Weekly Care Homes Evidence Digest

Prevention and control of COVID-19 in home care/care homes settings
14th January 2021

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: from the USA, evidence of the moderating effect of old age on the impact of COVID-19 on mental health; importance of communication in end of life care; and further evidence of the value of whole genome sequencing in understanding outbreaks of COVID-19 in long term care facilities; from Canada, the potential for social interventions to mitigate the impact of COVID-19 related isolation and loneliness; from the UK, a review of international discharge criteria for hospitalised patients with COVID-19; and an evaluation of risk communication strategies for the roll out of COVID-19 vaccination across Europe. Finally, summaries of recently published reports, guidance and statistics.
### Peer-Reviewed Articles

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| 19.09.2020       | The need for improved discharge criteria for hospitalised patients with COVID-19—implications for patients in long-term care facilities | Age and Ageing / Article | - In the COVID-19 pandemic, patients who are older and residents of long-term care facilities (LTCF) are at greatest risk of worse clinical outcomes.  
- This study reviewed discharge criteria for hospitalised COVID-19 patients from 10 countries with the highest incidence of COVID-19 cases as of 26 July 2020.  
- The authors’ recommend a unified, simpler discharge criteria, based on current studies which suggest that SARS-CoV-2 loses its infectivity by 10 days post-symptom onset.  
- In asymptomatic cases, this can be taken as 10 days after the first positive PCR result, with additional days of isolation beyond this to be left to the discretion of individual clinician.  
- This represents a practical compromise between unnecessarily prolonged admissions and returning highly infectious patients back to their care facilities, and is of particular importance in older patients discharged to LTCFs, residents of which may be at greatest risk of transmission and worse clinical outcomes. |
| 09.12.2020       | COVID-19 worries and mental health: the moderating effect of age | Aging and Mental Health / Article | - Older age (60+ years) increases the risk of contracting and dying from coronavirus disease 2019 (COVID-19), which might suggest worse mental health for those in this age range during the pandemic.  
- However, older age is generally associated with better emotional well-being, despite increased likelihood of negative events (e.g. death of a spouse) with age.  
- This study examined whether age moderated the relation between COVID-19 worries and mental health.  
- In conclusion, this study found that older age may buffer against the negative impact of the COVID-19 pandemic on mental health, but more research is necessary to understand the potential protective nature of age during the pandemic, as well as the recovery period. |
<p>| 24.12.2020       | Clinical Presentation, Course, and Risk Factors Associated with Pathogens / Article | - This study describes a rapidly escalating COVID-19 outbreak among 116 LTCF residents in Rhode Island, USA. |</p>
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| 14.01.2021 | Mortality in a Severe Outbreak of COVID-19 in Rhode Island, USA, April–June 2020 |                                                                                           | - Overall, 111 (95.6%) residents tested positive and, of these, 48 (43.2%) died.  
- The most common comorbidities were hypertension (84.7%) and cardiovascular disease (84.7%).  
- A small percentage (9%) of residents were asymptomatic, while 33.3% of residents were pre-symptomatic, with progression to symptoms within a median of three days following the positive test.  
- While typical symptoms of fever (80.2%) and cough (43.2%) were prevalent, shortness of breath (14.4%) was rarely found despite common hypoxemia (95.5%).  
- The majority of patients demonstrated atypical symptoms with the most common being loss of appetite (61.3%), lethargy (42.3%), diarrhea (37.8%), and fatigue (32.4%).  
- Many residents had increased agitation (38.7%) and anxiety (5.4%), potentially due to the restriction measures or the underlying mental illness.  
- Overall, the clinical features of the disease in this population can be subtle and the symptoms are commonly atypical.  
- However, clinical decline among those who did not survive was often rapid with patients expiring within 10 days from disease detection.  
- Further studies are needed to better explain the variability in clinical course of COVID-19 among LTCF residents, specifically the factors affecting mortality, the differences observed in symptom presentation, and rate of clinical decline. |
| 04.01.2021 | Risk Factors Associated With All-Cause 30-Day Mortality in Nursing Home Residents With COVID-19 | JAMA Internal Medicine / Original Investigation                                           | - This study was undertaken to identify risk factors for 30-day all-cause mortality among US nursing home residents with COVID-19.  
- The cohort study was conducted at 351 US nursing homes among 5256 nursing home residents with COVID-19–related symptoms who had severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection confirmed by polymerase chain reaction testing between March 16 and September 15, 2020.  
- In this study of nursing home residents with COVID-19, increased age, male sex, and impaired cognitive and physical function were independently associated with mortality. |
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| 05.01.2021 | End-of-life care in the time of COVID-19: Communication matters more than ever | Journal of Pain and Symptom Management / Article | - Understanding these risk factors can aid in the development of clinical prediction models of mortality in this population.  
- The COVID-19 pandemic resulted in visitation restrictions across most healthcare settings, necessitating the use of remote communication to facilitate communication among families, patients and healthcare teams.  
- This study found that effective remote communication with the patient and the healthcare team, was associated with significantly better ratings of the overall experience of end-of-life care by bereaved family members.  
- These findings offer timely insights into the importance of remote communication strategies. |
- Communication between patients, families, and healthcare teams at the end of life remains critically important during times of limited in-person visitation.  
- Families report that low-quality communication causes profound distress that can affect the quality of dying and bereavement.  
- Innovative strategies are needed to ensure that high-quality communication occurs despite pandemic-related visitation restrictions. |
