



To: Renfrewshire Integration Joint Board

On: 24 June 2022

Report by: Head of Strategic Planning and Health Improvement

Heading: Chief Officer's Report

Direction Required to Health Board, Council or Both	Direction to:	
	No Direction Required	X
	2. NHS Greater Glasgow & Clyde	
	3. Renfrewshire Council	
	NHS Greater Glasgow & Clyde and Renfrewshire Council	

1. Summary

- 1.1. This report provides an update to the Integration Joint Board (IJB) on key operational activity, including the HSCPs operational response to COVID-19. The report focuses on developments and activity since the last IJB on 22 March 2022.
- 1.2. The impact of the pandemic will continue to fluctuate however the spread and severity of the virus appears to have significantly reduced and in response, the Scottish Government has scaled scale back the COVID-19 response as we move to an 'endemic' state.
- 1.3. This paper also provides an update on operational services, including the agreement across NHS Scotland to remove social distancing in most settings for Healthcare professionals, reflecting reduced infection rates and updated national guidance.
- 1.4. Considering the decreased infection rates, hospitalisations, and a move to a lower threat level, the HSCP anticipates that this report will be the last separate COVID update report to the IJB.

2. Recommendations

It is recommended that the IJB note:

 The implications of the Scottish Government's updated physical distancing quidance (Section 4); and The updates provided on COVID-19 services, the current impact of the pandemic on the provision of operational services and the extension of elements of financial support for Adult Social Care providers (Sections 5 to 12).

3. Background

- 3.1. At its last meeting, the IJB was updated on the increased spread of the Omicron variant between January and March 2022 attributable to the easing of restrictions. On 15 March 2022, 1,996 people were in hospital in Scotland, and average cases per day rose above 12,000.
- 3.2. In the intervening period, hospital occupancy and admissions have declined and decreased significantly as restrictions have eased further. As of 30 May 2022, there are 590 people in hospital in Scotland, and average cases per day have reduced below 1,000. For the majority the overall severity of illness from COVID-19 infection has reduced substantially.
- 3.3. On 18 April 2022, the Scottish Government ended the lateral flow device (LFD) offer for asymptotic testing. On 1 May 2022 the purpose of COVID-19 testing shifted from population wide testing to reduce transmission, to targeted testing and surveillance. Reported cases will no longer be representative of all COVID-19 cases in Scotland; the HSCP will therefore proceed with caution when comparing trends going forward.

4. Physical Distancing, Property and Accommodation

- 4.1 On 23 May 2022, NHSGGC removed social distancing in most settings. This decision will enable the HSCP to align distancing arrangements between NHSGGC and Renfrewshire Council, who have also recently reduced distancing. In doing so, the HSCP will adopt a cautious and phased approach to this transition over coming weeks to ensure the continued safety of all involved.
- 4.2 In response to these changes, work is underway across the HSCP to revise operational arrangements across the estate. To do this effectively, a range of connected factors will be considered and implemented to ensure an effective transition. Staff are also encouraged to follow the wider range of COVID-19 health and safety measures, including testing and wider infection, prevention, and control efforts to ensure safety of colleagues, patients, and service users.
- 4.3 The HSCP Senior Management Team are carefully considering the complexities and challenges of remobilising and reinstating services and work is also underway to address backlog maintenance and improvement works where necessary to ensure buildings are reopened safely.
- 4.4 Alongside this, the SMT are considering opportunities and longer-term working solutions relating to hybrid working arrangements. Informed by recent changes to guidance, and through the benefits realised in recent years, the HSCP will

continue to adapt different means and models of hybrid service delivery moving forward. A further update will brought to the IJB in September 2022 on the HSCP's wider Property Strategy, which will seek to capture these considerations and set out the HSCP's approach, with partners, to our utilisation of available property and accommodation in future.

5. Testing

- On 29 April 2022, the Scottish Government confirmed, in line with the <u>Test and Protect Transition Plan</u> that from 1 May 2022 there will no access to asymptomatic testing for COVID-19 and contract tracing will cease for health and social care staff. This follows the cessation of the routine asymptomatic testing for the public on 18 April 2022.
- For health and social care staff updated guidance applies to those who develop symptoms of respiratory infection; those with a positive test for COVID-19; and those who have a household member or overnight contact who has tested positive for COVID-19. Coming into effect on 1 May 2022, the guidance reflects the latest clinical public health advice and replaces that issued on 24 January 2022 and supports the updated 'Stay at Home' advice.

