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England

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Weekly Care Homes Evidence Digest

Prevention and control of COVID-19 in home care/care homes settings
29th October 2020

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 PHE Covid-19 evidence digest, 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 PHE **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: a qualitative analysis of the dilemmas for restrictive visiting policies in Dutch care homes; evidence from the USA of a reduction in mortality from COVID-19 in nursing residents with diabetes taking metformin; and also from the USA, a 'traffic light' system for cohorting nursing home residents to control transmission of COVID-19. From the UK, 'top tips' for improving care in care homes in response to COVID-19 from a synthesis of rapid reviews; an analysis of the evolution of outbreaks in care homes across a large health region in Scotland; and a rapid review of factors associated with COVID-19 in care homes and domiciliary care, and effectiveness of interventions (<https://phelibrary.koha-ptfs.co.uk/covid19rapidreviews/>). Finally, this week summaries of recently published reports, guidance and statistics.

Peer-Reviewed Articles

Publication date	Title / URL	Journal / Article type	Digest
15.10.2020	<p>Assessing the Distribution of Elderly Requiring Care: A Case Study on the Residents in Barcelona and the Impact of COVID-19</p>	<p>International Journal of Environmental Research and Public Health / Article</p>	<ul style="list-style-type: none"> • Analyzed the distribution of the demand for elderly care services, obtaining a deeper understanding of how the demand for elderly care is dispersed throughout the city. • Considering the characteristics that were likely to impact the demand for homecare in the neighborhoods, we clearly identified five groups of neighborhoods with different profiles and needs. • Found that the number of Covid-19 cases in each neighborhood was more correlated to the number of elderly people in the neighborhood than it was to the number of beds in assisted living or day care facilities in the neighborhood.
18.10.2020	<p>Serological Survey following SARS-COV-2 Outbreaks at Long Term Care Facilities in Metro Vancouver, British Columbia: Implications for Outbreak Management and Infection Control Policies</p>	<p>American Journal of Infection Control / Article</p>	<ul style="list-style-type: none"> • A cross-sectional serological survey was carried out in two long term care facilities that experienced COVID-19 outbreaks in order to evaluate current clinical COVID-19 case definitions. • Among individuals with a negative or no previous COVID-19 diagnostic test, myalgias, headache and loss of appetite were associated with serological reactivity. The US CDC probable case definition was also associated with seropositivity. Public health and infection control practitioners should consider these findings for case exclusion in outbreak settings.
21.10.2020	<p>Caught off guard by Covid-19: now what?</p>	<p>Geriatric Nursing / Article</p>	<ul style="list-style-type: none"> • Maintaining social interactions, relationships and intimacy are fundamental needs of older adults living in assisted living (AL) communities. Yet, these very basic human needs have been impeded by quarantine mandates imposed by the COVID-19 pandemic. • Utilizing the 4 M Framework, created by The John A. Hartford Foundation and Institute of Healthcare Improvement, the authors describe simple direct bedside interventions of low cost, and high patient-centered value which front-line nursing and caregiver staff can employ to maintain social connections, interactions, mentation, function and mobility among residents they care for, and care about, in AL communities.

