



19 April 2023

Covid-19 Vaccination & Changes to National Guidance update

The webinar will begin shortly





COVID-19 Vaccination & Changes to National Guidance Update

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Vaccination

Vaccination remains a primary protection measure against both COVID-19 and flu, helping to reduce the risk of serious illness, hospitalisation and death

Spring COVID-19 booster programme

The programme is in line with [Joint Committee on Vaccination and Immunisation \(JCVI\) advice](#) that a spring booster dose should be offered to:

- ▶ **adults aged 75 years and over**
- ▶ **residents in a care home for older adults**
- ▶ **individuals aged 5 years and over who are immunosuppressed (as defined in tables 3 or 4 of the Green Book)**

Everyone eligible for a COVID-19 vaccination can book their booster dose online via the national booking service or by phoning 119

Roll out has begun with residents in care homes being offered their booster from visiting vaccination teams from 3 April & the general public from 17 April

- ▶ In addition, JCVI's interim advice remains that people at higher risk of severe COVID-19 are expected to be offered a booster vaccine dose in autumn 2023, in preparation for winter 2023 to 2024. Further advice regarding an autumn campaign will be provided in due course
- ▶ From 30 June 2023, the ongoing primary course vaccination offer will become more targeted, available during vaccination campaigns only for those at higher risk of severe outcomes from COVID-19. Those who have not received their primary course vaccination are encouraged to come forward before this time to take up the offer before it closes
- ▶ Flu vaccination reduces the risk of co-infection with COVID-19 and flu, and is therefore an important defence against severe outcomes

When did guidance change?

On the 30th March 23 the Department of Health & Social Care announced changes to the way Covid - 19 is managed in adult social care settings. These changes took effect on the **3rd April 23**

Why did guidance change?

Changes are based on the latest advice and evidence from the UK Health Security Agency (UKHSA) that indicates that the risk of harm from COVID-19 across adult social care has now been significantly reduced

This is due to high vaccination coverage amongst those receiving care, prior immunity, and access to COVID-19 treatments for those at the highest risk when appropriate

The Government is therefore moving to a risk-based approach to managing COVID-19 that prioritises reducing severe outcomes for those at the highest ongoing risk from COVID-19.

What has changed ?

Testing changes:

Testing in England has now been aligned with management of other common respiratory infections

[COVID-19 supplement to the infection prevention and control resource for adult social care - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/covid-19-supplement-to-the-infection-prevention-and-control-resource-for-adult-social-care) has been updated to reflect changes to focus testing on those eligible for COVID-19 treatments

Note: This document also now contains information previously outlined in the ASC COVID-19 testing guidance (which has now been withdrawn) to streamline into a single document

- **Symptomatic testing** of individuals (using an LFD test) is advised **only for those eligible for COVID-19 treatments and with symptoms of a respiratory infection. If they have a high temperature or feel unwell, advised to avoid contact with others**

Please review the criteria to assess whether any individuals you care for are eligible for COVID-19 treatments. Refer to [Treatments for COVID-19 - NHS \(www.nhs.uk\)](https://www.nhs.uk/conditions/coronavirus/covid-19/treatments) for a list of people at highest risk and seek clinical advice from a GP or other professional as necessary

Service and care managers should support people who are potentially [eligible for COVID-19 treatments](#) this includes ensuring there are enough tests stored on site for eligible individuals to test if they become symptomatic

- People with [symptoms of a respiratory infection](#) **who are not eligible for COVID-19 treatments** do not need to test but are asked to stay away from others until they feel well & do not have a temperature. This includes staff with symptoms, who are advised to stay away from work during this time
- **People who test positive for COVID-19** should stay away from others for a **minimum of 5 days** after day they took the test & until they feel well & no longer have a temperature. **Testing is no longer required to return to normal activities before 10 days following a positive test**



