OFFER OF MULTIDISCIPLINARY SUPPORT TO INDEPENDENT CARE PROVIDERS

Across the North Yorkshire and York area, work to support the independent care sector in preventing and managing outbreaks of Covid-19 has helped consolidate and expedite collaboration between Health & Social Care colleagues to develop the offer of support to you, the people you support and staff.

As a result of learning from the last 2 ½ years, Humber and North Yorkshire Health and Care Partnership (HNYHCP), previously known as the Vale of York and North Yorkshire CCGs) & North Yorkshire County Council (NYCC) are working together on to deliver an integrated approach to quality assurance and quality improvement.

The team is formed of the NYCC Quality & Service Continuity Team and York Place Quality Nursing Team working as an integrated service led by Principal Nurse/ Head of Quality Improvement. The Quality Assurance and Improvement Team has Quality Nurses, Quality Improvement Officers and Quality Assurance Officers working together, with a risk-based approach, to provide support and advice to providers across York & North Yorkshire (including Craven). By working as a single service, we are able to ensure that the most appropriate support is provided by the most appropriate staff for the job.

This offer does not detract in any way from the proactive and innovative work that is already underway by providers. Colleagues across the independent care sector have and continue to work incredibly hard under great pressure to keep people and staff as safe as possible. It is hoped that by all partners working together providers will feel able to call on extra resource or expertise to help compliment existing structures to look after people and staff.

Background

Purpose and values underpinning the requirements:

As Health & Social care partners across Humber and North Yorkshire Health and Care Partnership (HNYHCP)& North Yorkshire County Council (NYCC) we know how vulnerable the people you support are and will aim to work collaboratively to:

- Support the delivery of high quality care
- Prevent harm
- Share best practice
- Provide opportunities to influence and collaborate on service and quality improvement.

What is the offer to our colleagues in the independent care sector?

The offer from the HNYHCP and NYCC to providers includes seven elements:

1. Training and Care Sector Engagement – sharing, learning and good practice
2. Leadership and Workforce support
3. Commissioning responsive supportive care
4. Digital Support
5. Effective Communication with and between providers
6. Joint working for system wide care and response
7. Recovery plans

Further detail is provided below:

Element one - Training and Care Sector Engagement – sharing, learning and good practice

- Weekly bulletins will continue to share good practice and learning
- Care Connected, a regular virtual meeting provides a forum to raise concerns or queries and for the HNYHCP to facilitate support in responding to these including ethical dilemmas and training as requested by the membership
- The HNYHCP and NYCC will co-ordinate an offer of training in areas including, but not limited to:
    - Personal Protective Equipment (PPE) including what PPE is required and appropriate and how best to use it as well as working to support you where there are issues with obtaining PPE
    - Infection Prevention Control
    - Covid-19 specific messages and guidance
    - Catheter care
    - Sepsis awareness
    - Falls prevention
    - React to Red
    - Nutrition and Hydration
    - Dementia training
    - Mouthcare
    - Safety huddles, how to run these effectively
    - Early identification of the deteriorating resident
    - Advance care planning with the support of primary care colleagues
    - End of life care with support from the Hospice teams
    - Deprivation of Liberty Safeguards and Mental Capacity Act guidance including standard documents to be used and a forum for asking

questions
- Safeguarding support, advice, and guidance
- Moving and Handling
- Defensible documentation
- Risk assessment and care planning

- Supportive calls will be made to providers who report challenges
- Infection prevention and control expertise will be available from HNYHCP and NYCC super trainers who will then train in these key skills.
- The HNYHCP and partners will support the care sector with learning from incidents and root cause analysis

Element 2 - Leadership and Workforce

- Support for registered managers via registered managers network and Partners in Care/ Care Connected Network. These forums may blend as the team evolves.
- HNYHCP & NYCC recognise the enormous toll this is taking on care sector staff, sharing of support for health & wellbeing for social care workers including mental health and wellbeing through IAPT and bereavement services.
- Support to Registered Managers with professional advice and support and incidents as requested from HNYHCP Senior Nursing team and the Quality & Service Continuity Team.
- 'Care for Others, Make a Difference' campaign for recruiting into the care sector alongside the 'Bring Back Staff' to maximise use of NHS returners to nursing homes, student nurses and mutual aid from other commissioned services
- Establishment of education resources and materials which will be made available to the care sector from organisations such as Skills for Care

