



Public Health
England

Protecting and improving the nation's health

Weekly Care Homes Evidence Digest

Prevention and control of COVID-19 in home care/care homes settings
10th September 2020

Summary

This weekly digest contains a selection of evidence published in the last 7 days, in relation to the prevention and control of COVID-19 in home care/care home settings. We search a number of Covid-19 review repositories, an existing PHE Covid-19 evidence digest, Ovid Medline and Embase, Social Care Online, medRxiv (pre-print server) and various websites. We select peer reviewed and non-peer reviewed publications (pre-prints), as well as systematic reviews, guidance and evidence summaries.

The digest is produced by PHE [Knowledge and Library Services](#) (KLS), in conjunction with a small editorial team.

We do not accept responsibility for the availability, reliability or content of the items included in this resource and do not necessarily endorse the views expressed within them. Our intent is to highlight early emerging research findings as well as research that has been subject to peer review and wider scrutiny.

This week's digest includes: further international evidence of the value of confining care staff with care home residents and for the cohorting of residents; use of de-prescribing in reducing the risk of transmission of infection by optimising medicines management; and from Canada, principles and key recommendations to help to restore confidence in the future of long term care facilities. From the UK, evidence of the impact of COVID-19 on paid home care for dementia, and a genomic epidemiology survey of the dynamics of COVID-19 in care homes from the East of England. Finally, a summary of recent published reports, guidance and statistics.

Peer-Reviewed Articles

Publication date	Title / URL	Journal / Article type	Digest
01.09.2020	Cross-Sectional Prevalence of SARS-CoV-2 Among Skilled Nursing Facility Employees and Residents Across Facilities in Seattle	Journal of General Internal Medicine / Article	<ul style="list-style-type: none"> Between March 29 and May 13, 2020, 1583 employees and 1208 residents at 16 SNFs were tested for SARS-CoV-2 using quantitative real-time reverse transcription polymerase chain reaction. A subset of employees completed a sociodemographic and symptom questionnaire. Eleven of the 16 SNFs had one or more resident or employee test positive. Overall, 46 (2.9%) employees had positive or inconclusive testing for SARS-CoV-2, and among those who completed surveys, most were asymptomatic and involved in direct patient care. The majority of employees tested were female (934, 73%), and most employees were Asian (392, 30%), Black (360, 28%), or white (360, 28%). Among the 1208 residents tested, 110 (9.1%) had positive or inconclusive results. There was no association between the presence of positive residents and positive employees within a SNF ($p = 0.62$, McNemar's test).
01.09.2020	Assessment of Receipt of the First Home Health Care Visit After Hospital Discharge Among Older Adults	JAMA Network Open / Article	<ul style="list-style-type: none"> Investigates how often Medicare patients referred to home health care at hospital discharge receive a home health care visit, and whether there are disparities? In this cross-sectional study of Medicare beneficiaries in 2016, only 54.0% of patients discharged from the hospital with a home health care referral received home health care services within 14 days of discharge. This rate was even lower among Black and Hispanic patients, those who were dually enrolled in both Medicare and Medicaid, and patients who lived in high-poverty, high-unemployment zip codes. These findings suggest that patients may face important differential barriers in access to home health care at a time when home health care is increasingly presented as a safer alternative to institutional postacute care during coronavirus disease.
01.09.2020	Confinement of staff with residents in nursing homes: a solution against COVID-19? [Click]	Geriatric Et Psychologie Neuropsychiatrie Du Vieillessement / Article	<ul style="list-style-type: none"> During March-May 2020, 17 French nursing homes organized staff confinement periods with residents 24 hours a day and 7 days a week, to reduce the risk of entry of the SARS-CoV-2 virus into their facilities, in a context where visits to residents were prohibited.

