

# Weekly Q&A with Care Homes

Wednesday 16th June

## Stop Hate UK

Mike Ainsworth presented on Hate Crime. He covered:

- How legislation and processes have changed
- The rise in % of cases reported
- The level of hate crime in Sutton (which is noted overall to be low, with a hotspot of hate crime in Sutton on the high street)
- Impact of hate crime
- Services Stop Hate UK provider “whatever they call you call us”

Please see the [full presentation](#).

- **Question:** Do you have any advice around hate crimes related to the different COVID-19 variants?
- **Answer:** Hate crime towards some communities has increased since the pandemic first started and with transmission of the delta strain. Often communities do not reach out to the police because individuals believe they have more important things to deal with. This is not true, the behaviour is not acceptable and needs to be reported and so issues can be recognised and resolved.

## Quarterly data return

- We aim to create a quarterly form for homes to fill in. It will include a request for data we currently can't get anywhere else. We plan to launch the first in July.
- It will be seen by the CQC as supporting system integration. It is important care homes are seen as an intrinsic part of that system and not outside of it.
- Sections:
  - Beds - how homes describe their current beds and used for dementia patients
  - Funding - who funds the beds / info on self funders
  - Residents - length of stay, age ranges
- We'd like to pilot the survey this week
  - to understand how long it is taken
  - If there is anything missing
  - If questions don't make sense

Volunteers agreed to complete the pilot.

## Infection Prevention and control

- **Question:** Can we use fans?  
**Answer:** We will get back to you with an answer
- **Question:** Can hairdressers visit homes  
**Answer:** We will get back to you with an answer

### Isolation

- **Question:** Do new residents have to be isolated?  
**Answer:** From 21st June residents from the community will not have to isolate (they will have to complete a series of PCR tests). If a person is admitted from a hospital or another care home they must self isolate.
- **Question:** Does a respite resident coming in for a week from the community need to be isolated?
- **Answer:** No. The resident must be tested on day of admission and then day 7.

### COVID-19 vaccine for care home staff

- We don't have any official guidance yet to say vaccines will be mandatory.
- **Question:** If we have interviewed someone and they want to start can we get them vaccinated  
**Answer:** If you've offered them a job and they've accepted we can.
- **Question:** What about a new team member who is not yet registered with a GP? Will CHST give their 1st dose vaccine?  
**Answer:** Email Lucy Webber ([lucy.webber@swlondon.nhs.uk](mailto:lucy.webber@swlondon.nhs.uk)) and she will see what she can do.

### Capacity Tracker

- **Question:** Can i ask , under what category does student on placement fall under , esp on the capacity tracker
- **Answer:** Lucy will ask Paul Harper

### Wednesday 21st April

#### COVID-19 vaccine

- One home noted a thankyou to Lee as homes had issues in getting their staff the second dose, which he was able to resolve.
- Supply issues are being resolved.
- **Question:** Is it true people are going to get a 3rd dose in September?  
**Answer:** Not that we are aware. We will still be providing later cohorts the vaccine by then.
- **Question:** A member of staff does not want the vaccine because her partner does not want her to have it because they are trying for a baby. How can I support her?  
**Answer:** Theories surrounding fertility issues are unfounded as the vaccine does not alter an individual's genetic material. No other vaccines have ever had this effect. The NHRA says you do not need to put off your family planning after having the vaccine. The guidance on pregnancy is slowly changing, soon pregnant women may be allowed to have the vaccine (not only on a risk assessed basis). There may be problems with misinformation. Please refer her back to her GP for more information. However at the end of the day it is her decision.

#### IPC audit and training

- We have new infection control funding, however we don't yet know the conditions of it. Any home can have an IPC best practice audit. Sarah Brown or Debbie Jones will walk through your home with your IPC champion to ensure you are complying with the regulations - it only takes an hour. We will leave you with the IPC audit checklist for the IPC champion to complete independently going forward. We will add the checklist to the Sutton Care Hub.
- Homes can also have refresher training.
- Homes are finding the checklist very helpful.

#### Quality Assurance visit

- Quality Assurance will start doing face to face QA visits from May. These will not be unannounced, they will be scheduled in at a time to suit you. There will probably be a focus on IPC and will be done jointly by LBS and the CCG.

#### Visiting

- **Question:** How is visiting going?  
**Answer:** One home noted they only do visiting Wed, Thurs, Fri and Sat and they get 20 minimum visitors daily. If visitors don't want to do the LFD tests then they should do a screened visit. Some residents' families did not want to wear masks around their residents with dementia, and took this out on the staff. We have resolved this now. Another home notes they know some hugging takes place when they are not in the room. We have told them they are putting their family members at risk. Some people want to remove their mask but if so they have to go in the visiting pods. The home

noted they can't control what visitors do when they're not in the room. Another home noted the residents with capacity said it was their risk to take if they didn't comply with the visiting guidance. More people prefer the pod because you don't have to wear PPE. Couple of people have asked if they can meet in the garden (socially distanced). Overall it's been really positive.

- Staffing is not an issue as a home notes they used the RTF fund to pay someone to do the visitor tests
- **Question:** Visitor does LFD tests and visits residents outside and wears a mask, but does have close contact? Is that ok?  
**Answer:** Yes this is fine
- **Question:** We're giving some visitors the tests to take home and then texting the pictures in so we can register them. Is this allowed?  
**Answer:** Yes this makes sense.

#### Capacity tracker

- **Question:** We don't have to fill it in on a weekend?  
**Answer:** Correct. However if there is an infection / outbreak, please report no matter the day.
- Capacity tracker is here to say, but regularity of some submissions will probably reduce to weekly and monthly. It will also focus less on COVID-19 and more on business as usual.

#### GP visits

- GP rounds will be going to weekly and all residents do not need to be discussed. It is going to be done remotely over the phone. If needed, the GP can review via video call. If the GP needs to visit face to face this is now allowed.
- We want to go back to doing MDTs where we do a deep dive into some individual residents. It would be helpful if we can time that with a dietitian or other professional visits.
- Support available from care home support teams 7 days a week.
- Virtual ward has been set up in which a resident can be monitored like they're on a virtual ward but they are at home. There is an ipad in which consultants can see the readings. There is a virtual ward senior nurse. It is helpful if for example someone has a UTI or a fall, this can prevent them from being admitted to hospital. A GP can refer into the virtual ward for up to two weeks.

#### Testing

- **Question:** Do you think testing would reduce for staff in terms of frequency?  
**Answer:** We haven't got any further guidelines as of yet. We need more information on the immunity results of the vaccine.

### Sessions

We will move these Q&A sessions (11am - 12pm) to monthly and the Care Home forum to quarterly (2 - 4pm). The next meeting will be a Care Home Forum on the 19th May.

### Wednesday 7th April Visiting guidance

- From the 12th April:
  - Every care home resident can nominate up to 2 named visitors who will be able to enter the care home for regular visits (and will be able to visit together or separately as preferred).
  - These visitors should be tested using rapid lateral flow tests before every visit, must wear the appropriate personal protective equipment (PPE) and follow all other infection control measures (which the care home will guide them on) during visits.
  - Visitors and residents are advised to keep physical contact to a minimum.
  - Visitors and residents may wish to hold hands, but should bear in mind that any physical contact increases the risk of transmission. For this reason there should not be close physical contact such as hugging
  - In addition to their 2 named visitors, residents with higher care needs can also choose to nominate an essential care giver
  - Please see the [full guidance](#).
- Care homes can also continue to offer visits to other friends or family members through arrangements such as outdoor visiting, rooms with substantial screens, visiting pods, or from behind windows
- Appointments will still have to be made. No unannounced visits.
- Children and young people aged 18 or under can be a nominated visitor or essential care givers if appropriate.
- Children under the age of 2 will not count in the number of people, when counting visitors.
- Children aged 11 and over must wear the same PPE as adults.
- **Question:** Would it be helpful if we provided guidance for residents who are meeting people outside of a care home (more relevant for LD Care Homes)?

**Answer:** Yes.

We will update both the 1 pages to reflect the new guidance. We will look to keep these to a postcard size to enable you to individuals when they want to take residents out on a visit.

### How to work safely in Care Homes

- Updated guidance is providing new recommendations around:
  - Changing PPE after each episode of personal care

- Eye protection - please look at the National portal around eye protection. If you are unable to get the quantity you need by 12th April please let LBS know and we can get some emergency supplies through to you (potentially same day)
- Please [see full guidance](#).
- **Question:** Can we order reusable eye protection?  
**Answer:** Eye protection can be reused if the manufacturer has identified it can be reused with a cleaning regimen for it.
- PPE portal is now going to remain open until the end of March 2022.

#### **Lateral flow device**

- **Question:** How long do you have to wait for a LFD test result?
- **Answer:** Some people are saying results come up much sooner. Some say that you can see positive results within minutes. Positive tests can be read and reported after 20 mins. You need to wait the full 30 mins for a negative result.
- One home noted that two staff tested negative on LFD but tested positive on the PCR.
- **Question:** Are homes receiving different brands of LFDs?  
**Answer:** It's always the same. They should be the Innova LFDs

#### **Vaccine**

- The DHSC is going to contact homes directly to find out why staff do not want the first dose of the vaccination, if uptake is below 25%.
- Care Home staff can get their first dose when residents are getting their second dose at the home.

#### **Communication with you**

- **Question:** Do you have any feedback on these sessions and the way we communicate with you?  
**Answer:** Sending information via whatsapp would be useful. Every other week for Care Home Q&A is still preferred. One home noted they find the sessions really useful.
- **Question:** Would you find peer support groups helpful?  
**Answer:** A Home has initiated this for LD Homes. We might look to do something similar for older people's homes.

#### **Wednesday 24th March**

##### **Staff vaccinations**

- One home noted that until it becomes law, their solicitors advised it is illegal to refuse to hire someone if they are refusing to have the vaccine because of equal opportunity.
- Doctors, dentists and other health professionals have to get the Hep B vaccine to work in a hospital.
- A few staff who think they may need the vaccine to travel have now changed their mind and have agreed to get it.

- Resident's family and friends have said they want only vaccinated staff working with their loved ones. A home noted this cannot be accommodated, because the vaccine is not mandatory.
- **Question:** If a voluntary care staff member received their vaccine from the service user's GP, do they have to have the second dose from the same GP or should they go to their own GP?  
**Answer:** It has to be the same GP practice (not necessarily the same person). You must have the same vaccine and not mix
- Staff need to be at the care home for the second doses - even if they don't work on the day the GP and CHST are visiting the home. We will let you know in advance when we are coming so you can organise this.
- **Question:** If the care home managers are aware of staff who haven't had their first dose, can they have their first doses if the GPs or CHST team are coming to the home anyway (ie. for second doses for residents or other staff)?  
**Answer:** Yes, if you let us know in advance so we can bring extra supply.
- There is a national problem with the supply of the vaccine at the moment.
- **Question:** Are there any trends arounds side effects from the second dose? Are people having a similar reaction to the first one?  
**Answer:** It is quite variable. It's an individual reaction. Elderly people seem to react better than younger people. One home noted no residents have had reactions but some staff have seen flu like symptoms with the second dose of the pfizer. Another home noted no effects other than a sore arm.

#### **Staff testing**

- We have heard a few homes are testing staff daily. Two homes noted they are doing twice weekly LFD testing and once a week PCR testing unless they have positive cases and then they moved to daily testing. The information is really helpful in case you do have an outbreak.

