



Public Health
England

Protecting and improving the nation's health

Weekly Care Homes Evidence Digest

Prevention and control of COVID-19 in home care/care homes settings
5th November 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 number of rapid reviews on current topical research questions and reviews of international lessons learned from the impact of the first 'wave' of COVID-19 on long term care facilities; from Cuba, potential benefits of monoclonal antibody therapy in reducing mortality in care homes; the impact of the design of nursing homes on the quality of life of nursing home residents from the USA ; and an international assessment of the success of precision shielding in reducing mortality from COVID-19 in high risk groups. From the UK, an exploration of COVID-19 testing pathways to inform the use of point of care tests. Finally this week, summaries of recently published reports, guidance and statistics, including the impact of hospital discharges on outbreaks of COVID-19 in care homes in Scotland and updated guidance to support safe visiting to care homes in England .

Peer-Reviewed Articles

Publication date	Title / URL	Journal / Article type	Digest
26.10.2020	<p>Psychosocial Impact of COVID-19 Nursing Home Restrictions on Visitors of Residents With Cognitive Impairment: A Cross-Sectional Study as Part of the Engaging Remotely in Care (ERiC) Project</p>	<p>Frontiers in Psychiatry / Article</p>	<ul style="list-style-type: none"> • Authors examined the effects via cross-sectional online survey of COVID-19 visiting restrictions on measures of perceived loneliness, well-being, and carer quality of life (QoL) amongst visitors of residents with and without cognitive impairment (CI) in Irish RCFs. • 225 responses were included of which 202 noted whether residents had reported CI. Most of the 202 identified themselves as immediate family (91%) and as female (82%). The majority (67%) were aged between 45 and 64 years. Most (80%) reported that their resident had CI. Approximately one-third indicated reduced satisfaction (27%) or that restrictions had impaired communication with nursing home staff (38%). Median loneliness scores were 4/9, well-being scores 60/100 and carer QoL scores 10/15. Visitors of those with CI reported significantly lower well-being but no difference in loneliness or QoL. • This survey suggests that many RCF visitors experienced low psychosocial and emotional well-being during the COVID-19 lockdown. Visitors of residents with CI report significantly poorer well-being as measured by the WHO-5 than those without.
26.10.2020	<p>Triggers of mental health problems among frontline healthcare workers during the COVID-19 pandemic in private care homes and domiciliary care agencies: Lived experiences of care workers in the Midlands region, UK</p>	<p>Health & Social Care in the Community / Article</p>	<ul style="list-style-type: none"> • The study explored the triggers of mental health problems among frontline healthcare workers during the COVID-19 pandemic. • The research found that triggers of mental health problems among frontline health workers in private care homes and domiciliary care agencies are fear of infection and infecting others, lack of recognition/disparity between National Health Service (NHS) and social care, lack of guidance, unsafe hospital discharge, death and loss of professionals and residents, unreliable testing and delayed results and shortage of staff.
26.10.2020	<p>Use of a Humanized Anti-CD6 Monoclonal Antibody (Itolizumab)</p>	<p>Gerontology / Article</p>	<ul style="list-style-type: none"> • During the outbreak, a local transmission event took place in a nursing home in Villa Clara province, Cuba, in which 19 elderly residents tested positive for SARS-CoV-2. These residents were included in an