Setting	Testing	Type of test
Care homes	Outbreak testing	LFD
	Symptomatic testing for those eligible for COVID-19 therapeutics	LFD
Hospices	Outbreak testing	LFD
	Symptomatic testing of patient facing staff	LFD, where recommended by the hospice
	Symptomatic testing for those eligible for COVID-19 therapeutics	LFD
Extra care and supported living	Symptomatic testing for those eligible for COVID-19 therapeutics	LFD

Testing recommended in care services (adult social care and hospices)

[COVID-19: testing from 1 April 2023 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/covid-19-testing-from-1-april-2023)

Care home residents who have a positive COVID-19 test result

Should be supported to:

- Stay away from others for a minimum of **5 days** after the day they took the test
- Access appropriate treatments as quickly as possible if they are eligible
- Receive at least **one visitor at a time** with appropriate IPC precautions; – this number can be flexible in the case that the visitor requires accompaniment (for example if they require support, or for a parent accompanying a child); this does not include visiting professionals – visitors should be advised before seeing a resident that they have had a positive test and are advised to stay away from others; this can be done by the resident or by the care home if they are not able to do this
- Go into outdoor spaces within the care home grounds through a route where they are not in contact with other residents
- Avoid contact with other people who are eligible for COVID-19 treatments for 10 days after a positive test
- Residents who have tested positive for COVID-19 can return to their usual activities after 5 days if they feel well and no longer have a high temperature
- The care home manager should inform the resident's GP of the positive test result

People receiving care outside of care homes who have symptoms of a respiratory infection and are not eligible for COVID-19 treatments

- ▶ People receiving care at home who have symptoms of a respiratory infection and who have a high temperature or do not feel well enough to do their usual activities should follow the guidance for people with symptoms of a respiratory infection
- ▶ They should avoid contact with other people until they no longer have a high temperature or feel unwell. **These individuals are not required to take an LFD test if they are symptomatic**

People receiving care outside of care homes who have a positive COVID-19 test result

- ▶ People receiving care who test positive for COVID-19 and do not live in a care home should follow the [guidance for people with a positive test result People with symptoms of a respiratory infection including COVID-19 - GOV.UK](https://www.gov.uk/guidance/people-with-symptoms-of-a-respiratory-infection-including-covid-19) (www.gov.uk)
- ▶ If a person receiving care has tested because they are [eligible for COVID-19 treatments](#), guidance on [COVID-19 treatments](#) should be followed to access appropriate treatments as quickly as possible



Individuals who are contacts of confirmed COVID-19 cases

- ▶ Individuals do not need to be tested if they have been in contact with a case of COVID-19

- ▶ Individuals who are household/overnight contacts should follow guidance for the general public set out in [guidance for people with symptoms of a respiratory infection including COVID-19](#). Avoid contact with anyone you know who is at [higher risk of becoming severely unwell](#), wear a face mask , wash your hands frequently , limit close contact with other people outside your household, especially in crowded, enclosed or poorly ventilated spaces , If you develop symptoms of a respiratory infection stay at home and avoid contact with others

Outbreaks in Care Homes

Outbreak Testing is now focused on determining the cause of the outbreak & on preventing severe outcomes for individuals @ high risk

- **In a suspected outbreak**, there is no longer a need to test the whole home to identify COVID-19 positive cases. Linked asymptomatic cases are no longer counted as part of the definition of an outbreak
- If 2 or more linked residents develop symptoms of a respiratory infection within 14 days of each other, **the first 5 symptomatic residents** should take a **COVID-19 lateral flow test**, whether or not they are eligible for COVID-19 treatments this is to determine if an outbreak of COVID-19 or other infection. **(PCR tests are no longer advised)** After this, only residents who are eligible for COVID-19 treatments should take a LFD test if become symptomatic
- Report outbreak to UKHSA HPT eastofenglandhpt@ukhsa.gov.uk and copy in HCC Public Health HertsHPT.SPOC@hertfordshire.gov.uk to your email
- Care homes can continue to make use of flexibility to initiate own risk assessment with support available from UKHSA HPT if required. Implement proportionate outbreak management measures in line with national guidance [COVID-19 supplement to the infection prevention and control resource for adult social care - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/covid-19-supplement-to-the-infection-prevention-and-control-resource-for-adult-social-care)

