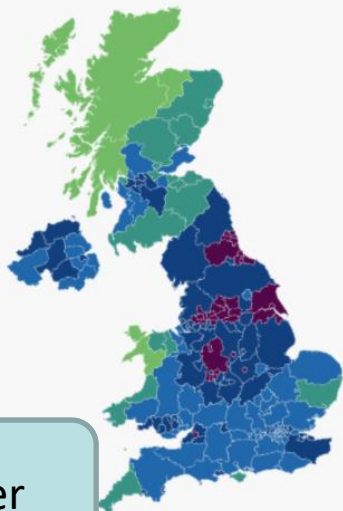


## Explore the UK interactive map

Browse cases by week.

See how the pandemic is spreading across the UK.

View map



12<sup>th</sup> November

### Gateshead

Seven days to 05 November 2020

Total cases

**852** ↑ 124 (17.0%)

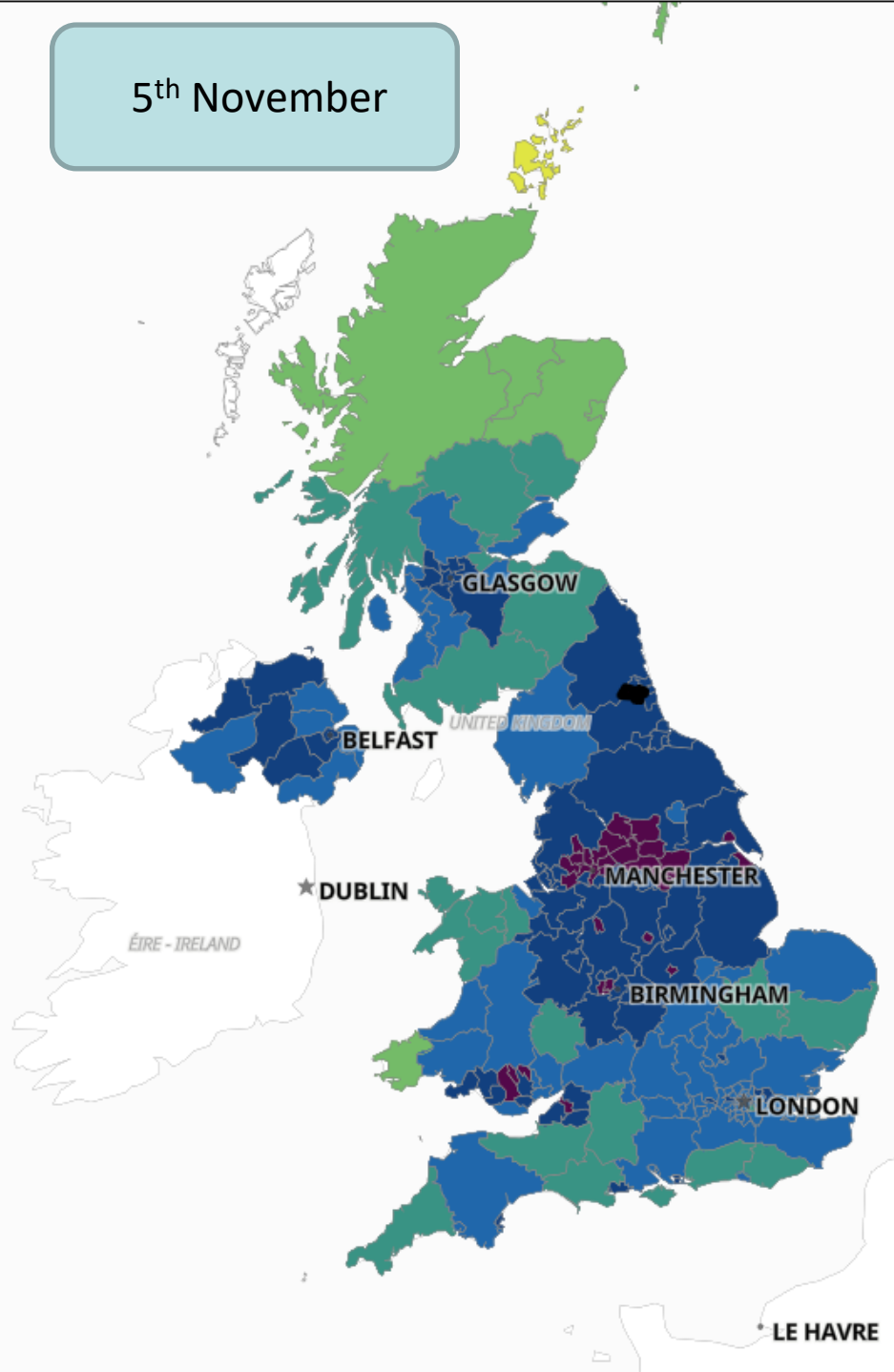
Rolling rate

**421.7**

Case rate compared to the UK average



5<sup>th</sup> November



26<sup>th</sup> November

## Gateshead

Seven days to 26 November 2020

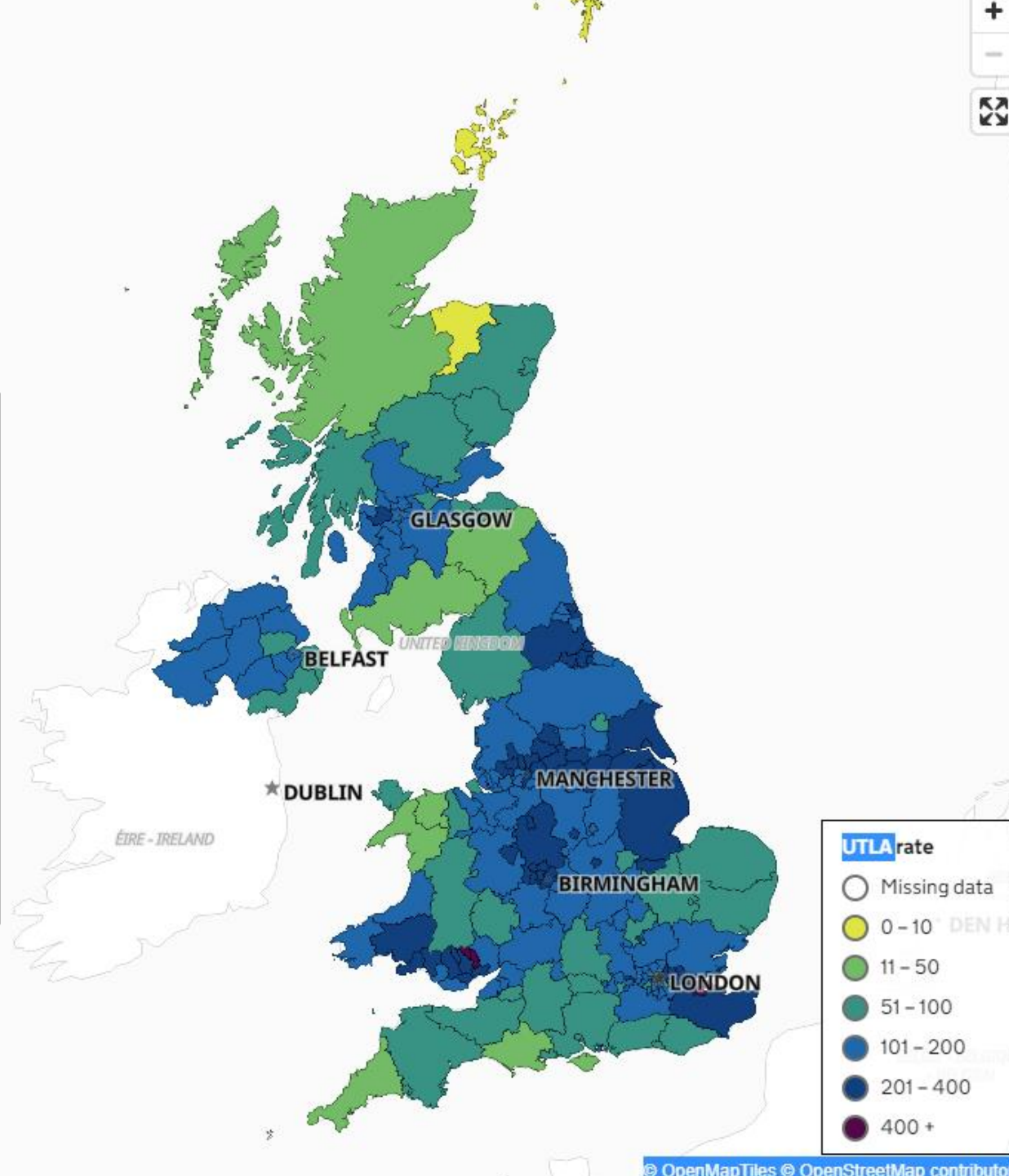
Total cases

**378** ↓ -240 (-38.8%)

Rolling rate

**187.1**

Case rate compared to  
the UK average



# PHE data October 14<sup>th</sup> and 27<sup>th</sup> October – confirmed cases of admissions into hospital

## Healthcare

### Patients admitted

Latest data provided on 10 October

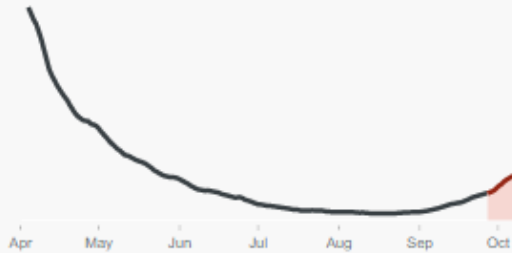
Daily

680

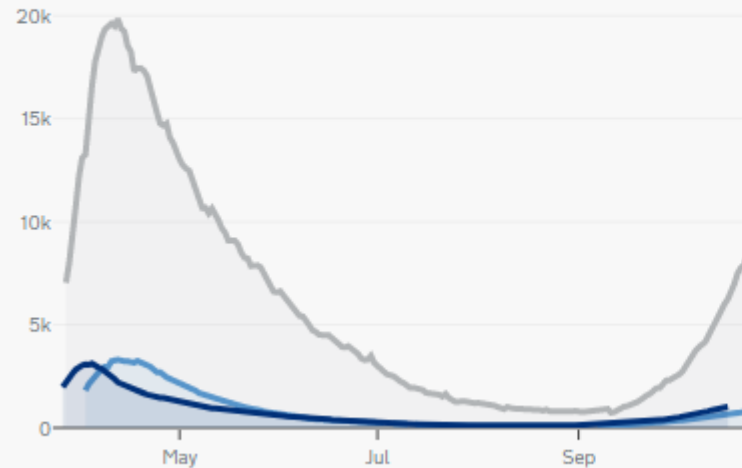
Last 7 days

4,576

↑ 1,414 (44.7%)



## Healthcare



Patients in hospital

9,199

Patients in ventilator beds

852

Patients admitted

Daily

1,152

Total

159,551

## Healthcare

### Patients admitted

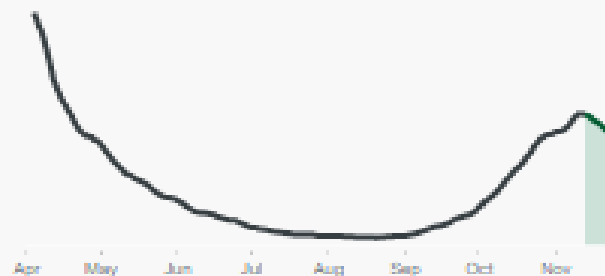
Latest data provided  
on 26 November 2020

Daily  
**1,369**

Last 7 days  
**10,415**

↓ **-1,361 (-11.6%)**

