

Welcome

Winter Preparedness Webinar

21st September 2023

Session will begin shortly

The 'Care To Step Up' programme is part-funded by:



European Union
European Structural
and Investment Funds

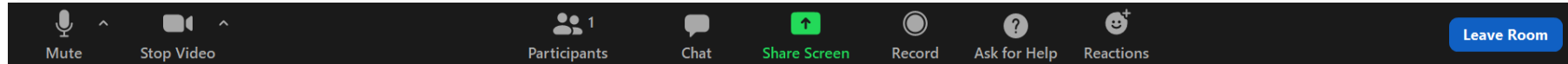


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Winter Preparedness Webinar

Tanya Brady – Senior IPC Nurse PH/HPT HCC

Geraldine Bruce – Head of Health Protection HCC

21 September 2023



Aim/Objective

- Support ASC providers to prepare for Winter
- Inform of importance of Vaccination & IPC best practice
- Signpost to relevant IPC guidance & resources available
- Gain better understanding of who is who in the system for IPC advice & support

Agenda

- Introduction & who is who in the system for IPC advice & support
- Update on new COVID-19 variant BA.2.86
- Autumn/Winter COVID-19 / Flu vaccination programme
- Best way to protect against COVID-19
- Supporting those eligible for COVID-19 treatments
- Revisit current IPC guidance
- COVID-19 outbreak, testing & reporting
- COVID-19 admission & visiting arrangement in care homes
- Acute respiratory Infection (ARI)
- Norovirus
- Cold Weather planning
- Resources

Who is Who?

UKHSA HPT

- Statutory body
- Lead organisation for the reporting and management of all outbreaks
- Provide initial risk assessment and advice in outbreaks
- Produce national guidance
- Lead IMT's for significant outbreaks

County Council SPOC/IPC

Nurse Tanya Brady

- Oversight of local outbreaks in care homes
- Local advice and guidance
- Answer queries
- Support education and awareness of outbreaks of infectious disease
- Produce local IPC information in conjunction with HCPA



New COVID Variant

- A new COVID variant BA.2.86 has been identified in UK
- The variant is of Omicron (BA.2) sub lineage with more than 30 mutations in spike protein
- 37 cases detected in England majority identified in a care home outbreak in Norfolk
- The single care home outbreak is an early indicator that the variant may be sufficiently transmissible to have impact in close contact settings
- Degree of widespread community transmission both in UK and globally
- Limited information on transmissibility, severity & potential vaccine evasion properties
- There is no change to the guidance and advice on COVID-19 treatments, testing, outbreak control management and infection prevention & control
- UKHSA is carrying out further investigation



Autumn /Winter COVID-19/Flu Vaccination

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

- Autumn/winter COVID-19/Flu vaccination programme was brought forward as a precautionary measure to protect the most vulnerable from illness this winter following identification of COVID-19 variant BA.2.86
- The accelerated vaccination programme commenced 11 September beginning with care home residents / staff with the expectation to have all residents vaccinated by 22 October
- Co administration of COVID-19 and flu vaccines for residents /staff is recommended where possible



Autumn /Winter COVID-19/Flu Vaccination

- Eligibility criteria remains unchanged for both Autumn 2023/24 COVID-19 cohorts and flu cohorts

[National flu immunisation programme 2023 to 2024 letter - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/national-flu-immunisation-programme-2023-to-2024-letter)

[JCVI statement on the COVID-19 vaccination programme for autumn 2023, 26 May 2023 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/jcvi-statement-on-the-covid-19-vaccination-programme-for-autumn-2023)

- No decision has been made on expanded eligibility for vaccination and this continues to be kept under close review

Adult social care letter can be found here:

[Flu and COVID-19 autumn vaccine programmes \(skillsforcare.org.uk\)](https://www.skillsforcare.org.uk/flu-and-covid-19-autumn-vaccine-programmes)



Those eligible for an autumn COVID-19 vaccine

- residents in a care home for older adults
- all adults aged 65 years and over
- people aged 6 months to 64 years in a clinical risk group, as laid out in the Immunisation Green Book, COVID-19 chapter
- frontline health and social care workers
- people aged 12 to 64 years who are household contacts (as defined in the Green Book) of people with immunosuppression
- people aged 16 to 64 years who are carers (as defined in the Green Book) and staff working in care homes for older adults.