	in Elderly Patients with Moderate COVID-19		<p>expanded access clinical trial to receive itolizumab, an anti-CD6 monoclonal antibody.</p> <ul style="list-style-type: none"> All patients had underlying medical conditions. The product was well tolerated. After the first dose, the course of the disease was favourable, and 18 of the 19 patients (94.7%) were discharged clinically recovered with negative real-time reverse transcription polymerase chain reaction test results at 13 days. This study corroborates that the timely use of itolizumab in combination with other antivirals reduces COVID-19 disease worsening and mortality.
27.10.2020	COVID-19 outbreak in long-term care facilities from Spain. Many lessons to learn	PLOS ONE / Article	<ul style="list-style-type: none"> Analyses mortality, costs, residents and personnel characteristics, in six long-term care facilities (LTCF) during the outbreak of COVID-19 in Spain. 198 residents and 190 workers from LTCF A were included, between 2020 March 6 and April 5. Epidemiological data were also collected from six LTCFs of Albacete for the same period of time, including 1,084 residents. The pooled mortality rate for the first month and first three months of the outbreak were 15.3% and 28.0%, and the pooled excess mortality for these periods were 564% and 315% respectively. The COVID-19 pandemic posed residents at high mortality risk, mainly in those older, frail and with worse functional status. Personal and economic costs were high.
27.10.2020	Residential context and COVID-19 mortality among adults aged 70 years and older in Stockholm: a population-based, observational study using individual-level data	The Lancet Healthy Longevity / Article	<ul style="list-style-type: none"> The aim of this study was to investigate how individual-level housing and neighbourhood characteristics are associated with COVID-19 mortality in older adults. For this population-based, observational study, we used data from the cause-of-death register held by the Swedish National Board of Health and Welfare to identify recorded COVID-19 mortality and mortality from other causes among individuals (aged ≥70 years) in Stockholm county, Sweden, between March 12 and May 8, 2020. Living in a care home was associated with an increased risk of COVID-19 mortality compared with living in independent housing, potentially through exposure to visitors and care workers, but also due to poor underlying health among care-home residents.

28.10.2020	<p>Dealing with COVID-19 Outbreaks in Long-term Care Homes: A Protocol for Room Moving and Cohorting</p>	<p>Infection Control & Hospital Epidemiology / Letter</p>	<ul style="list-style-type: none"> • Authors share guidance on principles of room movement available for long-term care homes for the purposes of infection control. • Authors conclude that having a better understanding of principles of room movement during a COVID-19 outbreak setting may help minimize the size and scale of the outbreaks in the first wave.
29.10.2020	<p>Unravelling the modes of transmission of SARS-CoV-2 during a nursing home outbreak: looking beyond the church super-spread event</p>	<p>Clinical Infectious Diseases / Article</p>	<ul style="list-style-type: none"> • An outbreak of COVID-19 in a nursing home in the Netherlands, following an on-site church service held on March 8, 2020, triggered an investigation to unravel sources and chain(s) of transmission. • After the church service, 30 of 39 visitors (77%) developed symptoms; 14 were tested and were positive for COVID-19 (11 residents and 3 non-residents). In the following five weeks, 62 of 300 residents (21%) and 30 of 640 HCWs (5%) tested positive for COVID-19; 21 of 62 residents (34%) died. The outbreak was controlled through a cascade of measures. • Although initial investigation suggested the church service as source of the outbreak, detailed analysis showed a more complex picture, most consistent with widespread regional circulation of the virus in the weeks before the outbreak, and multiple introductions into the nursing home before the visitor ban.
30.10.2020	<p>COVID-19 Test Result Turnaround Time for Residents and Staff in US Nursing Homes</p>	<p>JAMA Internal Medicine / Letter</p>	<ul style="list-style-type: none"> • Authors performed a cross-sectional study using the Medicare COVID-19 Nursing Home Database, a federally mandated weekly survey of all Medicare-certified Skilled nursing facilities (SNFs), to examine facility-reported test result turnaround time. • Only a small fraction of SNFs had less than 1-day turnaround for staff or resident testing by late September 2020. Although testing delays improved over time, the state of testing is far behind the less than 24-hour turnaround that epidemiological modeling suggests is essential to prevent COVID-19 outbreaks in SNFs.
31.10.2020	<p>Building long-term care staff capacity during COVID-19 through just-in-time learning: Evaluation of a modified ECHO model</p>	<p>Journal of the American Medical Directors Association / Article</p>	<ul style="list-style-type: none"> • This study aimed to determine whether Project ECHO® (Extension for Community Healthcare Outcomes) Care of the Elderly Long-Term Care (COE-LTC): COVID-19, a virtual education program, was effective at delivering just-in-time learning and best practices to support LTC teams and residents during the pandemic. • Of the 252 registrants for ECHO COE-LTC: COVID-19, 160 (63.4%) attended at least one weekly session. Nurses and nurse practitioners