▶ Rate per 100k resident  
population: **15.6**



All healthcare data

## Testing

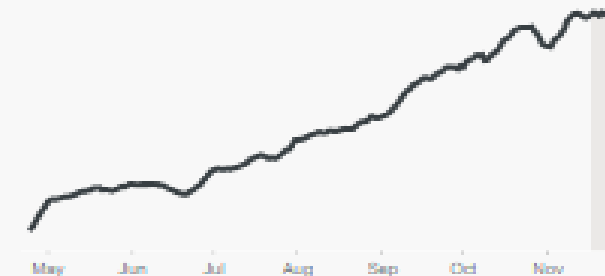
### Virus tests conducted

Latest data provided  
on 30 November 2020

Daily  
**214,835**

Last 7 days  
**2,131,087**

↓ **-164,478 (-7.2%)**



All testing data

# Deaths within 28 days of a positive test

## 14<sup>th</sup> October and the 27<sup>th</sup> October

Deaths

### Deaths within 28 days of positive test

Latest data provided on 14 October

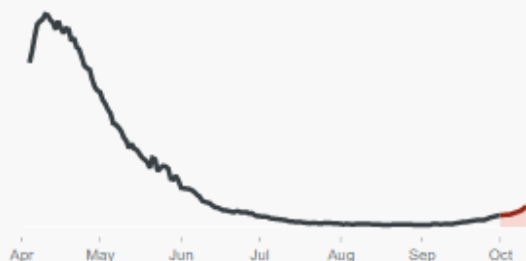
Daily

137

Last 7 days

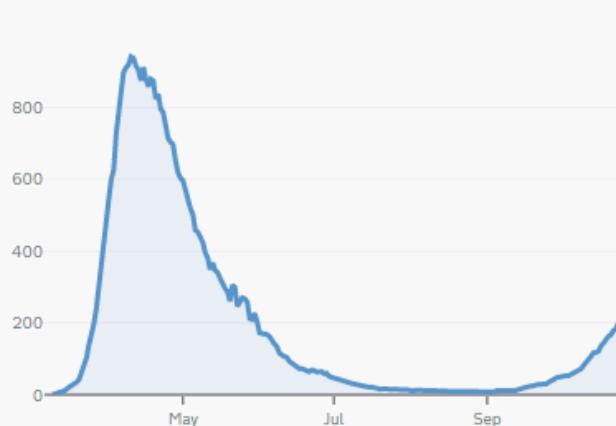
640

↑ 268 (72.0%)



### Deaths

[More on deaths](#)



### Deaths within 28 days of positive test

Daily

367

Total

45,365

### Deaths with COVID-19 on the death certificate

Total

58,925

## P.H.E. Data

### Cases

#### People tested positive

Latest data provided  
on 1 December 2020

Daily

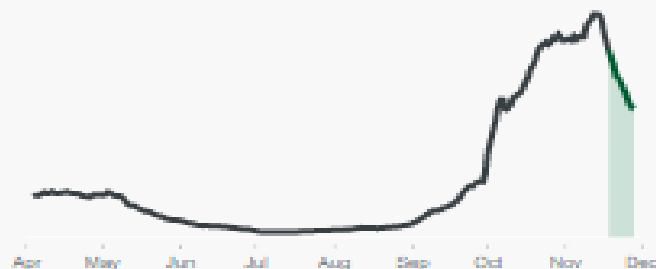
**13,430**

Last 7 days

**105,576**

↓ **-22,486** (-17.6%)

► Rate per 100k resident  
population: **160.2**



All cases data

### Deaths

#### Deaths within 28 days of positive test

Latest data provided  
on 1 December 2020

Daily

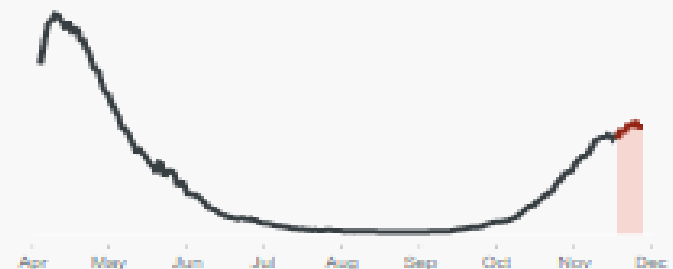
**603**

Last 7 days

**3,217**

↑ **123** (4%)