The following groups are eligible for a free flu vaccine

- All adults aged 65 and over
- Anyone under 65 with certain health conditions like diabetes, heart disease, some neurological diseases, liver disease or a weakened immune system (for instance due to being prescribed steroids or treated for cancer)
- All pregnant women
- Children aged 2 to 3 years on 31 August 2023
- All primary school children and secondary school aged children in years 7 to 11
- Those living in care homes
- Certain carers
- Frontline health and social care workers



Autumn/Winter COVID-19/Flu Vaccination

- Staff can book their vaccinations via the National Booking Service from 18 September, via NHS App or by phoning 119
- All staff are encouraged to take up the offer of Autumn Covid-19 and flu vaccinations this year in order to protect yourselves and the vulnerable people you work with from these viruses and prevent you from having to take time off from work due to illness
- Materials to help care home managers promote vaccinations for staff including Q&A leaflets, posters, and stickers are available to order by registering at: <https://campaignresources.dhsc.gov.uk/campaigns/winter-vaccinations/>



NHS Capacity Tracker

- The NHS capacity tracker remains an essential tool for understanding the uptake of both COVID-19 and Flu vaccination
- Vaccination data forms part of the mandated data collection
- DHSC recommend care home managers update CT immediately following a vaccination team visit

Best way to protect against COVID-19

Vaccination, COVID-19 treatments, and following IPC guidance remain the best way to help protect against COVID-19 across adult social care, and we ask that you continue to promote the measures outlined below:

- Encourage staff and residents to take up the offer of COVID-19 vaccination
- Support people eligible for COVID-19 treatments to LFD test as soon as possible for COVID-19 if they develop respiratory symptoms and access appropriate treatment if they test positive. [Update on how COVID-19 treatments can be accessed by people outside of hospital \(skillsforcare.org.uk\)](https://www.skillsforcare.org.uk)
- Providers should ensure adequate supply of LFD tests is available (checking expiry dates) to test those eligible for COVID-19 treatments if they develop respiratory symptoms & for COVID-19 outbreak testing in line with national guidance. Eligible care provider organisations can obtain LFD tests from the ordering portal [Apply for coronavirus test kits - GOV.UK \(test-for-coronavirus.service.gov.uk\)](https://www.gov.uk/test-for-coronavirus)

Best way to protect against COVID-19

- Ensure PPE is available to be used in line with risk assessments
- Ensure adequate ventilation – letting fresh air from outdoors into indoor spaces can help remove air that contains virus particles and prevent the spread of COVID-19
- Appropriate management of waste
- Follow national IPC guidance
- Contact UKHSA EOE HPT / LA if there are concerns

Supporting those eligible for COVID-19 treatments

Individuals who are at higher risk of severe outcomes from COVID-19 may be eligible for COVID-19 treatments if they become unwell

- Identify & keep a record of those potentially eligible for COVID-19 treatments
- Discuss in advance treatment options with potentially eligible residents & family
- As per the guidance, if someone who is eligible for COVID-19 treatment develops symptoms of COVID-19 they should be tested as soon as possible with a lateral flow device (LFD) test. If they do not initially test positive but continue to show COVID-19 symptoms, they should be tested daily for a further 2 days (3 days in total)

[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) (updated 25 August 2023)



Supporting those eligible for COVID-19 treatments

- If someone who may be eligible for COVID-19 treatments tests positive for COVID-19, providers should organise an assessment for COVID-19 treatments for them

NHS 111 will be able to advise on local arrangements in the first instance, and then depending on local arrangements, this may be a local COVID-19 treatment service, the individual's GP, or their own hospital specialist