Outbreaks in Care Homes

- **Outbreak measures** can be lifted **5 days** after the last suspected or confirmed case of COVID-19. Residents should be monitored for up to a further 5 days after this to ensure they can access appropriate treatments where necessary
- **Recovery testing with PCR tests is no longer required**, & there are no differences in guidance between small and larger care homes
- Further testing should only be done if advised by UKHSA HPT due to specific issues of concern

Note: Rapid response testing of staff after a single positive case in the setting is no longer recommended

Contact UKHSA HPT by email if:

- You observe greater severity of presentation than expected in residents
- more deaths or hospitalisations than expected
- rapidly increasing cases despite IPC and outbreak control measures
- a suspected outbreak of another illness alongside COVID-19
- a high proportion of residents have been offered or accessed COVID-19 treatments during the outbreak
- you have operational issues
- Flu is confirmed for example if resident was tested in hospital
- You have any other concerns

UKHSA HPT provide infection prevention and control advice and will advise if wider testing is required where there are specific concerns

We remain here to support you

- ▶ Following advice & guidance from UKHSA HPT should you still have queries or concerns you can email the HCC Public Health / HPT - HertsHPT.SPOC@hertfordshire.gov.uk
- ▶ Refer to HCC management of COVID-19 outbreaks in care homes - (effective April 1st) flow chart detailing the process [COVID-19 Outbreak management Process flow chart - effective April 23 V2.pdf](#)

Admission of care home residents

Hospital discharge

- ▶ Individuals being discharged from hospital into a care home should be tested with a **LFD test** within 48 hours before planned discharge. This test should be provided and done by the hospital. **PCR tests should no longer be taken**
- ▶ The result of the test should be shared with the individual and their key relatives or advocate. Evidence of a negative LFD test result should be communicated by hospitals to care homes in writing within the usual communications provided at the time of discharging a patient to a care home
- ▶ Individuals who test positive for COVID-19 can continue to be admitted to the care home if the home is satisfied they can be cared for safely. Individuals who are admitted with a positive test result should be kept away from other residents on arrival and should follow the guidance [care home residents who test positive for COVID-19](#)

Community admission

- Individuals admitted from the community or other care setting **do not need to be tested** before they are admitted into the care home as there is a lower risk of exposure compared to a hospital setting

Visiting arrangements in care homes

Access inside the care home and visits out

- ▶ Visits out should be facilitated wherever possible and there should not be any restrictions on visits out for individuals who are not symptomatic or who have not tested positive in any circumstance
- ▶ Care home residents should not usually be asked to avoid contact with others or to take a test following visits out of the care home
- ▶ **In the event of an outbreak of COVID-19**, each resident should (as a minimum) be able to have **one visitor at a time inside the care home**. Additionally, end-of-life visiting should be supported in all circumstances
- ▶ It is important that any visitor follows the IPC processes put in place by the care home, such as practising hand hygiene and wearing appropriate personal protective equipment (PPE). Visitors should consider taking up any COVID-19 and flu vaccines they are eligible for
- ▶ Visitors should not enter the care home if they are feeling unwell, even if they have tested negative for COVID-19, are fully vaccinated and have received their booster. Transmissible viruses such as flu, respiratory syncytial virus (RSV) and norovirus can be just as dangerous to care home residents as COVID-19

[COVID-19 supplement to the infection prevention and control resource for adult social care - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

Ordering tests

Residential care services, such as extra care, supported living and care homes, may continue to order LFD tests on an organisational basis to provide tests to those eligible for COVID-19 treatments. In addition, care homes will need LFD tests in case an outbreak is suspected

Care homes are eligible to order tests as an organisation if they are regulated by the Care Quality Commission (CQC)