| 06.01.2021 | Compress the curve: a cross-sectional study of variations in COVID-19 infections across California nursing homes | BMJ Open / Original Research             | - Nursing homes’ residents and staff constitute the largest proportion of the fatalities associated with COVID-19 epidemic.  
- Although there is a significant variation in COVID-19 outbreaks among the US nursing homes, it is still not known why such outbreaks are larger and more likely in some nursing homes than others.  
- This research aims to understand why some nursing homes are more susceptible to larger COVID-19 outbreaks.  
- The research found that the size of COVID-19 outbreaks in nursing homes is associated with their ratings and governance features.  
- To prepare for the possible next waves of COVID-19 epidemic, policy makers should use these insights to identify the nursing homes who are more likely to experience large outbreaks. |
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| 06.01.2021 | The effects of the COVID-19 pandemic on people with dementia                   | Nature Reviews Neurology / Article | • The COVID-19 pandemic has posed unique risks to people with Alzheimer disease and dementia.  
• Research from 2020 has shown that they have a relatively high risk of contracting severe COVID-19, and are also at risk of neuropsychiatric disturbances as a result of lockdown measures and social isolation. |
| 06.01.2021 | The Effects of the COVID-19 Pandemic on the Lived Experience of Diverse Older Adults Living Alone With Cognitive Impairment | The Gerontologist / Article       | • Even before the COVID-19 pandemic, older adults with cognitive impairment living alone (an estimated 4.3 million individuals in the United States) were at high risk for negative health outcomes.  
• There is an urgent need to learn how this population is managing during the pandemic, and findings underscore the need to expand access to home care aides and mental health services for this population. |
| 07.01.2021 | Control of a COVID-19 outbreak in a nursing home by general screening and cohort isolation in Germany, March to May 2020 | Eurosurveillance / Article        | • This description of a successful control of a COVID-19 outbreak in a nursing home may support others in similar efforts.  
• The combination of general SARS-CoV-2 screening and consistent cohorting of residents who tested positive or negative proved to be a laborious but powerful approach to outbreak control.  
• Skilled and motivated staff, focused medical responsibilities, vigorous support by the community in the frame of emergency state legislation and structures, and sufficient PPE and testing capacities are crucial for controlling an outbreak in this vulnerable setting. |
| 08.01.2021 | Clinician experiences delivering dementia caregiver support services during COVID-19 | American Journal of Geriatric Psychiatry / Correspondence | • The COVID-19 pandemic caused widespread disruptions across healthcare systems, including for people living with dementia and families who care for them.  
• In particular, the pandemic may have disrupted critical support services for dementia family caregivers who often face significant financial, social, emotional and physical strain.  
• The authors examine the extent to which clinicians caring for individuals with dementia in the Veterans Health Administration used telehealth to maintain family caregiver support services through the initial COVID-19 surge. |
| 08.01.2021 | COVID-19 vaccine rollout risk communication strategies in Europe: a rapid response | Journal of Risk Research / Article  | • This paper evaluates current communication strategies on vaccine rollouts in several European nations: the UK, France, Germany, Sweden and Switzerland.  
• Following an outline of the history of vaccination issues and unique public vaccine hesitancy profiles in each nation, an overview on current |
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| 10.01.2021| Coping of Older Adults in Times of Covid-19: Considerations of Temporality Among Dutch Older Adults | The Journals of Gerontology: Series B / Article                                      | • Older adults describe this crisis consistently with earlier findings from disaster studies.  
• They use known coping strategies, but emphasize the duration in relation to their expectation of temporality.  
• This underscores a dynamic, processual approach towards coping that incorporates temporal dimensions such as duration and order.  
• The findings in this study stress the importance of acknowledging heterogeneity among older adults and adjusting communication about mitigation measures to decrease insecurity and increase resonance.  
• This may make COVID-19 mitigation measures more manageable and age-responsible and allow older adults to start living again. |
| 11.01.2021| Age in the Time of COVID-19: An Ethical Analysis                      | Aging and disease / Commentary                                                     | • The authors conclude that age should never be used as a unique criterion for withholding/not initiating life-saving procedures, even in pandemics or cases in which healthcare resources are extremely scarce.  
• This approach is based on fundamental Codes of Ethics, such as the WMA Code of Ethics or the Oath of Hippocrates and all physicians treating patients should obey them. |
<p>| 11.01.2021| Palliative Care for Older Adults with Multimorbidity in the Time of COVID 19 | Journal of Aging and Social Policy / Article                                       | • Since COVID, many palliative care providers have become more accessible through telehealth; however, older adults may have challenges with technology and require caregiver involvement to use. |</p>
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| 04.01.2021      | Epidemiological analysis of 3,219 COVID-19 outbreaks in the state of Baden-Wuerttemberg, Germany. | Research Square / Article | • The severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) pandemic has emerged as an unprecedented global crisis challenging health systems.  
• The dynamic nature of the pandemic warrants ongoing characterisation and assessment of outbreak settings to identify groups at greatest risk, to establish early measures to curb transmission.  
• The increase in the number of outbreaks and in the number of cases per outbreak in high-risk settings, specifically in care homes after the 40th week highlights the imperative of controlling transmission in vulnerable populations. |
| 08.01.2021      | Utilization of Whole Genome Sequencing to Understand SARS-CoV-2 Transmission Dynamics in Long-Term Care Facilities, | MedRxiv / Article | • Congregate settings and high-density workplaces have endured a disproportionate impact from COVID-19.  
• In order to provide further understanding of the transmission patterns of SARS-CoV-2 in these settings, whole genome sequencing (WGS) was performed on samples obtained from 8 selected outbreaks in Minnesota from March – June, 2020. |