Supporting those eligible for COVID-19 treatments

- If a provider is unsure of the local arrangements, contact the individual's GP during normal opening hours, or NHS 111 out-of-hours and at weekends
- Providers should also check eligibility criteria for COVID-19 treatments with the GP when a resident is newly diagnosed with an ongoing condition which may make them eligible. [Treatments for COVID-19 - NHS \(www.nhs.uk\)](https://www.nhs.uk)
- Treatments are most effective if started early and most have to be provided within 5 days of symptom onset. It is therefore essential to test people and seek assessment as soon as possible so that potentially eligible people can be assessed within the treatment window

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



IPC guidance

All managers & adult social care staff should read & implement 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/guidance/covid-19-supplement-to-the-infection-prevention-and-control-resource-for-adult-social-care)

This guidance outlines COVID-19 infection prevention and control (IPC) measures for staff, service users and visitors in adult social care settings and services, including information on COVID-19 testing in ASC - detailing the testing regime for eligible staff & residents & where outbreaks are suspected. Testing & IPC measures in this guidance are focused on protecting those most at risk of severe outcomes

Updated 25 August 2023:

- To outline revised details of targeted vaccination offer and latest JCVI advice
- To reflect changes in how people who are potentially eligible for COVID-19 treatments can access treatments



IPC guidance

Other relevant & useful IPC guidance documents:

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

This resource contains general IPC principles to be used in combination with advice & guidance on managing specific infections

[NHS England » National infection prevention and control manual \(NIPCM\) for England](https://www.nhs.uk/publications/nipcm)

Evidence based best practice manual ensuring a consistent approach to IPC across all care settings

* Ensure all IPC policies are up to date, read & followed by all staff



Personal Protective Equipment (PPE)

- Appropriate PPE should be worn by care workers in all settings, as well as visitors to residential care settings, subject to a risk assessment

[COVID-19 PPE guide for adult social care services and settings - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/covid-19-ppe-guide-for-adult-social-care-services-and-settings)

- Ensure an adequate supply of PPE is available
- Free PPE remains available for COVID-19 needs until March 2024, or until stocks run out if earlier than this [Estimated stock-out dates by PPE category - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/estimated-stock-out-dates-by-ppe-category)
- For PPE to be effective, it is important to use it properly and follow instructions for putting it on (donning) and taking it off (doffing).

[Guide to donning \(putting on\) and doffing \(removing\) PPE \(non AGP\) in adult social care settings \(for print\) \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/guidance/guide-to-donning-putting-on-and-doffing-removing-ppe-non-agp-in-adult-social-care-settings-for-print)

- All used PPE should be disposed of appropriately in the correct waste stream



Face masks

Care workers and visitors do not routinely need to wear a face mask in care settings or when providing care in people's home. However, there are certain circumstances where it is recommended for staff and visitors to wear a face mask to minimise the risk of transmission of COVID-19:

- If a person being cared for is suspected or known to have COVID-19 (staff and visitors are recommended to wear a Type IIR fluid-repellent surgical mask)
- In the event of a care home outbreak
- If a care recipient would prefer staff or visitors to wear a mask while providing care

Providers should also support the personal preferences of care workers and visitors who wish to wear a mask.

Type IIR masks should always be worn if there is a risk of splashing of blood or body fluids

[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)



Face masks

All face masks should:

- be well fitted to cover the nose, mouth and chin
- be worn according to the manufacturer's recommendations (check which side should be close to the wearer)
- not be allowed to dangle around the neck at any time, or rest on the forehead or under the chin
- not be touched once put on
- be worn according to the risk-assessed activity
- be removed and disposed of appropriately, with the wearer cleaning their hands before removal and after disposal

Face masks should be changed:

- if they become moist
- if they become damaged
- if they become uncomfortable to wear
- if they become contaminated or soiled
- at break times
- after providing care for someone with suspected or confirmed COVID-19
- between different people's homes
- after 4 hours of continuous wear