			<p>represented the largest proportion of HCPs (43.8%). Overall, both confidence and comfort level working with residents who were at risk, confirmed or suspected of having COVID-19 increased after participating in the ECHO sessions.</p> <ul style="list-style-type: none"> The results demonstrate that ECHO COE-LTC: COVID 19 effectively delivered time sensitive information and best practices to support LTC teams and residents.
31.10.2020	Nursing Home Design and COVID-19: Balancing Infection Control, Quality of Life, and Resilience	Journal of the American Medical Directors Association / Article	<ul style="list-style-type: none"> This article proposes that there is now an urgent need to examine these architectural design models and provide alternative and holistic models that balance infection control and quality of life at multiple spatial scales in existing and proposed settings. Moreover, this article argues that there is a convergence on many fronts between these issues and that certain design models and approaches that improve quality of life, will also benefit infection control, support greater resilience, and in turn improve overall pandemic preparedness.
01.11.2020	Predicting Coronavirus Disease 2019 Infection Risk and Related Risk Drivers in Nursing Homes: A Machine Learning Approach	Journal of the American Medical Directors Association / Article	<ul style="list-style-type: none"> This retrospective cohort study used a gradient boosting algorithm to evaluate risk of COVID-19 infection (i.e., presence of at least 1 confirmed COVID-19 resident) in Nursing homes (NH) The strongest predictors of COVID-19 infection were identified as the NH's county's infection rate and the number of separate units in the NH; other predictors included the county's population density, historical Centers of Medicare and Medicaid Services cited health deficiencies, and the NH's resident density. A machine-learning model can help quantify and predict NH infection risk.
01.11.2020	Three-Tiered COVID-19 Cohorting Strategy and Implications for Memory-Care	Journal of the American Medical Directors Association / Article	<ul style="list-style-type: none"> Authors created, implemented, and present a guide to rapidly deploy point-prevalence testing and 3-tiered cohorting in a skilled nursing facility (SNF) to mitigate an outbreak. We outline key challenges to SNF cohorting. Study suggests that the 3-tiered cohorting approach separating exposed from unexposed negative-test individuals is crucial to stop horizontal transmission among older adults with dementia. Individual rooms for all patients may not be possible at an SNF, and therefore prioritizing the isolation of exposed individuals is essential to mitigating and preventing spread of an outbreak.

02.11.2020	Halting a SARS-CoV-2 Outbreak in a U.S. Veterans Affairs Nursing Home	American Journal of Infection Control / Article	<ul style="list-style-type: none"> A Veterans Affairs long term care facility on Long Island New York was confronted with a COVID-19 outbreak in late March to Mid-April 2020. Faced with a dwindling supply of PPE, the Infection Control team distributed supplies saved for a possible Ebola outbreak; A COVID unit was created within the nursing home facilitating the geographic isolation of cases; universal testing of residents and employees allowed for the implementation of proper quarantine measures. It was a multidisciplinary team approach led by the Infection Control team that successfully contained this outbreak.
03.11.2020	August 2020 Interim EuGMS guidance to prepare European Long-Term Care Facilities for COVID-19	European Geriatric Medicine / Article	<ul style="list-style-type: none"> The guidance is based upon the literature available on August 17, 2020. It lists measures that can be implemented to keep COVID-19 out of LTCFs, and COVID-19 symptoms that require RT-PCR testing in residents, staff members and visitors. It also indicates the strategy to be used when a first LCTF resident or staff member is infected and proposes measures to limit adverse effects of the quarantine of residents tested positive for COVID-19.
03.11.2020	Effects of COVID-19 on Informal Caregivers and the Development and Validation of a Scale in English and Spanish to Measure the Impact of COVID-19 on Caregivers	Journal of Applied Gerontology / Article	<ul style="list-style-type: none"> Authors assessed its perceived impact on caregiving through a new measure: the Caregiver COVID-19 Limitations Scale (CCLS-9), in Spanish and English. Also compared levels of caregiver self-efficacy and burden pre-COVID-19 and early in the pandemic. Administered surveys via internet to a convenience sample of caregivers in January 2020 (pre-pandemic, n = 221) and in April–June 2020 (English, n = 177 and Spanish samples, n = 144) to assess caregiver self-efficacy, depression, pain, and stress. Compared to pre-COVID-19, caregiver stress ($p = .002$) and pain ($p = .009$) were significantly greater early in COVID-19, providing evidence of its validity.
03.11.2020	The COVID-19 pandemic and long-term care: What can we learn from the first wave about how to protect care homes?	Eurohealth / Article	<ul style="list-style-type: none"> The COVID-19 pandemic has highlighted and exacerbated pre-existing problems in the long-term care sector. Based on examples collected from the COVID-19 Health System Response Monitor (HSRM) and the International Long-term care Policy Network (LTCcovid), this article aims to take stock of what countries have done to support care homes in response to COVID-19. By learning from the measures taken during the first wave, governments and the sector itself have an opportunity to

