



# UK Health Security Agency

## Weekly Care Homes Evidence Digest

### Prevention and control of COVID-19 in home care/care homes settings

22<sup>nd</sup> October 2021

#### Summary

This weekly digest contains a selection of evidence published in the last 7 days, in relation to the prevention and control of COVID-19 in home care/care home settings. We search a number of Covid-19 review repositories, an existing UK Health Security Agency (UKHSA) Covid-19 evidence digest (including Covid-19 evidence digests produced by Public Health England prior to October 2021), Ovid Medline and Embase, Social Care Online, medRxiv (pre-print server) and various websites. We select peer reviewed and non-peer reviewed publications (pre-prints), as well as systematic reviews, guidance and evidence summaries.

The digest is produced by UKHSA [Knowledge and Library Services \(KLS\)](#), in conjunction with a small editorial team.

We do not accept responsibility for the availability, reliability or content of the items included in this resource and do not necessarily endorse the views expressed within them. Our intent is to highlight early emerging research findings as well as research that has been subject to peer review and wider scrutiny.

This week's digest includes; from USA, further evidence and recommendations for the use of telemedicine in nursing homes during the COVID-19 pandemic; and further evidence of the negative effects of the COVID-19 pandemic on nursing home staff; from Japan, further evidence of a link between mental health and physical activity among older people during the COVID-19 pandemic; and a cohort study of older people in the community showing measures of transition to frailty; from Israel, reflections on the impact of a national programme to protect residents of long term care facilities, including safe family visits, during the COVID-19 pandemic; and from the Republic of Ireland, a rapid systematic review indicating novel evidence of measures to protect older people in long term care facilities during the COVID-19 pandemic.

From the UK, reflections on an evidence summary of a collection of research in care home settings; a briefing on the impact of COVID-19 on the clinically extremely vulnerable population; and an editorial commenting on the parliamentary report on the UK COVID-19 response.

Finally, summaries of other recently published reports, guidance and statistics.

An ongoing series of UKHSA rapid reviews on a range of COVID-19 related research questions can be also found at <https://ukhsalibrary.koha-ptfs.co.uk/covid19rapidreviews/>. A wider range of UKHSA information resources on the impact of the COVID-19 pandemic may be found at <https://ukhsalibrary.koha-ptfs.co.uk/coronavirusinformation/>.

## Peer-Reviewed Articles

Publication date	Title / URL	Journal / Article type	Digest
15.10.2021	<a href="#">Recommendations to Enhance Telemedicine in Nursing Homes in the Age of COVID-19</a>	JAMDA / Research Letter	<ul style="list-style-type: none"> <li>• Nursing homes (NHs) have been at the frontline of the COVID-19 pandemic. Despite representing &lt;1% of the U.S. population, NH residents account for nearly 33% of all COVID-19 deaths in the USA.</li> <li>• The Center for Medicare and Medicaid Services implemented sweeping telemedicine (TM) regulatory relief in an effort to reduce COVID-19 spread in NHs. The authors report 12 recommendations to enhance and sustain TM from a TM adoption study, certified as quality improvement by the UW Madison Health Sciences IRB.</li> <li>• The 12 recommendations made in this paper fall into four primary categories: <ul style="list-style-type: none"> <li>○ Improvements and provision of Equipment and Infrastructure</li> <li>○ Development and planning of schedules for TM activity</li> <li>○ Protocols for, and training in, information exchange</li> <li>○ Identification &amp; appointment of a dedicated Telemedicine Encounter Facilitator, who should be a trained clinician.</li> </ul> </li> </ul>
16.10.2021	<a href="#">Bacterial contamination of the smartphones of healthcare workers in a German tertiary-care hospital before and during the COVID-19 pandemic</a>	Am. J. Infection Control / Study	<ul style="list-style-type: none"> <li>• Assuming that hygiene measures have improved significantly due to COVID-19, authors aimed to investigate bacterial colonization on smartphones (SPs) owned by healthcare workers (HCWs) before and during the pandemic.</li> <li>• Employing a before-and-after study design, randomly selected HCWs were included. Devices underwent sampling under real-life conditions, without prior manipulation. Swabs were collected in 2012 (pre-pandemic) and 2021 to determine microbial colonization. Isolates were identified by MALDI-TOF mass spectrometry and underwent microbiological susceptibility testing.</li> <li>• The proportion of clinically relevant bacterial pathogens (e.g. Staphylococcus aureus, enterococci, Enterobacterales, non-fermenting bacteria) ranged from 21.2% in 2012 to 39.8% in 2021.</li> </ul>