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

www.gov.uk



Care Home COVID-19 Outbreak, reporting & testing

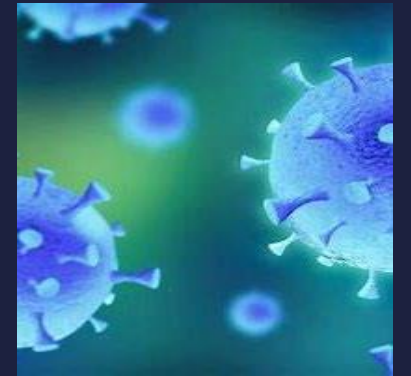
Definition of an outbreak

An outbreak consists of 2 or more positive or clinically suspected linked cases of COVID-19 within the same setting within a 14 day period

An outbreak may be suspected when there is an increase in the number of residents displaying symptoms of a respiratory infection.

If an outbreak is suspected

- Care home undertakes a risk assessment to determine if OB & if control measures needed
- Inform UKHSA EOE HPT email: eastofenglandhpt@ukhsa.gov.uk & copy in LA HPT/SPOC email: HertsHPT.SPOC@hertfordshire.gov.uk to your email
- You are not required to wait for advice from UKHSA HPT if you feel able to initiate the risk assessment independently
- UKHSA HPT will provide IPC advice & guidance & further support is available from UKHSA HPT or local authority at the care home request



Care Home COVID-19 Outbreak, reporting & testing

- To inform the risk assessment, the **first 5 linked symptomatic residents** should be tested using LFD tests irrespective of their eligibility for COVID-19 treatments . This is to determine if there is a COVID-19 OB
- After this, new symptomatic cases do not require testing unless they are eligible for COVID-19 treatments

Note: If residents are displaying symptoms of a respiratory infection and the **LFD tests are negative** **Think Flu** & consider testing for flu & other respiratory infections

- Implement proportionate & risk based outbreak control measures
- The care home manager should ensure staff, residents and their loved ones are informed of the outbreak and any relevant measures that have been implemented



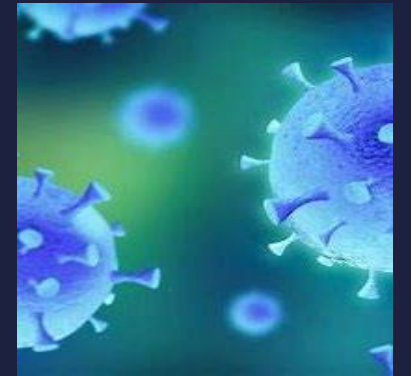
COVID-19 Outbreak control measures

- Proportionate reductions in communal activities
- Proportionate reductions in admissions which may include temporary closure of the home to further admissions
- Restriction of movement of staff providing direct care to avoid risk of outbreaks spreading between different parts of settings (for example wings)
- Ensure adequate ventilation
- Appropriate PPE
- Enhanced environmental cleaning
- Safe management of infectious laundry & waste



Care Home COVID-19 Outbreak, reporting & testing

- Contact UKHSA EOE HPT where specific issues of concern e.g greater severity of illness , death / hospitalisation, rapidly increasing cases despite OB management measures, high proportion of residents have been offered or accessed treatments, a suspected OB of other illness alongside COVID-19 e.g Flu , operational issues
- If further advice / support is required email: HertsHPT.SPOC@hertfordshire.gov.uk
- OB measures can be lifted 5 days after last suspected or confirmed case .This is from the day of the last positive test, or the day the last resident became unwell, whichever is latest
- Residents should be monitored for up to a further 5 days after this to ensure they can access appropriate treatments where necessary
- In an outbreak, transfer of residents to hospital or other settings should be avoided unless clinically necessary/ medical emergency



[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)



COVID-19 Visiting arrangement in Care homes

Contact with relatives and friends is fundamental to care home residents' health and wellbeing and visiting should be supported