#### **Visitors**

- **Question:** One visitor has tested negative, but she refuses to have her results recorded. What do I do about that?
- **Answer:** The home is going to try and give the ipad to the visitor and see if she will fill it in. Her issue is with providing personal data.
- We have no update on how the visiting guidance will change as restrictions are loosened. We think updates for visitors into care homes will be slow. However residents visiting outside of the care we will need more guidance sooner as restrictions ease.

#### **PPE**

- There is no sign in a change of PPE requirements as vaccine rates rise.
- Reusable PPE is being explored.

- All visitors have to continue to wear masks, even if the relatives have dementia. Carolyn Moore ([carolyn.moore@sutton.gov.uk](mailto:carolyn.moore@sutton.gov.uk)) is happy to chat to residents / their relatives directly. You can also contact Hannah Gotchling ([hanna.gottschling@sutton.gov.uk](mailto:hanna.gottschling@sutton.gov.uk)) for queries about relatives who lack capacity / have dementia.
- **Question:** How do we work with people who are exempt from wearing masks?
- **Answer:** In GP surgeries they try and see people online or do it outside. If they need to be examined this happens (but all the talking is done before). If they can at least wear a visor that is helpful. For visitors, homes should do a risk assessment and it should be explained that they may be putting their loved ones at risk.
- **Question:** Does anyone know about supplies of clear masks?  
**Answer:** They're very expensive and can only be used once. They are more suitable for those people who need to lip read.

### **Wednesday 10th March**

#### **Visitors**

- A home with a visiting pod noted having visits without masks is much better as residents really appreciate being able to see the people's faces. Access to the pod happens outside. They have an intercom. They had a singer in and the residents really enjoyed it.
- There hasn't been a rush on visiting, since the new guidance has been announced.
- The media have not been helpful by saying you can hug your family when this is still not allowed.
- Some homes have found it difficult to agree the nominated visitor. One home made suggestion is should be the person who lives the closest or the resident knows the best.
- Helen is creating two 1 page updates on visiting both inside and outside care homes to support homes to understand the policies. This will go out on Friday 12th Care Matters weekly.
- The nominated visitor must not change.
- Information on essential care givers:  
For some residents a visit with a greater degree of personal care may be central to maintaining their immediate health and wellbeing.  
In such cases, in addition to the single named visitor and with the agreement of the care home, the 'essential care giver' will be enabled and supported to provide this care and they will be able to visit more often. They will have access to the same PCR and rapid lateral flow testing and PPE arrangements as a member of care home staff. Each resident will be different, and the exact arrangements will need to be agreed between the care home, resident and their family (with professional support if helpful). This should follow an individualised assessment of the resident's needs.

#### **Vaccinations**



- 2nd dose vaccinations are being planned by the person / team who delivered the first dose for your home (GP or CHST). We will start the elderly homes on the 18th April. We are recommending these are done by April.
- If you have any staff who would like to be vaccinated, please let your vaccine team know. They can order more to vaccinate staff as well on the day.
- You do not need to get consent for the 2nd dose, as long as the first dose went well and there were no negative reactions. If there were any issues, you can let us know and we can discuss with residents and their family

#### **Q&A time & frequency**

- We have been running these sessions since October. Do we need to continue to meet weekly or 2 weekly or monthly?
- One home agreed fortnightly would be helpful.

#### **Care Home Forum**

- We are concerned about Managers time so would like feedback on whether and when to bring the Care Home Forums back?

#### **Infection prevention control**

- Please contact Sarah Brown ([Sarah.Brown@swlondon.nhs.uk](mailto:Sarah.Brown@swlondon.nhs.uk) if you have any questions).

#### **Current outbreak**

- If you have an outbreak currently you will be getting an invite for a drop in session each Thursday between 1 and 1:40 to discuss outbreak response and the support that has been offered. This will help us to understand the learnings from outbreaks.

#### **Wednesday 24th February**

##### **New guidance around loosening restrictions**

- **Question:** Is an outbreak still defined as 2 or more positive test results (in residents), and therefore visiting would cease?  
**Answer:** Yes this will still be in place until further guidance. Please continue to enable visits in exceptional circumstances.
- **Question:** Families are going to ask to have a coffee in the park with our residents, is this possible and when?  
**Answer:** We are expecting further guidance on this and based on the recent announcement about easing restrictions, we anticipate that it would be possible for care home providers to enable outdoor visits for residents. Please expect more detail soon.
- **Question:** When residents are allowed to visit families and stay over will the visiting / isolation guidelines be updated.

**Answer:** We anticipate the visiting guidelines will be updated. We are looking at putting together a visiting action card to provide you information on different visiting situations and what to do.

- **Question:** Will the ICF finish on March 31st?

**Answer:** We are advised it will finish. We advise you look at how you can invest the funding you currently have to support safe visiting. Paying staff for isolating will have to be done through statutory sick pay after the fund finishes.

- **Question:** Is there a limit for how many visits a resident can have per week?

**Answer:** Currently visitor numbers should be limited to a single constant visitor wherever possible, with an absolute maximum of 2 constant visitors per resident. No further detail on limits have been provided so far. We will provide you an update via the Sutton Care Hub and email if more information is provided.

### Vaccine

- **Question:** When will we hear about the 2nd vaccine? Some staff are coming up to 10 weeks.

**Answer:** This week is the last week of 1st doses of Pfizer at Nonsuch Mansion. We want to start 2nd doses next week, however we are waiting for sign off. Please send your lists of who needs a 2nd dose and is coming up to 12 weeks to Viccie Nelson ([Viccie.Nelson@swlondon.nhs.uk](mailto:Viccie.Nelson@swlondon.nhs.uk)).

- **Question:** One resident has not been vaccinated. I have contacted the GP and the CHST. I understand the logistics are complicated around providing one vaccine.

**Answer:** We will need to explore the best option, for example:

- Can they do this first dose at the same time as the second dose?
- GPs are doing housebound visits, or they can do clinics in a surgery.
- Vaccination clinics are taking place in Cheam Baptist church next week.

### Testing

- **Question:** Issues with testing and the dentist.
- **Answer:** Dentists should be testing themselves twice a week as part of regular testing, however we understand that as managers you will want to be assured and you should base this on trust. If the visiting professional is not coming to the home very often, it may be reasonable to ask them to get tested to comply with the Care Homes policies.

### GP alignment

- All residents need to be registered with one GP by the end of March. If you have residents registered at multiple GPs, please identify who your clinical lead is and look to get all your residents registered with them. GPs are happy to have conversations with families to reassure them.
- Respite residents can be temporarily registered to the GP

### Shielding staff

- Staff who have been told to shield have been advised to work from home if possible. Most staff in the care home cannot work from home. There needs to be a risk assessment with the Manager, to see if they can work in an area with lower risk of COVID transmission. If they want to work they can. It is a choice.

### **EU Settlement Scheme (EUSS)**

EU citizens urged to apply to the EU Settlement Scheme

- What is EUSS?
  - Staying in the UK after Brexit
  - Most EU, EEA or Swiss citizens and their family need to apply to the EU Settlement Scheme to continue living in the UK after 30 June 2021.
  - They can also apply if they are the family member of an eligible person of Northern Ireland.
  - The EEA includes EU countries and Iceland, Liechtenstein and Norway.
  - If their application is successful, they will get either settled or pre-settled status.
  - The application to the EU Settlement Scheme is free.
    - EU nationals/ family members need to apply even if they have Permanent Residency
    - Children need individual applications
    - EU nationals need to secure their status to ensure they can continue to work, study, rent, receive NHS care and access to other benefits as public services, public funds and pensions
- How to apply
  - Usually EU nationals need to apply online and verify their ID using EU exit ID document app.
- What do they need to apply?
  - The application asks for basic information like name, address, contact details (email address and mobile phone number), nationality and NINO if they have one.
  - In order to start the application online and verify their identity using the EU Exit ID Document Check app the client needs a valid passport or ID document or biometric residence card (if they are a non-EU citizen).
  - Some people must use a paper form.
  - Clients need to request a paper form if they don't have (or can't get) an identity document, such as a passport.
  - Completion of paper forms requires more specialist advice and the adviser needs to be OISC (Office of the Immigration Services Commissioner) accredited at level 2
  - A Local Authority would not need to be OISC registered to obtain a paper form for a looked after child or care leaver.
  - Criminality Checks

- As part of the application clients need to complete the criminality check by declaring any criminal convictions.
- Criminality checks will be conducted against UK criminality and security databases, as well as overseas criminal records where appropriate.
- Minor offences, such as driving offences, will not affect their application.
- The criminality check will not affect the majority of EU citizens and their family members.
- Proof of residence
- Home Office will use existing Government data, where available, to make it easier for clients to prove how long they have been living in the UK.
- If a National Insurance number is provided, checks will be run against HMRC and DWP records.
- It will help tell them whether the client is eligible for settled or pre-settled status. There may be cases where residence cannot be proven automatically in this way and they may require additional evidence.
- If that happens they will be able to submit further evidence online by uploading documents into their application.
- Best evidence to provide are Council Tax Bills, Annual Bank Statements, Phone Bills, Utilities Bills, Doctor or Hospital Letters, Employer Letters, Payslips, P45 and P60, Tenancy Agreements.
- For a list of suggested evidence that is accepted, visit [gov.uk/eu-evidence-of-residence](https://gov.uk/eu-evidence-of-residence).
- Successful applicants will get digital proof of their status through an online service.
- After the application has been submitted they will receive an email stating a Certificate of Application. That letter is the proof that they have applied to the EU Settlement Scheme and is not the decision letter.
- Once the Home Office has made a decision they will send another email with the decision letter attached.
- That decision letter will state if they have been granted Settled or Pre-settled Status
- Family members who are from outside the EU will receive a biometric residence card if they do not already have one.
- Their status will be stored electronically by the Home Office. Once they receive the status, clients will be able to access it to view or prove it on GOV.UK
- Applications for Children
- Children of EU nationals need to apply for EU settlement Scheme.
- Their applications will be linked with one of their parents and they will be granted the same status as their parent.
- During the application you will need the parent's full name and their application number. You also need to upload proof of their relationship as birth

- certificate or benefit letters (Child Tax Credits, Universal Credit or Child Benefit).
- If the child is a looked after child or a care leaver their application can be made without being linked to their parents but on their own merit.
- Processing Time
- The Home Office states that the applications can take 5 days to process and sometimes longer, even 1 month or more.
- Help is available locally:
  - Citizens Advice Sutton, St Nicholas Way, Sutton, SM1 1EA, Visit Monday to Friday 10am to 3pm, call 07389731261, email euss@citizensadvicesutton.org.uk
  - The Home Office updated its EUSS caseworker guidance to include a section on applications in respect of adults with care or support needs, here:
  - [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/940843/main-euss-guidance-v8.0ext.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/940843/main-euss-guidance-v8.0ext.pdf)

**Wednesday 10th February**  
**COVID-19 Vaccine**

- If you have any residents who weren't vaccinated or new residents who require vaccination please get in touch with the care home support team. Sometimes new residents have been vaccinated so please check on admission.
  - We are seeing more and more care home staff wanting to be vaccinated. If you have any staff who are not sure where they need to go to get vaccinated, please get in touch. Staff are able to go to a number of local sites.
  - If you have staff who are undecided about the vaccine please continue to have conversations with those staff. If there are issues and themes which are coming up consistently in these conversations, please let us know so we can debunk any myths and reassure staff as much as possible.
  - We are seeing very few side effects with the vaccination.
  - We are still seeing outbreaks after care home residents and staff have the vaccine, as you can still get COVID-19 with the vaccine, but people experience much less severe symptoms.
  - Please note if you have had COVID-19 before, you still should get the vaccine as we do not know what level of immunity having COVID-19 provides you compared to the vaccine.
  - Both vaccines are very effective and safe so it shouldn't matter which one you have. You should get whichever vaccine is available at the time.
  - We are considering what support we can provide to encourage people to get the vaccine. For example:
    - Information sharing events with similar staff from different homes
    - Resources in different languages.
- If homes have any other ideas please share.