	on English flag in top right to read article in English]		<ul style="list-style-type: none"> • Authors observed that 16 nursing homes (94%) had no cases of COVID-19 among the residents, and that mortality from COVID-19 was very low compared to that recorded at the national level by Santé Publique France. • The number of cases of Covid-19 among the staff of these nursing homes was also lower than that recorded by Santé Publique France.
03.09.2020	Care Aides Working Multiple Jobs: Considerations for Staffing Policies in Long-Term Care Homes During and After the COVID-19 Pandemic	Journal of the American Medical Directors Association / Letter	<ul style="list-style-type: none"> • Authors comment on implications of and problems caused by the single-site order restricting health care aides to working at only 1 site to control the Covid-19 spread.
04.09.2020	Family members' concerns about relatives in long-term care facilities: Acceptance of visiting restriction policy amid the COVID-19 pandemic	Geriatrics & Gerontology International / Article	<ul style="list-style-type: none"> • This study aimed to explore family members' concerns for their relatives during the lockdown period, assess their level of acceptance of the visiting restriction policy and determine the associated factors. • Most family members visited the residents at least once a week (72.4%) before the lockdown. • The most common concerns of the 156 family members for their relatives were psychological stress (38.5%), followed by nursing care (26.9%) and daily activity (21.1%). • Nearly 84.6% of those interviewed accepted the visiting restriction policy, and a higher satisfaction rating independently associated with acceptance of the visiting restriction policy.
05.09.2020	A study of universal SARS-CoV-2 RNA testing of residents and staff in a large group of care homes in South London	Journal of Infectious Diseases / Article	<ul style="list-style-type: none"> • Combined nose and throat swab testing for SARS-CoV-2 RNA was carried out in 2455 residents and staff across 37 care homes in the London Borough of Bromley across a three-week period. Results were reported within 24 hours of sample delivery and data were collected on the presence or absence of symptoms. • Overall, the point prevalence of SARS-CoV-2 infection was 6.5% with a higher rate in residents (9.0%) than in staff (4.7%). A key finding was the high proportion of asymptomatic infection detected in staff (69%) and residents (51%) with evidence of under-detection of symptoms by care home staff. • The high proportion of asymptomatic infection combined with under detection of symptoms by care home staff indicates that offering a test to all residents and staff in care homes with rapid reporting of results

			would assist accurate identification of infected individuals, facilitating prompt infection prevention and control action.
06.09.2020	Three-Tiered COVID-19 Cohorting Strategy and Implications for Memory Care	Journal of the American Medical Directors Association / Article	<ul style="list-style-type: none"> • This report summarizes experience of implementing facility-wide point-prevalence testing and three-tiered cohorting during a SNF outbreak of SARS-CoV-2 in a SNF is a mix of post-acute and long-term care. It has 200 beds on four floors including one memory-care unit floor. • Used a step-wise guide to direct the three-tier cohorting based on the results of 30 point prevalence testing administered at the onset of the outbreak and individual exposure risk. The strategy resulted in three separate cohort groups: positive (red), negative-cleared (green), and negative-exposed (yellow).
07.09.2020	Learnings to Operate LTC Better from the COVID-19 Crisis	Geriatric Nursing / Article	<ul style="list-style-type: none"> • Discusses some of the problems of Covid-19 in long-term care, such as problems caused by social isolation, plus stress and anxiety around catching and spreading the virus. • Discusses medication management and deprescribing. • Gives guidance to healthcare workers.
07.09.2020	Factors Associated with Nursing Homes' Late Participation in COVID-19 Reporting	Journal of the American Geriatrics Society / Research Letter	<ul style="list-style-type: none"> • From 31 May nursing homes were required to report COVID-19–related cases and deaths to the Centers for Disease Control and Prevention. • 15,418 (11.5%) of nursing homes did not follow the requirement to report the COVID-19 data. Starting on June 7, 2020, nursing homes that did not submit COVID-19 data would receive a warning notice of \$1,000 with \$500 for each additional week. • Smaller and nonchain nursing homes, as measured by average residents' daily census, were less likely to report COVID-19 data. Nonchain nursing homes may lack resources to conduct reporting, and they were more likely to have COVID-19 cases. Additional support may be needed to help small and nonchain nursing homes to make sure they have sufficient resources to comply.
09.09.2020	Decision-making for receiving paid home care for dementia in the time of COVID-19: a qualitative study	BMC Geriatrics / Article	<ul style="list-style-type: none"> • The aim of this study was to explore the decision-making processes of continued paid home care support for dementia in the time of COVID-19. • Fifteen unpaid carers, who were also accessing paid care support for the person living with dementia before COVID-19, were included in the analysis.