► Rate per 100k resident  
population: **4.4**



All deaths data



## Deaths registered by place of occurrence - ONS data

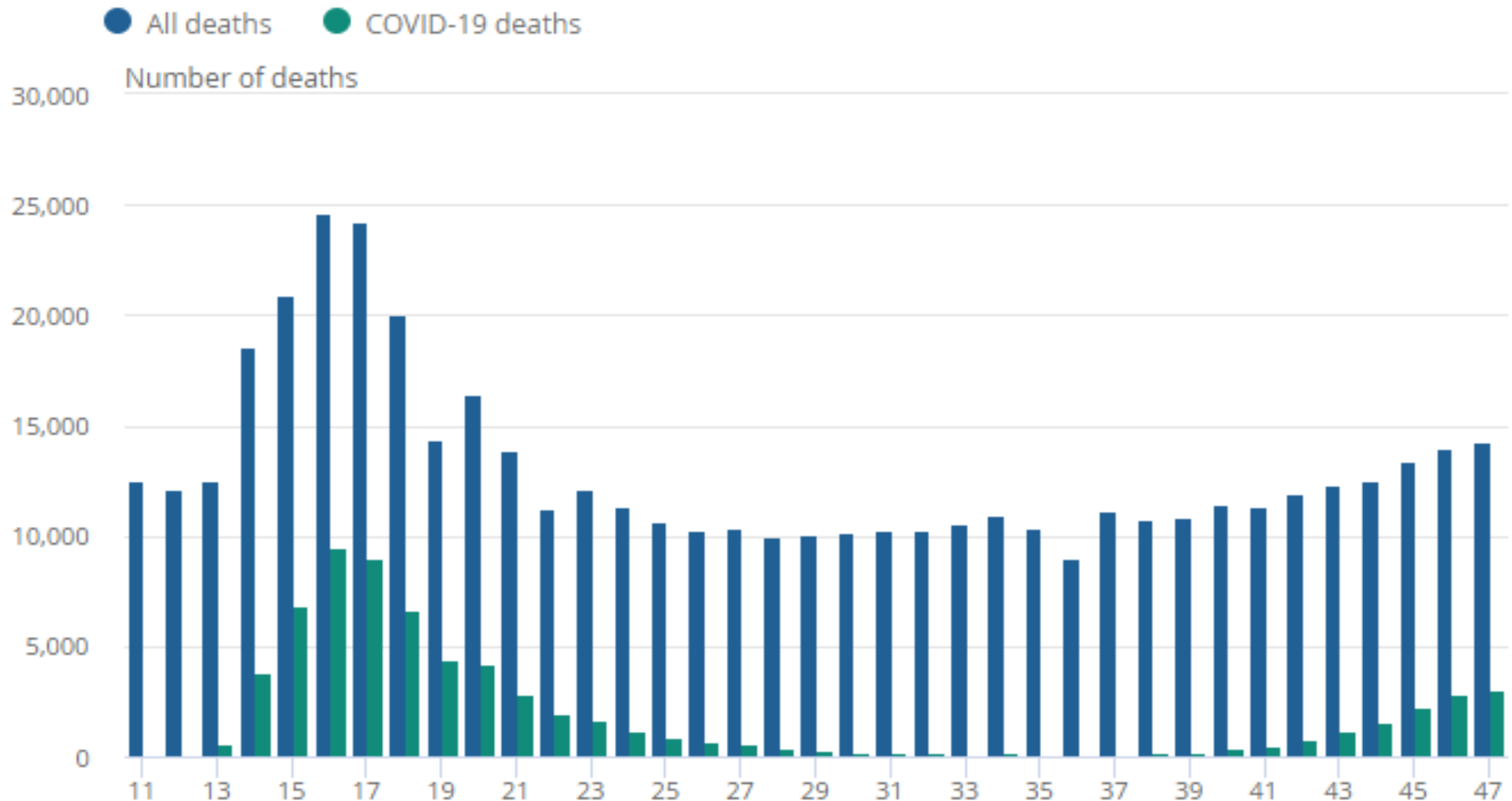
- The year-to-date analysis shows that, of deaths involving the coronavirus (COVID-19) up to Week 47 (week ending **20 November 2020**)
- 65.9% (42,110 deaths) occurred in hospital
- **with the remainder occurring in care homes (17,319 deaths)**
- private homes (3,072 deaths)
- hospices (870 deaths)
- Other communal establishments (251 deaths)
- elsewhere (230 deaths)

Between Weeks 46 and 47, the number of deaths involving COVID-19 increased in

- hospitals (146 deaths higher)
- **care homes (42 deaths higher)**
- private homes (27 deaths higher)
- Deaths involving COVID-19 in hospitals as a proportion of all deaths in hospitals increased to 35.5% in Week 47 – the highest since Week 19 (week ending 8 May 2020)
- **Deaths involving COVID-19 in care homes as a proportion of all deaths in care homes increased to 18.9% in Week 47, the highest since Week 23 (week ending 5 June 2020)**

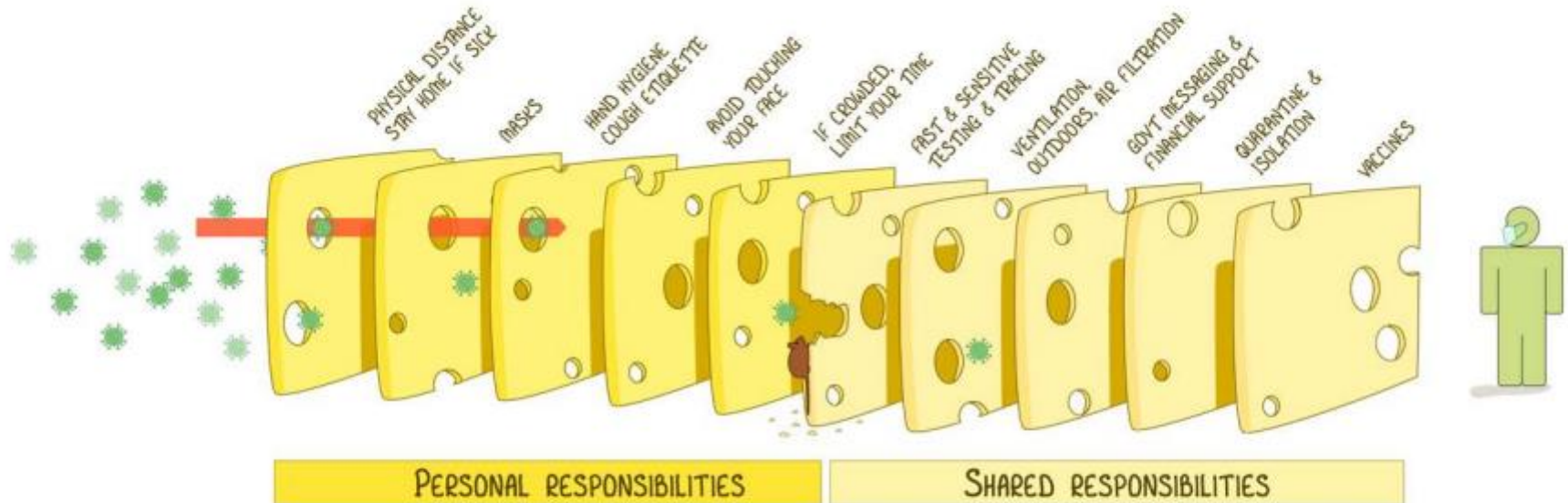
# Deaths in the UK involving COVID-19 increased in Week 47 for the 11th consecutive week

Number of deaths registered by week, UK, week ending 13 March 2020 to  
week ending 20 November 2020



# THE SWISS CHEESE RESPIRATORY VIRUS PANDEMIC DEFENCE

RECOGNISING THAT NO SINGLE INTERVENTION IS PERFECT AT PREVENTING SPREAD

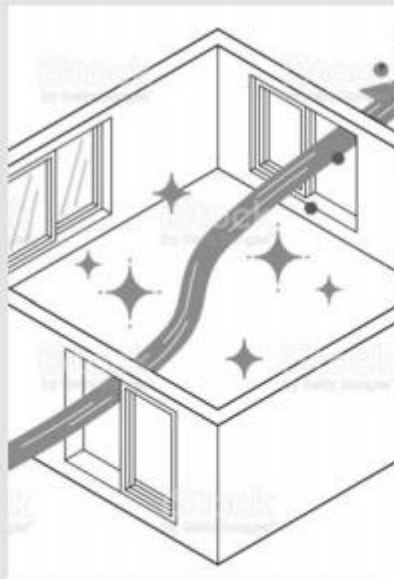


EACH INTERVENTION (LAYER) HAS IMPERFECTIONS (HOLES).  
(MULTIPLE LAYERS IMPROVE SUCCESS.)