- **Question:** The process to book the vaccine is not simple. Staff may be too embarrassed to say that they are struggling. The process is time consuming and you have to have the information to hand. Some of the carers are not great with technology. Another home reiterated this point. Booking the vaccine at Wilson was a much easier process.  
**Answer:** We will feed that back to see if the process can be improved.
- **Question:** Will the second vaccination for care home residents be brought forward to less than the 12 week period?  
**Answer:** We are hoping to vaccinate people in less than 12 weeks, however we are waiting for permission from NHS England to provide second doses, which is dependent on the priority deadline on the 15th February.
- On swiftqueue your second dose is booked automatically, 12 weeks later
- If you did not book on swiftqueue the site will contact you before 12 weeks from your first dose. If it is coming up to 10-11 weeks since your first dose please contact the site to confirm.
- For residents it should be straight forward as the GP practice or CHST will come and give the second doses.
- One home noted because they had their vaccination 10 days before, they believe their residents had less severe symptoms.
- The COVID-19 vaccine is not mandatory and staff will not be let go if they do not have the vaccine.

Please note:

- Sutton Council's Director of Public Health Dr Imran Choudhury along with Dr Pardhanani, the GP clinical chair and council leader Ruth Dombey will hold a live, online Q&A event on Thursday 11 February at 6pm.
- The event will give residents the chance to ask questions about the COVID-19 vaccine.
- This event is open to all Sutton residents.
- Please [register for your ticket to this live event](#).
- If you have a burning question and would like to hear from a trusted local GP and from Sutton's Director of Public Health, then join us for a live Q and A. You can [submit questions in advance](#) anonymously or ask the panel live.




**COVID-19 VACCINE:  
YOUR QUESTIONS  
ANSWERED LIVE**

Join Sutton Council's first live webinar on COVID-19 vaccination on 11 February 2021 at 6pm. Taking your questions will be the borough's Director of Public Health, the GP Clinical Chair and the Leader of the Council. Open to all Sutton residents.

We know that some residents still have unanswered questions about the vaccine. Please join us to ask any questions you have.

**Only limited places are available on a first-come-first-served basis, so please reserve your place now.**

**THE PANEL**

 <p><b>Councillor Ruth Dombey Leader of Sutton Council</b></p>	 <p><b>Dr Imran Choudhury Director of Public Health Sutton Council</b></p>	 <p><b>Dr Dino Pardhanani GP Clinical Chair Sutton Borough Team NHS SWL CCG</b></p>
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### **Outbreaks and Infection Control**

- You do not need to wear shoe covers, as this may spread infections more.
- Please take the opportunity to book refresher ICP training, as guidance is continually being updated.
- Modupe noted questions about whether the PPE the homes are using is good enough to provide infection prevention and control with the new strain. The fluid repellent masks are protective. However if you have a resident who coughs up a lot, think about additionally wearing a visor to protect the rest of the face.
- It is important if you are adding any other PPE on to the recommended list, you need to ensure your staff are donning and doffing correctly and are trained correctly.
- If you are uncertain about products please contact us.

### **Testing**

- Some LD homes have experienced delays in experiencing LFD kits. They were able to borrow kits from other homes in the area. Please continue to contact 119 if you have any issues and if this is not helpful please contact [asc.providercomms@sutton.gov.uk](mailto:asc.providercomms@sutton.gov.uk).

### **Remote monitoring**

- When there are signs of something wrong (e.g. different behaviour or eating). Monitoring can be put in place to detect deterioration. This is not there for extra work or to be used all the time, but can be useful for residents who are deteriorating.

- Part of this is going to be the RESTORE training. You need to have this training to use the kits.
- The company providing these devices also has a medication management system which we are utilising.
- The training for this should happen in the next couple of weeks via a webinar.
- **Question:** One home noted the RESTORE training is a bit ambiguous around advanced care plan/dnar etc. For example someone might score high because their baseline rates might be high or low and that is normal for them.  
**Answer:** This is true and we will hopefully iron out these issues, the inverse is we don't have this system and escalations are note made.
- Please note anyone can have the training (not just clinical). One home noted they had asked for carers to have it as the feedback from the training was good.
- We have approved a Clinical Examination Skills course for all RGNs directly employed by care homes in Sutton.
- The receptionist at the GP needs to be trained so they can prioritize appropriately. GPs are trialling a bypass number of emergencies.



**Wednesday 3rd February**

**Testing**

- **Questions:** How does the scanner work. The scanner did not come with instructions. What are the extra bar codes for?  
**Answer:** Homes who have received the scanner noted, they plugged the scanner into the USB of a computer and it made things quicker because you don't have to type the number in twice. We will look into who is best placed to provide the training and information on the scanner.
- **Question:** If there is no physical contact and the visitors take their own temperature do they need to do the LFD test?  
**Answer:** The guidance states that indoor visits at the end of life should be supported by LFD tests. However, if you are at all concerned in any way you can request visitors to test for screened visits. Please ensure, as per guidance, that you advise your visitors that testing is a way of minimising the risk of visiting a care home and if your visitors consent to have the test there is no harm completing it. It is important that visitors observe social distancing, PPE and hand hygiene practice.
- Visiting professional testing should be in line with guidance and it says that any professionals who are part of regular testing do not require a test on the door of the care home. Lee noted CHST staff are swabbed weekly x 2 it is not necessary for staff to be swabbed every time that they visit a home.
- Homes were also advised they shouldn't LFD CQC inspectors, as they are part of regular testing. One home noted, the CQC inspector refused to do the LFD test so the CQC inspector did not enter the home, speak to staff or residents. They completed the audit from the manager's office.

**COVID-19 vaccination**

- Some residents who have had their vaccines have tested positive but have no symptoms.
- One home noted, as soon as the home had one positive case more staff wanted the vaccine.
- **Question:** When/where do staff get their 2nd vaccination?  
**Answer:** Individuals will need to be vaccinated at the same place they got their first vaccination. For individuals who have had their vaccine at Nonsuch Mansion, GP surgeries will invite individuals back for their second dose. It will be around 10-12 weeks from the first dose.

**COVID-19 outbreak**

- **Question:** When we have an outbreak the home is closed to new admissions for 28 days. Is this from the first positive case or last?  
**Answer:** The guidance does not state that the home is closed to new admission for 28 days because of an outbreak. The guidance states that the Health Protection team may advise closure of home to further admissions, recognising this is usually the care

home manager's decision in discussion with their commissioners (and alerting the CCG and local authority). An outbreak is declared over 28 days from the last positive person (confirmed) or someone with symptoms (suspected).

- **Question:** When you have finished your outbreak, is there a letter which says the outbreak is complete, or can we go ahead and lift the outbreak restrictions?  
**Answer:** Public health will write a letter with some instructions after 28 days. The letter is not sent until you have completed your [online testing form](#) and provided assurance that there are no longer any new positive people from recent home testing.
- **Question:** One home noted they are struggling to understand where the COVID-19 infection has come from?  
**Answer:** Testing is so important. More testing helps provide more information. You may need to move resident testing to coordinate when staff test positive.
- **Question:** I had staff who had positive PCR tests and a negative LFT test. Within the 90 days what testing do I need to do?  
**Answer:** PCR and LFD testing is not required for someone with a positive result within 90 days. Please see the following guidance: [COVID-19: management of staff and exposed patients or residents in health and social care settings](#)
- We noted it is very difficult to not have an outbreak so we have to prepare as much as possible. We should not feel like we've failed. There is no blame.
- We are there to help. The more information we are given the more help we can provide. No one is blamed and it is about learning from the outbreaks to minimise risk.

#### **CQC / Sutton Infection Prevention Control audit**

- It is adding stress knowing that they will be turning up at some point. Please contact Carolyn Moore (carolyn.moore@sutton.gov.uk) if you want to discuss your ICP.
- CQC wants to know how much PPE you have, so you should audit your PPE item.

**Wednesday 27th January**

**COVID-19 vaccination**

- All residents in older people's homes (who were not COVID-19 positive in the last 4 weeks) have been vaccinated.
- We are in the process of vaccinating the LD homes and residents living in supporting living. Homes are being prioritised by age of resident.
- Staff in LD homes can be vaccinated at the same time. We are seeing staff who had hesitancy around the vaccine want to get it when the offer is there on the day. We need to know in advance how many staff would like the vaccine so we know how much to bring.
- Some LD homes are waiting for the vaccine. If your residents do not want to wait, mobile residents can go to Nonsuch Mansion to get their vaccine. This can be booked through resident's GPs.
- GPs may be able to pick up the vaccine from Nonsuch Mansion to provide clinics to give the vaccine in their surgeries.
- The vaccine which is being administered at Nonsuch Mansion is the Pfizer vaccine. Over 65s should be completed by the middle of February. You may have to wait until these people are complete for LD residents to be able to book in.
- The pfizer vaccine gap is recommended between 3 and 12 weeks. This guidance has changed as it was originally 3 weeks. This supports more people to get the first dose. We may see the 12 weeks reduced to 6 or 8 weeks, based on delivery. For more information please see the following independent report: [Optimising the COVID-19 vaccination programme for maximum short-term impact](#).
- The hospital will contact you to book the second dose. Will we double check with Wilson Hospital if their process is different.
- Everyone will (or already has received) a letter from Nick Ireland which outlines the process for any staff who have not been vaccinated - including a unique link.

**Infection Control & RESTORE Training**

- The vaccine does not make you immune from COVID-19, it reduces the severity of the effects of COVID-19. It is so important to keep infection prevention control in place to stop transmission. You still may spread COVID-19 if you have had the vaccine.
- Some homes have asked for a refresher on infection control training which is a good idea to re-emphasise the messages around infection control.
- RESTORE training is still on offer. If you haven't had this training please sign up. One home noted how beneficial the RESTORE training was, especially as a refresher, to get extra information.
- We want all of the GPs to complete RESTORE training as well.
- For information on how to register for both training programmes please visit the [Sutton Care Hub - Training Page](#).

**Rapid testing fund**

- You will have also received information about the rapid testing fund. Please look at the specific criteria. Your nominated lead for testing must attend the rapid testing funding training webinar to release the funding.

#### **Vitamin D**

- Vitamin D is not on prescription and comes under home remedies. The family can get it for the resident. It may have been prescribed for a reason.

#### **CMCs**

- One home noted GPs will do a meet and greet and complete the CMC. Most residents are on CMC.
- Some homes have Sutton Care Home Support Team to support with this.
- Some homes noted it has dropped because of other pandemic pressures.
- Some homes noted they would like help with the CMCs.
- Not all paramedics are aware of the CMC.

#### **Support for Managers if they are off work**

- If managers are off sick what happens?
  - One home noted the Deputy Manager steps in. If both the Manager and Deputy Manager are off work/have to isolate the Regional Nurse Manager will step in.
- The council can provide support through their contacts at the CCGs and Agencies. You can also use your infection control fund to ensure any agency staff do not work at any other care homes.

