

City of York Local Care Market resilience plan

May 2020 v4

Why we are here:

Following an increased understanding of Covid 19 and the impact of the infection on care homes several measures have been enacted locally and nationally to assist care homes in their approach to protecting residents.

A national response has seen the implementation of a number of initiatives and our Care Market resilience plan aims to articulate our process in York to support our residents in care homes.

Issues to consider in York:

City of York provision of care homes is different to North Yorkshire however the system wide support is across several partners that work to a Vale of York and North Yorkshire footprint, we need to ensure we are connected to these options of resource and support.

Developing a City of York specific model is required which includes a York specific action plan. However, developing a response in isolation of the system wide approach across North Yorkshire may not offer the best option in this instance to ensure the most effective support system for our residents.

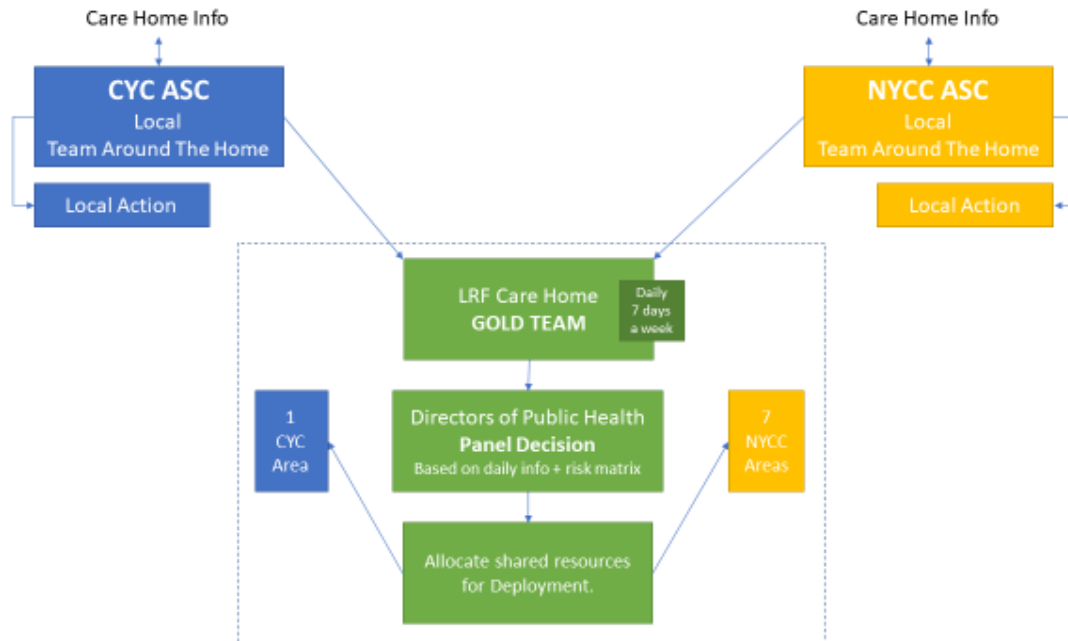
For this reason York has incorporated both elements within its approach, having strategic oversight and governance of the sites within York whilst working coterminous with the cross county LRF response when deploying additional support.

Key components of the Care market resilience plan:

- Care home whole site testing
- Testing and safe management of care home placement and discharges
- Safe discharge from hospital
- Infection Prevention Control team support (including PPE management)
- CCG and Primary care support
- Community health provider support
- Communications to and from care home sites

Whole site testing:

York decision making process:



1. City of York team around the home.

Each care home site has a named lead from ASC (adult social care) who is able to support each care home directly. A number of scheduled support calls are undertaken systematically across the whole care market and the responses analysed by a senior manager.

Each call both offers support and assesses the current status of the site. Monitoring potentially symptomatic cases, staffing, PPE and any training.

The call also allows for the identification of key sites for testing.

Each day a summary of findings is analysed with the senior officer and the public health specialist lead. Decisions from this analysis is then actioned. Local response where resources are available, immediate escalation or fed into the next shared daily Care Home Gold meeting for action across the wider health footprint.

In addition to this each site completes and returns the capacity tracker to enable clear understanding of the system capacity and where targeted support is required

Testing oversight:

Testing is implemented across York within the pillar 2 options and any locally developed and available processes.

Testing site	Who	How	Notes
National test centre (York P&R Poppleton) Drive through or self-test	Key worker employer referral	Employer process Unique referral code given by text https://test-for-coronavirus.service.gov.uk/appointment	CYC employees this is through Medigold when reporting absence
National test centre (York P&R Poppleton) Drive through or self-test	Key worker self-referral	https://self-referral.test-for-coronavirus.service.gov.uk/	
Mobile testing unit	Available in specific areas on set days across NYCC	LRF Daily prioritisation - referral	
National test centre (York P&R Poppleton) Drive through or self-test	Symptomatic person	https://www.nhs.uk/ask-for-a-coronavirus-test	

Testing site	Who	How	Notes
At the care home through national process	Whole site testing request including staff	PHE referral via CYC named contact Daily prioritisation https://request-care-home-testing.test-for-coronavirus.service.gov.uk/	This is same as care home direct referral
Satellite testing unit	N/A	N/A	Not yet available
National test site - courier to care home	Residents of CQC registered care homes	CQC directly wrote to each care home with instructions	
National Test site – courier	Care home manager referral	https://request-care-home-testing.test-for-coronavirus.service.gov.uk/	

to care home site			
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Testing site	Who	How	Notes
Surplus from West Yorkshire – Arranged via LRF	Symptomatic residents in supported accommodation	Via ASC	
National test centre	Any resident	https://www.nhs.uk/ask-for-a-coronavirus-test	

This table may change with any new guidance

Proposed developments:

County LRF subgroup for care homes has expressed an interest to become a Satellite test site to enable a focused response locally.