[Behavioural, Environmental, Social and Systems Interventions for pandemic preparedness](#)

LAW IN THICKET  
VIRALOGYDOWNUNDER.COM  
WITH THANKS TO JODY LAWARD, KATHARINE ARDEN & THE UNI OF GLD  
BASED ON THE SWISS CHEESE MODEL OF ACCIDENT CAUSATION BY JAMES T REASON, 1990  
VERSION 3.0  
UPDATE: 24062020

# Ventilation: SAGE Oct 2020

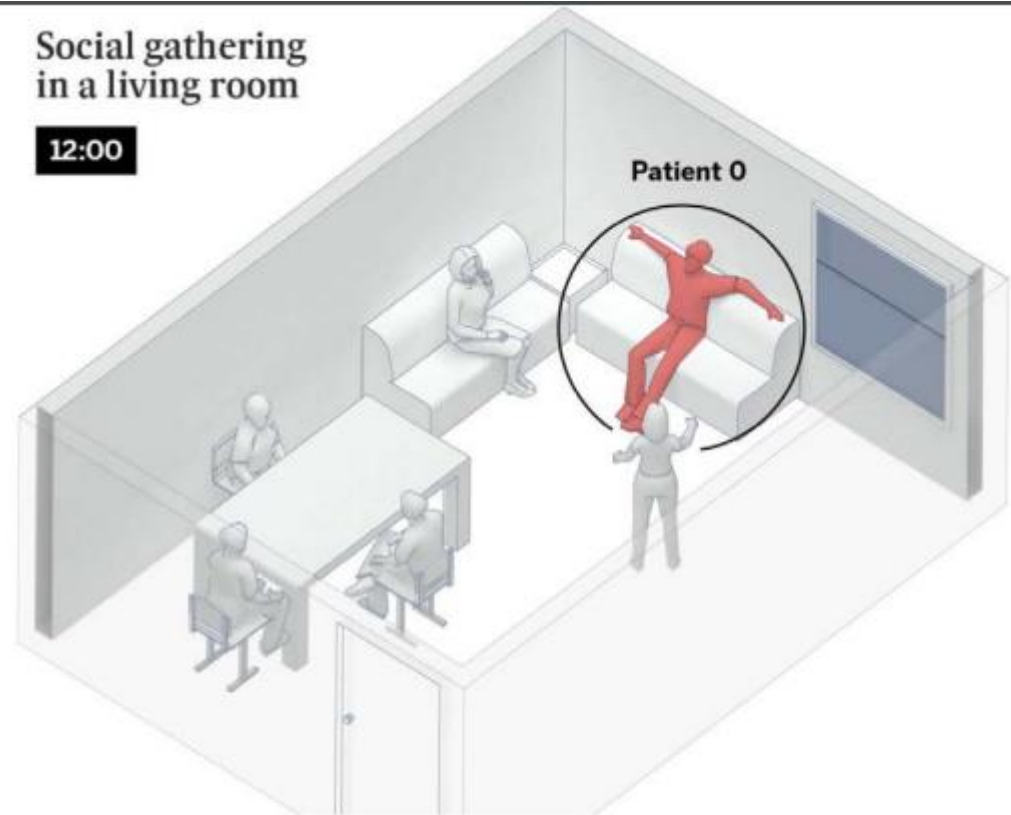


- recognise the importance of ventilation for >2m transmission
- Far-field transmission depends on multiple factors like viral emission rate, ventilation rate, number of occupants, duration of exposure, temperature, humidity
- mitigation measures required will depend on the individual building, users, ventilation type, length of exposure and activity
- face coverings and ventilation will help reduce far-field aerosol transmission
- increased ventilation may have other negative consequences though-increased energy use, reduced thermal comfort, security,
- CO2 useful indication of poor ventilation, but not good for monitoring transmission in low occupancy or large vol spaces

## [How the coronavirus is spread through the air](#)

### Social gathering in a living room

12:00



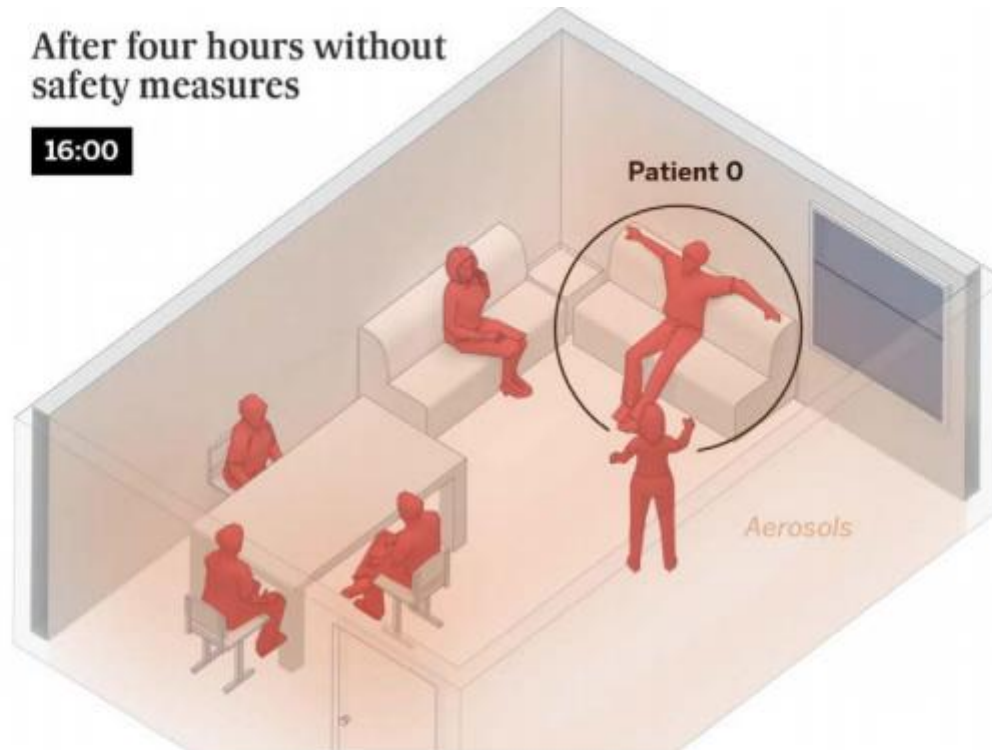
Six people get together in a private home, one of whom is infected. **Some 31% of coronavirus outbreaks recorded in Spain** are caused by this kind of gathering, mainly between family and friends.

**Methodology:** we calculated the risk of infection from Covid-19 using a tool developed by José Luis Jiménez, an atmospheric chemist at the University of Colorado and an expert in the chemistry and dynamics of air particles. Scientists around the world have reviewed this Estimator, which is based on published methods and data to estimate the importance of different measurable factors involved in an infection scenario. However, the Estimator's accuracy is limited as it relies on numbers that are still uncertain – numbers that describe, for example, how many infectious viruses are emitted by one infected person. The Estimator assumes that people practice the two-meter social distancing rule and that no one is immune. Our calculation is based on a default value for the general population, which includes a wide range of masks (surgical and cloth), and a loud voice, which increases the amount of aerosols expelled.