			put the sector on a stronger footing from which to strengthen long-term care systems.
03.11.2020	Seropositivity and risk factors for SARS-CoV-2 infection in staff working in care homes during the COVID-19 pandemic	Journal of Infection / Letter	<ul style="list-style-type: none"> • Authors found SARS-CoV-2 seropositivity rates among staff working in care homes affected by COVID-19 outbreaks to be several times higher than community seroprevalence in London. • The high seropositivity rates precluded more detailed assessment of risk factors for SARS-CoV-2 infection, especially in relation to non-occupational risk factors. SARS-CoV-2 antibody positivity was, however, significantly, independently and positively associated with Asian ethnicity and having a household member who also worked in care homes. Further studies are needed to assess the level and duration of protection offered by the antibodies against SARS-CoV-2 re-infection and onward transmission in institutional settings.

Preprints

Publication date	Title / URL	Journal / Article type	Digest
28.10.2020	Did the UK government really throw a protective ring around care homes in the COVID-19 pandemic?	LSE Research Online / Article	<ul style="list-style-type: none"> • Mixed methods including policy analysis and an anonymous online survey of English care home providers, recruited using webinars and WhatsApp groups about their experiences of funding, testing, PPE, isolation and staffing until the end of May and early June 2020. • Results found that testing had taken place in 70% of care homes surveyed but only 36% of residents had been tested, of whom 16% were positive. Managers were unable to effectively implement isolation policies and reported that workforce and funding support did not always reach them. Guidance changed frequently and was conflicting and could not always be implemented, for example when personal protection equipment was extremely expensive and difficult to source.
30.10.2020	Understanding and addressing challenges for Advance Care	MedRxiv / Article	<ul style="list-style-type: none"> • Cross-sectional on-line survey of 277 UK palliative and hospice services' response to COVID-19. • 37.9% of services provided more Advance Care Planning directly. 58.5% provided more support to others. Some challenges to Advance

	<p>Planning in the COVID-19 pandemic: An analysis of the UK CovPall survey data from specialist palliative care services</p>		<p>Care Planning pre-dated the pandemic, whilst other were COVID-19 specific or exacerbated by COVID-19.</p> <ul style="list-style-type: none"> • Authors conclude that professionals and healthcare providers need to ensure Advance Care Planning is individualised by tailoring it to the values, priorities, and ethnic, cultural, and religious context of each person. Policymakers need to consider carefully how high-quality, person-centred Advance Care Planning can be resourced as a part of standard healthcare ahead of future pandemic waves.
01.11.2020	<p>Rapid review of the evidence on impacts of visiting policies in care homes during the COVID-19 pandemic</p>	LTCcovid.org / Article	<ul style="list-style-type: none"> • Given that there were already low rates of social interactions among residents and loneliness before the COVID-19 pandemic, the evidence reviewed suggests that visiting restrictions are likely to have exacerbated this further. While there is no scientific evidence identifying visitors as the source of infections this is likely to reflect that most care homes did not allow visitors during the initial peaks of the pandemic. A pilot re-opening homes to visits under strict guidelines did not result in any infections. • Allowing visitors in facilities where there are no COVID-19 cases is important to support resident wellbeing. Safeguards to reduce risk of COVID-19 infection have been described, including visits through windows/glass, outdoor visits, and well-ventilated indoor spaces, screening of visitors, use of masks and other PPE and hand hygiene and cleaning.
03.11.2020	<p>A rapid systematic review of measures to protect older people in long term care facilities from COVID-19</p>	MedRxiv / Article	<ul style="list-style-type: none"> • The aim of this rapid systematic review was to investigate measures implemented in long term care facilities to reduce transmission of COVID-19 and their effect on morbidity and mortality of residents, staff, and visitors. 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 1.2-85.4% in residents and 0.6-62.6% in staff. Mortality rates ranged from 5.3-55.3% in residents. • 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.