- There should not normally be any restrictions to visits into or out of the care home
- Visitors should follow the IPC processes put in place by the care home, such as practising hand hygiene and wearing appropriate personal protective equipment (PPE). Additional requirements for face masks may be in place during a confirmed outbreak of COVID-19
- Visitors should not enter the care home if they are feeling unwell, as transmissible viruses such as flu, respiratory syncytial virus (RSV) and norovirus can be just as dangerous to care home residents as COVID-19
- **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
- Visitors should consider taking up any COVID-19 and flu vaccines they are eligible for
- Health, social care and other professionals may need to visit residents within care homes to provide services. Visiting professionals should follow the PPE recommendations as per other visitors & be informed by the home of an outbreak & measures implemented
- End-of-life visiting should be supported in all circumstances

Admitting COVID-19 positive individuals to a Care Home

Individuals being discharged from hospital into a care home should be tested with a COVID-19 LFD test within 48 hours before the planned discharge

Individuals who test positive for COVID-19 can 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 supported to:

- Stay away from others for a **minimum of 5 days** after the day they took the test
- Avoid contact with other people who are eligible for COVID-19 treatments for 10 days after a positive test
- Individuals should be supported to access appropriate treatments as quickly as possible if they are eligible
- Receive at least one visitor at a time with appropriate IPC precautions
- 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
- The care home manager should inform the resident's GP of the positive test result
- After 5 days, the resident can return to their normal activities if they feel well and no longer have a high temperature

[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)

Prevent the spread of other respiratory viruses (including Influenza)

Covid-19 and other respiratory viruses such as Flu are likely to co circulate this winter

It may be difficult to distinguish between symptoms of COVID-19, influenza, and other respiratory viruses

Care home residents may not present with classical symptoms of COVID-19 or Influenza. Therefore, acute respiratory infection (ARI) should also be considered if there is a sudden deterioration in physical or mental health, with or without a fever



How to prevent spread of respiratory viruses:



- Prompt identification of unwell individuals
- Refer those unwell to GP for clinical assessment
- Educate residents on the actions they can take to protect themselves – effective hand washing, respiratory precautions, prompt reporting if feeling unwell
- Ensure staff are **aware of the signs and symptoms / atypical symptoms** to look out for in the resident:

[COVID-19 symptoms and what to do - NHS \(www.nhs.uk\)](https://www.nhs.uk)

[People with symptoms of a respiratory infection including COVID-19 - GOV.UK \(www.gov.uk\)](https://www.gov.uk)



Prevent the spread of other respiratory viruses

- Encourage staff to stay away from work if they are experiencing respiratory symptoms
- Ask visitors not to visit their loved ones if they feel unwell
- Encourage your residents to get vaccinated against COVID-19 & seasonal Influenza
- **Get your free flu/ COVID-19 vaccination**
- **Ensure IPC policies are up to date, read & followed by all staff**



Prevent the spread of respiratory viruses

Ensure staff are familiar with the infection prevention & control measures

- Isolation of symptomatic residents
- Hand hygiene
- Appropriate PPE
- Respiratory & cough hygiene
- Environmental & equipment cleaning
- Safe management of infectious laundry & waste
- Adequate ventilation



Respiratory & cough hygiene

Good respiratory hygiene reduces the transmission of respiratory infections

To help reduce the spread of infection:

- cover the nose and mouth with a disposable tissue when sneezing, coughing, wiping and blowing the nose – if unavailable use the crook of the arm to catch a sneeze or a cough
- ensure a supply of tissues is in reach of the person or those providing care
- dispose of all used tissues promptly into a waste bin, which should be provided
- clean hands after coughing, sneezing, using tissues, or after contact with respiratory secretions or objects contaminated by these secretions
- keep contaminated hands away from the eyes, nose and mouth
- support people who need help with respiratory hygiene where necessary



Acute Respiratory Infection Outbreak

Where an outbreak of respiratory illness is suspected:

- Refer to GP for clinical review to consider whether the suspected cases meet COVID-19 or Influenza Like Illness case definition (and COVID-19 LFT if appropriate) .Testing suspected acute respiratory infection cases with LFDs is quick and allows you to establish if COVID-19 may be the cause
- Report the outbreak to UKHSA EOE HPT email: : eastofenglandhpt@ukhsa.gov.uk
- UKHSA HPT will undertake a risk assessment, provide IPC advice & may organise additional swabbing for influenza and other respiratory viruses. This is so that appropriate antivirals can be provided if influenza virus is detected to treat and prevent further case
- Outbreaks of acute respiratory illness in care homes should initially be managed by immediate implementation of the more stringent infection control measures required for COVID-19 until the causative organism is shown not to be COVID-19 by laboratory testing

[Guidelines for PHE Health Protection Teams on the management of outbreaks of influenza-like illness \(ILI\) in care homes \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/90421/guidelines-for-phe-health-protection-teams-on-the-management-of-outbreaks-of-influenza-like-illness-ili-in-care-homes.pdf)



Diarrhoea & Vomiting

Care home residents and staff in nursing/residential care homes are particularly susceptible to viral gastroenteritis such as Norovirus. Norovirus can cause diarrhoea and/ or vomiting and can spread rapidly from one person to another. It is a self limiting illness.

How to stop Norovirus spreading:

- Report increased incidence / outbreak to UKHSA EOE HPT
- UKHSA HPT will undertake risk assessment & provide IPC advice
- Isolate symptomatic residents until 48 hrs after resolution of symptoms
- Exclude symptomatic staff until 48 hrs after resolution of symptoms
- Reinforce hand hygiene with soap and water only (alcohol hand rub is not effective against Norovirus spores)
- Enhanced cleaning with chlorine based disinfectants to clean surfaces
- Appropriate PPE (disposable apron & gloves)
- Arrange Stool sampling collection as requested by GP or UKHSA HPT
- Ensure residents are clinically assessed by their GP and rehydrated adequately especially if you are concerned
- Transfer of residents to hospital or other settings should be avoided unless medically required. If a transfer is necessary, inform the ambulance provider AND the receiving hospital/setting of the outbreak prior to arrival

[Norovirus: managing outbreaks in acute and community health and social care settings - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/norovirus-managing-outbreaks-in-acute-and-community-health-and-social-care-settings)

[Norovirus: how to stop it spreading - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/norovirus-how-to-stop-it-spreading)



Preparing for cold weather

Cold weather can put people at greater risk of ill-health and even death primarily because it increases the probability of complications from existing disease, and of injury due to falls.

Reduce the risks associated with exposure to cold weather by:

- developing, and where necessary implementing, business continuity plans (BCP) for cold weather, and ensuring all staff know how to take action accordingly
- protecting clients and staff by promoting COVID-19 and flu vaccination for them
- taking simple measures to protect clients and staff from cold, snow and/or ice

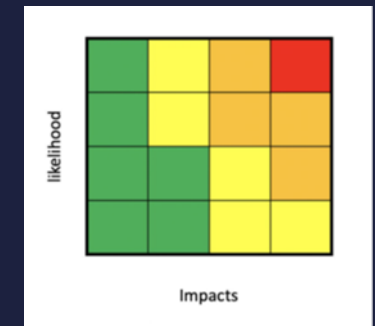
If you work in a setting that provides care in clients' own homes, you should also:

- identify who is at higher risk of cold-related illnesses and how to reduce that risk
- have a plan in place for individuals you are responsible for to keep them warm during the winter and ensure staff know how to raise concerns regarding clients they are working with if necessary
- ensure staff are aware of main sources of support for housing, energy bills and other needs to signpost clients to, including support for those on low incomes



Preparing for cold weather

- UKHSA have published new guidance for managers in adult social care providing advice on how to reduce the risks of cold weather to the health and wellbeing of those who receive care. [Supporting vulnerable people before and during cold weather: for adult social care managers - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/supporting-vulnerable-people-before-and-during-cold-weather-for-adult-social-care-managers)
- Adult Social care managers should also consult the [Cold-Health Alert action card for providers](#). This card summarises the suggested actions that providers of social care should consider to prepare for and respond to each Cold-Health Alert (CHA) type (yellow, amber or red). It also identifies some of the key long-term strategic actions managers can take which will help minimise harms to health arising from cold weather.
- Carers providing direct care to people, including in their own homes, are recommended to review UK Health Security Agency (UKHSA) guidance on [keeping warm and well: staying safe in cold weather](#) for advice on keeping buildings warm during periods of cold weather, and other general measures to help protect social care clients.