**Preprints**

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| 12.01.2021      | Changes of perceptions and behaviours during the phases of COVID-19 pandemic in German elderly people with neurological disorders: an observational study using telephone interviews | BMJ Open / Original Research | • This study aimed to describe perceived limitations in everyday life, psychological burden and approval to easing of measures during the COVID-19 phases in elderly people with neurological disorders.  
• While limitations in daily life decreased during the study period, anxiety remains a common psychological burden in elderly sick people, and this needs special attention.  
• Most people do not approve easing of measures, and special strategies are needed to cope with changing measures during the COVID-19 pandemic. |

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**Digest**

- In the inpatient setting, palliative consult teams have assumed a greater role in daily communication with families who cannot visit the patient and in providing emotional support to front-line colleagues.
- Busy primary clinicians have embraced these efforts, but challenges remain to sustaining these changes.
Correctional Facilities and Meat Processing Plants in Minnesota, March – June 2020

- Among the sequenced specimens, three LTCFs and both correctional facilities had spread associated with a single genetic sequence, and a fourth LTCF had outbreak cases associated with two distinct sequences.
- In contrast, cases associated with outbreaks in the two meat processing plants represented multiple SARS-CoV-2 sequences.
- These results suggest that a single introduction of SARS-CoV-2 into a facility can result in a widespread outbreak, and early identification and cohorting of cases, along with continued vigilance with infection prevention and control measures is imperative.