<p>03.11.2020</p>	<p>'Necessity is the mother of invention': Specialist palliative care service innovation and practice change in response to COVID-19. Results from a multi-national survey (CovPall)</p>	<p>MedRxiv / Article</p>	<ul style="list-style-type: none"> • Aim of study was to map and understand specialist palliative care services innovations and practice changes in response to COVID-19 (CovPall). • 458 respondents: 277 UK, 85 Europe (except UK), 95 World (except UK and Europe), 1 missing country. 54.8% provided care across 2+ settings; 47.4% hospital palliative care teams, 57% in-patient palliative care units, and 57% home palliative care teams. • The crisis context meant services implemented rapid changes. Changes involved streamlining, extending and increasing outreach of services, using technology to facilitate communication, and implementing staff wellbeing innovations. Barriers included; fear and anxiety, duplication of effort, information overload, funding, and IT infrastructure issues. Enablers included; collaborative teamwork, pooling of staffing resources, staff flexibility, a pre-existing IT infrastructure and strong leadership.
<p>03.11.2020</p>	<p>The challenges of caring for people dying from COVID-19: a multinational, observational study of palliative and hospice services (CovPall)</p>	<p>MedRxiv / Article</p>	<ul style="list-style-type: none"> • Surveyed palliative care and hospice services, contacted via relevant organisations. • 458 services responded; 277 UK, 85 rest of Europe, 95 rest of the world (1 country unreported); 81% cared for patients with suspected or confirmed COVID-19, 77% had staff with suspected or confirmed COVID-19; 48% reported shortages of Personal Protective Equipment (PPE), 40% staff shortages, 24% medicines shortages, 14% shortages of other equipment. • Across all settings palliative care services were often overwhelmed yet felt ignored in the COVID-19 response. Palliative care needs better integration with health care systems when planning and responding to future epidemics/pandemics.
<p>04.11.2020</p>	<p>Precision shielding for COVID-19: metrics of assessment and feasibility of deployment</p>	<p>MedRxiv / Article</p>	<ul style="list-style-type: none"> • Aim is to present simple metrics of such precision shielding of people at high-risk of death after infection by SARS-CoV-2; demonstrate how they can be estimated; and examine whether precision shielding was successfully achieved in the first COVID-19 wave. • For setting-related precision shielding, data were analysed from 10 countries where information was available on numbers of nursing home residents, proportion of nursing home residents among COVID-19 deaths, and overall population infection fatality rate. • Assuming 25% infection fatality rate among nursing home residents, S (shielding) values for nursing home residents ranged from 0.07 to 3.1. The best shielding was seen in South Korea (S=0.07) and

			<p>modest shielding was achieved in Israel, Slovenia, Germany, and Denmark. No shielding was achieved in Hungary and Sweden. In Belgium (S=1.9), UK (S=2.2) and Spain (S=3.1), nursing home residents were far more frequently infected than the rest of the population.</p>
04.11.2020	<p>Understanding COVID-19 testing pathways in English care homes to identify the role of point-of-care testing: an interview-based process mapping study</p>	MedRxiv / Article	<ul style="list-style-type: none"> • This study evaluated current testing pathways in care homes to explore the role of point-of-care tests (POCTs). • Ten staff from eight care homes, purposively sampled to reflect care organisational attributes that influence outbreak severity, underwent a semi-structured remote videoconference interview. • Swab-based testing is organisationally complex and resource-intensive in care homes. It needs to be flexible to meet the needs of residents and provide care homes with rapid information to support care decisions. POCT could help address gaps but the complexity of the setting means that each technology must be evaluated in context before widespread adoption in care homes.

Reports and other publications

Publication date	Title / URL	Author(s)	Digest
28.10.2020	<p>Discharges from NHSScotland hospitals to care homes</p>	Public Health Scotland	<ul style="list-style-type: none"> • This publication by Public Health Scotland (PHS) presents management information statistics on people aged 18 and over who were discharged from an NHSScotland hospital to a care home between 1 March and 31 May 2020. • Between 1 March and 31 May 2020, there were 5,204 discharges from NHS hospitals to care homes (4,807 individuals), this accounted for 5.3% of all hospital discharges during the same period. • There were 3,599 discharges from hospital to a care home between 1 March and 21 April. The majority (81.9%) of which were not tested for COVID-19, in-keeping with clinical guidance which restricted testing to those with symptoms of infection. Of the 650 who were tested, 78 received a positive result while in hospital. • There were 1,605 discharges from hospital to a care home between 22 April and 31 May. The majority (1,493, 93%) were tested for COVID-19, in line with the changes in clinical guidance. Of these,