			<ul style="list-style-type: none"> <li>Resistance profiles revealed a proportion of multidrug-resistant bacteria such as MRSA and VRE of less than 2%.</li> <li>The comparison of before-and-after sampling showed a significant increase in smartphone use during work from 2012 to 2021 with a simultaneous increase in cleaning intensity, probably as a result of the COVID-19 pandemic.</li> <li>SPs must be carefully disinfected after handling in healthcare. Behavioral changes related to the COVID-19 pandemic could have a significant impact if implemented sustainably in everyday clinical practice.</li> </ul>
16.10.2021	Working Experience of Certified Nursing Assistants in the Greater New York City Area during the COVID-19 Pandemic: Results from A Survey Study	Geriatric Nursing / Study	<ul style="list-style-type: none"> <li>study aimed to examine the challenges and needs of certified nursing assistants (CNAs) working in nursing homes during COVID-19 pandemic in the greater New York City area, USA.</li> <li>Between September and November of 2020, a telephone survey was administered to and completed by 208 CNAs in the study area about various aspects of their working experience during COVID-19.</li> <li>CNAs reported significant exposure to COVID-19 and experienced additional emotional and financial strain due to the pandemic.</li> <li>80.1% reported having contact with a patient with known or suspected case of COVID-19; 80.6% reported having enough access to PPE during the pandemic, though 32.6% indicated having to provide their own at one point.</li> <li>91.3% experienced a death of a patient in their nursing home or unit at the time of the survey, which increased their mental health hardship</li> <li>Nearly half of CNAs reported “harder” or “a lot harder” to afford basic needs (e.g., food and housing) because of the pandemic</li> <li>CNAs reported a mixed impact of the pandemic on their long-term career choice with 17.9% indicating less likeliness of continue in the nursing home industry and 20.4% indicating more likeliness to do so</li> </ul>
17.10.2021	Social frailty and Depressive Symptoms during the COVID-19 Pandemic among Older Adults in Japan: Role of Home Exercise Habits	Arch. Gerontology and Geriatrics / Study	<ul style="list-style-type: none"> <li>Study examined the association between social frailty and depressive symptoms among community-dwelling older adults during the coronavirus disease 2019 pandemic. Additionally, we investigated whether home exercise habits moderated the impact of social frailty on depressive symptoms.</li> </ul>

			<ul style="list-style-type: none"> <li>• A total of 309 (28.0%) participants had depressive symptoms. Compared with non-social frailty, social frailty was associated with depressive symptoms. A similar relationship was observed in those who did not exercise at home. However, no such relationship was observed in those who did exercise at home.</li> <li>• Authors conclude social frailty was associated with a risk of depressive symptoms during the pandemic. In addition, the findings suggested that home exercise may buffer the association between social frailty and depressive symptoms.</li> </ul>
18.10.2021	A pioneering national program for the protection of residents of long-term care facilities during the COVID-19 pandemic	J. Am. Geriatrics Soc. / Research Letter	<ul style="list-style-type: none"> <li>• This paper focuses on the establishment and immediate impact of the national program for protection of residents of long-term care facilities (LTCF). More than a year and half into the pandemic, this approach is still having positive impact. Wide PCR testing and vaccination were integrated into the program as they became available</li> <li>• On April 11, 2020, the government established the “Fathers and Mothers Shield” (FMS) a national project to reduce morbidity and mortality from COVID-19 in all the LTCF in Israel while enabling, to some extent, a return to daily life routines.</li> <li>• FMS had three objectives: (1) Publication of COVID-19 policy guidelines, (2) Improving the speed, quality and quantity of PCR testing, and (3) Interruption of potential infection chains.</li> <li>• FMS pioneered visitations according to specific guidelines to ensure safe family visits. This resulted in immediate amelioration of residents' emotional and mental health</li> <li>• A logistics plan identified addressed shortages in human resources and PPE.</li> <li>• Determining a unified policy, issuing centralized guidelines, and</li> <li>• transparency improved compliance with guidelines throughout the country and reduced outbreaks</li> <li>• These findings provide important insights for future response to emergencies in LTCF.</li> </ul>
19.10.2021	Transition to frailty in older Japanese people during the	Arch. of Gerontology and Geriatrics / Study	<ul style="list-style-type: none"> <li>• Authors aimed to understand health and lifestyle conditions associated with frailty transition over 6 months. A community-based prospective</li> </ul>