#### **Feedback on outbreak management**

- One home noted: I can only speak for my experience during an outbreak. The support from everyone was fantastic. Everyone was available at different times of the day. You are literally not alone

#### **Wednesday 20th January**

#### **Sutton Care Hub survey**

- We are currently working on phase 2 and 3 of the Sutton Care Hub. We want you and your staff's feedback on:
  - What you want to see on the hub
  - What we could do to improve the layout
  - What are the most important areas / pages
  - How would you like to be notified of updates to the site

[Link to survey](#)

#### **Capacity tracker**

- Please complete the [Public Health online google form](#) as well as the Capacity tracker.

- We appreciate the time this takes but this information is vital to help us provide you the right support.
- **Question:** When we fill the number of staff tested do we count PCR and LFTs or just one?

**Answer:** Capacity tracker - Please just record PCR tests.

Public health Online submissions - Please record both. The Public health Online submissions gives us more information around testing to support us with outbreaks.

### **Discharge**

- If a resident has tested positive in a hospital, they must isolate for 14 days. If they are well enough to leave hospital but still within the 14 days they should go to a TADD. After 14 days, they do not need another test, they can go home.
- Please note: *An exception to this process is for individuals who have tested positive for COVID-19 and are within 90 days of their initial illness onset or positive test date. If these individuals have already completed their 14-day isolation period from onset of symptoms or positive test result (if asymptomatic) and have no new COVID-19 symptoms or exposure, they are not considered to pose an infection risk. They therefore do not have to be re-tested and can move directly to a care home from hospital.*
- Please make sure you are aware of the current rules for each of these subject areas:
  - [Visiting Care Homes](#)
  - [Visits out of Care Homes](#)
  - [Discharge into Care Homes](#)
  - [Looking after people who lack mental capacity](#)

### **COVID-19 vaccinations**

#### **Older people homes**

- We will have completed the first vaccination in all older people homes by the end of this week.
- There have been no major side effects in older people. We have seen more side effects in younger people.
- Some staff have changed their mind on the day we have come to vaccinate residents and agreed to have the vaccine, as they have spoken face to face with a GP.
- Care Home staff can continue to get the vaccine at:
  - Croydon
  - Epsom St Hellier
  - Royal Marsden
  - St George's
- Please revisit staff who may have changed their mind and they can book through the individual provider link.

#### **LD / MH / PD Younger people homes**

- We are trying to prioritise homes with older people in the home, or clinically vulnerable people. We are looking to vaccinate all younger people's homes in the next 2 or 3 weeks.
- To prepare please:
  - Gain consent from residents
  - When you are contacted you will need to confirm how many people want the vaccine (residents and staff) and if anyone is COVID positive. If you have COVID positive residents or staff, this does not mean we will not come to the home, but we will have to complete a risk assessment to make a decision. Residents who have tested positive for COVID-19 in the last 4 weeks are not recommended to have the vaccine.
  - If there are special requests (such as anesthetic cream) please let us know, as we will need to order this in advance.
- On the day of the vaccine we will need help from the home, please:
  - Have the right staff in on the right day. Staff who know the residents well.
  - It is also helpful if staff dress residents in loose clothing to make the vaccine easier to give out quickly.
  - Please provide us a room to give out the vaccine and bring the residents to the room, if possible.
- If residents would like the vaccine quicker, those that are well and mobile, can book an appointment through their GP and go to the vaccination site at Nonsuch mansion.
- Side effects of the vaccine can be a sore or achy arm. People find that paracetamol works well for this.
- **Question:** We're having issues with the GP and best interest forms. They said the person giving the vaccine will sign them off and it has nothing to do with them.  
**Answer:** The best interest decision needs to be made by someone who knows the resident the best. The form needs to be completed based on what the person thinks the residents would want. You should be able to ask the GP if you need to. Hannah Gotchling (hanna.gottschling@sutton.gov.uk) will be able to provide support if you are experiencing issues. If GP doesn't respond to the best interest form let Shazma ((shazma.mawani@nhs.net) know and she will follow up.
- The GP practice of the LD homes have been contacted. Some will be doing their own homes and others will be done by the Sutton Care Home team. If the Sutton Care Home Team is doing your home they will support you with any forms.
- We can not give GPs vaccines to use when they like. They must pick them up and use them within 6 hours. The logistics must be agreed because of the resources.
- **Question:** Will a care home registered as a physical disability home be vaccinated at the same time.  
**Answer:** Yes. Please be sure to get the consent forms.

**Track and trace**



**South West London**  
Clinical Commissioning Group



- **Question:** A staff member asymptomatic tests positive they should isolate for 10 days. If after 5 days their wife tests positive they get a notification to isolate through track and trace to isolate for another 10 days or be fined. This is not in line with guidance.  
**Answer:** If you tested positive and were asymptomatic, you do not need to isolate again. If you haven't tested positive you will need to continue isolation. Modupe will take this issue to the Director of Public Health.

**Wednesday 13th January**

**Healthwatch - Friends and Family presentation**

- Peter Flavell (Chief Executive Officer - Healthwatch) provided an introduction and some background on Healthwatch.
- Healthwatch are working on a friends and family survey to collect feedback from residents, their relatives and friends.
- Before we finalise the survey, we would appreciate feedback on:
  - Any additional questions (e.g. about new areas such as the COVID-19 vaccine)
  - Any additional questions from other surveys you have seen
  - Whether it would be helpful to have questions for staff to fill out
- The survey can be sent online or on paper with free post envelopes, depending on what works best for residents, relatives and friends. We will try and make it as easy as possible for you.
- We have created communications via posters, social media posts and would ask you to add to your newsletters which go out to family and friends, when the survey is released, to encourage completion.
- If the residents don't have capacity, their relatives can complete the survey with them.
- Feedback from Care Homes
  - Questions will need to be accessible for people with learning disabilities.
  - We may get more responses with the paper forms as staff are burnt out with IT systems. Response from Pete: We will send each Care Home a small number of paper questionnaires and free post labels. Please let us know at the time if you want more.
  - Helen and Pete will work with the Homes to ensure the survey goes to the right person (Care Home Manager or Area Manager across many homes).
- We may delay the survey until the older people's homes have been vaccinated by the end of January.
- Once we have collected the responses we will, share feedback, anonymously:
  - with Care Home managers
  - With LBSto create action plans.

**COVID-19 vaccine programme**

- We received our first batch of 400 AZ (Oxford) vaccine on Friday at 4pm, 8th January. We mobilised teams quickly and were able to give half of the vaccines on Saturday.
- We are administering vaccines around 10 vaccines an hour.
- We have just under 800 care home residents in total in older people's homes to vaccinate. We aim to have all older people's homes complete by the end of January.
- Around 60% of GPs agreed to vaccinate their Care Homes, the other 40% required the support of the Care Home Support Team. We have started vaccinating the homes where the GPs agreed to complete the vaccination as they do not require a Patient



Specific Directive. From Friday 15th January the Care Home Support Team will complete their vaccines with the completed Patient Specific Directives.

- It is important that Care Homes have the right staff in on the right day. Staff who know the residents well. It is also helpful if staff dress residents in loose clothing to make the vaccine easier to give out quickly.
- When we get to a Care Home, we will give out vaccines in the following order, to provide more time for more complex cases (if needed):
  - Less complex cases
  - Complex cases
  - Residents who are allergic to many medications
  - Non-mobile residents
- For Care Homes with an active COVID-19 outbreak we will complete a risk assessment before we come to the home. Residents who have tested positive for COVID-19 in the last 4 weeks are not recommended to have the vaccine.
- Things are changing very quickly after an hour and half of vaccinations on Saturday we were informed we were legally allowed to get 11 vaccines per vial. Previously this was 10.
- If there are any vaccines left per vial and all the residents have been vaccinated they can be given to staff. In one case it was possible to give these vaccines to the staff of a neighboring LD Care Home.
- If you have staff who have not been vaccinated please contact Shazma ([shazma.mawani@nhs.net](mailto:shazma.mawani@nhs.net)) and she can book staff an appointment for Saturday afternoon (15th January) at Nonsuch mansion.

#### **COVID-19 vaccine side effects**

- In Sutton, we have had no allergic reactions to the AZ and pfizer vaccine. Some people have felt nauseous or dizzy, but very rare.

#### **COVID-19 vaccine for LD Homes**

- We are currently not allowed to vaccinate LD residents unless they are over 80, because of the priority order. If you have mixed ages in your homes, if you let us know we could potentially come and vaccinate the whole home.
- The prioritisation could change quickly for the LD homes so please continue to get consent from your residents as we know this may be difficult.

#### **COVID-19 vaccine for residents on the end of life pathway**

- The decision of whether a resident on an end of life pathway should have the vaccine, should be made on a case by case basis by the resident and their family.

**Wednesday 23rd December**

### **COVID-19 vaccination for staff**

- Across SWL, Sutton has the 2nd highest rates of care home staff who have the vaccine or have registered their interest for it.
- We encourage staff to email the dedicated inbox to book to get a vaccine. If you do not get an automated response please try again as your response may have not been registered. After you apply, someone should call you (including weekends) within 5 days. The call may be from an unknown number. Croydon Hospital are sending you a link to their booking system.
- Shazma had her vaccination today and found it less painful than the flu vaccine, as it was a smaller needle. She felt fine other than a slightly aching arm. This experience is similar to other staff.
- The Wilson hospital has been added.
- When we vaccinate residents we may be able to vaccinate staff as well.

### **COVID-19 vaccination for residents**

- You have to be really careful with the vaccine, as it is fragile. This makes it difficult to transport. This is why it has not been taken to the Care Home residents yet.
- There has been 7 pilot sites where the Pfizer vaccine has been taken to Care Homes, using cool boxes with gel packs. They had a freezer at the main hub. In the morning they were able to take the gel packs out and load the boxes. They were reconstituted and drawn up at the care homes. They believe this was successful.
- We will start vaccinating residents in the first week of January. However, it does depend on vaccine supplies, deliveries and logistics as to which homes will go first. This applies to elderly care homes.
- We need homes to start going out for consent now. Please see the [forms](#).
- GPs and CHST are having the training now to draw up and give out the vaccine.
- The Pfizer vaccine has to be stored at a very cold temperature. The vaccine needs to be given within 2 hours of being out of the fridge.
- We will give you a day and time frame of when we will arrive to give the vaccine.
- It would be helpful if you had an empty room for us to prepare the vaccine. We will go to the bed-bound residents room to give the vaccine. As the vaccine is so fragile it is ideal to give it out in a communal area which residents can be brought to.
- We will bring everything we need:
  - PPE
  - Sharps bin
  - Checklist/consent forms for allergies / previous vaccinations / COVID-19
  - etc
- We will give you a card which says the date of the 1st dose of the vaccination.
- We will do the largest homes first. We will look at geography to cover off homes in the same area.
- We cannot vaccinate a home whilst there is an ongoing outbreak. Individuals should wait 4 weeks after having a positive COVID-19 test to have the vaccine.

- You should not have had the flu vaccination within one week of the COVID-19 vaccine.
- The Oxford vaccine is much easier to give and transport, but at the moment we do not have a date for when that will be approved.
- We are going to have a webinar for relatives who would like to ask questions about the COVID-19 vaccine on Monday 4th and Tuesday 5th of January. We will provide some more information about these sessions shortly. Staff and managers can join if they would like.
- There will be a short notice list for people who want the vaccine in case there are any leftovers.

#### **COVID-19 vaccine - LD Homes**

- LD Homes are not a priority at the moment. They will be vaccinated closer to spring time. They are priority group 6. If you have LD residents who are over 80 you can bring them to the Nonsuch Mansion for their vaccine. This can be booked through their GP.