			1,215 tested negative and 278 tested positive. Of those who tested positive, 233 had a negative test result prior to discharge.
31.10.2020	The Impact of COVID-19 on nursing homes in Italy	Social Policy Lab	<ul style="list-style-type: none"> • Authors used national data provided by ISTAT (the National Institute of Statistics) to analyse the distribution and main characteristics of nursing homes in the country, including the coverage rate of available beds in residential structures, changes in the number of patients, in the number of professionals employed in such structures, and the public-private mix. • Policy legacy factors, coupled with the strong pressure on the health system exerted by the very quick spread of the outbreak, have played an important role in the way nursing homes have (poorly) dealt with the pandemic. The lack of public knowledge about the spread of the virus in these structures, and the weak response they could give to the pandemic, are to be seen as the result of the poor development of long-term care policy in Italy, and of the marginality of such institutions within such system.
03.11.2020	Care Home Review: A rapid review of factors relevant to the management of COVID-19 in the care home environment in Scotland	Jacqui Reilly, David Crawford, Donna O’Boyle	<ul style="list-style-type: none"> • A review, commissioned by the Scottish Government Cabinet Secretary for Health and Sport, to make recommendations for systems review and highlight good practice. • Contributory factors and root causes are identified, and their impact examined in detail within the narrative report. These factors have been found to be present in at least two or more of the care homes included in this review and are summarised as: <ul style="list-style-type: none"> ○ High community prevalence of COVID-19 in the geographical region ○ Homes which had >20 resident places, were for older adults and had not experienced a COVID-19 outbreak previously and had high occupancy ○ Presence of asymptomatic cases and lack of awareness of the wider spectrum of symptom presentation in older people ○ Delays in testing and reporting of results ○ Slow confirmation of an outbreak ○ Delays to initiation of additional control measures to stop the widespread transmission.

			<ul style="list-style-type: none"> ○ Context specific challenges in the care home environment with IPC measures
03.11.2020	Staying Apart to Stay Safe: The Impact of Visit Restrictions on Long-Term Care and Assisted Living Survey	Office of the Seniors Advocate British Columbia	<ul style="list-style-type: none"> • Outlines the findings of a five-week survey about the impact of COVID-19 related visitor restrictions at long-term care and assisted living homes. The survey, answered by residents, their family members and the general public, had over 13,000 valid responses. • Most family members and residents support some visit restrictions during the pandemic, although they believe visits should be more frequent and that at least one more visitor for each resident should be permitted.
04.11.2020	Written Statement: Covid-19 asymptomatic testing programme for care homes	Welsh Government (Minister for Health and Social Services)	<ul style="list-style-type: none"> • Where community prevalence rates are categorised as high, in line with nationally agreed thresholds, it is expected that asymptomatic staff testing will be undertaken on a weekly basis. • Confirms that all asymptomatic testing of care home staff in Wales will now be undertaken through the UK Organisations Portal and the Lighthouse laboratories.

Guidance

Publication date	Title / URL	Author(s)	Digest
Updated 02.11.2020	COVID-19: how to work safely in domiciliary care in England	Public Health England	<ul style="list-style-type: none"> • A resource for those working in domiciliary care providing information on the use of personal protective equipment (PPE).
Updated 02.11.2020	COVID-19: how to work safely in care homes	Public Health England	<ul style="list-style-type: none"> • Guidance for those working in care homes providing information on how to work safely during this period of sustained transmission of COVID-19.
03.11.20	Adult social care - winter preparedness plan: 2020 to 2021	Scottish Government	<ul style="list-style-type: none"> • This plan sets out the measures already in place that must be retained and those that need to be introduced across the adult social care sector over winter 2020 to 2021.

			<ul style="list-style-type: none"> The Plan is aimed at mitigating risks likely to arise in the short term and should therefore be treated as a flexible document, which may be updated or supported by additional guidance.
04.11.20	Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19	Department of Health and Social Care	<ul style="list-style-type: none"> This guidance is for everyone in England who has been identified as clinically extremely vulnerable. The new information includes additional guidance for clinically extremely vulnerable people, to help protect you from coronavirus (COVID-19). These new shielding measures will apply nationally for 4 weeks up to 2 December.

