



Partners in Care Lessons Learned

“PiCLL” Bulletin (April 2020)



Partners in Care COVID-19 Response ECHO Network

The network is a virtual collaboration between NHS Vale of York CCG and St Leonards Hospice using Project ECHO, designed to provide support, education and guidance to care independent care providers and other stakeholders during the COVID-19 outbreak. This summary has been produced to share learning from providers in the network that have experienced cases within their setting. This includes how the cases presented, how the provider managed the outbreak and learning for other providers who may find themselves in a similar situation

Lessons learned: 23-04-2020

The main themes of what was discussed and subsequently handed to the facilitator to disseminate are as follows:

1: Symptoms/ Presentation

1. Symptoms in the people we support have not been the classic well known symptoms
2. Presentation can be similar to a UTI
3. Loss of taste/ smell reported
4. Gastric symptoms reported in some residents
5. Variation in range of temperatures reported including some with low temperature who later became ill
6. A & E GP reported that there are also some effects upon heart muscles as a result of Covid-19
7. Even people who have had it are still concerned

2: Infection

1. A regular log of a residents physical observations (temperature etc) is useful; also making sure we record when the resident goes into self-isolation.
2. Residents with co- morbidities are at higher risk
3. It is difficult to get a handle on a person's baseline/ normal temperature range if they are new or a respite resident.

One care home in another part of the country reported that they were 'hit hard and fast'

1. 9 residents died, 2 without symptoms. It is noted that a 99 year old resident didn't get it
2. They reported and swabbed 23 staff in first week and 13 in the next week
3. They reported that they seemed to have two groups of types of the virus.
Type 1: ill for 24 hours and then nothing but it comes back and it is this group who seem to get a second wave and then people in this group have died.
Type 2: ill for a full week

| Total Covid-19 cases | Day since presentation |
|----------------------|------------------------|
| 9 | Day 1 |
| 14 | Day 3 |
| 15 | Day 6 |
| 17 | Day 8 |
| 21 | Day 9 |
| 23 | Day 10 |

3: Response

1. Planning is very important so you can take control. Suggested to treat it like a fire drill (be aware that these plans will change).
2. One care home reports that even though we had a multitude of plans in place and had increased our infection control, it still "got in."
3. Treat Covid as an outbreak: close the staff room, restrict movement, Isolate Kitchen and non-clinical staff from clinical areas where possible
4. Use IT to connect residents to relatives and each other
5. GPs are keen to sort out end of life plans
6. An additional thorough cleaning schedule and regime is required
7. Isolating some residents has been a bit easier than was initially thought

4: Staff Wellbeing

1. Allow the time to talk to staff, residents and relatives,
2. Formal weekly updates to staff/ residents/ relatives were helpful but trying to limit the amount of information and changes to policy that are going out to managers every day has helped, although this has been really hard when everything is changing daily.
3. Suggested to change clothes/ footwear prior to leaving work or on entry to home. Shower before contact with household.
4. Don't assume you know which staff need support, they were surprised
5. Keeping up staff morale is very hard (pizza was found to help)

6. Self-care is vital. Use the support you have around you
7. Use the garden where possible for residents and staff.
8. Continual reassurance needed and a willingness to accept that not everyone can adapt to this change as quickly as might be needed.
9. CHAD (Care Homes and Dementia team) are available to support.
tewv.chad.york@nhs.net

6: Other factors

1. Press get in touch but don't engage, send to head office
2. Anxiety for care home managers about how staff will manage financially and emotionally if they are self-isolating
3. There is a lot of anxiety about PPE and a lack of realistically available testing at this point
4. Concerns raised over the availability of thermometers

All incidents are kept confidential and used solely to share in this bulletin.

For further information relating to this PicLL, please contact Chris Charters (Project ECHO Manager, St Leonards Hospice) at Christopher.Charters@stleonardshospice.nhs.uk