

Health and social care update and guidance during COVID-19





At Connect2Care, we understand that the COVID-19 (Coronavirus) outbreak will have put you and your teams under increased pressure and demands. As a result of the outbreak, there continues to be a lot of changes to legislation and processes designed to help our industry navigate through this extremely difficult time.

To support you as best we can and help you save valuable time, we've created a 15-minute [video](#) which explains the latest Government advice in a simple and easy to understand way. In the video, our National Sector Lead for Health and Social Care, Lindsey Appleby-Flynn, walks through the updates and provides useful advice for implementing the changes.

This guide contains a summary of the main points raised in the accompanying [video](#).

Connect2Care's signposting sheet

It can be difficult to know where to turn to for help and support during the COVID-19 outbreak. There can be a lot of conflicting advice out there, which can make things seem all the more overwhelming.

We've created a comprehensive signposting sheet which will help point you in the right direction if you need support during this unprecedented time. This will be frequently updated with any changes that may impact on our sector, so do check back on a regular basis.



The Coronavirus Act 2020

The Coronavirus Act 2020, which became law on 25th March 2020, allows ministers to suspend key Care Act 2014 duties. This means assessment, care planning and review duties will be temporarily stopped and councils will only have to meet needs to prevent human rights breaches.

The Coronavirus Act 2020 weakens section 18 and 20 of the Care Act 2014 in relation to unmet needs of service users and carers. This has raised some concerns and experts continue to debate the best way to implement these changes to maintain the safety of everyone involved.

Changes have also been made to the Deprivation of Liberty Safeguards (DoLS), under the Mental Capacity Act 2005. This allows Social Workers to carry out assessments and reviews over the telephone or video calls.





Personal protective equipment (PPE)

[The Government has also issued advice on the use of personal protective equipment \(PPE\) during the COVID-19 outbreak period.](#) The advice follows the standard patient and public involvement (PPI) and infection control recommendations.

Advice for primary care services

[The NHS has issued comprehensive advice to support primary care services and its workers.](#) Some of the guidance provided may be relevant to social care services, such as advice for completing telephone triage for those needing the support of primary care services, and information on patient transfers.



Advice for councils and care providers

[The Government has released guidance for councils and care providers to help delay the spread of COVID-19.](#)

Residential care services have been advised to work in collaboration with local authorities to identify how they can work to support each other, such as sharing workplaces, linking with primary and community health services, and the use of volunteers where safe.

The guidance contains detailed information about the effective use of:

- Tools to report bed vacancies (Capacity Tracker).
- Secure video and audio conferencing systems.
- Visiting policy reviews to stop or limit visitors.
- Implementing barrier nursing protocols for anyone showing symptoms of COVID-19.
- Personal protective equipment (PPE) and cleaning protocols and disposal.
- Personal protective equipment (PPE) procurement, including details of free PPE from the Government.
- Fluid repellent face masks, including details of free masks from the Care Quality Commission.

If any care provider has concerns about their supply of personal protective equipment, please contact the dedicated helpline on **0800 915 9964** or email: supplydisruptionservice@nhsbsa.nhs.uk.

There is also updated guidance on [Admission and Care of Residents during COVID-19 Incident in a Care Home](#) which covers:

- Admission of residents.
- Caring for residents depending on their Covid-19 status.
- Reporting of Covid-19 cases.
- Advice for staff.
- Supporting existing residents that may require hospital care.
- National support available to implement guidance.

Advice for supportive living providers

Public Health England has released guidance for providers of care and support delivered within supported living environments (people in their own homes), including for people with mental health conditions, learning disabilities or autistic adults.

They advise that supportive living providers should work in collaboration with local authorities to have a plan of action in place. They recommend that providers should ensure:

- ▶ All information about clients, their care needs and the number of hours required to support the client is kept up to date.
- ▶ Data relating to clients is shared lawfully between providers where necessary.
- ▶ Plans are in place to meet all commissioned care hours during the outbreak.
- ▶ They work with those who fund their own care to understand what levels of care they'll require during this period of uncertainty.

Additional guidance from Public Health England is available for home care workers.

Changes within the mental health sector

Short-term changes have been made to the Mental Health Act and associated protocols during the COVID-19 outbreak. There's likely to be a shortage of mental health staff available during the outbreak, and these changes will help to maintain the safety, care, and treatment of people severely affected by mental illness.

Due to an expected reduction in the number of available psychiatrists during the outbreak, only one psychiatrist is required to section a person, rather than two. Changes have also been made to mental health tribunals, such as having less panel members and allowing reviews via telephone.

A handful of temporary changes have been made to the Mental Health Act. This includes:

- ▶ Increasing the amount of time a voluntary patient can be held under Section 5.
- ▶ Increasing the amount of time the police can detain someone in a place of safety if they suspect mental ill health under Sections 135 and 136.
- ▶ Temporarily lifting the time limit that the court can hospitalise someone being tried for a crime under Sections 35 and 36 to undergo mental health assessment.
- ▶ Requiring just one doctor (rather than two) to implement the transfer of a prisoner to hospital for psychiatric treatment under Section 47. The Secretary of State for Justice will still need to consent to this transfer.
- ▶ Lifting the requirement for doctors to seek the approval of a second opinion approved doctor (SOAD) when treating someone against their will under various sections of the [Mental Health Act](#).