<p>22.10.2020</p>	<p>Producing ‘Top Tips’ for Care Home Staff During the COVID-19 Pandemic in England: Rapid Reviews Inform Evidence-Based Practice but Reveal Major Gaps</p>	<p>Journal of Long-Term Care / Article</p>	<ul style="list-style-type: none"> • Methods: Eight rapid, expert reviews of published, multidisciplinary research evidence were conducted to help answer care home workers’ questions about ‘how’ to support residents, family members and each other at a time of unprecedented pressure and grief and adhere to guidance on self-distancing and isolation. A review of the emerging policy guidelines published up to the end of April 2020 was also undertaken. • The rapid reviews revealed gaps in research evidence, with research having a lot to say about what care homes should do and far less about how they should do it. The policy review highlighted the expectations and demands placed on managers and direct care workers as the pandemic spread across the UK.
<p>22.10.2020</p>	<p>A cross-sectional survey assessing the preparedness of the long-term care sector to respond to the COVID-19 pandemic in Ontario, Canada</p>	<p>BMC Geriatrics / Article</p>	<ul style="list-style-type: none"> • An online cross-sectional survey of Ontario LTC Clinicians working in LTC homes in Ontario Canada was conducted to provide the clinician perspective on the preparedness and engagement of the LTC sector during the COVID-19 pandemic. • LTC homes implemented a wide range of important interventions (e.g. instituting established respiratory isolation protocols, active screening of new LTC admissions, increasing education on infection control processes, encouraging sick staff to take time off, etc). • Ample communications pertinent to the pandemic were received from provincial LTC organizations, the government and public health officials. • However, the feasibility of implementing public health recommendations, as well as the engagement of the LTC sector in pandemic planning were identified as areas of concern. • Medical director status was associated with an increased knowledge of local implementation of interventions to mitigate COVID-19, as well as endorsing increased access to reliable COVID-19 information and resources to manage a potential COVID-19 outbreak in their LTC home. • LTC clinician respondents indicated that better engagement with LTC leaders is needed to plan a coordinated pandemic response.
<p>22.10.2020</p>	<p>Implementation of an algorithm of cohort classification to prevent the</p>	<p>Journal of the American Medical Directors Association / Article</p>	<ul style="list-style-type: none"> • Older adults living in nursing homes are the most vulnerable group of the COVID-19 pandemic. There are many difficulties in isolating residents and limiting the spread in this setting.

	<p>spread of COVID-19 in nursing homes</p>		<ul style="list-style-type: none"> • Authors have developed a simple algorithm with a traffic light shape for resident classification and sectorization within nursing homes, based on basic diagnostic tests, surveillance of symptoms onset and close contact monitoring. We have implemented the algorithm in several centers with good data on adherence. Suggestions for implementation and evaluation are discussed.
<p>23.10.2020</p>	<p>Evolution and effects of COVID-19 outbreaks in care homes: a population analysis in 189 care homes in one geographical region of the UK</p>	<p>The Lancet Healthy Longevity / Article</p>	<ul style="list-style-type: none"> • Authors aim to describe the evolution of outbreaks of COVID-19 in all care homes in one large health region in Scotland. • Between March 10 and Aug 2, 2020, residents at 189 care homes (5843 beds) were tested for COVID-19 when symptomatic. A COVID-19 outbreak was confirmed at 69 (37%) care homes, of which 66 (96%) were care homes for older people. • The size of care homes for older people was strongly associated with a COVID-19 outbreak (odds ratio per 20-bed increase 3.35, 95% CI 1.99–5.63). • 907 confirmed cases of SARS-CoV-2 infection were recorded during the study period, and 432 COVID-19-related deaths. • 411 (95%) COVID-19-related deaths occurred in the 69 care homes with a confirmed COVID-19 outbreak, and two (<1%) were in one of the 120 care homes without a confirmed COVID-19 outbreak. • At the 69 care homes with a confirmed COVID-19 outbreak, 74 excess non-COVID-19-related deaths were reported, whereas ten non-COVID-19-related excess deaths were observed in the 120 care homes without a confirmed COVID-19 outbreak.
<p>23.10.2020</p>	<p>Clinical and ethical recommendations for decision-making in nursing homes in the context of the COVID-19 crisis</p>	<p>Medicina Clínica (English Ed.) / Article</p>	<ul style="list-style-type: none"> • The research group on chronicity in Central Catalonia (C3RG), the chairs of palliative Care and Bioethics, and the Centre for Social and Health Studies (CESS) at the UVic-UCC (Catalonia, Spain) promoted a consensus of specific recommendations to guide professionals and organizations in the difficult decision-making process. • Involved the participation of 12 scientific societies, 5 bioethics entities or their chairpersons, as well as 15 organizations - including professional associations, employers' associations, research, and administration groups.

