## Grampian Health Protection Team Weekly Bulletin – Care Homes Week beginning 18/1/21

## **Updates**

**COVID Vaccine and residents:** Many residents have now received the vaccine yet we are finding outbreaks amongst residents in care homes; many are asymptomatic or displaying mild symptoms. The good news is the vaccine appears to be preventing significant illness but we must try and minimise the risks associated with asymptomatic transmission by remaining vigilant to any residents displaying any hint of being unwell e.g. mild fever, an episode of diarrhoea, more tired than usual and immediately isolate and test using NHSG swab and NHSG lab chit previously circulated. Please contact us at HPT if there is any question over which chit to use for symptomatic resident testing.

**Cohorting Staff:** Managers are strongly encouraged to reflect on current cohorting arrangements and consider whether current systems for doing so could be strengthened. The rationale for this being is to minimise the risks of transmission so that if staff do bring it in it is contained. Cohorting means that the same staff work together in teams and work with the same residents/ in the same units/areas for as long as possible i.e. not just 1 shift but for weeks and months. Car sharing and meal breaks should also be within the assigned cohort. This may be a particular challenge depending on the physical layout, staffing etc and it is suggested that the majority of staff so far as possible should be cohorted with a minimum number of floating staff. Floating staff should be deemed IPC champions to fulfil that role. Staff were invited to share their experience of managing this – see shared learning.

**Staff Rooms**- Ensure staff are wiping down after using rest areas e.g.table, doors, handles and replacing their facemask with a new one. Provide hand gel, masks and equipment to clean down and disinfect surfaces in staff rooms so that staff have access to clean masks after their breaks, and can clean the area before next use.

Cleaning and disinfecting- reminded that all high touch surfaces should be cleaned with general purpose detergent and then disinfected. The solution for disinfection should be 1000 parts per million available chlorine - no other concentration is suitable. Please ensure disinfection products are Hypochlorite based as per guidance. Guidance states that a combined product for cleaning and disinfecting may be used if available, as long as it contains 1000 parts per million available chlorine. Disinfectant wipes are acceptable for use between uses on staff desks, phones, keyboards, kettles and other surfaces and items used by staff.

**Night Staff -** ensure night staff are following the same IPC guidelines as all other staff. Need to ensure all staff are trained in IP&C - hand washing, masks, social distancing etc. Managers should make sure that **ALL** care staff on the premises are adhering to enhanced precautions – supervise staff practice

**Visors-** Should be worn when carrying out care for residents with detected COVID or has COVID symptoms and/or splash risk. Public Health Scotland recently advised HPT that visors should be single use only and that there is plenty stock of these accessible through procurement. Don FRFM and visor before going into room. Doff apron and gloves before leaving room and doff visor and mask as soon as possible on exiting the residents room.

**Staff with symptom** Staff with symptoms, or their family members should always be tested through the NHS Grampian COVID testing website – covid19.nhsgrampian.org - NOT through 111 or by using swabs supplied to the care home for asymptomatic staff or resident testing.

**Migration of asymptomatic surveillance testing to regional hub** Grampian has a new laboratory facility dedicated to this situated on the Foresterhill site. Home managers will be

contacted by the regional hub to advise when they are to come on board with this and should continue to use existing processes until then. Email for any issues experienced regards this at nss.nationallabsprogramme@nhs.scot

**Lateral flow test** –Tests are designed for asymptomatic testing and is not an accurate test for any one with symptoms- do not use for staff, relatives or residents with symptoms.

TURAS training is here https://learn.nes.nhs.scot/41992

If a staff member becomes symptomatic after a negative LFT they should isolate and get a PCR test through **covid19.nhsgrampian.org** 

**Spitting** –This phenomena is thought to be associated with mucous membrane shed inside the mouth post COVID vaccine/infection. Residents have been found spitting or wiping the contents of their mouth on surfaces/floors both within their rooms and in communal areas. Please be alert to this and include oral hygiene in affected residents care plans and ensure cleaning and disinfection protocols are strictly followed for body fluids i.e.saliva. Also ensure residents are supplied with adequate tissues and a lined bin to dispose of these.

**Masks-** Masks and all PPE should be doffed after being in a room with a resident with confirmed or suspected COVID, after carrying out personal care for **any** resident and, if the mask is touched or becomes wet. Sessional masks can be worn when not giving direct personal care for example, dispensing medications. See update guidelines care homes 31/12/2020, points 4 & 5 and new National IPC manual addendum –

http://www.nipcm.hps.scot.nhs.uk/scottish-covid-19-community-health-and-care-settings-infection-prevention-and-control-addendum/

## **Shared Ideas:**

**Cohorting** – close fire doors to minimise footfall and segregate/limit residents and staff in each area; use empty rooms at the end of wings/corridors to create staff room and equip these with kettles etc so self sufficient within assigned cohort. Ensure cleaning wipes and hand gel are readily accessible in these areas. Stagger staff entrance so only one using changing room at a time.

## **Finally**

The HPT are seeking clarity on the following and will share with homes in due course:

- 1. Site (i.e. throat and nostril or both nostrils) of swabbing when using LFD testing kits.
- 2. Communication with General Practice regards symptomatic swabbing of residents with non classic covid symptoms.

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