After four hours without  
safety measures

16:00

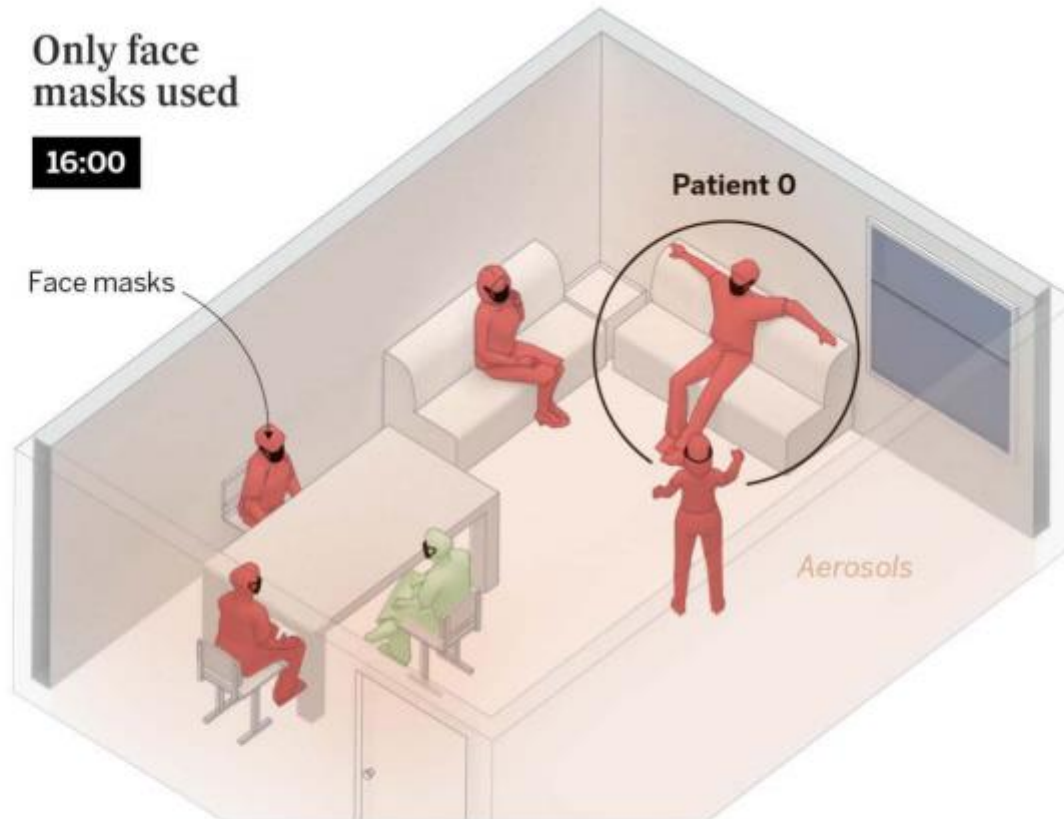


Irrespective of whether safe distances are maintained, if the six people spend four hours together talking loudly, without wearing a face mask in a room with no ventilation, **five will become infected**, according to the scientific model explained in the methodology.

Only face  
masks used

16:00

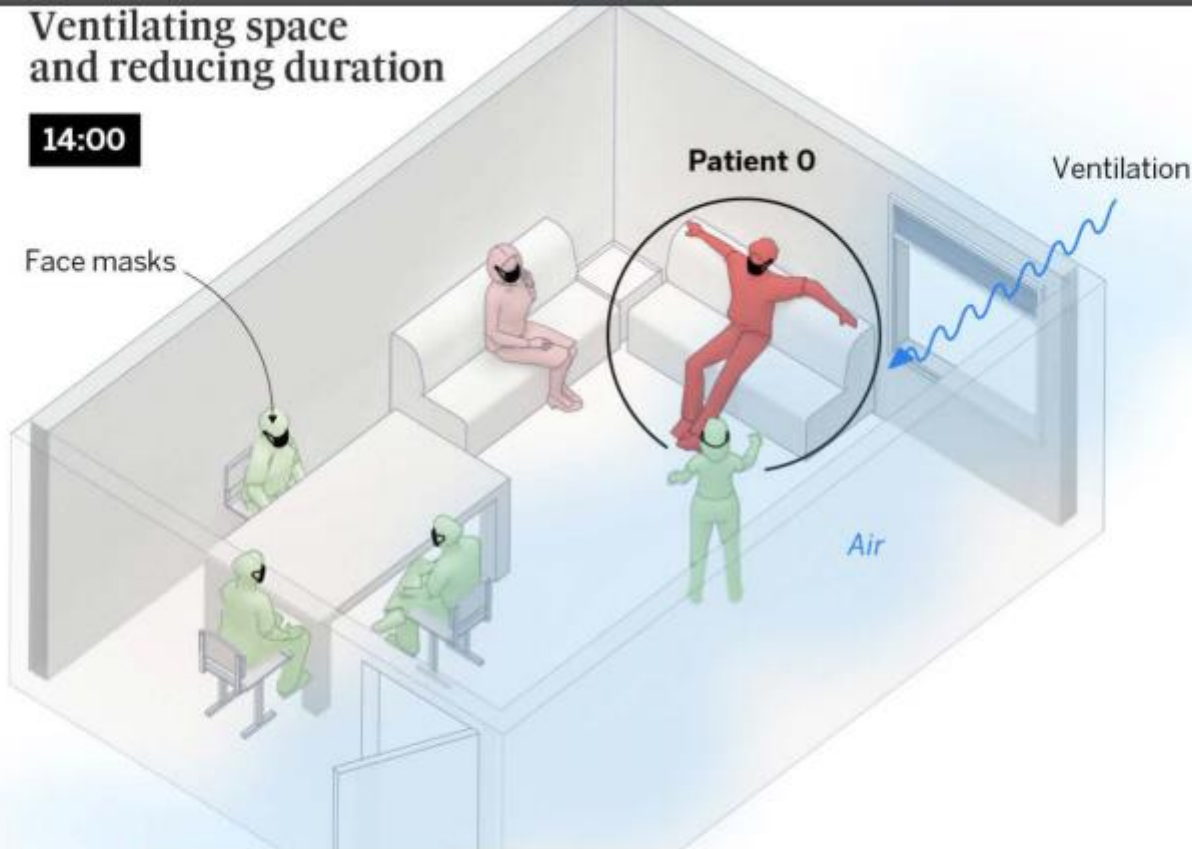
Face masks



**If face masks are worn,** four people are at risk of infection. Masks alone will not prevent infection if the exposure is prolonged.

## Ventilating space and reducing duration

14:00



**The risk of infection drops to below one when the group uses face masks, shortens the length of the gathering by half and ventilates the space used.**

# Covid-19 in older people

## During lockdown or shielding?

- Home confinement in older people may cause
  - (i) cardiorespiratory and metabolic deconditioning,
  - (ii) insulin resistance,
  - (iii) muscle loss and
  - (iv) increased fat mass.
- In addition, social isolation may be worsened.



## How do Covid-19 risk factors relate to age?

- disease severity rises with age , comorbidities, frailty -poorer outcomes.

## Challenges as older people recover from Covid-19? Covid can..

- **worsen frailty** indirectly, e.g. deconditioning, or directly, e.g. lung disease, muscle wasting and neurological impacts.
- **mental health** may suffer and needs for rehabilitation and mental health support may be quantitatively and qualitatively different from those of people who are younger.
- **increased risk of “long Covid”** - experience long term effects of Covid-19, greater in women and rises with age and with body mass index (BMI).

# Management of Covid 19

[Long Covid](#) (ZOE 10-20%): 4 syndromes

- Post intensive care syndrome
- Post viral fatigue syndrome
- Permanent organ damage
- Long term Covid syndrome

[NHS England](#) (£10m)

- Clinics
- NICE Guideline Nov 2020
- Online rehab service “Covid Recovery”
- [Chest, Heart and Stroke](#) Covid 19 Recovery service (phone, video call + online)
- Research





# Shielding advice



Guidance

## **Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19**

Updated 4 November 2020

- <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>



# Get vitamin D supplements

## Shielded patients and care home residents to receive free vitamin D

29 November 2020

Patients on the shielding list and care homes are to be provided with free vitamin D this winter, the government has announced.



## Guidance

# Mouth care for hospitalised patients with confirmed or suspected COVID-19

Published 6 August 2020

### Contents

[Mouth care for non-ventilated patients](#)

[Mouth care for ventilated hospital patients - under the direction of the nurse in charge](#)

[End of life care](#)

[Step down care - patients no longer ventilated](#)

 [Print this page](#)

Supporting seriously ill patients' mouth care is an important part of overall patient care. If oral hygiene is neglected, the mouth rapidly becomes dry and sore. The aim of good mouth care for patients in hospital is to maintain oral cleanliness, prevent additional infection and reduce the likelihood of developing bacterial pneumonia. On admission include the mouth in the patient's assessment and care plan (an example of a form to record this can be found here: [mouth care assessment and record](#)).

This guidance outlines mouth care for hospitalised adults and children with confirmed or suspected coronavirus (COVID-19) who are non-ventilated, ventilated and those having step down or end of life care.

When providing mouth care for patients with COVID-19 wear [personal protective equipment](#) (PPE) to prevent contact and droplet transmission. This means wearing disposable gloves, plastic apron, eye protection and a fluid resistant surgical mask. Delivering mouth care is not an [aerosol generating procedure](#). However, the environment you are working in may require the use of enhanced PPE (for example if working where patients are ventilated).