	<a href="#">coronavirus disease 2019 pandemic: a prospective cohort study</a>		<p>cohort study was conducted from May to July 2020 (baseline) and November 2020 to January 2021 (follow-up) in Japan, with 1,953 community-dwelling older people (≥65 years) at baseline. To identify transition from non-frailty at baseline to frailty at follow-up, the Frailty Screening Index was used.</p> <ul style="list-style-type: none"> <li>• 706 individuals returned the baseline and follow-up questionnaires. Among the 492 non-frail older people at baseline, there was a 9.8% increase in frailty transition</li> <li>• Approximately 10% of older people showed new transitions to frailty over 6 months during the COVID-19 pandemic. A combination of age and subjective leg muscle weakness is a feasible measure to optimally identify frailty transition.</li> </ul>
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### Reports and other publications

Publication date	Title / URL	Author(s)	Digest
18.10.2021	<a href="#">Making progress: but a way to go—the age and ageing care-home collection</a>	Gordon, Adam L; et al.	<ul style="list-style-type: none"> <li>• Commentary designed to accompany the ‘Care Home Collection’ which is included in this edition of CHD as an Evidence Summary. Key findings from the development of the collection include: <ul style="list-style-type: none"> <li>○ The publication rate of care-home research papers in <i>Age and Ageing</i> has increased over the last 5 years.</li> <li>○ The small number of feasibility randomised controlled trials published show the challenges of trial research in this sector.</li> <li>○ Routine data from care-home residents are difficult to access and this limits the research endeavour.</li> <li>○ Care-home research published in <i>Age and Ageing</i> has been predominantly from the UK and healthcare related.</li> <li>○ More resident and care home centred research is possible if novel approaches are used to work collaboratively with care homes.</li> </ul> </li> </ul>
October 2021	<a href="#">Assessing the impact of COVID-19 on the clinically</a>	Hodgson, Karen; et al	<ul style="list-style-type: none"> <li>• Briefing shows the scale of the challenge of ensuring that the most clinically vulnerable to COVID-19 are kept safe, and in providing high-</li> </ul>

	<a href="#">extremely vulnerable population</a>		<p>quality health and social care during the pandemic. It also indicates that there are substantial unmet needs that should be prioritised to ensure that the mental and physical health of this group does not deteriorate further.</p> <ul style="list-style-type: none"> <li>• In this briefing, the authors: <ul style="list-style-type: none"> <li>○ present analysis from the Networked Data Lab on the impact the pandemic has had on the clinically extremely vulnerable population</li> <li>○ assess the mental health of people identified as clinically extremely vulnerable</li> <li>○ examine the data on access to care for clinically extremely vulnerable</li> <li>○ assess the limitations to the use of an algorithm-driven approach to identifying the clinically extremely vulnerable population which were exacerbated by poor availability of high-quality data.</li> </ul> </li> </ul>
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## Guidance

Publication date	Title / URL	Author(s)	Digest
19.10.2021	<a href="#">UKHSA review into IPC guidance</a>	UK HSA	<ul style="list-style-type: none"> <li>• Recommendations for changes to COVID-19 infection prevention and control (IPC) advice to help ease pressure on the NHS.</li> </ul>

## Evidence Summaries

Publication Date	Title / URL	Author(s)	Digest
18.10.2021	<a href="#">Care Home Collection</a>	[editors: Gordon, Adam L; et al.; Authors: Various]	<ul style="list-style-type: none"> <li>• Editors searched Age and Ageing for care home articles published since 2015. From these we collated 42 into the Age and Ageing care home collection. This collection, draws together important papers that</li> </ul>