			<ul style="list-style-type: none"> • Thematic analysis identified three overarching themes: (1) Risk; (2) Making difficult choices and risk management; and (3) Implications for unpaid carers. Many unpaid carers decided to discontinue paid carers entering the home due to the risk of infection, resulting in unpaid carers having to pick up the care hours to support the person living with dementia. • Findings raise implications for providing better PPE for paid carers, and to support unpaid carers better in their roles.
--	--	--	---

Preprints (non-peer reviewed)

Publication date	Title / URL	Journal / Article type	Digest
01.09.2020	COVID-19 infection dynamics in care homes in the East of England: a retrospective genomic epidemiology study	MedRxiv / Article	<ul style="list-style-type: none"> • Between 26 Feb and 10 May 2020, a total of 7,406 COVID-19 positive samples from 6,600 patients in the East of England were identified, of which 1,167 (18.2%) were residents from 337 care homes. • 30/71 (42.3%) care home residents tested at Cambridge University Hospitals NHS Foundation Trust died. • Genomes were available for 700/1,167 (60%) residents from 292 care homes, and 409 distinct viral clusters were defined. • The authors identified several probable transmissions between care home residents and healthcare workers.
09.09.2020	Healthcare workers in elderly care: a source of silent SARS-CoV-2 transmission?	MedRxiv / Article	<ul style="list-style-type: none"> • 621 HCWs with mild respiratory symptoms working in 4 organisations in elderly care in the South-East Netherlands. • 133/615 (21.6%) HCWs tested positive for SARS-CoV-2, ranging from 15.6 to 44.4% per elderly care organisation, and from 0 to 64.3% per separate location of the organisations, respectively. 74.6% of tested HCWs were nursing staff, 1.7% elderly care physicians, 20.3% other HCWs with patient contact and 3.4% HCWs without patient contact.

			<ul style="list-style-type: none"> • Whole genome sequencing of 22 samples in 2 facilities strongly suggests spread within facilities. • We found a high SARS-CoV-2 prevalence among HCWs in nursing homes and district nursing, supporting the hypothesis of undetected spread within elderly care facilities. Structural testing of elderly care HCWs, including track and trace of contacts, should be performed to control this spread, even when only mild symptoms are present.
--	--	--	---

Reports and other publications

Publication date	Title / URL	Author(s)	Digest
27.08.2020	Restoring trust: COVID-19 and the future of long-term care in Canada	Facets Journal / Report	<ul style="list-style-type: none"> • This paper reports the findings of the COVID-19 Long-Term Care (LTC) working group addressing a preferred future for LTC in Canada, with a specific focus on COVID-19 and the LTC workforce. • Addresses the research context and policy environment in Canada's LTC sector before COVID-19 and then summarizes the existing knowledge base for integrated solutions to challenges that exist in the LTC sector • Outlines vulnerabilities exposed because of COVID-19, including deficiencies in the LTC sector that contributed to the magnitude of the COVID-19 crisis. Focuses especially on the characteristics of older adults living in nursing homes, their caregivers, and the physical environment of nursing homes as important contributors to the COVID-19 crisis. • Includes nine recommendations for action to help solve the workforce crisis in nursing homes.
29.08.2020	COVID-19 mortality and long-term care: a UK comparison	International Long Term Care Policy Network	<ul style="list-style-type: none"> • Report presents comparable data and statistics on the effect of COVID-19 within long-term care (LTC) settings in the UK, with a focus on care homes. • Provides a background to LTC policy and provision in the UK.

			<ul style="list-style-type: none"> • Outlines the ways each of the UK nations records COVID-19 mortality and the data sources for each. Highlights the additional sources of mortality data on care home residents that are comparable across the four nations. • Describes the path of the pandemic throughout the UK, presenting data on COVID-19 mortality and the impact of COVID-19 within care homes. • Presents data on excess mortality – as one of the key metrics to assess the mortality impact of the pandemic and to make robust comparisons between countries – across the UK and by location of death. • Highlights the testing regimes and their evolution. • Comments on the impact of COVID-19 within the care at home setting.
03.09.2020	Carol Munt: Stop the harsh blanket ban on visitors in hospitals and care homes	BMJ Opinion / blog post	<ul style="list-style-type: none"> • Care homes have experienced a worse time than was necessary due to the lack of testing, which meant that older patients were discharged from hospital back into care homes without adequate testing for Covid-19. Care homes also faced inadequate supplies of PPE. Rapid changeover of staff, many from agencies, made things even worse. In addition, and like the NHS, there is no uniformity among care homes apart from the need to be profitable for their owners. • In the same way that we wouldn't stop prescribed medication and treatments, we should not stop visits. • Asks questions to those involved in decision making: <ul style="list-style-type: none"> ○ Why do we still have such variation in compassionate care across the country? ○ Why were decisions taken without any consideration for the need of patients and their families to connect?
09.09.2020	A social care cap must sit alongside reform to the entire system	Nuffield Trust / blog post	<ul style="list-style-type: none"> • Discusses one possible solution to social care's problems; a cap on how much an individual would have to pay towards their care over a lifetime.