# Coronavirus (COVID-19) advice for social care

## Safeguarding adults with dementia during the COVID-19 pandemic

**Updated: 10 November 2020**

**Published in partnership with [Alzheimer's Society](#)** [link 1](#)

Safeguarding adults with dementia is an important part of everyday work for providers of adult social care. This quick guide aims to support care providers and staff to safeguard people with dementia during the pandemic.

There are increased concerns that, during this time, people may be more vulnerable to abuse or neglect. This may be a result of:

- [increased social isolation](#) [link 2](#)
- [stress on carers and caring relationships](#) [link 3](#)
- [overstretched and stressed care staff](#) [link 4](#)
- [an increase in criminal behaviour \(scams etc\)](#) [link 5](#)
- [an increase in domestic abuse](#) [link 6](#)
- [a range of new contacts \(volunteers, those delivering food and medicines\)](#) [link 7](#).

Care providers and staff are likely to be under extra pressure as you cover for others who are sick or self-isolating, and you may be worried about your own health and that of your families. At this time, support for each other, and those to whom we provide care, is really important.

**This is a time when we must all be extra vigilant and try to pick up any early signs that something isn't right.**

## Make sure you are alert to the signs of abuse

People with dementia, staff, carers and family may not report abuse for a number of reasons:

# Vaccinations



- NHS preparing to deliver from Dec 2020
  - Care home -> 80s +HCW+SCW->rest of population in order of age and risk
  - GPs, pharmacists, nightingale hospitals, roving teams
  - Storage: -70 degrees, different for different vaccines
- Phase 3 trials n=10
- Human challenge studies (Jan, UK, await MHRA/ethics approval)

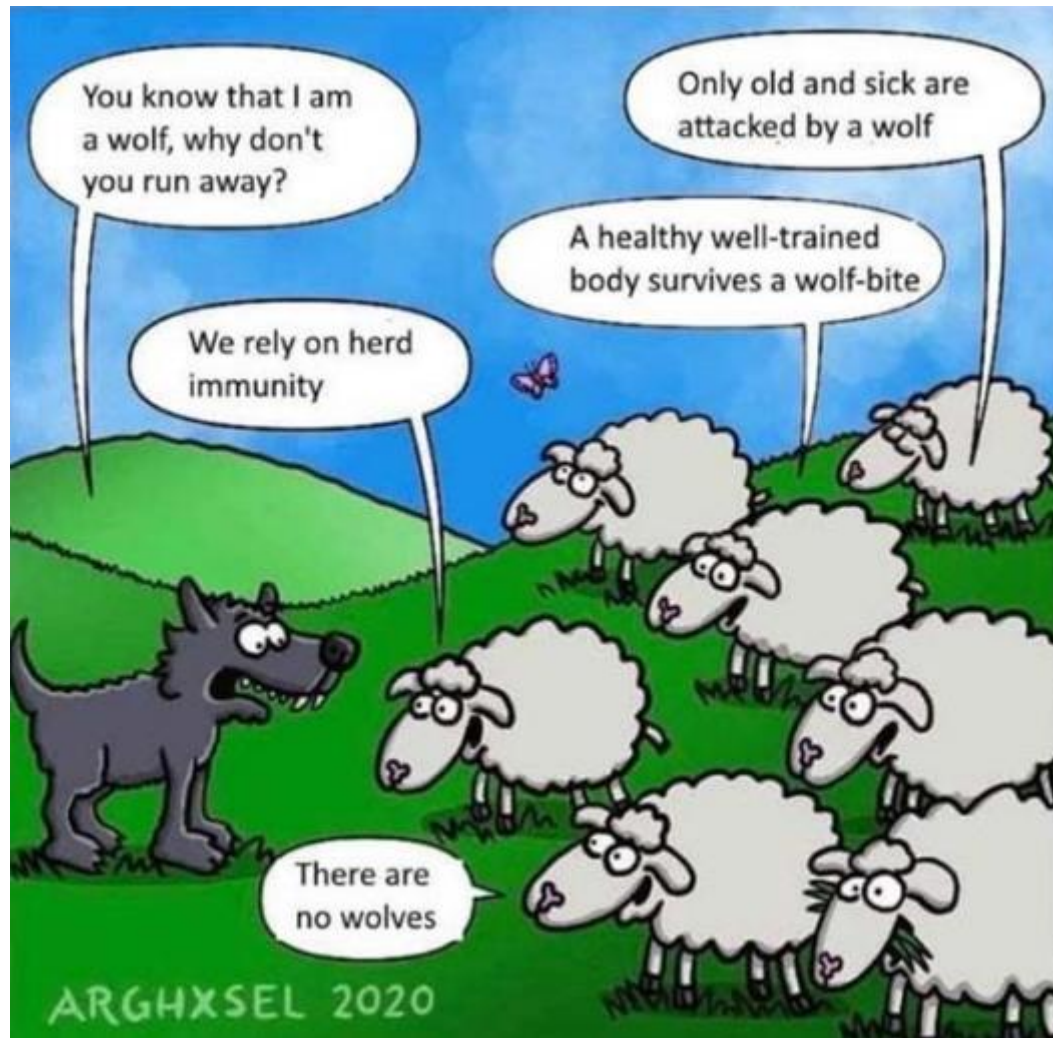
...but what will they tell us

- “Vaccine don’t stop disease, vaccination programmes do” (T. Frieden)
- Covax-170 member countries that aim to distribute at least 2 billion vaccine to high risk people fairly in each member country (Russia and US not joined)





The elderly and all health and social care workers are set to be prioritised for a coronavirus vaccine that has proven to be more than 90% effective.



# Visiting



Care Home Relatives Scotland group wants to see more access for relatives in care homes to improve the quality of life for residents. (Photo: Jeff J Mitchell/Getty)

## Government guidance in England for Care Homes (CHs)

- limited screens, pods, windows-no practical guidance
- pilot of family member as key worker (within a month)

CHs include vulnerable people

### -Scotland

338 patients with confirmed/suspected C19 discharged to CHs

Even when guidance changed-45 transferred despite no negative test (45% of all C19 death were in CHs in Scotland)

### SAGE 24/9

- Evidence of outbreaks in CHs
- Need to understand different routes of transmission and relative impact
- Recognise growing evidence of negative mental impact of restricted visiting-need to balance risks

### Research

### CONDOR-CH – mass testing

### Wearable devices



# Care homes to get more coronavirus tests so residents can scrap social distancing with up to two visitors who each get swabbed twice a week

- Rapid testing is already being trialled in Devon, Cornwall and Hampshire
- If a visitor regularly tests negative they could hold hands with home resident
- During the first wave care homes were barred from having any visitors at all
- In-home carers will also get regular free tests to take at home from today

By [SAM BLANCHARD](#) SENIOR HEALTH REPORTER  and [CONNOR BOYD](#) ASSISTANT HEALTH EDITOR FOR MAILONLINE

**PUBLISHED:** 14:01, 23 November 2020 | **UPDATED:** 17:09, 23 November 2020

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shares

 **50**[View comments](#)

Care home **coronavirus** testing could be expanded to allow each resident to have two visitors each who get swabbed twice a week so they can visit without social distancing.

The Government is considering plans to offer swab tests to two people per resident to try and keep the virus out of care homes while also allowing social visits.

During the first wave of Britain's epidemic, when testing was not widely available, care homes were completely closed off to visiting family and friends.

Loneliness Minister Baroness Barran says the next few months will be "incredibly challenging"



ADAM ISFENDIYAR

An online photo exhibition shows people in East London who faced isolation during the pandemic

# Multidisciplinary Team Working in a General Practice Setting

The practicalities of making it work

## Core values underpinning successful MDT work in general practice



Endorsed by:



## Editorials

### COVID-19 and the legacy of grief

## UK charities face soaring demand for grief counselling due to Covid-19

**Bereaved families say they have been abandoned by the government**

### ‘Grief has been delayed.’ Love and Loss in a Pandemic

Review: Unbearable trauma is captured in RTE’s respectful, unflinching documentary

### How coronavirus has transformed the grieving process

April 17, 2020 3:55pm BST

## People bereaved by Covid-19 in UK feel forgotten, charity says

**Sue Ryder says governments should allow support bubbles for those who are grieving**

Fears have been raised over a “long-lasting” impact on families who have been forced to deal with funeral restriction measures during the Covid-19 pandemic.