Element 3 - Commissioning responsive, supportive care

- There will be the provision of registered nurse offer for daily support to each care home through community / acute providers. This is to ensure that people supported receive the best advice and care from community services such as wound care, continence, long term conditions and no-one 'slips through the net'
- Telemedicine will be supported in a number of identified providers to support staff and residents in accessing clinical advice/ care/ referral
- There will be the provision of clear support from specialists to every care home and a 'directory' detailing that support

- St Leonard's Hospice have committed to supporting with the provision of exemplary end of life care services in the care sector and are available for to consult with for support people in your care and bereavement support for staff As mentioned above, the toll this takes on staff is recognised and to support staff there will be the provision of clear support for staff wellbeing and mental health e.g. IAPT for care home staff, bereavement support, clear documentation for supporting homes to make best interests decisions, dementia care, mental capacity advocates where required
- There will be the provision of clear and effective discharge planning processes from hospital and follow up visits the day following discharge, from most appropriate health professional and you will be made aware of the pathway so that you can ensure you are comfortable with residents coming into your homes.
- There is already the provision of effective IPC support from community infection prevention and control services and QAIT support

The principle of 'one care home one GP practice' is the cornerstone of the multidisciplinary support. The enhanced offer from primary care will include:

- A named clinical lead from the practice for each care home
- Weekly 'check ins' with each home. This needs to be multidisciplinary in nature drawing on expertise and support as required for the population needs and can be a virtual 'check in'
- Development of a process and establishment of personalised care plans including advance care plans
- Clinical pharmacy support including medication reviews

Element 4 - Digital Support

- The HNYHCP have already arranged for the provision of Tablets allocated to care homes for virtual GP consultations enabling a new way in working for Health Care Practitioners reducing visit times and increasing speed of assessment and consultation.
- The Capacity Tracker allows the HNYHCP and NYCC to identify capacity in the market and challenges facing providers, allowing support to be offered to those settings, as appropriate. This has been extended to organisations including the Hospice, Mental Health, Learning Disability, and community units.

- NHS Mail provides a secure means of communicating information including, where appropriate, sensitive, and confidential patient information to colleagues in the NHS. It also enables care sector colleagues to comply with the requirements of the Data Security Protection Toolkit. A significant number of care sector colleagues have now begun to transition to NHS Mail across the HNYHCP, and support is available to transition if providers have not already done so.
- Further development of telehealth solutions for effective monitoring and response with the provision of Immedicare is now available in many care homes and the aspiration is to extend this offer further

Element 5 - Effective Communication with and between providers

- The Trusted Transfer documentation used by care homes continues to be supported for enabling communication on admission and to support discharge. Urgent messages and signposting to updated guidance are and will continue to be circulated as required by the HNYHCP & NYCC communications, it is anticipated these may blend as the team evolves in response to providers needs
- Interface between secondary care and care providers for resolution of issues and sharing of best practice (through discharge standards group)

Element 6 - Joint working for system wide care and response

- Building a provision to support specialist nurses and care providers in the training and education provided to enable wider skill set i.e. insulin administration, end of life care
- Pathway to Outstanding supports providers to improve their current Good CQC rating to achieve outstanding.

Element 7 - Recovery plans

Supporting care providers with requests and queries

- We will aim to provide clarity to care homes as services are re-introduced and enable people to access these, where possible, including referrals/planned care etc.
- Early planning for the next flu & booster vaccination season and how this might be operationalised under different circumstances in the future, planning for future service delivery, models and payment mechanisms e.g. CHC, making sure that we don't lose examples of transformation and different ways of working so that these can be carried forward in the future.

Please help us to help you:

Providers are encouraged to share examples of good practice. The team want to learn and work with providers for local solutions that work.

Providers are encouraged to make use of the training available and escalate concerns as soon as possible so that the team can try to support you to resolve these.

Next Steps:
Some parts of this offer are under development as the team evolves. The team will continue to communicate out further information regarding the overall partnership offer to care providers to support continued efforts to deliver enhanced healthcare in care homes and across the care sector for our most vulnerable people.

For further information and to see how the QAIT can help your service please contact sarah.fiori@nhs.net