<p>23.10.2020</p>	<p>Dilemmas with restrictive visiting policies in Dutch nursing homes during the COVID-19 pandemic: a qualitative analysis of an open-ended questionnaire with elderly care physicians</p>	<p>Journal of the American Medical Directors Association / Article</p>	<ul style="list-style-type: none"> • The aim of this study was an exploration of dilemmas experienced by Elderly Care Physicians (ECPs) as a result of the COVID-19 driven restrictive visiting policy. • 76 ECPs answered the questionnaire describing a total of 114 cases in which they experienced a dilemma. Thematic analysis revealed four major themes: • (1) The need for balancing safety for all through infection prevention measures versus quality of life of the individual residents and their loved ones; • (2) The challenge of assessing the dying phase and how the allowed exception to the strict visitor restriction in the dying phase could be implemented; • (3) The profound emotional impact on ECPs; • (4) Many alternatives for visits highlight the wish to compensate for the absence of face to face contact opportunities. However, given the diversity of NH residents, alternatives were often only suitable for some. • ECPs reported that the restrictive visitor policy deeply impacts NHs residents, their loved ones and care professionals. The dilemmas encountered as a result of the policy highlight the wish by ECPs to offer solutions tailored to the individual residents. Authors identified an overview of aspects to consider when drafting future visiting policies for NHs during the COVID-19 pandemic.
<p>23.10.2020</p>	<p>Home Health Staff Perspectives on Infection Prevention and Control: Implications for COVID-19</p>	<p>Journal of the American Medical Directors Association / Article</p>	<ul style="list-style-type: none"> • From May to November 2018, we conducted in-depth telephone interviews with 41 staff from 13 agencies across the nation. • Participants perceived that IPC plays a big part in patient safety and reducing rehospitalizations, and protection of patients and staff was a major motivator for compliance with IPC. • The identified challenges included the unpredictability of the home environment, patient/family dynamics, the intermittent nature of HHC, and staffing issues. • Education was seen as a tool to improve staff, patient, caregiver and families' compliance with IPC. • Keys to success and innovation included: a leadership focus on quality, using agency infection data to improve quality, and a coordinated approach to patient care.

			<ul style="list-style-type: none"> Identified barriers to effective IPC in HHC, as well as important facilitators that HHC agencies can use to implement policies and procedures to improve patient care and keep staff safe. Leadership prioritization of infection prevention and control is key to implementing appropriate infection prevention and control policies and may be especially important in midst of COVID-19.
26.10.2020	Importance of Flow for Lonely Nursing Home Residents During the COVID-19 Pandemic	Journal of Gerontological Nursing / Letter	<ul style="list-style-type: none"> Authors interested in an emotion-related factor that can effectively predict loneliness when residents are presented with activities that are sufficiently challenging to alleviate boredom. Provides valuable information for developing strategies to reduce loneliness in nursing home residents; however small sample size (24 participants) due to survey being paused through onset of pandemic.
26.10.2020	Metformin is associated with Decreased 30-day Mortality among Nursing Home Residents Infected with SARS-CoV2	Journal of the American Medical Directors Association / Article	<ul style="list-style-type: none"> Retrospective cohort study of 775 nursing home residents infected with SARS-CoV-2, seeking to evaluate mortality benefit among older persons infected with SARS-CoV-2 who were taking metformin as compared to those who were not. Relative to those not receiving diabetes medications, residents taking metformin were at significantly reduced hazard of death (adjusted HR 0.48, 95%CI 0.28, 0.84) over the subsequent 30 days from COVID-19 diagnosis. There was no association with insulin (adjusted HR 0.99, 95% 0.60, 1.64) or other diabetes medications (adjusted HR 0.71, 95% CI 0.38, 1.32). Data suggests a reduction in 30-day mortality following SARS-CoV-2 infection in residents who were on metformin-containing diabetes regimens. These findings suggest a relative survival benefit in nursing home residents on metformin, potentially through its mTOR inhibition effects.
26.10.2020	The Winter Respiratory Viral Season During the COVID-19 Pandemic	Journal of the American Medical Directors Association / Article	<ul style="list-style-type: none"> Discusses unique considerations that COVID-19 brings to the health and well-being of residents and staff in nursing homes and other long-term care settings this winter. Specific topics include preventing the spread of respiratory viruses, promoting immunization, and the diagnosis and treatment of suspected respiratory infection. Policy-relevant issues are discussed, including whether to mandate influenza immunization for staff, the availability and use of PPE, supporting staff if they become ill, and the distribution of a COVID-19 vaccine when it becomes available.