# Briefing: Adult social care and COVID-19

## Assessing the impact on social care users and staff in England so far

Karen Hodgson, Fiona Grimm, Emma Vestesson, Richard Brine and Sarah Deeny

### Key points

- The coronavirus (COVID-19) pandemic has had a profound impact on people receiving social care. As of July 2020, there have been over 30,500 more deaths among care home residents in England than we would normally expect. A further 4,500 excess deaths have been reported among people receiving domiciliary social care.
- While fewer domiciliary care users have died than care home residents, in proportional terms the increase in deaths has been higher in domiciliary care than care homes (225% compared with 208%). Domiciliary care users continue to die at a higher rate than has been reported in previous years. Many of these additional deaths have not been linked explicitly to COVID-19. It is unclear whether these additional deaths are due to the indirect impacts of the pandemic or as a result of undiagnosed cases.
- It is not just those receiving social care who have lost their lives during this pandemic. Social care workers are among the occupational groups at highest risk of COVID-19 mortality. Among this group, care home workers and home carers account for the highest proportion (76%) of COVID-19 deaths. We do not know exactly when these deaths occurred, so it is not possible to understand the extent to which more recent policy changes and infection control measures have improved safety for staff.
- COVID-19 outbreaks in care homes may be driven by multiple factors, including community transmission as well as infections picked up during hospital stays. Our analysis shows that between 17 March and 30 April, discharges from hospitals to care homes decreased in England to 86% of the historical average. 46,700 people were discharged from hospital to care homes between 17 March and 30 April – 7,700 fewer than previous years. The data available do not allow us to examine whether these discharges led to subsequent outbreaks in care homes.

Interesting article you may want to read

<https://www.health.org.uk/sites/default/files/upload/publications/2020/20200730-Adult-social-care-and-COVID-19-impact-so-far.pdf>

# Interesting article you may want to read

## RESEARCH

### Producing 'Top Tips' for Care Home Staff During the COVID-19 Pandemic in England: Rapid Reviews Inform Evidence-Based Practice but Reveal Major Gaps

Ann-Marie Towers\*, Anne Killest†, Melanie Handley‡, Kathryn Almack‡, Tamara Backhouse‡, Diane Bunn‡, Frances Bunn‡, Angela Dickinson‡, Elspeth Mathie‡, Andrea Mayrhofer‡, Rasa Mikelyte\* and Claire Goodman‡

**Context:** The work presented in this paper was undertaken during the first three months of the COVID-19 crisis in the UK.

**Objectives:** The project is aimed to respond to questions and concerns raised by front-line care staff during this time, by producing research-based 'Top Tips' to complement emerging COVID-19 policy and practice guidelines.

**Methods:** Eight rapid, expert reviews of published, multidisciplinary research evidence were conducted to help answer care home workers' questions about 'how' to support residents, family members and each other at a time of unprecedented pressure and grief and adhere to guidance on self-distancing and isolation. A review of the emerging policy guidelines published up to the end of April 2020 was also undertaken.

**Findings:** The rapid reviews revealed gaps in research evidence, with research having a lot to say about what care homes should do and far less about how they should do it. The policy review highlighted the expectations and demands placed on managers and direct care workers as the pandemic spread across the UK.

**Implications:** This paper highlights the value of working with the sector to co-design and co-produce research and pathways to knowledge with those who live, work and care in care homes. To have a real impact on care practice, research in care homes needs to go beyond telling homes 'what' to do by working with them to find out 'how'.

**Keywords:** care homes; COVID-19; policy review; expert review; social care; skilled care

#### Background

In many countries, care homes are being disproportionately affected by the COVID-19 global pandemic, with high rates of mortality (Oliver, 2020a; Comas-Herrera & Zalakin, 2020; British Geriatrics Society, 2020a). In the UK, central government guidance on how care homes should respond to COVID-19 has been inconsistent and criticised for being overly health-focused, disregarding the health and safety of the social care workforce and the conditions within which they are working (The National Care Forum, 2020).

Care, 2019). Whilst demand for care has led to significant increases in the number of jobs in the social care sector, most of these (76%) are direct care roles, fulfilled by a workforce historically referred to as 'unskilled' (Skills for Care, 2019). Regulated professionals (e.g. social workers, occupational therapists and nurses) account for only 5% of the workforce, compared with 54% of the workforce in health (NHS Digital, 2018).

Within adult social care in England, care homes account for approximately 42% of jobs (Skills for Care, 2019), caring for approximately 400,000 people (LaingBuisson,

<https://journal.ilpnetwork.org/articles/10.31389/jltc.43/>



## 8 top tips – you can download these info sheets for each of these tips giving a list of things you can do:-

- Top Tips for Tricky Times: Hydration and Covid-19
- Top Tips for Tricky Times: Supporting residents at the end of life when there is uncertainty
- Top Tips for Tricky Times: Supporting families at a distance
- Top Tips for Tricky Times: Helping care home residents with dementia to use video to communicate with their families
- Top Tips for Tricky Times: When residents do not understand social distancing or self-isolation
- Top Tips for Tricky Times: Providing physical comfort and reassurance to care home residents during COVID-19
- Top Tips for Tricky Times: Using music to provide comfort and reassurance for care home residents living with dementia
- Top Tips for Tricky Times: Supporting staff following multiple deaths in care home environments

# Wider Considerations

## The same pandemic, unequal impacts: How people are experiencing the pandemic differently

It's been clear from the early stages of the COVID-19 pandemic that some groups are more affected than others.



**People living in the poorest areas are at higher risk from COVID-19**

People in the most affluent areas are **50% less likely** to die of COVID-19 than those in the poorest areas.



**Black and minority ethnic communities are more affected by COVID-19**

People of black ethnicity are **4 times as likely** to die from COVID-19 compared to people of white ethnicity.



**Disabled people have been hit particularly hard**

Disabled people have experienced death rates **2 to 3 times higher** than non-disabled people.



**Young people are most likely to lose employment**

One in three of 18–24-year-olds have been furloughed or lost their job – **twice the rate** of working-age adults.



**Health and social care workers have an increased risk of adverse mental health outcomes**

**4 in 5** social care workers in Scotland reported their work during COVID-19 negatively impacted their mental health.

The COVID-19 impact inquiry is exploring the different ways the pandemic, and the national response to it, are affecting health and health inequalities in the UK.

Find out more at [health.org.uk/covid-19-impact-inquiry](https://health.org.uk/covid-19-impact-inquiry)



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## Deaths of people identified as having learning disabilities with COVID-19 in England in the spring of 2020

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/933612/COVID-19\\_learning\\_disabilities\\_mortality\\_report.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/933612/COVID-19_learning_disabilities_mortality_report.pdf)

**Information Available for those with Learning Disabilities during COVID-19** – all info located from the PCPLD Network (Palliative Care for People with Learning Disabilities) <https://www.pcpld.org/links-and-resources/>

### **Easy-read resources about Coronavirus**

- Coping with coronavirus picture books & guides free downloads from Books Beyond Words <https://booksbeyondwords.co.uk/coping-with-coronavirus>
- Covid-19 guided self-help booklet series from Scottish Commission for Learning Disability <https://www.sclld.org.uk/covid-19-guided-self-help-booklet-series/>
- Information about Coronavirus from Mencap <https://www.mencap.org.uk/sites/default/files/2020-03/Information%20about%20Coronavirus%20SrS1.pdf>
- Coronavirus Poster Set from Photo symbols <https://www.photosymbols.com/blogs/news/coronavirus-poster-set>

### **Planning ahead / advance care planning**

- Jack plans ahead for coronavirus: a guide for family and carers free download from Books Beyond Words <https://booksbeyondwords.co.uk/>
- Advance Care Planning Guidance for Coronavirus and Learning Disabilities from Mary Stevens Hospice and Dudley Voices for Choice <https://www.pcpld.org/wp-content/uploads/ACP-Guidance-for-Coronavirus-and-Learning-Disabilities-.pdf>
- Covid-19 Hospital Communication Passport and supporting resources from Include Me TOO <https://includemetoo.org.uk/covid19/>