**Question:** Should I start getting consent from my LD residents?

**Answer:** Yes as this may take time.

**Question:** What is the link to training for people giving the vaccine?

**Answer:** <https://www.e-lfh.org.uk/programmes/covid-19-vaccination/>

There is a module on the pfizer vaccine. There will be a separate module for the oxford vaccine. Shazma will find out what the registration code for eLearning for Health should be. [sutton.qm@gracewell.co.uk](mailto:sutton.qm@gracewell.co.uk)

#### **LFD test**

If staff miss the PCN test LFD tests could be used as a fail safe. There is no requirement to test care home staff workers who are visiting staff outside.

#### **Cards and gifts**

One home noted they got a lovely surprise from the Local Authority, cards for residents and gifts for the staff.

**Tuesday 22nd December**  
**COVID-19 vaccine dedicated session**

**Question:** If you have tested positive for COVID-19 before do you need the vaccine?

**Answer:**

- Yes, you still need the vaccine. When you have COVID-19 you will develop some immunity but we do not know how strong it is and how long it will last. The vaccination will give you longer immunity.
- You should not have the vaccination if you have had COVID-19 in the past 4 weeks. This is so if you get any symptoms we can know whether they are from the vaccine or COVID-19 virus.

**Question:** How long will immunity last?

**Answer:**

- We don't know how long immunity will last yet. We may have to have the COVID-19 vaccine annually. We need to continue testing to provide data on how long immunity will last.

**Question:** Is it mandatory?

**Answer:**

- It is not compulsory / mandatory. No one can force anyone to take it. However it is recommended, as we currently do not have an alternative to protect us all from COVID-19 in the long term.
- Care Home Staff and Care Home residents are in priority group one because it is more important to build an immune response in high risk people. The more people vaccinated the less people who will need to go to hospital. The benefits are much higher than the risks.

**Question:** For staff, what is the waiting list for the vaccine? Staff who have opted to have the vaccine at St George's have got it quickly. Staff who have opted for Croydon hospital have not yet.

**Answer:**

- You should get a call from an unrecognised number when you apply for the vaccine.
- After you have emailed the COVID-19 vaccine with all the relevant information, you should get an automatic response. If you don't get that automated response please email again.
- Staff can send their details in individually or a manager can sign up many people at once.
- There is a bit of a backlog in certain areas. If you want to get it from the Wilson Hospital they have capacity this week.
- Croydon Hospital has changed to an online booking system. They will send you a link for you to book the vaccine yourself.

**Question:** Where are the vaccinations of residents?

**Answer:**

- We are hoping to start vaccinating residents in the first week of January. However, it does depend on vaccine supplies, deliveries and logistics.
- We need homes to start going out for consent now.
- GPs and CHST are having the training now to draw up and give out the vaccine.
- The pfizer vaccine has to be stored at a very cold temperature. The vaccine needs to be given within 2 hours of being out of the fridge.
- We will do the largest homes first. We will look at geography to cover off homes in the same area.
- The Oxford vaccine is much easier to give and transport, but at the moment we do not have a date for when that will be approved.

**Question:** Will there be form to say we have has the vaccine

**Answer:**

- There will be a form which shows if you've had the vaccination.
- There is a card given to show you have had your COVID-19 vaccine.

**Question:** If a resident has capacity and does not want to have the vaccine. Is there anything we can do?

**Answer:** You should provide them all the information to make an informed decision. However if they still decline you must respect their decision.

**Wednesday 16th December**  
**COVID-19 vaccine dedicated webinar**

**Question:** If someone is allergic to many things? What is the risk of getting a reaction to the vaccine?

**Answer:**

- The overall side effects of the vaccine for most people seem very mild, for example: a tired arm. Two people (with severe allergies) have had an anaphylactic reaction.
  - If you have had an anaphylactic reaction in the past the recommendation is you do not have the vaccine.
  - If you have been prescribed an epi pen you should not have the vaccine.
  - If you have a mild allergic response, for example you get a rash or mild allergic reaction you can still have the vaccine.
- All staff given the vaccines are trained in anaphylaxis, just in case.

**COVID-19 Vaccine Presentation**

**Presented by Sarah Taylor (Chief Pharmacist for the Sutton Borough)**

Some key points from the presentation are:

- The COVID-19 vaccine is a messenger mRNA vaccine. There is no live / whole virus in the vaccine. In getting the vaccine your body will produce antibodies which are ready if you are then exposed to COVID-19. The vaccine does not change your DNA.
- Some people are worried about how quickly the vaccine has been produced. The vaccine has gone through the normal clinical trials on 44,000 people across age, ethnicities and gender demographics. The vaccine showed effectiveness of 95%. The difference between this and other vaccines, which have taken longer to develop, is that there were more resources and finance put into this vaccine to help it move quickly.
- Everyone can have the vaccine, except :
  - People who have experienced an anaphylactic reaction to vaccines, food or medicines in the past and/or have an epi pen.
  - Women who are pregnant, breastfeeding or planning on getting pregnant. This is not because the vaccine affects your fertility. This is only because all new medication and vaccines are not given to pregnant or breastfeeding women, as they are not tested on pregnant women.
  - People who have had the flu vaccine in the last 7 days. The advice is for staff and residents to get their flu vaccine now so you are ready to have your COVID-19 vaccine when you can.
- The COVID-19 vaccine is given in two doses 21 days apart.
- You may be thinking you are fit and healthy and if you get COVID-19 you will be fine, however:
  - You can not predict who is more likely to be more severely affected

- You may experience long covid symptoms even if you are not carrying the virus anymore
- You may feel well but you can still carry the vaccine to other people
- At the moment we cannot bring the vaccine to Care Homes however we hope to either be able to do this soon or use the oxford vaccine once signed off. When this is an option, the vaccine may be brought to you by your GP or Care Home Support team.
- The MHRA are currently reviewing the Oxford vaccine for approval, we hope that this will be more suitable (logistically) to bring to care homes.
- Please start to obtain consent and have best interest discussions, if necessary, from your residents about the vaccine so you are prepared to give it to them when the time comes.
- Nursing staff who will be giving out the vaccine will need to complete the appropriate training. Please see the Sutton Care Hub's [COVID-19 vaccine page](#) for more information

**COVID-19 Vaccine Booking Process**  
**Presented by Shazma Mawani (GP & PCN Clinical Director).**

Please see [COVID Vaccine booking registration and booking 151220](#) for more information.

**Question:** What are the arrangements regarding giving vaccines to residents INSIDE their own nursing homes? My Jesmund nursing home colleague suggests that there may be licensing issues?

**Answer:**

- The current vaccine can not be delivered to homes. If you have a resident who is over 80 and relatively mobile, you can book them an appointment at the vaccination site. However the site was rainy and muddy today and it may be more safe to wait for the vaccine to be able to come to you.

**Question:** People believe the vaccine has been delivered too fast and hasn't gone through the right checks because of pressure from the Government.

**Answer:**

- The Medicines and Healthcare products Regulatory Agency (MHRA) completes approvals completely independently of the Government. The Government is not able to influence the MHRA's approval.
- The MHRA is one of the most robust and respected organisations in the world.
- When vaccines are developed in the past they would complete stages one at time because of resources. Whereas with the amount of money and resources dedicated to the COVID-19 vaccine they have been able to run stages in parallel so things can move quicker. The finance behind this vaccine is a bigger driver for speed. The safety aspect is completely separate to the government.

**Question:** Staff are worried about long term effects.

**Answer:**

- The initial side effects are pain in the arm which is short lived, tiredness headaches or joint pain. It tends to last a couple of days. There were 44,000 volunteers in the clinical trial of all different ages and ethnicities. There is no evidence of long term effects. It doesn't change your DNA. It doesn't affect your fertility. It does not contain any animal products,
- There can be long term effects of Covid-19 which can be worse than the vaccine.

**Question:** Theory about microchips

**Answer:** The vaccine does definitely not contain microchips. It purely builds up your immune response. It is not a live vaccine, it is an inactive vaccine.

**Question:** Has anyone on the call had the vaccine?

**Answer:**

- Jane Ingram noted she has had the vaccine. She experienced an achy arm for 24 hours. She was in and out very quickly and was able to go back to work, after 15 minutes observation.
- Now managers have started getting the COVID-19 vaccine, it has made staff be more willing to get it. Setting an example is key.
- There are no policies in place around a COVID-19 passport but this may be a thing in the future for travel or large events. This possibility is convincing individuals to get the COVID-19 vaccine.
- We are seeing a shift in attitude as people are having the vaccine and returning to work fine.



**Wednesday 9th December**  
**Lateral Flow Device Testing**

**Question:** Does the maximum two named visitors still apply given that visitors will be tested before entering?

**Answer:**

- The guidance on safe visiting states that visitors should be limited to a maximum of 2 constant visitors wherever possible to limit the overall number of visitors to the care home and/or to the individual, and the consequent risk of disease transmission from multiple different routes. This is still in place. You should carry out a risk assessment to what works for your home. For example, one home has put some flexibility around this rule for individual cases. You should speak to your families and decide together, keeping in mind the time required to carry out the tests and other things that are going on.
- If homes require support with training for lateral flow tests please let us know. It is important that the test is done correctly so the result is accurate. Even homes who have been chosen to use the LFT cannot start testing until the 14th December.
- If homes are interested in joining the Sutton LFT devices pilot scheme and receiving additional staff training, please let us know via [asc.providercomms@sutton.gov.uk](mailto:asc.providercomms@sutton.gov.uk).

**Question:** Where does the liability sit if the test is wrong or a person is hurt during the test?

**Answer:** We are advising you to do your own risk assessment. It is your responsibility to complete the assessment.

**COVID-19 Vaccinations**

**The vaccination programme**

- Care home staff are priority group 1 and started to receive the COVID-19 vaccination on Tuesday, at St George's hospital or Croydon hospital.
- The vaccine is currently not cleared to be taken to the Care Homes. Therefore we are focussing on Care Home staff who are able to get to Croydon University Hospital or St George's Hospital.
- We are not able to come to homes yet and give the vaccine to residents. We are hoping the vaccine can be made more stable so it can be transported to the homes. If not, we will have to wait for the second vaccine.
- Nonsuch mansion is being set up as a dedicated spot to get the vaccines for mobile residents over 80. There is a national IT issue which means Care Home staff cannot currently get the vaccine at this local site, but we are hoping this will change. There will be a list of NHS staff and care home workers who can be contacted if there are any vaccines left over for people in lower priority groups.

**Booking an appointment**

- It is very easy to book an appointment to get the vaccine early. If you work for a care home in South West London and would like the covid-19 vaccine early, please email us at [carehome.covidvaccine@swlondon.nhs.uk](mailto:carehome.covidvaccine@swlondon.nhs.uk) with:
  - Your name
  - Your email address
  - Your mobile telephone number
  - The care home you work at and its postcode
  - If you would prefer to travel to Croydon University Hospital or St George's Hospital for your vaccine

**Question:** Some of our staff have emailed to book an appointment and not heard back, whilst others have.

**Answer:** If you don't receive an email that lodges your request you should re-register. It may be an admin or technical function. It may be that one hospital site has more slots available than the other. Some people are getting St George's appointments the next day. As the service gets busier, it may take longer to process requests. It also depends on vaccine supply and delivery during a particular week.