Top tips to keep warm & well this Winter

- Heat rooms you spend time in to at least 18°C
- Try to reduce draughts , you can fit draft excluders around doors cheaply
- Keep windows closed at night
- Wear multiple layers of thinner clothing this could keep you warmer than one thicker layer
- Get vaccinated if eligible against COVID-19 & Influenza
- Keep active- try not to sit still for more than an hour or so. If you find it difficult to move about, stretching your arms and legs can also help keep you warm
- Where bad weather is forecast , plan ahead for provision of medicines & food

If you work in a care home or other residential setting, you should:

Ensure that plans are in place to be able to monitor room temperature, body temperature, pulse rate and blood pressure to protect residents

[Keeping warm and well: staying safe in cold weather - GOV.UK \(www.gov.uk\)](https://www.gov.uk)



Summary- key messages

- **Be prepared** – ensure adequate supply of PPE , LFD test kits , disposable cleaning materials, paper towels, liquid soap , alcohol hand rub
- Get vaccinated against COVID-19 / seasonal flu
- Encourage residents to get vaccinated against COVID-19 / seasonal Flu
- Prompt recognition of an outbreak
- Report outbreaks of respiratory infection & D&V to UKHSA HPT
- Ensure IPC policies are up to date, read & followed by all staff
- Follow National IPC guidance



Resources

- [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)
- [Infection prevention and control: resource for adult social care - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/infection-prevention-and-control-resource-for-adult-social-care)
- [NHS England » National infection prevention and control](https://www.nhs.uk/england/national-infection-prevention-and-control)
- <https://www.gov.uk/guidance/people-with-symptoms-of-a-respiratory-infection-including-covid-19>
- [Update on how COVID-19 treatments can be accessed by people outside of hospital \(skillsforcare.org.uk\)](https://www.skillsforcare.org.uk/news/2020/05/update-on-how-covid-19-treatments-can-be-accessed-by-people-outside-of-hospital)
- [COVID-19: guidance for people whose immune system means they are at higher risk - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/covid-19-guidance-for-people-whose-immune-system-means-they-are-at-higher-risk)
- [Flu and COVID-19 autumn vaccine programmes \(skillsforcare.org.uk\)](https://www.skillsforcare.org.uk/news/2020/05/flu-and-covid-19-autumn-vaccine-programmes)
- [Supporting vulnerable people before and during cold weather: for adult social care managers - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/supporting-vulnerable-people-before-and-during-cold-weather-for-adult-social-care-managers)



Resources

[Cold-Health Alert action card for providers](#)

[keeping warm and well: staying safe in cold weather](#)

[The flu vaccination. Who should have it and why. Winter 2023 to 2024 \(publishing.service.gov.uk\)](#)

[Norovirus: managing outbreaks in acute and community health and social care settings - GOV.UK \(www.gov.uk\)](#)

[Norovirus: how to stop it spreading - GOV.UK \(www.gov.uk\)](#)

[COVID-19 symptoms and what to do - NHS \(www.nhs.uk\)](#)

[People with symptoms of a respiratory infection including COVID-19 - GOV.UK \(www.gov.uk\)](#)

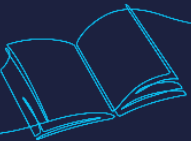
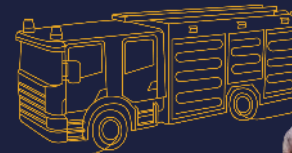
[Influenza-like illness \(ILI\): managing outbreaks in care homes - GOV.UK \(www.gov.uk\)](#)





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