Ageing, Social Distancing, and COVID-19 Risk: Who is more Vulnerable?

- This article considers the moderating role of social relationships as a potential influence on stress resilience, allostatic load, and vulnerability to infection and adverse health outcomes in the elderly population.
- Understanding the mechanisms how social support enhances resilience to stress and promotes mental and physical health into old age will enable new preventive strategies.
- Targeted social interventions may provide effective relief from the impact of COVID-19-related isolation and loneliness.
- In this regard, a pandemic may also offer a window of opportunity for raising awareness and mobilizing resources for new strategies that help build resilience for our ageing population and future generations.

### Reports and other publications

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<tr>
<td>06.01.2021</td>
<td>Priority groups for coronavirus (COVID-19) vaccination: advice from the JCVI, 30 December 2020</td>
<td>Department of Health and Social Care</td>
<td>Advice from the Joint Committee on Vaccination and Immunisation (JCVI) on the groups that should be prioritised for vaccination.</td>
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<td>11.01.2021</td>
<td>UK COVID-19 vaccines delivery plan</td>
<td>Department of Health and Social Care</td>
<td>How the UK government was able to build up a supply of vaccines and how it is planning to deploy them.</td>
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## Guidance

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<tr>
<td>06.01.2021 (updated)</td>
<td>Coronavirus (COVID-19): getting tested</td>
<td>Department of Health and Social Care</td>
<td>• Guidance on coronavirus testing, including who is eligible for a test and how to get tested.</td>
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<td>11.01.2021 (updated)</td>
<td>Coronavirus (COVID-19) testing: privacy information</td>
<td>Department of Health and Social Care</td>
<td>• Privacy notice for NHS Test and Trace virus testing for all users of the service.</td>
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<td>11.01.2021 (updated)</td>
<td>Coronavirus (COVID-19): providing home care</td>
<td>Department of Health and Social Care</td>
<td>• Information for those providing personal care to people living in their own home during the coronavirus outbreak.</td>
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<td>11.01.2021 (updated)</td>
<td>Coronavirus (COVID-19): support for care homes</td>
<td>Department of Health and Social Care and Helen Whately MP</td>
<td>• Sets out the support package to keep care homes safe during the coronavirus pandemic.</td>
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<td>11.01.2021 (updated)</td>
<td>COVID-19 Guidance on visits to Long Term Residential Care Facilities (LTRCFs)</td>
<td>Health Protection Surveillance (Ireland)</td>
<td>• Guidance information on visiting Long Term Residential Care Facilities (LTRCFs).</td>
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## Statistics

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<td>12.01.2021</td>
<td>Number of deaths in care homes notified to the Care Quality Commission, England</td>
<td>Office for National Statistics, Care Quality Commission</td>
<td>• Provisional counts of deaths in care homes caused by the coronavirus (COVID-19) by local authority.</td>
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### State COVID-19 Data and Policy Actions

**Date:** 12.01.2021

**Source:** KFF (Kaiser Family Foundation)

- Explore United States state-level data on a variety of COVID-19 metrics, including the latest hotspots, cases and deaths by race and ethnicity and at long-term care facilities.
- Find up-to-date information on state policy actions on social distancing measures and reducing barriers to COVID-19 testing and treatment.

### Coronavirus (COVID-19): adult care homes – additional data

**Date:** 13.01.2021

**Source:** Scottish Government

- Weekly data on COVID-19 in adult care homes in Scotland.

### Editorials and News

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- The author of the letter commends the authors’ of the report for highlighting the link between frailty and inflammation and increased mortality, especially in patients with COVID-19, and makes further additional comments related to this topic. |
| **05.01.2021**   | COVID-19 in Community-Based LTCFs: Successful Strategies for Abatement at One VA Healthcare System | Journal of the American Geriatrics Society / Letter | - This letter describes the strategies used at one VA facility, which includes a “Strike Force” team that can quickly visit the site to perform tests for the coronavirus on all veterans based at that facility. |