<p>26.10.2020</p>	<p>Does copper prevent nosocomial transmission of COVID-19?</p>	<p>Journal of the American Medical Directors Association / Letter</p>	<ul style="list-style-type: none"> • Authors carried out a quasi-experimental study within a nursing home which was divided into 2 identical wings apart from one of them was equipped with elements (door handles, handrails and grab bars) covered with a copper alloy, known to be antimicrobial. • Among the 353 people followed, 47 cases of COVID 19 were recorded (13%) during the study period. The RR of infection was significantly higher in the copper equipped wing (RR = 2.98; 31 95% CI RR = 1.60-5.89). • Results show that the copper surfaces had no protective effect in preventing the transmission of SARS-CoV-2, and make authors question the importance of hand contamination. • A previous study, carried out in the same nursing home, led to similar conclusions with an epidemic of seasonal influenza (also known to be airborne transmitted), and showed that copper did not appear to have any protective effect, although it was effective in reducing the risk of contamination for manual nosocomial infections, especially bacterial.
<p>26.10.2020</p>	<p>Evaluating the effect of COVID-19 pandemic lockdown on long-term care residents' mental health: a data driven approach in New Brunswick</p>	<p>Journal of the American Medical Directors Association / Article</p>	<ul style="list-style-type: none"> • Presents a supporting analysis of the effects of lockdown in homes without COVID-19 outbreaks on depression, delirium, and behaviour problems in a network of seven LTC homes in New Brunswick, Canada where mitigative strategies were deployed to minimize poor mental health outcomes (e.g., virtual visits, increased student volunteers). • Included 4209 assessments from 765 LTC residents between January 2017 to June 2020 and modelled the change within and between residents for depression, delirium, and behavioural problems over time. Though the number of residents who had in-person visits with family decreased from 73.2% before to 17.9% during lockdown, the number of residents experiencing delirium and behavioural problems did not change. The proportion of residents with indications of depression decreased from 19.9% before to 11.5% during lockdown. • Indicates that the effect of lockdown was not statistically significant on depression, delirium, or behavioural problems. Authors' analyses demonstrate poor mental health outcomes associated with lockdown can be mitigated with thoughtful intervention and ongoing evaluation with clinical information systems.

<p>26.10.2020</p>	<p>Exploring the N95 and Surgical Mask Supply in U.S. Nursing Homes During COVID-19</p>	<p>Journal of Applied Gerontology / Article</p>	<ul style="list-style-type: none"> • U.S. health care facilities have been encountering a recurrence of medical supply shortage since COVID-19 exploded in March 2020. There is an urgent need for important PPE such as N95 and surgical masks. • This project examined the factors that were associated with nursing homes' N95 and surgical mask supply. • Found that a high number of resident COVID-19 cases contributed to the supply of N95, but not surgical masks, whereas a high number of staff cases did not lead to an adequate supply of either N95 or surgical masks. Compared with not-for-profit (NFP) facilities, for-profit (FP) nursing homes were less likely to get enough masks. A better supply distribution plan is needed to prepare for future possible PPE shortage.
<p>26.10.2020</p>	<p>COVID-19 in Long Term Care Facilities: A Review of Epidemiology, Clinical Presentations, and Containment Interventions</p>	<p>Infection Control & Hospital Epidemiology / Article</p>	<ul style="list-style-type: none"> • This review summarizes the literature to describe the current epidemiology of COVID-19 in LTCFs, clinical presentations and outcomes in the LTCF population with COVID-19, containment interventions, and the role of healthcare workers in SARS-CoV-2 transmission in these facilities.
<p>26.10.2020</p>	<p>"It's Pure Panic": The Portrayal of Residential Care in American Newspapers During COVID-19</p>	<p>Gerontologist / Article</p>	<ul style="list-style-type: none"> • Study examines the discursive construction of residential care during the COVID-19 pandemic in 54 articles from three leading American newspapers: The New York Times, USA Today, The New York Post. • Findings indicate that residents' voices are excluded and superseded by others, namely their family members. Literary elements were used to portray residential care as shockingly dangerous, deceptive, and problematic. Blame was often assigned to an individual or group according to the political tendency of the newspaper.
<p>28.10.2020</p>	<p>Comparative Performance of Private Equity–Owned US Nursing Homes During the COVID-19 Pandemic</p>	<p>Jama Network Open / Article</p>	<ul style="list-style-type: none"> • In this cross-sectional study of 11 470 US nursing homes, there were no statistically significant differences in staffing levels, COVID-19 cases or deaths, or deaths from any cause between PE nursing homes and facilities with other ownership types. Compared with PE, all other ownership types were more likely to have at least a 1-week supply of N95 masks and medical gowns. • PE-owned nursing homes performed comparably with for-profit and non-profit nursing homes based on COVID-19 cases and deaths and deaths by any cause but had less PPE than other nursing homes.