#### **Myth busting**

- People are getting inaccurate information from social media and other sources. We will develop an FAQ.
- Two people with severe allergic reactions have had issues however most people have been completely fine other having a sore arm. Anyone that has a vaccine will now be observed for 15 minutes. Staff should have anaphylactic training. There will always be trained doctors on site.
- There is some fear from people who think it's going to affect their reproductive system. A lot of staff are young women of childbearing age. It is recommended pregnant women do not get the vaccine or women who are within 2 months of trying to conceive. There is no evidence the vaccine affects fertility. With any new medication or vaccine, it is normal practice for pregnant women not to be given it until it has been in circulation for a while to reduce any unknown risks.
- There are complications of COVID-19 which can affect people in the long term including young people. The side effects of having COVID-19 are worse than the vaccine.

#### **COVID-19 vaccine dedicated webinar**

- We propose this session next week is dedicated to the COVID-19 vaccine. Each home should send at least two members of staff who can cascade the information to their colleagues. Please send any questions in advance to [asc.providercomms@sutton.gov.uk](mailto:asc.providercomms@sutton.gov.uk).
- We will cover
  - what the vaccine contains
  - what the side effects of the vaccine could be
  - Any questions you have

### **Delivering the vaccine**

- We will have a core team between community and primary care to support home to provide the appropriate staff on vaccination training. We are asking all GPs if they are willing to go into homes to provide the vaccine. If not the Care Home Support Team may train nurses from nursing homes and deliver the vaccine for residential and learning disabilities homes.
- If residents have capacity we only need a verbal consent
- If not, there is a process around that consent, please see [COVID-19 vaccination: consent forms and letters for care home residents](#) for the forms.

**Wednesday 2nd December**

**COVID-19 Vaccination**

**Question:** Our GP is in Surrey and they say they will only be providing their service users the COVID-19 vaccination. I am a bit worried as we are in that unique position where we are Surrey for Health and Sutton for everything else. The GP has said they will not be giving out a vaccine they will need to go to the hospital.

**Answer:** You will need to work with the Surrey GP on this because the COVID-19 vaccination programme falls under the primary care network (PCN).

- We are awaiting clarification about which vaccine is the most appropriate for Care Homes and on the training requirements.
- The vaccine may need to be given out by nurses in nursing homes and in residential and LD homes may need additional support to provide the vaccine. We are working with GPs to see if they are able to go into Care Homes to give out the vaccines. The dedicated Care Home Support Teams may also support the delivery of vaccines.
- LBS and Care Homes have been told we will get 10 days notice to when the supply of the vaccine will be arriving.
- Residents in LD homes and staff will ideally be vaccinated in homes, however this may not be possible and they may need to go to the fixed, dedicated site. We are currently looking at potential sites and locations. More updates will be provided in next week's Q&A session.
- Please see [COVID-19 vaccine guidance for health and social care workers](#) and [COVID-19 vaccination programme](#)

**Question:** What about homes who have staff who live out of the area (SWL)?

**Answer:**

- Each region in London will be working on plans for administration of the vaccine and staff should keep an eye on information distributed in the area they live.
- There are also discussions around whether GP's can vaccinate staff not registered to their clinic.

**Question:** Is there a consent form for staff we can use?

**Answer:** There will be. We can start creating a COVID-19 vaccine page on the Sutton Care Hub and add information about the vaccine to that.

**Question:** What are the minimum training requirements to deliver the vaccine?

**Answer:** Please see [COVID-19: vaccinator training recommendations](#). Please let us know if you require support to top up or deliver some of this training.

**Question:** We need an answer on LD home residents

**Answer:** We need to confirm the logistics to understand the prioritisation of people receiving the vaccine, we will answer this question as soon as we can. Please see [Priority groups for coronavirus \(COVID-19\) vaccination: advice from the JCVI, 2 December 2020](#).

### **Fogging**

**Message on the use of Fogging** (also referred to as 'Fumigation' or 'wide-area spraying' or 'disinfectant fogging')

Fogging is not recommended in any national guidance and its effectiveness in cleaning surfaces, decontamination or killing COVID-19 has not been provided. Also, if fogging is not done correctly, it may be harmful as it can expose people in the environment, where it is used and others, to hazardous chemicals and environmental pollutants.

Please continue to follow the [National guidance](#) which recommends that routine cleaning must be performed using either:

- a combined detergent/disinfectant solution at a dilution of 1,000 parts per million available chlorine (ppm available chlorine (av.cl.)); or
- a general-purpose neutral detergent in a solution of warm water followed by a disinfectant solution of 1,000ppm av.cl

### **List of useful evidence can be found below:**

- **HSE:** During the coronavirus (COVID-19) pandemic, fog, mist, vapour or UV treatments may be suitable options to help control the spread of the virus, by cleaning and disinfecting a larger space or room. Any use of these treatments for these purposes should form part of your COVID-19 risk assessment. Users must be competent and properly trained. ***Disinfecting premises using fog, mist, vapour or ultraviolet (UV) systems during the coronavirus pandemic***
- **WHO:** In indoor spaces, routine application of disinfectants to environmental surfaces via spraying or fogging (also known as fumigation or misting) is not recommended. Spraying environmental surfaces in both health care and non-healthcare settings (e.g. patient households) with disinfectants will not be effective and may pose harm to individuals. If disinfectants are to be applied, manual surface cleaning with detergent and water using applied friction (e.g. brushing, scrubbing) must be performed first to ensure physical removal of organic materials, followed by use of a cloth or wipe which is soaked in the disinfectant - ***Coronavirus disease (COVID-19) Situation Report – 115***

### **Lateral Flow Testing (LFT)**

The rollout of LFT has started with the largest Care Homes in the country and so far no Sutton Homes have been selected for the first phase. We are uncertain whether the tests will arrive before Christmas and await further confirmation from DHSC. In preparation for the rollout of the LFT you can use your ICF money and LBS will be calling every home over the next week to understand the additional practical and financial support you may need to deliver the LFT. We are going to provide a package of support based on this feedback.

### Visiting guidance

**Question:** Families have been told they can be tested and visit their relatives but we have not been provided LFT tests. The guidance keeps changing and families are angry. The difference between what the media is reporting and the real situation.

**Answer:**

- Visits to care homes should be supported wherever they can happen safely and please follow the guidance and carry out risk assessments.
- The registered manager of each care home is responsible for setting the visiting policy and for considering the individual needs of each resident.
- Keep very thorough notes of your risk assessment and why decisions have been made.
- According to the guidance,
  - visitors can come into the care home if they:
    - Test negative on every visit
    - Wear the right PPE
    - Follow all infection control measures
  - Outdoor and screened visits are an option for visitors who haven't been tested. Social distancing, PPE and good hand hygiene are still very important.
  - Visits in exceptional circumstances, such as end of life, should always be supported.
  - It is essential visiting is supported by good infection control while in and around the care home, including during the visit itself.
  - If there is a COVID-19 outbreak in the care home, unfortunately visiting will have to stop until the outbreak is over.
  - We will provide over the coming week more details on visiting over Christmas, following calls with each home.
  - We will develop into an easy to read format for you to provide to friends and family of residents.
  - Sarah will share learning from the visiting pods and from the LFT tests she has
  - Care Homes should be carrying on with the weekly tests.

**Question:** Can resident's families buy the tests themselves?

**Answer:**

- There is no guidance on using other tests apart from the national tests. If they bought the test themselves - you would need to be assured the test was taken properly and at the right time. You need to do a risk assessment. The testing could be inaccurate.
  - Visits out of care homes should only be considered of residents of working age (e.g. under 65s). This is law.
  - We will support you to start planning in the interim before you get the kits.

**Question:** A home is coming under pressure to take a resident who is continually testing positive 4 weeks down the line. Should we accept her? If we get a positive test does that count as an outbreak and therefore visiting is canceled.

**Answer:**

- The PCR test is sensitive and so people can continue to test positive for a while after isolation. Care Homes shouldn't be under pressure to take a resident back if the isolation period of 14 days after the first positive test has not been completed. After the 14 days isolation, they should be non-infectious AND if they have no new symptoms and no fever without use of paracetamol etc for 48 hours, they don't have to be retested, so you should be fine to accept the resident.
- We are creating a flowchart on this. If infections are not linked we wouldn't count it as an outbreak. Outbreaks are only if the transmissions are within the home.
- You will only be advised if you are doing things outside the guidance or you have an outbreak. Other than that we are here to support you to make your own policies and judgement. We are trying to support and not intervene if necessary.

### **Wednesday 25th November**

#### **Flu vaccine**

- Flu vaccinations for care home staff - either they can get this from their own GP surgery or any community pharmacy. There is a 38% uptake for care home staff at the moment. Community Pharmacies are still experiencing similar problems in obtaining flu vaccination stocks. Any queries to email Sarah Taylor (Chief Pharmacist and Flu Lead - [Sarah.Taylor@swlondon.nhs.uk](mailto:Sarah.Taylor@swlondon.nhs.uk)).

#### **COVID-19 Vaccine**

- Nurses for nursing homes, GPs for LD homes and the Care Home Support Team may be able to provide the COVID-19 vaccine.
- We are also working on consent policies for those who do not have capacity. We will look at what you already have in place for the flu vaccine, to see if it is suitable.

#### **Admissions and discharge**

**Question:** Accepting patients into Care Homes from hospitals and from temporary facilities. Are people experiencing issues with this?

**Answer:** No one noted any issues. If you are having any issues please contact the Care Home Support team.

#### **IPC training and champions**

- You can access both face to face training (at LBS Civic offices), Tuesday, Thursday and Friday afternoons and virtual training which can be arranged at a time suitable for you. Please see the Sutton Care Hub's [Infection Prevention and Control training page](#) for more information and to book.

- We are looking for infection prevention and control champions to be linked in to ICP information. You can use some of your infection control funding to pay a member of staff to take on this role. Please see the Sutton Care Hub's [Infection Prevention and Control page](#) for more information on the role.

### **Testing**

**Question:** A resident tested positive in the last 90 days, is it ok that we are retesting them every week?

**Answer:** No there is no need to retest them. If staff or residents test positive, they are not to be tested again for 90 days unless they develop new possible COVID-19 symptoms.

- You should receive direct communications about the roll out of lateral flow testing in Care Homes. The test is a swab and Care Homes can process results themselves within 30 minutes. Larger homes will receive the kits first. All care homes may receive a kit before Christmas. There should be enough tests for staff, residents and up to 4 visitors a week per resident.
- PCR tests will continue and more details about frequency of both PCR and the lateral flow tests will be provided.
- Time taken to upload data on the system is one big constraint in testing. Homes can use an IC fund for an administrative staff to work extra hours to carry out the upload.
- People can self test but it's noted to be less accurate than when administered by a trained professional.
- It is important for accuracy homes to not wait longer than 30 minutes to read the results.
- Good for picking up positives in those with a high viral load (i.e. when they are most infectious and the quick results turnaround helps prompt isolation).
- Even if you have a negative result you should still wear PPE and follow strict IPC.

**Question:** Where does the liability sit if the test is wrong or a person is hurt during the test?

**Answer:** Our Director of Public Health asked this question at a recent DHSC webinar on lateral flow testing and we are expecting clarification from DHSC soon.

### **Visitors**

- If you have an ongoing outbreak you should not have visitors.

**Question:** Will visitors be allowed to hold their resident hand / hug?

**Answer:** According to advice from DHSC, testing is one way of minimising the risk of visiting a care home. If a visitor has a negative test, is wearing appropriate PPE, and follows other infection control measures then it will be possible for visitors to have physical contact with their loved one, such as providing personal care, holding hands and a hug.