Safe discharge and admissions

A number of initiatives have been locally implemented to reduce cross infection by moving people between sites including hospital admissions and discharges. A new facility Peppercourt has been put in place to assist with the discharge of covid positive residents returning to supported living and care homes. This serves two purposes, to reduce the likelihood of introducing covid into the receiving site by continued testing and self-isolation prior to moving and to assist the patient to recuperate in a bespoke service offer.

In addition to the hospital discharge pathway a local testing regime is in development to ensure that individuals entering and leaving supported living sites are able to access tests prior to movement.

Primary Care and CCG support

The CCG have worked as part of the local team and have a distinct offer to the health marketplace.

Specifically this has been to engage with the sector across a number of fields to ensure the care remains of a high standard. Within this process this includes:

- Strategic co-ordination of resource deployment
- Strengthening and deployment of proactive IPC training and governance
- Bespoke support to identified sites

- Co-ordination of primary care response to sites

Communications to and from care home sites – support for community health providers;

In addition to the scheduled calls to each site, a daily update bulleting designed to be able to read whilst busy. Disseminating relevant new guidance and information in real time to ensure managers in sites have continued support and information quickly and have a point of contact to check their approaches. Ensuring the latest guidance for instance around use of PPE is made available as soon as it is available.

Overview of York and North Yorkshire Model

Level	Role	Who
Strategic GOLD	<p>Strategic Response (daily 8am Care Home Gold Meeting)</p> <p>Daily Care Home Cell Conference Call:</p> <ul style="list-style-type: none"> - Real time decision making - System wide assurance - Highest escalation points for system - Oversight of Dashboard with autonomy to direct Silver and Bronze with key actions - Link to CQC Emergency Support Framework - Strategic interventions 	<p>CYC Head of Commissioning CCG Senior Lead Chief Nurses CYC Public Health Mental Health Lead IPC Lead CQC Lead ICG PCN (CD) Safeguarding Specialist Palliative Care Mental Capacity/DOLs CQC PHE DoH</p>
Tactical SILVER	<p>Tactical Response (part of 8am Care Home Gold Meeting)</p> <p>Subject matter expertise supporting areas of most risk as directed by Gold or as required by Bronze, this includes national and regional experts:</p> <ul style="list-style-type: none"> - Training and advice - Specialist intervention - Intelligence gathering - Operational decision making - Support with Comms/Media - Establish peer support across localities - Development and dissemination of guidance 	<p>CYC Public Health rep ASC Senior officer</p> <p>Other subject matter experts as required</p>
Operational BRONZE	<p>Operational Response (ASC commissioning team)</p> <p>Stage 1: Named leads from ASC gathers information proactively</p> <p>Stage 2: Care Home Liaison Officers provides a co-ordinated response through risk assessment and operational decision making alongside other known intelligence (CQC rating, soft intelligence, and data)</p> <p>Practical support offered to Care home locally. Other actions as directed by Silver/Gold</p>	<p>Daily analysis with</p>

Data collection:

Each day a situation report is collated within ASC and disseminated to agreed partners. This enables coherent and consistent monitoring of each site, the pattern of potential infection and support offered from across the system. This includes where testing has been undertaken and which route this was undertaken, identifying where any clusters may be a potential or new infections noted.

This informs the daily analysis of the allocation of resources both locally and across the whole health footprint.

PPE: managing PPE supply to care home has been fragile due to the lack of PPE nationally in the first few weeks. However CYC established a robust system early in the lock down to ensure that all care homes were provided with the PPE they required.

This procedure Included:

- Establishing a sub-silver group to source PPE, which purchased PPE from a wide variety of suppliers.
- Contacting the National Disruption Supply line for emergency supplies
- Using contacts, including the NHS supply chain which was unpredictable due to its priority of supplies going to the NHS. We only had access to this as we already held a contract for them to supply our Healthy Vitamins.
- Anyone who required PPE, but couldn't source this via their own supply network contacted PPE@York.gov.uk and PPE (if it complied with national guidance) was delivered by Be Independent – our independent living aids partner.

Since commencing this process we have kept up to date lists of supplies, costs etc. this is all available to scrutiny. Once the Local Resilience Forum was established we have made regular requests for supplies via this route and have encouraged Care Homes, Domiciliary care providers and Personal Assistants to do the same. A record of all LRF requests have also been kept.

Today, (26th May) the procedure for Care homes is to source their PPE from their usual supply chains, if this is not successful a request can be made to the LRF and if they are still experiencing difficulties a request may be made to the PPE email, which is then acted upon within 24-48 hours.

Care homes and other have been encouraged to request no more than a month's supply from CYC to ensure that we have sufficient to meet demands, however there is no limit on how often care home may request help and some are still receiving regular supplies.

We recognise that this has not been the most cost effective method of sourcing PPE and have now reduced the purchasing of PPE to a few trusted sources, we make use of the LRF supply to care homes and we are looking to be part of a regional supply chain, via our procurement colleagues, to order in bulk and therefore reduce the overall cost to the council.

This plan will continue to be updated to take account of guidance and changes in conditions.

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