28.10.2020	Clinical Suspicion of COVID-19 in Nursing Home residents: symptoms and mortality risk factors	Journal of the American Medical Directors Association / Article	<ul style="list-style-type: none"> To describe symptomatology, mortality and risk factors for mortality in a large group of Dutch nursing home (NH) residents with clinically-suspected COVID-19 who were tested with a Reverse Transcription Polymerase Chain Reaction (RT-PCR) test. About 40% of the residents with clinically-suspected COVID-19 actually had COVID-19, based on the RT-PCR test. Despite an overlap in symptomatology, mortality rate was three times higher for residents with COVID-19+. This emphasizes the importance of using low-threshold testing in NH residents which is an essential prerequisite to using limited personal protective equipment and isolation measures efficiently.
28.10.2020	Community COVID-19 activity level and nursing home staff testing for active SARS-CoV-2 infection in Indiana	Journal of the American Medical Directors Association / Article	<ul style="list-style-type: none"> To assess whether using coronavirus disease 2019 (COVID-19) community activity level can accurately inform strategies for routine testing of facility staff for active severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection. 59,930 nursing home staff tested for active SARS-CoV-2 infection in Indiana. Authors failed to observe a meaningful threshold of community COVID-19 activity for the purpose of predicting nursing homes with any positive staff.

Preprints

Publication date	Title / URL	Journal / Article type	Digest
23.10.2020	The impact of COVID-19 on Long Term Care Facilities (LTCFs) of an Italian Province: a cohort study and a retrospective analysis of observed vs. expected mortality	MedRxiv / Preprint	<ul style="list-style-type: none"> As it became evident that LTCs were the epicenter of the pandemic in Italy, health authorities of the Vicenza province adopted a plan, which included an epidemiological investigation in a case study facility (CSF) and a retrospective analysis to estimate the impact of COVID-19 in terms of mortality. Combining retrospective data and a prospective cohort study in the CSF we provided a tentative estimate of the impact of COVID-19 on LTCFs. We found an age-gradient in all variables explored. An observed mortality higher 60% than 2019 was found in those LTCF reporting COVID-19 cases.

			<ul style="list-style-type: none"> • Our findings suggest the need to adopt and maintain strict mitigation measures in LTCFs in the future dynamics of the epidemic.
25.10.2020	Predictors of PTSD, depression and anxiety in UK frontline health and social care workers during COVID-19	MedRxiv / Preprint	<ul style="list-style-type: none"> • An online survey was conducted in the weeks following the initial peak in cases (27 May to 23 July 2020). Participants included health and social care workers in nursing or care homes and community settings. • PTSD was assessed using the PTSD subscale of the International Trauma Questionnaire (ITQ); Depression assessed using the Patient Health Questionnaire-9 (PHQ-9); Anxiety was assessed using the Generalized Anxiety Disorder Scale (GAD-7). • Over 57% of respondents met the threshold for clinically significant PTSD, anxiety or depression, and symptom levels were reasonably high and comparable across occupational groups. Participants who were more concerned about infecting others, who felt they could not talk with their managers, who reported feeling stigmatised due to their role and who had not had reliable access to personal protective equipment (PPE) were more likely to meet criteria for a clinically significant mental disorder. Being redeployed during the pandemic, and having had COVID were associated with a higher likelihood of meeting criteria for PTSD. Higher household income was associated with reduced odds for a mental disorder.