6. PPE

- 6.1 On 30 March 2022, the Scottish Government provided an update on support arrangements on PPE for social care providers, unpaid carers and personal assistance though the local PPE Hubs.
- The Adult Social Care PPE Steering Group, working with NSS and colleagues in wider social care, have agreed that the current PPE Hub arrangement will be extended and remain in place until 30 September 2022. Financial support arrangements for social care providers to cover additional costs related to PPE due to COVID-19 have also been extended to 30 June 2022.
- As care providers return to normal PPE supply routes, the Scottish Government will reconsider options for the ongoing offer of PPE through local PPE hubs. Over the next few weeks, policy leads at Scottish Government policy leads will work closely with partners to set out appropriate long-term solutions in this area.
- On 14 April 2022, the Chief Nursing Directorate issued updated guidance on the extended use of face masks and face coverings in hospitals, primary care, and wider community health care. This guidance supersedes the June 2021 update and be found here. The guidance has been updated to reflect:
 - The change from legislation to guidance for the wider use of face masks and face coverings in public spaces.
 - Updates to the Scottish Winter (21/22 Respiratory Infections in Health and Care Setting Infection Prevention and Control (IPC) Addendum as outlined in the de-escalation Directors Letter (DL (2022) 07).

• Updated wording for staff and patients/visitors reaffirming the continued use of face masks in healthcare settings.

7. Winter Flu and COVID-19 Vaccination Programmes

- 7.1. On 5 May 2022, the Chief Medical Officer confirmed that the adult seasonal flu immunisation programme 2022/23 will deliver an extended programme to the following groups:
 - Secondary school Pupils
 - All those ages 50-64 years
 - independent contractors (GP, dental, optometry and community pharmacy practices), non-NHS laboratory staff (if working on COVID-19 testing during the coming flu season) including support staff
 - Teachers and pupil facing support staff
 - Prison population and prison officers who deliver direct front facing detention services
- 7.1. The flu immunisation programme is a strategic and Ministerial priority, and the extension of the programme reflects changes previously made for Winter 2021/22. The JCVI has highlighted that lessons from COVID-19 has demonstrated that conditions can evolve very quickly, and impact on all aspects of public health, including global vaccine supply. Consequently, the Scottish Government will procure sufficient vaccine for the expanded eligibility groups this season to prioritise those most at risk.

COVID-19 Vaccination Programme

- 7.2. By 23 May 2022, almost 4.4 million people received their first COVID-19 vaccine, an estimated 90.3% of the population in Scotland aged 12 and over. Over 4.1 people received their second dose, an estimated 85.0% of the population 12 and older. Additional, almost 3.5 million people in Scotland received their vaccine dose, an estimated 73.0% of the population 12 and over.
- 7.3. On 19 May 2022, the Health Secretary confirmed that in addition to the current booster programme, over-65s, health and social care staff and clinical vulnerable adults aged 16-54 will be offered a further COVID-19 booster vaccine in Autumn 2022. This follows interim advice from the JCVI. NHSGGC have lead responsibility for mass vaccination clinics and will continue to deliver vaccinations to those coming forward. The HSCP will continue to lead on providing vaccinations within Care Homes and to the housebound.

8. Care Homes

8.1. There are 23 Care Homes for Older People in Renfrewshire, three of which are operated by the HSCP – Montrose, Hunterhill and Renfrew. These Care Homes continue to see infection levels fluctuate for staff and residents. Figures from late May showed that in the previous 14 days, no care home residents

have tested positive, with a low number of cases among staff. However, outbreaks continue to occur resulting in regular changes to this position.

8.2. Through enhanced governance arrangements, the HSCP continues to ensure a timely and robust response to identified infections, including the deployment of supporting resources where necessary and appropriate, and the provision of expert clinical and care support to residents. The Clinical and Care Governance oversight meetings convene weekly and will remain under review.

9. COVID-19: Information and Guidance for Care Home Settings (For older adults)

- 9.1. On 3 May 2022, Public Health Scotland published <u>information and guidance</u> for care home settings (for older adults). The guidance relates to the management of COVID-19 in support of those working in care home settings and services users as well as residential and respite for older people that are registered with the Care Inspectorate.
- 9.2. This guidance does not replace individual expert clinical judgment or local response arrangements, but designed to support the development of those arrangements while maintaining a reasonable expectation that health protection principles and national policy are supported and implemented in line with The Public Health etc. (Scotland) Act 2008.
- 9.3. On 10 May 20022, Public Health Scotland confirmed that there will be a transition away from the use of the Winter Respiratory Infection IPC addendum and return to the main National Infection Prevent and Control Manual (NIPCM) from 11 July 2022. As noted above, this reflects national changes to the ways in which COVID infections are managed, supporting the national policy of 'living with COVID'.