Evidence Summaries

Publication Date	Title / URL	Author(s)	Digest
02.11.2020	Coronavirus: Adult social care key issues and sources	House of Commons Library	<ul style="list-style-type: none"> This Commons Library briefing paper provides an overview of key issues facing the adult social care sector during the coronavirus (Covid-19) outbreak and provides links to some of the key official guidance for the sector.

Statistics

Publication date	Title / URL	Author(s)	Digest
Updated 30.10.2020	COVID-19: Care Homes in England – Update	Centre for Evidence-Based Medicine	<ul style="list-style-type: none"> Data from care homes shows that outbreaks are increasing. PHE's current surveillance reports 397 incidents from care homes where 282 had at least one linked case that tested positive for SARS-CoV-2 in the week commencing the 19 October (up from 210 the previous week).
Updated 03.11.2020	Number of deaths in care homes notified to the Care Quality Commission, England	Office for National Statistics	<ul style="list-style-type: none"> Weekly updated provisional counts of deaths in care homes caused by the coronavirus (COVID-19) by local authority.

Updated 04.11.2020	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.
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Editorials and News

Publication date	Title / URL	Author(s)	Digest
27.10.2020	Policies Matter! Factors Contributing to Nursing Home Outbreaks During the COVID-19 Pandemic	Policy, Politics, & Nursing Practice / Editorial	<ul style="list-style-type: none"> Author outlines decisions made by Centers for Medicare and Medicaid Services (CMS) in respect to nursing homes during Covid-19 pandemic. Author states CMS made numerous federal nursing home policy decisions and directives to state agencies that made the nursing home COVID-19 situation worse. These included not making nursing homes a priority for testing and PPE.
28.10.2020	Put 'nursing' back into aged care: Nursing care is essential to aged care homes beyond the COVID-19 pandemic.	Contemporary Nurse / Editorial	<ul style="list-style-type: none"> Authors outline that the Covid-19 pandemic demonstrates the value and urgent need for registered nurses to be a strong presence in aged care homes where ratios are constantly reviewed to determine ongoing acuity and care needs to appropriate staffing levels so people can have their needs met.
29.10.2020	Covid-19: 338 patients with the virus were discharged from Scottish hospitals to care homes	BMJ / News	<ul style="list-style-type: none"> A total of 338 patients with a diagnosis of covid-19 were discharged from Scottish hospitals into care homes in the three months from March this year, says a report from Public Health Scotland. The discharges were necessary to free up space in hospitals for covid-19 patients but some care home owners have claimed that it introduced the virus into their premises, causing almost 2000 deaths across Scotland. Public Health Scotland says that most of the 3599 discharges that took place in the busiest month of March were among people who had never been tested. Of the 650 who were tested, 78 were positive, but the discharges still went ahead.

01.11.2020	Emerging Challenges and Opportunities for Home Health Care in the Time of COVID-19	Journal of the American Medical Directors Association / Editorial	<ul style="list-style-type: none"> Overall, the combination of reduced home health care referrals, PPE shortages and costs, no reimbursement for telehealth, and LUPA payment adjustments has been devastating for home health agencies. Yet, a combination of policy changes could help home health agencies to survive by addressing financial losses related to COVID-19 while supporting telehealth innovation during this time.
03.11.2020	National lockdown must not include locking out care home visitors	The National Care Forum / Press Release	<ul style="list-style-type: none"> A coalition of over 60 organisations, brought together by the National Care Forum (NCF) – the leading member association for not-for-profit social care providers – sent an open letter to Matt Hancock, Secretary of State for Health and Social Care, and Helen Whately, Minister for Care, calling on the government to ensure that care homes are supported to enable visits by families and loved ones, now and in the future. The letter calls on the government to adopt this position in any new regulations it is drafting for the care sector to cover the national lockdown and the aftermath.
04.11.2020	New guidance to support safe care home visits during lockdown	Department of Health and Social Care / Press Release	<ul style="list-style-type: none"> Care homes will be encouraged and supported to provide safe visiting opportunities as new national restrictions come into effect. Visits should be tailored to residents and facilities and should prioritise residents and staff's safety to limit the transmission of COVID-19 Care homes, especially those who have not allowed visits since March, will be encouraged and supported to provide safe visiting opportunities as new national restrictions come into effect Measures put in place should provide COVID-secure opportunities for families to meet using visiting arrangements such as floor to ceiling screens, visiting pods, and window visits