Extra care and supported living settings are eligible to order tests as an organisation if they meet at least one of the following criteria:

- the setting is a closed community with substantial facilities shared between multiple people
- it is a setting where the majority of residents (more than 50%) receive the kind of personal care that is CQC-regulated (rather than help with cooking, cleaning and shopping)

Non-residential adult social care services should ensure individuals who are eligible for COVID-19 treatments are supported to access LFD tests where necessary. Tests can be accessed for individuals [eligible for COVID-19 treatments](#) via [GOV.UK](#)

NHS Capacity Tracker

What is NHS Capacity Tracker ?

*Capacity Tracker is a web-based **digital insight tool** built by NECS in partnership with NHS England that enables care home, in-patient community rehabilitation, substance misuse and hospice providers to easily and **quickly share vacancy** and other critical information in **real time**, which allows Government and the NHS to have detailed insight across the sector. It is quickly adaptable to help effectively manage **broader challenges in infection monitoring, audit / compliance** and is currently supporting the **Covid-19** response*

What we need providers to continue to do:

- Update at a minimum between 8th-14th of every month as required by NHS CT
- Reflect additional changes in vacancies as often as possible
- Update when admissions are not possible to support effective efficient patient discharge
- Update on current outbreaks within the home, and when an outbreak is declared over

NHS Capacity Tracker

What providers need to know ?

- HCC home finders are using the NHS CT for spot bed placements, reflecting an accurate picture of current vacancies means homes will not be approached inappropriately
- DHSC can apply a fine for not updating mandatory data
- Current BAU Covid oversight uses NHS CT to understand current infection levels, & accurate recording leads to focused support if and when needed

Free PPE

- ▶ Remains available for COVID-19 needs until March 2024 , or until stocks run out if earlier than this
- ▶ The use of face masks should continue to be risk - based & ensure adequate stock supply available when required

Resources:

- ▶ [COVID-19 supplement to the infection prevention and control resource for adult social care - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/covid-19-supplement-to-the-infection-prevention-and-control-resource-for-adult-social-care)
- ▶ [People with symptoms of a respiratory infection including COVID-19 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/people-with-symptoms-of-a-respiratory-infection-including-covid-19)
- ▶ [Treatments for COVID-19 - NHS \(www.nhs.uk\)](https://www.nhs.uk/conditions/covid-19/treatments/)
- ▶ [COVID-19: testing from 1 April 2023 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/covid-19-testing-from-1-april-2023)
- ▶ [COVID-19 Outbreak management Process flow chart - effective April 23 V2.pdf](#)

General infection prevention and control guidance for adult social care

- ▶ [Infection prevention and control: resource for adult social care - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/infection-prevention-and-control-resource-for-adult-social-care)

Infection prevention and control training for care homes is available online:

- ▶ [Infection prevention and control \(skillsforcare.org.uk\)](https://www.skillsforcare.org.uk/infection-prevention-and-control/)
- ▶ [https://www.england.nhs.uk/publication/national -infection-prevention-and-control](https://www.england.nhs.uk/publication/national-infection-prevention-and-control/)



World Hand Hygiene Day 5 May

Questions ?



THE HCPA CARE PROVIDER HUB PROVIDING PEACE OF MIND.....



ASK us anything! We are your support service, here to answer your questions on all topics Adult Social Care related.

- Govt guidance, laws, standards and expectation.
- Covid: PPE, vaccinations and infection control.
- Liaison with Hertfordshire County Council.
- Funding, contracting and commissioning.
- Staff wellbeing and recognition.
- HR, Staffing and recruitment.
- Training and education.
- Business continuity.
- Data protection.
- Monitoring.
- Equipment.
- Insurance.

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01707 708108 / assistance@hcpa.co.uk (Mon to Fri - 9am to 5pm). www.hcpa.info/hub

HCPA: 'Sharing best practice in care through partnership'



Thank you for attending...

