

Dear Sir or Madam,

Re: Response to the MSC regarding Support for Care Homes

The majority of residential and domiciliary care to residents on the Isles of Scilly is provided by the Council of the Isles of Scilly through Park House which is CQC rated as Good in all categories.

Detailed risk assessments have been developed to address all risks in relation to infection control and staff and resident safety. The Registered Manager is a member of the local health cell and has contributed to an integrated Model of Care to support Covid 19 given island limitations in relation to acute care.

The Isles of Scilly are in a fortunate position to have been working in an integrated way for several years. The implementation of this system has enabled us to respond effectively and well to the possibility of Covid 19 affecting the islands. To date we have no recorded infections of Covid 19.

Due to the fragility of the islands, the transport links and the ageing population we recognise Covid 19 puts the islands at significant risk. We have worked with local agencies and national services to ensure any outbreak offers minimal risk to the community.

To date, medical information indicates that there have been no known Covid 19 cases on the islands

This provides a very brief overview of the work that has been undertaken by the local authority.

1. Joint work to ensure care market resilience locally

• **System wide approach:**

The Isles of Scilly has set up a support network and recognises the difficulties that have arisen due to Covid 19. It works with its partner agencies including primary and secondary care, private and voluntary providers to support the needs of the local community. A multiagency meeting takes place 3 times a week, which provides oversight of services in the most complex of cases. This includes working with individuals in their own homes or in the residential home on the islands. Officers within the Council's adult social care service, contribute towards various cells associated with the Covid 19 risk in the South-West these include, a health cell, testing cell, mental health cell, shielding cell, volunteer cell and a generic Council cell

• **Robust local resilience structures:**

The council has clear processes in place that escalate specific issues through the management structure within the islands, through to the mainland and on to central government, as is appropriate. The islands unique location, infrastructure and transport links make it a fragile economy and these support networks are essential in providing ongoing necessary resilience, for example the LRF ensuring stocks for Park House and air transport links with the mainland.

• **Data and intelligence:**

Data is shared as required across the services in line with regulations, regular contact has been organised, set up and implemented with various agencies. These include primary care, secondary care, voluntary sector, residential and domiciliary care services, public health, environmental health, housing, SWAST, mental health services and many others. The "cell" produce and support any appropriate information being effectively distributed across the islands and the south-west, to

support decision-making processes. This information is shared and becomes part of the south-west risk management process. Information from the care home relating to Covid is passed to CQC in relation to occupancy, Covid 19 outbreaks in the resident home and workforce availability due to Covid 19 are recorded.

- **Daily review of care homes:**

The care home on the islands is discussed 3 times a week at a multi-professional meeting, daily contact between Adult Social Care and the care home ensure all risks are identified, prioritised and infection prevention is foremost throughout the service. The care home or members of its team are also part of various “cells” including shielding (PPE), health cell and the Council cell.

2. **System assurance of planning and activity**

The islands have responded to the pandemic with a coordinated system that supports prevention cross contamination and rapid responses to changing circumstances and risk. Support has been offered to and accepted by the micro care providers when required, this supports the care system across the islands. This has included the use of PPE and training if required or requested on the usage of PPE. Advice and support and guidance on current government guidance and practice has also been offered.

- **PPE:**

The local authority has been sharing PPE with other agencies such as private-sector care agencies, undertakers, environmental health officers, blue light services etc. This is based on the understanding of reducing risk of cross contamination across the islands relating to social care. This has ensured all services have adequate stocks.

Guidance and support has been shared with providers and other interested parties to support information sharing across the islands.

Stocks of PPE in the care home have been sourced and adapted to the changing government guidelines over the period of time. Additional support if required has been given by the council to ensure stocks within the care home meet the changes in government guidance.

Training on the use of PPE has been provided by our health colleagues on the islands, this has been disseminated down to other services if required.

- **Testing:**

This is currently available for all health and social care employees on the islands. All staff have access to a testing regime if required. Discharge from hospital into the care home requires a test to be undertaken and negative result confirmed before transport back to the islands. We are currently looking at antibody testing. A plan for systematic testing for all care staff on the islands to ensure transmission is being developed prior to 4th July.

- **Discharge from hospital:**

All discharges from hospital to the care home require a test to have taken place. All patients are being screened before discharge.

- **Communications and support:**

As stated previously the Isles of Scilly Council has a well developed communication system in place across services and locations. The cells coordinate activity and information relating to Covid 19, ensuring care homes and domiciliary care and the community are the focus and risk is minimised. Electronic communication has been at the forefront of the response to Covid 19. This has enabled us to reduce personal interactions while maintaining services. Adult Social Care has adapted its operations using tools such as Skype to facilitate assessment processes. This is also happened for primary care and other care services. Training and briefings and the dissemination of frequently changing guidance has been successfully implemented using this process

- **Staffing:**

Staff have been required to shield and self-isolate, this has put pressure on existing services that have seen an increase in public need. Fast track recruitment has been successful in recruiting 3 new members of staff for the care home. The local authority has made its recruitment processes flexible and responsive, this has been very successful.

- **Engagement and co-production:**

The council has worked with other agencies and the community to adapt and change their functions locally and escalated issues where we have not been able to find a successful solution. For example transport links with the islands were put at risk due to flight restrictions and the cessation of the ferry service. Work with the military, transport providers and passenger transport at SWASFT and RCHT has enabled effective transport links for vulnerable adults if this is required.

3. Approach commissioners (LAs and CCGs) are taking to address short-term financial pressures experienced by care providers

We only commission two external placements and the funding is secure for both providers.

The Council provision is secure and additional funding released to support additional infection control measures..

4. Approach agreed locally to providing alternative accommodation where this is required

This has not been required to date on the islands. The care home has set up a system of barrier nursing and isolating individuals within their own rooms to ensure infection risks are minimised. This has resulted in vulnerable individuals being able to stay if required on the islands. The multi-disciplinary meeting that takes place 3 times a week reviews high risk cases, this migrates any risk during discharge into the care home or home with a package of care.

5. Local co-ordination for placing returning clinical staff or volunteers into care homes

The local authority, Adult Social Care and HealthWatch Isles of Scilly have set up a volunteer scheme that supports the most vulnerable people in the community to support shielding. They have also accumulated a list of people with professional qualifications and a willingness to work in a health field if necessary. To date this has not been required.

In summary

The Isles of Scilly council in conjunction with adult social care, primary care, health colleagues, private and voluntary sector and the local community have provided support to its care home and domiciliary care function across the islands. It has done this by providing equipment, money, advice and guidance, support and direction. Working with such organisations as HealthWatch Isles of Scilly

the NHS, CQC, public health and independent care providers, we have been able to meet the changing guidance and needs of our local community.