Detailed information about the temporary changes to the Mental Health Act during the COVID-19 outbreak can be found in the Connect2Care's signposting sheet.



Ethical framework for adult social care during COVID-19

During the COVID-19 outbreak, it may be necessary to make challenging decisions about the care that people receive. It's essential to make sure ethical values and principles are still met when making these decisions. Appropriate records must be kept of these decisions, along with their justifications.

When making key decisions or updating policies during COVID-19, these eight principles must be followed as part of the ethical framework for adult social care during COVID-19:

Reasonableness

Respect

Minimising harm

Inclusiveness

Accountability

Flexibility

Proportionality

Community

Further information about the definitions and application of each of the principles can be found in the Connect2Care signposting sheet.

Temporary changes to RIDDOR

The Health and Safety Executive has provided guidance for Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) for COVID-19 incidents.

During the COVID-19 outbreak, employers must only make a report under RIDDOR when:

- An unintended incident at work has led to someone's possible or actual exposure to coronavirus. This must be reported as a dangerous occurrence.
- A worker has been diagnosed as having COVID 19 and there is reasonable evidence that it was caused by exposure at work. This must be reported as a case of disease.
- A worker dies as a result of occupational exposure to coronavirus.

What to report:

■ Cases of disease: exposure to a biological agent:

If there is reasonable evidence that someone diagnosed with COVID-19 was likely exposed because of their work you must report this as an exposure to a biological agent using the case of disease report. An example of a work-related exposure to coronavirus would be a health or social care professional who is diagnosed with COVID-19 after treating patients or service users with COVID-19.

■ Work related fatalities:

If someone dies as a result of a work related exposure to coronavirus and this is confirmed as the likely cause of death by a registered medical practitioner then you must report this as soon as is practical and within 10 days of the death.

■ Dangerous occurrences:

If something happens at work which results in (or could result in) the release or escape of coronavirus you must report this as a dangerous occurrence. An example of a dangerous occurrence would be a lab worker accidentally smashing a glass vial containing coronavirus, leading to people being exposed.



Updates to CQC death notifications

The Care Quality Commission (CQC) have updated the Regulation 16 (death notification) reporting form during COVID-19.

To help understand the number of deaths that are occurring due to COVID-19, the form now allows you to indicate whether the death was a result of Coronavirus (either confirmed or suspected).

The updated Regulation 16 notification form should be used throughout the outbreak. Many care providers may have copies of the form saved locally on their computers – please check to make sure you are using the updated version. You can also bookmark the notification pages, or add them to your favourites, to ensure you are always able to access the most up-to-date form.

The information you provide will help develop a more accurate picture of the number of deaths due to COVID-19, which in turn will help CQC to work with system partners to mobilise the right level of support. It will also help inform the Government response, so it can put in place appropriate measures to support the health and social care system during this time.



Changes to DBS guidelines


Identities can now be checked remotely, without the need to see the physical evidence in person. This can be achieved by viewing the ID documents over a video call and receiving a scanned image of the ID documents in advance of the DBS check being completed.

Remote document checking should only be used in urgent cases where the usual method is not possible. The original documents must still be presented when meeting the person face-to-face.



Extension to First Aid Certificates

The Health and Safety Executive (HSE) and Department for Education have advised that first aid qualifications near expiry can be extended by up to three months. This is only if re-qualification is prevented by the COVID-19 outbreak. Both First Aid at Work (FAW) and Emergency First Aid at Work (EFAW) qualifications are included.





Government support for businesses and employees

[The Government has pulled together a comprehensive package of financial support for businesses impacted by COVID-19.](#)

Guidance and information is available for the following areas:

- ▶ Coronavirus Job Retention Scheme.
- ▶ Claiming back Statutory Sick Pay paid to employees with Coronavirus.
- ▶ Business rates relief.
- ▶ Business support grant funds.
- ▶ Support for small, medium and large businesses.

[The Government has provided support and advice for employees who have been impacted by COVID-19. Please share this guidance with your employees if needed.](#)

In addition, the Government has announced that workers on zero-hour contracts who are unable to work during the COVID-19 outbreak, can access Statutory Sick Pay (SSP) from day one of sickness. To top up their income, these workers can also access additional payments through Universal Credit if required.

Other sources for support and guidance

[The Government have launched a free to use WhatsApp service providing up-to-date and trustworthy information about COVID-19.](#) To use the service, add **07860 064422** to your phone contacts and message the word 'hi' in a WhatsApp message.

[Skills for Care, is offering a range of support, information and resources](#) for people who employ nurses, occupational therapists and social workers in adult social care on their website.

The [Local Government Association has information and guidance related to social care](#), including commissioning and supporting the provider market, and working collaboratively with health partners.

[Public Health England has a page dedicated to help those, working on the current coronavirus outbreak](#), to identify and access emerging evidence as it is published.

[Health Education England have created a free e-learning resource about COVID-19.](#) The programme includes key materials to help the health and care workforce respond to Coronavirus.

[Skills for Health have created a free e-learning Coronavirus \(COVID-19\) Awareness course.](#) In addition, [Skills for Health have comprehensive guidance relating to apprenticeships during the COVID-19 outbreak.](#)



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