Reports and other publications

Publication date	Title / URL	Author(s)	Digest
13.10.2020	An Inquiry into the Lived Experience of COVID-19 in the Home Care Sector in Ireland: The Experiences of Home Care Provider Organisations	Home & Community Care Ireland	<ul style="list-style-type: none"> • Part of a research project that explores the health, social and economic impact of the pandemic on the home care sector in Ireland. Key findings included: • The biggest challenge was employee recruitment and retention prompted by the closure of schools and creches, difficult working conditions and frequent self-isolation of carers; • Self-isolation of clients generated a 20-30 per cent decrease in home care services, with an estimated 10-40 per cent drop in revenue for the affected providers;

			<ul style="list-style-type: none"> • Providers implemented robust health and safety policies and a range of measures to reduce the traffic in clients' homes. i.e. smaller staffing pods, 'one carer' model, and phone assessment and monitoring; • The pandemic had a positive impact on workplace relationships having prompted strong team spirit and enhanced communication internally, and a strengthened partnership with the public health and social care services (HSE) externally. • High levels of stress in the workplace, with very prevalent mental and physical exhaustion. Many organisations provided a range of support to their employees including supervision and counselling, flexible working arrangements, yoga and meditations seminars, and wellbeing calls and packages. • The main concern about winter 2020/21 is a potential second wave with an immediate effect on the health care workforce. The importance of rapid testing, PPE provision and distribution, and potential further lockdowns with implication for childcare have also been identified as worrying. • The pandemic also generated positive changes such as increased health and safety standards, and introduction of technology and artificial intelligence in the home care sector.
<p>Updated 13.10.2020</p>	<p>Updated country report: The Long-Term Care COVID-19 situation in Australia</p>	<p>Sara Charlesworth & Lee-Fay Low, International Long Term Care Policy Network</p>	<ul style="list-style-type: none"> • Looks at the infection rates amongst staff and residents in the Australian long term care sector and at the policy and funding measures put in place by the government to assist the aged care sector prepare for and manage COVID-19 infections. • Looks at concerns raised by the Royal Commission into Aged Care Quality & Safety which found deficiencies in government planning around COVID-19 in residential aged care, inadequate infection control, that PPE and testing was sometimes hard to access, and that surge staffing arrangements were not sufficient, resulting in poor care during COVID-19 outbreaks in Victoria. The Commissioners also found that the Australian government did not have a COVID-19 plan devoted solely to aged care.

<p>Updated 14.10.2020</p>	<p>Mortality associated with COVID-19 in care homes: international evidence</p>	<p>Adelina Comas-Herrera et al., International Long Term Care Policy Network</p>	<ul style="list-style-type: none"> • In almost all countries where there have been deaths linked to COVID-19, a substantial proportion of those deaths were among care home residents. Based on the data gathered for this report, the current average of the share of all COVID-19 deaths that were care home residents is 46% (based on 21 countries). • For the countries where this data is available, the share of all care home residents who have died (linked to COVID-19) ranges from 0.01% in South Korea to over 4% (which would mean that over one in 25 care home residents have died linked to COVID-19) in Belgium, Ireland, Spain, the UK and the US. This share is highly correlated to the total number of COVID-19 deaths in the population who live outside care homes.
<p>14.10.2020</p>	<p>Update on COVID-related mortality in care homes in Israel, 12th October 2020</p>	<p>Sharona Tsadok-Rosenbluth (Ben-Gurion University of the Negev), Boaz Hovav (Max Stern Yezreel Valley College), Gal Horowitz (Ministry of Health), Shuli Brammli-Greenberg (Hebrew University of Jerusalem) / International Long Term Care Policy Network</p>	<ul style="list-style-type: none"> • 39% of deaths from Covid-19 in Israel (as of October 8th) were residents in long-term care facilities (704). The first outbreak in an Israeli long-term care facility began in mid-March, only sixteen days after the first patient was diagnosed in Israel. • The Israeli government appointed, on April 12th, a national-level team, called 'Fathers and Mothers Shield', to manage the COVID-19 outbreaks long-term care facilities. • By June 2020, the mortality rate due to Covid-19 in LTCF's reached 51% of all deaths from the virus. • To date (October 12th 2020) Israel is experiencing its second lockdown due to the rapid spread of the disease in the last couple of months.
<p>Revised 20.10.2020</p>	<p>Care Homes Strategy for Infection Prevention & Control of Covid-19 Based on Clear Delineation of Risk Zones</p>	<p>Eric Fewster, Independent Water & Environmental Manager, Salford, UK, et al.</p>	<ul style="list-style-type: none"> • Strategy is based around a fundamental understanding of asymptomatic / pre-symptomatic transmission as a major contributor to the spread of COVID-19. Stresses the importance of clear delineation of risk zones throughout the entire building, in order to reduce cross-contamination including from asymptomatic residents to whom 'normal care' might otherwise be given.
<p>Oct 2020</p>	<p>The state of the adult social care sector and workforce in England</p>	<p>Skills for Care</p>	<ul style="list-style-type: none"> • This report provides a comprehensive analysis of the adult social care workforce in England and the characteristics of the 1.52 million people working in it. Topics covered include: employment information, recruitment and retention, demographics, pay, qualification rates and future workforce forecasts.