### **Christmas**



- We will work on some further guidance around Christmas day. We will get something centrally from South West London CCG on decorations / presents. We have not yet found any published guidelines around decorations. Some homes are looking at decorations which can be cleaned down. Outside decorations are still fine.
- One home shared a bulletin which provided advice on single use decorations and decorations which can be hung high on the walls, therefore will not be touched. We will review this guidance and bring some information back to the next Q&A session next week and add to the Care Matters newsletter.
- One home mentioned they will be quarantining gifts for residents for 72 hours before they are given to the residents.

#### **Q&A session**

Question: Are you finding the Q&A sessions useful? Does it need to be weekly?

- Yes homes enjoy the session. The Tuesday SWL webinar is more focussed on IPC and is South West London wide. This session feels more local. Homes attending agreed to spread the word about the usefulness of the session to other homes.

**Wednesday 18th November**

**Staff working across different home**

**Question:** The majority of people who work in care have to have two jobs so that they can afford to live. What are providers meant to do when staff have two jobs and they are actually contracted for both jobs (so they aren't on bank, on zero hour or working for an agency)? Are staff expected to decide which job they will have to resign from (as no employer will 'hold' a job for anyone) to be able to carry on working in our homes? And if they are expected to resign how are providers then meant to fill these vacancies other than by using agency staff? Particularly an issue for people who do waking night shifts, as they tend to do one or two night shifts with a home, therefore the home is their secondary job and they are more likely to remain with their primary job.

**Answer:**

- We recognise this is a difficult topic. Please think about exploring the following options:
  - Try and work with the provider where the employee has a second job to discuss options for stopping sharing staff by increasing one person's hours and decreasing another person's hours to keep staff in one home.
  - Utilise the ICF money to increase individual employee's hours / top up wages.
- Please see the Central Government's open consultation "Stopping movement of staff between care settings". The Government is consulting on regulation which would include: "The requirement would apply to the Care Quality Commission (CQC) registered residential and nursing care home providers in England. These providers would be required not to use staff to provide nursing or personal care who are carrying on, or who have carried on within the previous 14 days, a regulated activity in another setting and/or for another health or social care provider subject to certain exceptions."
- To clarify if the policy is made into regulation, the above statement would have to be followed by all staff (even if currently staff working at two places).
- The rule only applies to individuals providing care. For example, it would not apply to people working at the housing association or for meals on wheels. We are happy to discuss individual cases with you to confirm if an individual's second job is covered under "individuals providing care".
- You have until midday Monday 23rd September to respond to the consultation. It is mainly a tick box exercise with one catch all a box for comments. Please [respond here](#). We will be submitting a response as LBS feeding back your concerns over availability of staff.
- To prepare for the policy potentially becoming regulation we advise you complete a workforce analysis to determine which of your staff are at high risk of being affected and the proportion of your staff who may be affected.

**Question:** Once we have the COVID-19 vaccine will we still have to wear PPE? Our residents do not like it.

**Answer:** Yes, at least for some time due to how long it will take to give everyone the vaccine, and some people refusing to have the vaccine. Also it may be helping to reduce the spread of flu. To support residents other homes wear badges with photos of them smiling.

### **Sutton Care Hub**

We have now launched the Sutton Care Hub, a brand new website which will become the single point of access for guidance, resources and information for all staff working across all Sutton's provider services.

The Hub will be public, therefore provide staff, at all levels, with the assurance that they can access the correct, most up to date information at any time from their computer, phone or tablet. The Hub will support the London Borough of Sutton (LBS), South West London CCG (SWLCCG) and our providers to work together to build a stable, sensitive and supportive care offer in Sutton.

The Hub will be regularly updated with the latest news, guidance and much more. Please also subscribe to the Sutton Care Bulletin for bimonthly updates on the sector's big news, spotlights on key successes, links to training and plenty more. If you have any feedback or suggestions for additional content on the Care Hub, please contact [asc.providercomms@sutton.gov.uk](mailto:asc.providercomms@sutton.gov.uk)

### **Visiting Guidelines**

Please carry on using visiting guidance provided at the start of lockdown. We are waiting for more clarity on reliability of rapid testing from the pilots.

### **COVID-19 Vaccine**

- Elderly care homes will be the first priority group. We are still following up on the priority grouping of:
  - LD homes
  - Mixed needs homes
  - Non-care care home staff
- It is unlikely vaccinations will be given out before Christmas.

### **Flu vaccine**

- Supplies of flu vaccinations keep changing all the time so it is advisable for care homes to contact their own community pharmacist or GP clinical lead first to see if they can help. The next step would be to email the Chief Pharmacist Sarah Taylor who is also the Joint Flu Lead for Sutton on [Sarah.taylor@swlondon.nhs.uk](mailto:Sarah.taylor@swlondon.nhs.uk)

### **Blood tests in Care Homes**

Some homes are completing their own blood tests and some are using the phlebotomy service. Please, can we encourage homes to do their own blood tests. As the phlebotomy service's supplies are not enough to cover all care homes. Care home Support Team are available to provide refresher training if needed. Care Homes can also order bottles and equipment from pathology.

#### **Guidance from the British Geriatric Society**

Updated BGS guidance has been published and 2 important factors that prevent staff from being involved in direct care of residents are highlighted below;

- all staff must use PPE and those who are unable to wear PPE should not be involved in direct care of residents.
- staff who decline regular testing must not be involved in direct care of residents.

These staff may need to be offered alternative roles.

#### **DOLS**

We must act in the patient/residents best interest and try to encourage adherence to social distancing. If staff decline regular testing, they shouldn't be performing care staff duties. If residents decline, Care Homes should develop a strategy to support them to get the test.

#### **Potential future themes**

- Admissions to homes

**Wednesday 11th November**

**COVID-19 Vaccination**

- Primary care has to submit their plan by Tuesday about how the COVID-19 vaccine will be delivered, if it is signed off. Older adults in Care Homes and Care staff are in the priority group. We will come back to you with more information on what is included in Care Home staff e.g. care staff / administration / managerial / housekeeping.
- People need to be given 2 vaccinations 1 month apart. They need to be stored at -80 degrees. Once delivered (in batches of 975) they need to be given out in 3 or 4 days. Everyone who gets the vaccine should be observed for 15 minutes.
- We are looking at training and will provide more details as more information comes out.
- The communications are being worked on currently, and we will share with you ASAP.
- Shazma will provide a list of community pharmacies that have the flu vaccine separately.
- The priority groups for COVID-19 vaccination are being worked up and although not mandatory all people in these high risk groups should be encouraged to get vaccinated.
- For more information please see <https://www.nhs.uk/conditions/coronavirus-covid-19/research/coronavirus-vaccine-research/>

**Visiting homes**

- If people do want to visit their family homes we need to complete a dynamic risk assessment. For example if we think it is appropriate service users can go home, we must minimise risk of transmission as much as possible.
- The issue with this approach is some services users feel that it is one rule for one and another rule for someone else.
- It should hopefully be more clear for older people's homes in lockdown. If you want to discuss specific cases please contact Hanna Gottschling (hanna.gottschling@sutton.gov.uk) and Modupe Omonijo (modupe.omonijo@sutton.gov.uk).
- Please continue to refer service users to the [https://www.sutton.gov.uk/info/200588/health\\_and\\_wellbeing/2166/visiting\\_relatives\\_in\\_care\\_homes](https://www.sutton.gov.uk/info/200588/health_and_wellbeing/2166/visiting_relatives_in_care_homes)
- Homes are still looking at visiting pods.

**Themes for Q&A sessions**

**Question:** Would you like a calendar for items to discuss at the Q&A sessions? These could be COVID-19 and none COVID-19. They could relate to the information in the newsletter.

**Answer:** Yes

### **MDTs**

**Question:** Is there any feedback on the sessions? The sessions can speak about individual residents and their physical, social, medical issues all at once. The suggestion is that managers attend those meeting

**Answer:** Two homes have had sessions and agree they were very useful.

### **Testing**

**Question:** Some staff are concerned about having tests. Some people have refused. Social media is creating myths around testing / vaccines ect. We can create some mythbusters and appropriate responses, if this would be helpful?

**Answer:**

- One home stated this will be very important around the COVID-19 vaccine. Managers need to have the right messages to relay about the positives and that it has come from a credible source e.g. the local authority.
- If homes can provide feedback on what sorts of myths they are hearing and what demographic (e.g. age group / gender) it is coming from so we can target communication. This will help us to not make assumptions on why staff are not taking the vaccine.

### **Outbreak management**

Please do reach out if you have a COVID-19 positive case. It is not because of a lack of protocols or quality on your part. We are in a pandemic, in which cases are very prevalent and we can only minimise risk as much as possible. We are here to support you in these situations.

### **Sutton Care Hub**

The Sutton Care Hub website is the single point of access for guidance, resources and information for all staff working across all Sutton's provider services and will be live on Tuesday 18th November. The Hub will be public, therefore provide staff, at all levels, with the assurance that they can access the correct, most up to date information at any time from their computer, phone or tablet. The Hub will support the London Borough of Sutton (LBS), South West London CCG (SWLCCG) and our providers to work together to build a stable, sensitive and supportive care offer in Sutton.

The Hub will:

- Hold information, guidance and resources for care providers in one central location.
- Provide up to date information, guidance and resources on remaining safe during the COVID-19 pandemic.
- Highlight the latest news and guidance available.
- Signpost staff to the latest local and national resources from other key organisations.
- Provide a single, joint calendar for events and activities.

**Wednesday 4th November**

**Flu vaccinations for staff**

**Question:** We are still having issues accessing the flu jab for staff. Can we have an update on this?

**Answer:**

- Flu vaccinations for care home staff - either they can get this from their own GP surgery or any community pharmacy. Providers are now able to apply centrally for more vaccines if they are running out. Any queries to email Shazma Mawani (shazma.mawani@nhs.net) or Sarah Taylor (Chief Pharmacist and Flu Lead - Sarah.Taylor@swlondon.nhs.uk).
- To note Community Pharmacies are experiencing similar problems to GP practices in obtaining flu vaccination stocks. However, details of how they are (and will be) able to access central stocks of vaccine have now been made available.
- NHSE have also launched a scheme to incentivise community pharmacies to vaccinate staff/residents of care homes, but needs a minimum of 30 vaccines (and maximum of 50) to be payable.

**Visiting guidance**

- There are likely to be some changes around visiting guidance because of the new national lockdown. Please see <https://www.gov.uk/government/publications/visiting-care-homes-during-coronavirus/update-on-policies-for-visiting-arrangements-in-care-homes>
- The infection prevention control 2 fund can be used to support safe visiting, but it must be in line with the new guidance.
- Please contact Hanna Gottschling ([hanna.gottschling@sutton.gov.uk](mailto:hanna.gottschling@sutton.gov.uk)) for support completing risk assessments for specific residents having visitors.
- We are looking at building a 'frequently asked questions' document around visiting to share knowledge.
- Central Government is encouraging visiting through pods and window visits. They are looking into rapid testing.

**Further guidance**

**Question:** Would it be useful to create guidance around testing and isolating?

**Answer:**

- We need policies to be consistent across Care Homes.
- It would be helpful to have a consistent stance on visitors. One home has purchased rapid tests for visitors. We have not issued guidance on this yet.
- We are launching the Sutton Care Hub (phase 1) in November. Phase 2 will include a password protected section where Care Home Managers could share information.

- We currently have a Care Home managers whatsapp group which has proved very useful (about 12 people). The website could do something similar and be moderated by LBS.