Guidance

Publication date	Title / URL	Author(s)	Digest
Updated 02.09.2020	Guidance for Registered Nurses performing sampling for COVID-19 in Residential Care Facilities	Health Protection Surveillance Centre	<ul style="list-style-type: none"> Updated guidance which applies to registered nurses performing sampling for detection of COVID-19 in RCFs.
Updated 03.09.2020	Coronavirus (COVID-19): adult care homes visiting guidance	Scottish Government	<ul style="list-style-type: none"> This guidance sets out how care home visiting may be re-introduced while minimising the risks to residents, staff and visitors. From 7th September, non-essential services should be able to resume visiting residents in care homes, provided relevant risk assessments have been undertaken by care homes and approved by the local Director of Public Health. Also sets out recommended actions for the safe resumption of communal and group activities, which should restart on or after 7th September on approval of risk assessments by local Director of Public Health. Recommended arrangements to safely resume respite care are also outlined, to support family and unpaid carers to have valuable breaks.

Statistics

Publication date	Title / URL	Author(s)	Digest
08.09.2020	Number of deaths in care homes notified to the Care Quality Commission, England	Office for National Statistics & Care Quality Commission	<ul style="list-style-type: none"> Provisional counts of deaths in care homes caused by the coronavirus (COVID-19) by local authority up to week ending 4 September.
09.09.2020	Coronavirus (COVID-19): adult care homes - additional data	Scottish Government	<ul style="list-style-type: none"> Weekly data on COVID-19 in adult care homes in Scotland up to 6 September, including: Testing for COVID-19 in adult care homes in Scotland split by care homes with confirmed Covid-19 and without confirmed Covid-19, presented by NHS Health Board;

			<ul style="list-style-type: none"> Deaths reported to Care Inspectorate - the number of deaths reported by adult care homes, including COVID-19 and non-COVID-19 related deaths.
--	--	--	---

Editorials and News

Publication date	Title / URL	Author(s)	Digest
03.09.2020	Covid-19: Charity to challenge rules on visits to care homes	BMJ / News	<ul style="list-style-type: none"> The UK charity John's Campaign has instructed lawyers to ask for a judicial review of government guidance that restricts family visits to loved ones in care homes. John's Campaign, which campaigns for family members to be included in their loved ones' care, said that its case for a judicial review against the visiting guidance was based on the belief that family members were not visitors but were integral to care home residents' wellbeing and happiness. The charity said that that government guidance had fundamental flaws that were "rooted in the government's failure to take account of human rights." It said, "there is no emphasis on the importance of meeting the individual needs and choices of care home residents, many of whom are living with dementia—a disability as well as a terminal illness.
04.09.2020	COVID-19 in long-term care facilities in South Africa: No time for complacency	South African Medical Journal / Editorial	<ul style="list-style-type: none"> A preliminary analysis of data submitted by 19 long-term care facilities was conducted on 25 August 2020. A combined total of 837 individuals tested positive for COVID-19, including 502 residents (representing 10% of the 4 825 residents) and 335 staff (representing 12% of the 2 657 staff) in those facilities. The median (interquartile range) age of residents diagnosed with COVID-19 was 58 (42 - 71) years and that of staff 42 (35 - 50) years. There were 447 females reported as COVID-19 cases (53%).

			<ul style="list-style-type: none"> • Among the 770 cases with comorbid conditions (92%), the most common were hypertension (n=163; 21%) and diabetes (n=60; 8%). • Of the 502 residents, 375 (75%) recovered, 53 (10%) died and 74 (15%) remained active cases as of 25 August 2020. Of the 335 staff, 318 (95%) recovered, 4 (1%) died and 13 (4%) remained active cases as of the same date. • Propose recommendations in 3 key areas: <ul style="list-style-type: none"> ○ Infection prevention and control ○ Early identification of cases ○ Clinical management and early referral where required.
08.09.2020	Care during Covid-19 must be humane and person centred	BMJ / Editorial	<ul style="list-style-type: none"> • Comments on the lack of person-centered care and the blanket application of restrictive visiting rules that have prevented families from visiting sick or dying relatives, and inhibited much needed comfort and support for those with physical or learning disabilities, mental health problems, or dementia.