			<ul style="list-style-type: none"> • Please note: the data used in this report for 2019/20 was collected prior to the height of the COVID-19 pandemic in England, therefore, this report does not show how COVID-19 has impacted the adult social care workforce. Rather it should be used as a baseline to reflect the composition of the workforce prior to COVID-19 and to give context to any further research or data collected after March 2020. • Skills for Care is analysing ASC-WDS data on a monthly basis to monitor the impact of COVID-19 on the sector and workforce. The outputs from this analysis can be found on the COVID-19 section of their website.
22.10.2020	Social care: funding and workforce. Third Report of Session 2019–21	Health and Social Care Select Committee	<ul style="list-style-type: none"> • Looks at funding and problems in the social care workforce, and at potential reforms.
27.10.2020	Nursing home safety during Covid: PPE shortages	U.S. Public Interest Research Group and Frontier Group	<ul style="list-style-type: none"> • Report into the continuing shortages of PPE in US nursing homes.

Guidance

Publication date	Title / URL	Author(s)	Digest
22.10.2020	Advice and guidance on discharging COVID-19 positive patients to care homes	Royal College of Physicians	<ul style="list-style-type: none"> • Identifies and summarises the key points in advice and guidance from the government, NHS and elsewhere.
Updated 23.10.2020	Visits to care homes: guidance for providers	Welsh Government	<ul style="list-style-type: none"> • Guidance is for providers of care home services. Provides advice for care home providers on facilitating: <ul style="list-style-type: none"> • outdoor visits; • indoor visits when the level of COVID-19 at a local or national level allows; • indoor visits in exceptional circumstances including end of life; • people going out into the community and visiting family and friends.

Evidence Summaries

Publication Date	Title / URL	Author(s)	Digest
22.10.2020	What is the evidence for the impact of closures of day-care centres and resumption of day care services for older people during COVID-19?	National Health Library & Knowledge Service	<ul style="list-style-type: none"> Summarises the evidence from a number of organisations plus the international literature.

Statistics

Publication date	Title / URL	Author(s)	Digest
27.10.2020	Number of deaths in care homes notified to the Care Quality Commission, England	Office for National Statistics & Care Quality Commission	<ul style="list-style-type: none"> Provisional counts of deaths in care homes caused by the coronavirus (COVID-19) by local authority up to week ending 23 October.
Updated 27.10.2020	Notifications of deaths of residents related to COVID-19 in adult care homes: 1 March to 23 October 2020	Welsh Government	<ul style="list-style-type: none"> The data presented here are based on the Notifications of Service User Deaths received by Care Inspectorate Wales from adult care homes which relate to their residents. The location of death may be in the care home, in hospital or another location.
28.10.2020	Coronavirus (COVID-19): adult care homes - additional data	Scottish Government	<ul style="list-style-type: none"> Weekly data on COVID-19 in adult care homes in Scotland up to 18 October including: Testing for COVID-19 in adult care homes in Scotland split by care homes with confirmed Covid-19 and without confirmed Covid-19, presented by NHS Health Board; Deaths reported to Care Inspectorate - the number of deaths reported by adult care homes, including COVID-19 and non-COVID-19 related deaths.

Editorials and News

Publication date	Title / URL	Author(s)	Digest
28.10.2020	Nursing Homes' Next Test— Vaccinating Workers Against COVID-19	JAMA / Medical News & Perspectives	<ul style="list-style-type: none">• Considers problem of getting several million initial doses to the nation's massive and far-flung long-term care workforce.