10. Day Support and respite

- 10.1. Day centres and respite services have continued to remain open to provide support to those in greatest need, supported by welfare calls, community outreach and digital engagement for those not currently attending a centre.
- 10.2. On 26 May 2022, the Scottish Government released updated guidance to support safe re-opening and delivery of building-based day services for adults (not applicable to children day services which are covered separately). The guidance sets out that building-based day services should return to prepandemic capacity wherever possible, while operating safely in line with COVID-19 guidance. Service users should follow 'COVID sense' and get vaccinated, stay at home if unwell with symptoms or have a fever and follow guidance set out by the Scottish Government.
- 10.3. Under the updated guidance, it is noted that there is no longer a legal requirement for physical distancing or face covering wearing in public settings, although mask face coverings remain recommended in indoor public places

and on public transport where it can be tolerated, as it minimises the risk of transmission of respiratory infections (including COVID-19) to others.

- 10.4. However, until July building-based day services are required to follow the Winter Respiratory Infections IPC guidance. This requires additional measures to be put in place to support the prevention of infection. Consequently, this impacts on the ability to reduce physical distancing at the current time. As noted in paragraph 9.3, the Scottish Government has confirmed that this guidance will be reduced from 11 July 2022, which will enable an increase in day centre capacity.
- 10.5. Work is underway with colleagues from Renfrewshire Councill Health and Safety team, Soft Facilities Management, Transport, and others to ensure readiness to increase access to services from the date that Infection Prevention and Control requirements change. All changes will be made in full agreement with Renfrewshire Council and will reflect available resources and staffing capacity.

11. Mental Health Inpatient Services

- 11.1. Mental Health inpatient services across Renfrewshire and NHSGGC continue to experience very high demand with the need for weekly NHSGGC wide Bed Management and Huddle meetings to manage current issues across the whole system.
- 11.2. The impact of COVID-19 infections on ward closures has reduced from a peak at the beginning of the year. However, at the time of reporting, Ward 37, RAH (Dementia Admission Ward), is currently closed to admissions due to a COVID-19 outbreak.
- 11.3. To mitigate the spread of COVID-19, patients admitted to Renfrewshire Mental Health wards continue to be tested for COVID-19 on date of admission and isolate for five days. There is no longer a requirement to re-test patients at day 5, if not displaying symptoms. From 16 May 2022 all clinical and non-clinical staff with direct contact to patients no longer require a PCR test but continue to test twice weekly using LFD testing kits.
- 11.4. The staffing position continues to be very challenging across mental health inpatient wards in NHSGGC. However, there has been some improvements in this within Renfrewshire with the number of vacancies halving over the last 18 months. Actions are in place to complement available staffing through use of the Nurse Bank, Agency staff and support, where possible and appropriate, from other services within the HSCP.
- 11.5. Adult and older adult mental health inpatients are now able to benefit from the support of two interchangeable visitors each day. Renfrewshire continues to provide flexibility wherever possible by arranging daily booking slots in all wards to ensure every patient has access to visitors for a limited period.

12. COVID-19 Financial Support for Adult Social Care Providers

- 12.1. On 13 June 2022 the Minister for Mental Wellbeing and Social Care wrote to Chief Officers and Chief Finance Officers to provide an update regarding the arrangements for COVID-19 financial support for Adult Social Care Providers. This funding has been in place since the outset of the pandemic and was previously extended to 30 June 2022.
- 12.2. The Minister has now confirmed that financial support will be extended beyond 30 June 2022 for two elements; (i) The Social Care Staff Support Fund which has been extended until 30 September 2022 and (ii) financial support arrangements relating to testing and vaccinations which has been extended until 31 March 2023.

Implications of the Report

- **1. Financial** No implications from this report.
- 2. HR & Organisational Development No implications from this report.
- **3. Community Planning** No implications from this report.
- **4. Legal** No implications from this report.
- **5. Property/Assets** No implications from this report.
- **6. Information Technology** No implications from this report.
- 7. **Equality and Human Rights** No implications from this report.
- **8. Health & Safety –** No implications from this report.
- **9. Procurement** No implications from this report.
- **10. Risk** Risks and issues arising during the COVID response and the Partnership's operational delivery are tracked and managed on an ongoing basis.
- **11. Privacy Impact** No implications from this report.

List of Background Papers: None

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