#### **Outbreak management**

**Question:** We had a positive test result on 29th Sept, All subsequent tests came back negative. Whole home testing was done yesterday and I am waiting for results. Unfortunately, one member of staff could not attend for testing although she has been negative last on 20th Oct. Will I not be able to have my outbreak declared over due to this? I am supposed to take in a new resident tomorrow.

**Answer:**

- Yes, the outbreak can be declared as over. The 28 day cycle is to ensure the risk around other people being infected is assessed.

#### **Infection Control Training**

**Question:** Do homes feel they need more Infection Control training?

**Answer:**

- One home noted they were going to get their new staff to complete ICP training. They were told they needed to wait 2 weeks. LBS will look into this. Care Home staff should be priority.
- PLEASE NOTE: There are open sessions being held at Sutton Civic offices every Tuesday and Thursday afternoons from 2-4pm. All places must be booked through Sarah.Brown@swlondon.nhs.uk via email as we are limited to 8 people per session in order to maintain the 2m social distancing recommendations.
- Currently are fully booked until the first of December, however if there are sufficient enquiries, Sarah will look to book a room on a Friday.
- If there are new starters that need initial training quicker, Helen Thurlow at Sutton CCG is part of a team who can hold on line training at much shorter notice, usually within a week. She can be contacted on [helen.thurlow@swlondon.nhs.uk](mailto:helen.thurlow@swlondon.nhs.uk).
- Some staff came back from the training and had a question around the spread of Covid-19 from plastic, aprons, gloves, arm coverings. Clarification from Sarah Brown (Infection control team). Plastic shoe covers and sleeve covers are not advised from an IPC point of view because, as they are not absorbent, the virus particles can be 'flicked off' during movement. Plastic PPE such as gloves, aprons or visors etc. pose next to no risk of spreading the virus providing the correct donning and doffing procedures are followed.
- We have been advised to disinfect frequently used surfaces (door knobs, worktops etc) twice daily.

#### **Audits**

**Question:** How are people finding the ICP audits?



**Answer:**

- One Care Home noted we are working on a number of audits at once. They have their ICP champion completing the ICP audit.
- Another home noted they have completed both (CCG & CQC), and the audits highlighted things the home needed to change.
- We could use the Sutton Care Hub to share learning between homes for audits.

**IPC fund**

**Question:** For those homes who have accepted the ICP funding, is there any other support that you need from the system which is not covered in the factors listed by the funding?

**Answer:** One home noted they feel much more confident they have things covered.

**Infection Prevention Control**

**Question:** Can we have a recap on domestic staff training, like cleaning high risk areas, colour coding of cleaning equipment etc?

**Answer:** We will check this with the Infection Control Team.

**Question:** Would people appreciate LBS organising a small, virtual Christmas event, potentially involving schools designing christmas cards?

**Answer:**

- Yes it will be helpful for morale.
- We will actively pursue and involve as many managers as possible.

**Shopping**

**Question:** Can we get a dedicated slot at the shops again?

**Answer:** Asda have said that their stock position is much healthier than it was in April and they are not anticipating a queueing situation. If this changes they will look to putting the dedicated hour back in. However, if shoppers for the homes can carry a letter of authorisation/ID, they will allow them to buy in greater quantities than the general public.

**PPE**

- PLEASE: Stock up on the free PPE that is on offer via the Government PPE portal. Currently not all providers are using the portal. You can only order so much, but you can order each week. The limits are being continually increased. The portal is easy to use and quick to be delivered (usually within 2 days).
- Current Order limits
  - Residential care homes with fewer than 10 beds can order up to (per week):
    - 200 IIR masks
    - 400 aprons
    - 800 gloves (400 pairs)
    - 2 bottles of hand hygiene (usually 500ml)
    - one box of visors (usually 50 per box)

- Residential care homes with between 10 and 24 beds can order up to (per week):
  - 300 IIR masks
  - 1,200 aprons
  - 2,400 gloves (1,200 pairs)
  - 4 bottles of hand hygiene (usually 500ml)
  - 2 boxes of visors (usually 50 per box)
- Residential care homes with between 25 and 49 beds can order up to (per week):
  - 400 IIR masks
  - 2,000 aprons
  - 4,000 gloves (2,000 pairs)
  - 6 bottles of hand hygiene (usually 500ml)
  - 2 boxes of visors (usually 50 per box)
- If you cannot find your log in you will need to contact the customer service team on 0800 876 6802. The team is available from 7am to 7pm, 7 days a week, to help resolve your queries.

Wednesday 28th October

### **Flu Immunisation**

- We have vaccinated 83% of residents across all our Care Homes in Sutton.
- Between 40 and 50% of residents in Learning Disabilities homes have been vaccinated.
- Please contact Shazma Mawani ([shazma.mawani@nhs.net](mailto:shazma.mawani@nhs.net)) if you require support in getting residents of staff vaccinated in your home.

**Question:** Can we insist staff get the flu vaccination? Some staff do not want to be vaccinated for various reasons.

**Answer:**

- We need to communicate the risk of staff being carriers to residents, if they do not get the vaccination.
- Getting the flu vaccination is a personal choice, however, particularly during the COVID-19 pandemic, we encourage all staff to get the vaccination.
- Please share [this video](#) with staff which shows staff explaining why they have got the vaccination. Please note the video was filmed pre COVID-19 therefore staff are not wearing PPE however it will cover key issues for staff.
- If the issue is the access to the flu vaccine, community pharmacists can deliver it in your Care Home or pharmacy.
- More information is coming out on Friday for how to access free flu vaccinations for LD Home Care Staff and residents.
- We recommend trying to get staff to champion the vaccine to each other and have the information come from a peer to peer level.
- If staff or residents will not get the vaccine, a risk assessment should be put in place.

### **Phlebotomy**

**Question:** Our phlebotomy services are stretched at the moment. Are Care Homes finding this is an issue?

**Answer:**

- Some nurses require new training. Shazma agreed she will look into this and report back.
- The Care Home Support Team will organise some refresher training for nurses to be able to take bloods. Lee Thorogood has also organised a system where care homes can order blood bottles from St Helier's and collect them from pathology reception.

### **Infection Prevention Control Training**

**Question:** Are homes able to access training for all staff, particularly for new starters?

**Answer:**

- There are open sessions being held at Sutton Civic offices every Tuesday and Thursday afternoons from 2-4pm throughout October and will continue through November if the demand is there. All places must be booked through Sarah.Brown@swlondon.nhs.uk via email as we are limited to 8 people per session in order to maintain the 2m social distancing recommendations.
- If you have available to you a large enough room to enable social distancing and a minimum of 5 people attending, additional training sessions can be organised at the location of your choice, within the Sutton area.

### **Guidance on people going home to family**

**Question:** In our Care Home residents do not get visitors they leave the home and go elsewhere. Is there guidance around this? Particularly as we struggle to ensure LD residents to isolate for the full 14 days, when they return. The approach is currently person centred and not consistent. Christmas may be a particular issue.

**Answer:**

- Some homes are still doing window visits.
- People seem to be more understanding now we have moved into tier 2.
- A home has ordered a visiting pod.
- 2 main issues:
  - Preventing infections due to challenges such as social distancing during visits when loved one expect more physical contact and inability to use PPE e.g. in some LD homes
  - Visiting policies have been largely a provider responsibility however more guidance is needed to ensure consistency.
- A statement has been put on the council website. The main point of the statement is that policies have been left to the providers discretion because of the varied needs of residents and individual situations in each home.
- An appreciation video for staff is going to be released soon. This will hopefully help cascade the messages to residents and their families and friends, about the commitment of the staff to look after loved ones and highlight the complexity of the situation.
- We are happy to continue to advise and provide support for individual cases.
- Please bring issues to this weekly forum so we can make decisions as a group.

### **DOLS and restrictions**

**Question:** If an individual does not have a DOLS and they need to go see a sick relative, Where do the DOLS and restrictions come in?

**Answer:**

- You should complete a mental capacity assessment to understand their understanding of the situation.
- Please speak to the Council's DOLS leader on specific situations such as this. Hanna Gottschling (hanna.gottschling@sutton.gov.uk)
- The new MCA and DOLS guidance will be shared in Friday's newsletter

### Sutton Care Hub

- The Sutton Care Hub is the single point of access for guidance, resources and information for all staff working across all Sutton's provider service.
- The Hub provides staff, at all levels, with the assurance that they can access the correct, most up to date information at any time from their computer, phone or tablet.
- Content will include:
  - News stories
  - Events and activities
  - Data submission
  - Care Home visitors
  - Testing
  - Outbreak Management
  - Infection prevention and control
  - Latest Guidance for Providers
  - Flu Vaccine
  - Training
  - Safeguarding
  - Workforce
  - Clinical Support
- The site will be enhanced over the next 6 months.

### Infection Control Fund

- Payment 1 was made 28th October, so should be with you by the 29th October, for those who accepted the conditions.

**Question:** If we are forced to use agency or bank staff, does this affect our funding?

**Answer:**

- Your allocation will remain 100% even if your Care Home is not at full capacity.

- If this happens we recommend you pay the bank/agency staff full time (using the ICF fund) even if you only need them part time to reduce the likelihood that they would also work at another organisation.
- The priority is to support you to control the risk, we can work with you if you're having particular issues around movement of staff.

### Wellbeing

- We are here to support you technically and your wellbeing. There are a number of wellbeing support service available to you:
- Council's employee assistance programme - we'll recirculate that

To speak to someone

- Urgent Support: Good-Thinking's [Urgent Support page](#) has numbers and links to help you access urgent support,
- 1:1 Mental health support 24 hours a day: Text FRONTLINE to 85258 for a text chat or call 116 123 for a phone conversation
- Visit [Bereavement Support Online](#) or call the free confidential bereavement support line (Hospice UK), on 0300 303 4434, 8am – 8pm
- NHS Psychological therapy (IAPT): Search [here](#) to find out how to get access to NHS psychological therapy (IAPT)
- Finances: If relatives of staff are financially affected by COVID-19, they can access the [Money Advice Service web-chat](#) or call 0800 138 1677, from [www.moneyadviceservice.org.uk](http://www.moneyadviceservice.org.uk)

Evidence-based apps and personalised online tools

- Worry and anxiety: The free [Daylight phone app](#) teaches you to manage worry and anxiety by offering audio-led guidance tailored to you
- Sleep: [Sleepio](#) is a highly personalised free digital sleep-improvement program which helps you get to the root of poor sleep.

Work and well-being

- Going Home checklist: Find simple steps to help you manage your own wellbeing at the end of each working shift in this [video](#)
- Risk Assessment BAME staff: Use Risk Reduction Framework for staff at risk of COVID-19 infection (pages 9 and 10) [here](#) and assessment [here](#)
- Preventing work related stress: Use Health and Safety Executive's talking toolkit for preventing work related stress [here](#)
- 'Mental Health and Psychosocial Support for Staff, Volunteers and Communities in an Outbreak of Novel Coronavirus': Guidance from the British Red Cross for staff, volunteers and communities. Can be found [here](#)



**South West London**  
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- Mental Health at work: Information and resources for managers on taking care of your staff. Learn how to support your staff [here](#)
- Anxiety and worry: Access the Guide to managing worry and anxiety amidst uncertainty from Practitioner Health (Psychology Tools) [here](#)
- This information and any additional information on wellbeing resources which are shared in this session will be posted on the Sutton Care Hub.
- One Care Home is running monthly competitions, for example: most outrageous photo ever taken / most outrageous holiday to win a £25 voucher. This has been helpful to boost morale and give staff something else to focus on.