Notes from Kingston Mencap Family carers meeting 16/12/2020



Meeting was led by Nicki Pratelli, Infection control lead at Kingston.

- Non CQC registered Supported living providers in Kingston will be able to access testing through the lateral flow testing initiative. This means people who don't have symptoms will be able to get tested. Managers from Supported living providers will be able to access training and Nicki Pratelli, Infection lead will provide details of how this will be implemented. We will share details as soon as they are available.
- The guidance for care homes for <u>visits out of the care home</u> (where people do visits out of the care home over the 5 days of Christmas for example) states the following: When the resident returns to the care home following the visit, additional measures will need to be taken in order to protect other residents and care home staff from the risk of COVID transmission. Specifically, the resident will need to isolate for 14 days.
- The roll out of the lateral flow testing to non CQC registered Supported living providers means that people will not have to self isolate when they return to the Supported living setting as they will be able to get tested before they return (the situation will be different if they test positive).
- Balance has confirmed that with the lateral flow testing (people being able to get tested before they return to their supported living setting from visiting families), people won't need to self isolate. Balance will put in place some mitigation measures to ensure it is as safe as possible without people being in their rooms for 14 days.
- In CQC registered supported living settings, staff are tested weekly and residents monthly as per the <u>guidance</u>.
- If someone who lives in a supported living setting is going to their parents' household over the 5 days of Christmas (23 to 27 December), all members of the parents' household need to be tested and have a negative result before the visit can take place as per the <u>guidance</u> for care homes: *All members of the household hosting the visit must have had a negative result from a COVID test taken immediately preceding the visit.*

- From 23 to 27 December, people from a Supported living setting should only form a Christmas bubble with one other household as per the <u>guidance</u> for care homes: A care home resident may form a bubble with one other household, and should not form a three-household Christmas bubble at any point.
- When in your <u>Christmas bubble</u> you should take these measures (Hands Face Space) to prevent the spread of the virus as we know that it's easier to catch and spread the virus in an indoor space, especially if there is little flow of fresh air:
 - wash your hands frequently
 - \circ $\,$ clean touch points regularly, such as door handles and surfaces
 - \circ $\;$ If you are only visiting someone for a short time, you should
 - keep socially distanced from anybody you do not live with as much as possible
 - make sure you let as much fresh air in as you can during a visit and after visitors have left, without getting cold, by opening windows and doors
- If someone tests positive before joining their Christmas bubble, they should not be joining their Christmas bubble and show follow the <u>guidance</u> and self isolate. It will be important for the family and the provider to communicate with each other and the person to provide reassurance and ensure there is support in place for that person for that period.
- Risk assessments were done by day services providers about delivering safe services to residents. The commissioning team had input from Health and safety experts and input from operations. For any risk assessments for supported living, this would need input from the social workers. John-Paul will talk to Supported living providers to ensure they are clear about the guidance and let them know about the lateral flow testing roll out.
- If someone wants to see their parents who are divorced and live in different parts of the country, in theory the person would be able to see both parents. Nicki stressed the importance of taking a common sense approach as travelling for example increases the risk of catching Covid 19 and it may be worth waiting to do the visits after the vaccine. Individuals have to think whether a visit and the possible increased risk is fair on the people they are meeting and the individuals themselves.

• For care homes who may not receive the lateral flow testing before Christmas, visits are still possible as stated in the <u>guidance</u> - see below. The commissioning team is supporting the care homes to review their visiting policy and risk assessment in line with the local outbreak plan. We expect care homes to have in place a visiting plan for each individual resident as part of their care plan, developed with the individual and their relatives

Visits should happen in the open air wherever possible, recognising that for many residents and visitors this will not be appropriate in the winter (this might include under a cover such as an awning, gazebo, open-sided marquee etc.) For these visits:

- the visitor and resident must remain at least 2 metres apart at all times
- the visit can take place at a window

Some providers have used temporary outdoor structures – sometimes referred to as 'visiting pods' – which are enclosed to some degree but are still outside the main building of the home. These can be used. Where this is not possible, a dedicated room such as a conservatory (ie wherever possible, a room that can be entered directly from outside) can be used. In both of these cases, providers must ensure that:

- the visiting space is used by only one resident and visiting party at a time, and is subject to regular enhanced cleaning between each visit
- the visitor enters the space from outside wherever possible
- where there is a single access point to the space, the resident and visitor enter the space at different times to ensure that safe distancing and seating arrangements can be maintained effectively
- there is a substantial screen between the resident and visitor, designed to reduce the risk of viral transmission
- there is good ventilation for spaces used (for example, including keeping doors and windows open where safe to do so and using ventilation systems at high rates but only where these circulate fresh air)
- consider the use of speakers, or assisted hearing devices (both personal and environmental) where these will aid communication. This will also avoid the need to raise voices and therefore transmission risk

In all cases:

- visitor numbers should be limited to a single constant visitor wherever possible, with an absolute maximum of 2 constant visitors per resident. This, for example, means the same family member visiting each time to limit the number of different individuals coming into contact. This is in order to limit the overall number of visitors to the care home and/or to the individual, and the consequent risk of disease transmission from multiple different routes
- appropriate PPE must be used throughout the visit, and around the care home building and grounds
- social distancing (between visitors and residents, staff, and visitors from other households) must be maintained at all times – during the visit, and around the care home building and grounds
- high quality IPC practice must be maintained throughout the visit and through the wider care home environment. (See section below on infection control precautions in the wider care home environment)
- visiting spaces must be used by only one resident and visiting party at a time, and between visits there must be appropriate cleaning and an appropriate time interval