

Weekly HPT Bulletin Week Beginning 25th January 2021

Managers are encouraged to share this **HPT weekly bulletin** with all staff within the home – copies on staff room notice boards or disseminate via Emails.

COVID Vaccine - many residents have now received the vaccine and a catch up is going ahead for those that missed first round. Despite this, there are still outbreaks and many are asymptomatic or displaying mild symptoms. The good news is the vaccine appears to be preventing catastrophic illness. Some staff have experienced varied reactions post vaccine. Any new staff should apply to be vaccinated using the same referral system. Here is some guidance and FAQ's
<https://www.gov.scot/publications/coronavirus-covid-19-vaccination-guidance-for-health-and-social-care-professionals/>

Testing -Continue to remain 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 (sent today).

There has been difficulties in authorising the swab from GPs and if this happens and you want to test your resident then you can as HPT has overall authority for testing. You have the swabs and you have the NHS lab chit but always call the GP directly if medically unwell. Out of Hours testing pathways and an updated HPT suite of testing information will be disseminated shortly.

HPT will mass test when there is a single confirmed positive case in either staff or in residents - if anyone found positive from this will do another mass sweep 5 days later to pick up any further transmissions.

Staff with symptoms, or their family members should always be tested through the NHS Grampian COVID testing website – covid19.nhsgrampian.org. Symptomatic staff do not attend work or do LFTs or any testing in the workplace – go home immediately and self-refer using the online form via this website.

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 and courier will collect that day or the next day. There are still some processes to iron out. There has been some confusion re swabbing sites for LFTs – please go by what your government letter says and with Care Homes it is throat then nose. As all other testing is done this way it is logical. Any enquires re LFT or PCR testing Email: gram.staffcovid19testing@nhs.scot or nss.nationallabsprogramme@nhs.scot

Cohorting Staff – 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. The rationale is to minimise the risks of transmission so that if staff do bring it in it is contained. HPT strongly advise you to think creatively on how you can logistically organise this acknowledging the fact that the physical layouts in some settings and other circumstances could be challenging. Evidence has shown that homes that have divided staff and cohorted teams greatly reduces transmission. Examples include using empty bed rooms for assigning a staff room/office/changing room to each cohort, staggering start times if using front doors and changing areas, separate smoking areas, designated rota manager. It's like running 2 units.

Deployment of agency and support staff: current Public health guidance advises that staff should be assigned to specific homes and not work between different settings. These staff should be assigned to a cohort within the home.

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.

2 stage 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. 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.

Exemption from this is in Kitchens and EH/FSA advice via this link

[https://www.foodstandards.gov.scot/downloads/COVID-19 -
FSS Guidelines for Food Business Operators and their Employees.pdf](https://www.foodstandards.gov.scot/downloads/COVID-19-_FSS_Guidelines_for_Food_Business_Operators_and_their_Employees.pdf)

Disinfectant wipes are acceptable for use between uses on staff desks, phones, keyboards, kettle 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 all enhanced IP&C - hand washing, masks, social distancing, cleaning. This is the Manager's responsibility and supervise staff practice.

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 new National IPC manual addendum.

Visors- Should only be worn when carrying out care for residents with detected COVID or 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.

Laundry- Assurance visits have advised that you do not use laundry bags for uniforms – all laundry to be taken home in plastic bags.

Spitting/Expectoration management –This phenomena “covid bomb”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. Include individual oral hygiene in residents care plans and ensure cleaning and disinfection protocols are strictly followed. Ensure residents have access to tissues and lined bins to dispose of these. If this is experienced post vaccine please report via yellow card scheme.

Vitamin D supplements – can be prescribed by GPs and will only be considered for people that really need it.

Outbreak Experiences – Aim is to offer all Managers a Teams Meeting that will allow care homes to share their real experiences of an outbreak to those that have not had one. Managers are very kindly willing to be open and honest and share what has worked for them with others. Everyone agreed that this would be so beneficial.

A resident's request is to have a badge that says *“Ive kicked covid's butt!”*