			<p>show how Age and Ageing is helping to shape and grow care home research.</p> <ul style="list-style-type: none"> <li>Given the importance of the COVID-19 pandemic in care homes, <a href="#">all of the care home COVID-19 papers published in Age and Ageing to date</a> are included.</li> <li>Papers are also included that consider: non-pharmacological strategies for residents with dementia, end-of-life care, sexuality and intimacy, and the care home workforce, as well as group of papers that present innovative approaches to research in care homes, each of which gives voice to residents and/or staff, are collated and presented as a way of moving towards a more resident- and care home-centred research agenda.</li> </ul>
18.10.2021	<a href="#">A rapid systematic review of measures to protect older people in long-term care facilities from COVID-19</a>	Frazer, Kate; et al.	<ul style="list-style-type: none"> <li>The aim of this rapid systematic review was to investigate measures implemented in LTCF to reduce transmission of COVID-19 and their effect on morbidity and mortality of residents, staff and visitors.</li> <li>Databases (PubMed, EMBASE, CINAHL, Cochrane Databases and repositories and MedRxiv prepublished database) were systematically searched from inception to 27 July 2020 to identify studies reporting assessment of interventions to reduce transmission of COVID-19 in nursing homes among residents, staff or visitors. Outcome measures include facility characteristics, morbidity data, case fatalities and transmission rates. Due to study quality and heterogeneity, no meta-analysis was conducted.</li> <li>The search yielded 1414 articles, with 38 studies included. Reported interventions include mass testing, use of personal protective equipment, symptom screening, visitor restrictions, hand hygiene and droplet/contact precautions, and resident cohorting. Prevalence rates ranged from 1.2% to 85.4% in residents and 0.6% to 62.6% in staff. Mortality rates ranged from 5.3% to 55.3% in residents.</li> <li>Novel evidence in this review details the impact of facility size, availability of staff and practices of operating between multiple facilities, and for-profit status of facilities as factors contributing to the size and number of COVID-19 outbreaks. No causative relationships can be determined; however, this review provides evidence of interventions that reduce transmission of COVID-19 in LTCF.</li> </ul>

## Statistics

Publication date	Title / URL	Author(s)	Digest
19.10.2021	<a href="#">Number of deaths in care homes notified to the Care Quality Commission, England</a>	ONS, CQC	<ul style="list-style-type: none"> <li>Provisional counts of deaths in care homes caused by the coronavirus (COVID-19) by local authority. Published by the Office for National Statistics and Care Quality Commission.</li> </ul>
19.10.2021	<a href="#">Care home resident deaths registered in England and Wales, provisional</a>	ONS	<ul style="list-style-type: none"> <li>Provisional counts of the number of care home resident deaths registered in England and Wales, by region, including deaths involving coronavirus (COVID-19), in the latest weeks for which data are available.</li> </ul>
20.10.2021	<a href="#">Coronavirus (COVID-19): adult care homes - additional data</a>	Scottish Government	<ul style="list-style-type: none"> <li>Weekly data on COVID-19 in adult care homes in Scotland.</li> </ul>

## Editorials and News

Publication date	Title / URL	Author(s)	Digest
15.10.2021	<a href="#">The parliamentary committee report on covid-19 response</a>	Gurdasani, Deepti; McKee, Martin	<ul style="list-style-type: none"> <li>Editorial reports on Commons Health and Social Care and Science and Technology parliamentary committees' reports on early handling of the Covid-19 pandemic and their findings, <i>inter alia</i>, that Care homes were effectively abandoned.</li> <li>The authors argue that important lessons identified by the report have still not been learnt and that fatalistic view of inevitable identified in the report as greatly impacting the pandemic response is still evident, and shown by the acceptance of far higher death rates in the UK than in comparable European nations</li> <li>The Editorial calls for need an urgent public inquiry which cannot wait until spring 2022, given continuing failures and the need to apply these lessons to current response. They call for the inquiry to be undertaken by independent experts without a vested interest in the results,</li> </ul>

			specifically a chair and substantial membership from abroad. The authors hope this will provide a rapid assessment of where UK policy remains out of line with best practice elsewhere, and why.
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