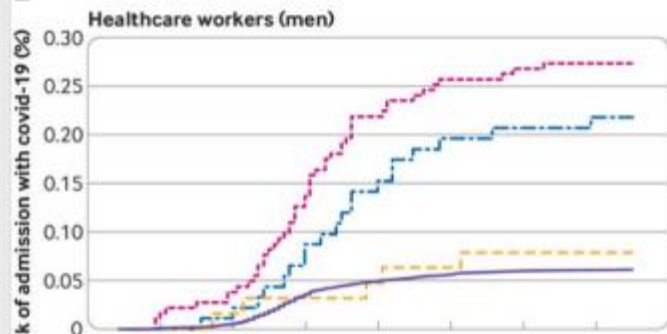
### **Bereavement support**

- When someone dies from coronavirus: a guide for family and carers free download from Books Beyond Words <https://booksbeyondwords.co.uk/>
- Let's talk about... when someone is ill or dies from coronavirus Resource to support conversations with people with learning disabilities online, from Books Beyond Words <https://booksbeyondwords.co.uk/coping-with-coronavirus>
- Keeping in touch when you can't be with someone who is so ill that they might die from National Bereavement Alliance <https://nationalbereavementalliance.org.uk/keeping-in-touch-when-someone-is-seriously-ill/>

# RISKS – challenges we face

## Self

Scotland, admissions, 160k



CDC, 21k health care workers (HCWs) exposures March-July

As of July 11, over 5,300 Minnesota health care workers have had close, prolonged contact with someone with COVID-19 while not wearing appropriate personal protective equipment\*

1 in 3 of these exposures occurred outside of patient care

Slow the spread of COVID-19 in health care settings and in the community



### Health care workers should receive

- ✓ Flexible sick leave
- ✓ Access to testing
- ✓ Personal protective equipment



### Everyone should

- ✓ Wear masks
- ✓ Stay at least 6 feet from others
- ✓ Wash hands often

\*Exposures involving direct/prolonged close contact with someone with COVID-19 while not wearing appropriate personal protective equipment or close, prolonged contact with cases in the household or community. During March 6–July 11, 2020, the Minnesota Department of Health and 1,217 participating health care facilities assessed 17,333 health care personnel for 21,406 exposures to a confirmed COVID-19 case.

CDC.GOV

[bit.ly/MMWR102920b](https://bit.ly/MMWR102920b)

MMWR

## News

**Covid-19: Two fifths of doctors say pandemic has worsened their mental health**

BMJ 2020 ; 371 doi: <https://doi.org/10.1136/bmj.m4148> (Published 27 October 2020)



# Managing risks

- Communication
- Rest
- Debriefing
- Practical and social support



Occurrence, prevention, and management of the psychological effects of emerging virus outbreaks on healthcare workers: rapid review and meta-analysis

BMJ 2020 ; 369 doi: <https://doi.org/10.1136/bmj.m1642> (Published 05 May 2020)

Cite this as: BMJ 2020;369:m1642

Patient facing staff greater risk of PTSD (OR 1.7, 95%CI 1.3, 2.3), and psychological distress (1.7, CI 1.5, 2.03).

-Risk factors: younger, junior, parent, infected family member. Longer quarantine, lack of practical support, stigma contributed

-Clear communication, adequate rest, practical and

## COVID-19: PSYCHOLOGICAL EFFECTS ON HEALTHCARE WORKERS

Covid-19: recording their stories provides emotional benefit to healthcare workers

Paul Bennett, <sup>1</sup> Rachael Hunter, <sup>1</sup> Steve Johnston, <sup>1</sup> David Jones, <sup>2</sup> Simon Noble<sup>3</sup>

- Clinical debriefing may increase risk of PTSD
- Covid Confidential-offloading, online
- 70% of users reported benefit
- 80% would recommend
- Themes: shock, dedication, collateral damage, power
- intervention not primarily research, EOLC



## SR: mental health impact of Covid 19 on healthcare workers; Nov 2020

N=59 studies

Correlates:

Exposure to C19

Female

Worry about  
infection/infecting  
others

But no comparative  
data on previous  
mental health or to  
general population

### Highlights

- Healthcare workers' mental health problems correlate with organizational factors such as workload and exposure to covid-19 patients.
- Healthcare workers are more interested in occupational protection, rest, and social support than in professional psychological help.
- Interventions focus more on addressing individual psychopathology, which points towards a mismatch between what workers want and need, and the services available to them.

Yes, but we need to make sure it is there for all to access



Care home providers, managers and staff have responded well to ensure **IPC is a priority**

Encouraged to see some of the support for staff that good providers have facilitated

The support has to extend to all providers, so that their staff feel **valued** at this time when their **contribution** is so **important** and their **dedication** so **appreciated**.

## How care homes managed **infection prevention and control** during the coronavirus pandemic 2020

November 2020

# CREATING TOMORROW TODAY: SEVEN SIMPLE RULES FOR LEADERS

1. Define our shared purpose

**OUR SHARED PURPOSE**



and be clear who the "our" are

2. Root our transformation efforts in a sense of belonging

**BELONGING**

3. Go backwards in the care/health process as a core principle



4. Support people to build their agency (power) at every level of the system

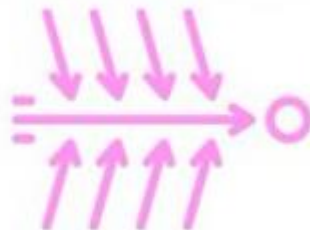


understanding that imbalances in power and privilege mean that people have very different starting points

7. Action small-scale changes within a large-scale framework



5. Embrace contradictions and tensions



6. Unleash learning as a power for transformation

**LEARNING**

Created by Helen Bevan and Goran Henriks

7 simple rules for leadership



## The COVID Vaccine and vaccinating your residents

Now that COVID vaccines are soon to be ready for use in the UK ,

**you could be very influential** in their usage in your care home, as your residents trust what you do and say .

**What are your thoughts on ....**

- Being vaccinated yourself ?
- And giving the vaccine to your residents ?
- What are the drivers eg getting back to normal seeing family etc?
- And what are the barriers eg fear of side effects ?
- What do you need to do before this is offered to you as a care home ?



# Get the flu jab



- People infected with both flu and SARS-CoV-2 are more than twice as likely to die as someone with the new coronavirus alone, emerging evidence analysed by [PHE\\_uk](#) has found
- C19 in Healthcare workers (HCW)- Irish data suggests 6% get it from patients, 20% other HCWs, 74% outside of healthcare ie home, community, travel

[Irish Health Worker study](#)



# KINDNESS CALENDAR: DECEMBER 2019



## SUNDAY

**1** Encourage kindness. Share the Kindness Calendar with others

**8** Do something helpful for a friend or family member

**15** Visit an elderly neighbour and brighten up their day

**22** Invite over someone who would otherwise be alone

**29** Turn off digital devices and really listen to people

## MONDAY

**2** Support a charity, cause or campaign you really care about

**9** Be generous. Feed someone with food, love or kindness today

**16** Look for something positive to say to everyone you meet today

**23** Choose to give or receive the gift of forgiveness

**30** Let someone know how much you appreciated their gift

## TUESDAY

**3** Give kind comments to as many people as possible today

**10** Count your blessings: list the kind things others have done for you

**17** Thank people who do things for you but you may take for granted

**24** Offer spontaneous hugs to your loved ones and friends

**31** Plan what extra acts of kindness you will do in 2020...

## WEDNESDAY

**4** Listen wholeheartedly to others without judging them

**11** Give someone your place in a queue (in traffic or in a shop)

**18** Offer to help someone who is facing difficulties at the moment

**25** Treat everyone with kindness today, including yourself!

## THURSDAY

**5** Leave a positive message for someone else to find

**12** See how many different people you can smile at today

**19** Give away something that you have been holding on to

**26** Encourage others to join you outside and enjoy time in nature

## FRIDAY

**6** Notice when you're hard on yourself or others and be kind instead

**13** Buy some extra items and donate them to a local food bank

**20** Congratulate someone for an achievement that may go unnoticed

**27** Call a relative who is far away to say hello and have a chat

## SATURDAY

**7** Make gifts to give to people who are homeless or feeling lonely

**14** Share a happy memory or inspiring thought with a loved one

**21** Shop locally and support independent producers

**28** Be kind to the planet. Eat less meat and use less energy

**"Do your little bit of good where you are; those little bits together overwhelm the world" ~ Desmond Tutu**





Any questions?

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# Next GSF Support Call

- Date: Tuesday 19<sup>th</sup> January 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 !



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