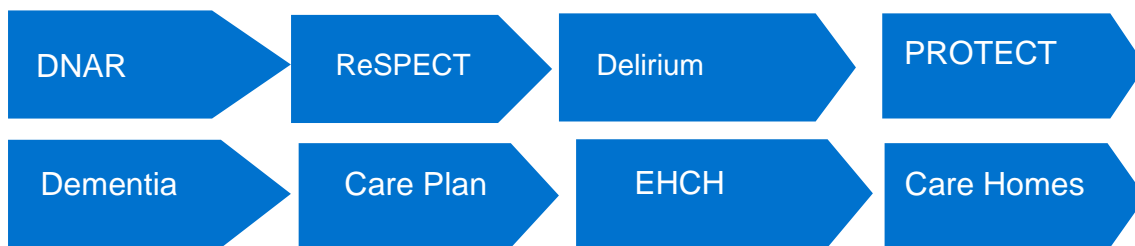


Friday 12th February 2021

Care Home Edition 11

Care@Home newsletter

Supporting people living with frailty and experiencing escalating needs during Covid-19



The Care@Home work stream is leading on the organisation of our COVID-19 response for care homes and the frail elderly at home in Bradford district and Craven.

We are working with key NHS, local authority, VCS and independent sector partners to keep as many people at home as possible and are working directly with care homes to support them in a different way for the next few months.

We are introducing practical pathways for managing people that get sick in care homes, and frail elderly who get sick in their own homes - with covid, or non-covid related illness.

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1. DNACPR and ReSPECT forms

What is Do Not Attempt Cardio Pulmonary Resuscitation?

When cardiac arrest occurs and we do not attempt to restart the heart but allow a natural death.

It should be noted that DNACPR does not mean that other appropriate and sometimes invasive treatments are not given e.g. painkillers, antibiotics, drugs for symptom control, feeding or hydration (by any route), investigations and treatment of a reversible condition

A DNACPR can be put in place where:

- A patient with capacity declines CPR
- A clinician considers that attempting resuscitation is likely to be futile (i.e. it will not work); and/or
- It is not in the patient's best interests (for example because they are unlikely to have a good quality of life even if resuscitation is successful).
- The decision as to whether CPR should be attempted is a medical decision and can only be made by a clinician. It cannot be overridden by a patient or a family member, even someone with legal power of attorney for health and welfare.

DNACPR and RESPECT forms

ReSPECT forms include instructions about attempting resuscitation and so a separate DNAR form is not required. If a resident has an old DNAR form that is fine and still stands until a ReSPECT form is put in place.

ReSPECT

Some residents will also have an Emergency Care Plan or ReSPECT documents detailing their wishes in an emergency. **If a ReSPECT form is in place that says a patient is not for resuscitation, a separate DNACPR form is not required.**

People can start their own plan with family or staff support. That initiated work is then checked, edited and signed off by an appropriate health care professional making it visible to all appropriate users including Urgent Care Services.

THINK

- Does the person have an Advance Care Plan?
- If not, could the person with support start a plan?

ASK

- The person if they would like to talk about their wishes and preferences if they become unwell. Involve those who matter to them in conversations
- The person if their advance care planning discussions can be shared

Further information on ReSPECT can be found here:

<https://www.resus.org.uk/respect>

2. Enhanced Health in Care Homes: A guide for care homes

The Care Provider Alliance has published [a guide for care homes](#) on the Enhanced Health in Care Homes (EHCH) service.

<https://careprovideralliance.org.uk/enhanced-health-in-care-homes-cpa-guide>

This guide provides advice for care home managers on how to support their residents to benefit from the service. It also provides information on how to work effectively with their Primary Care Network clinical lead to ensure the health of their residents is improved.

The guide was developed with NHS England and NHS Improvement's community services and ageing well team.

For more information on EHCH please visit [our workspace on Future NHS](#).

3. THINK DELIRIUM

Colleagues from Yorkshire and the Humber clinical network and West Yorkshire and Harrogate Health and Care Partnership have come together to work on a National Dementia pilot and have produced some THINK DELIRIUM resources.

<https://www.wyhpартnership.co.uk/our-priorities/mental-health/mental-health/dementia/raising-awareness-and-training-delirium>

Delirium is a condition where people have increased confusion, changes in thinking and a reduced attention span. Symptoms can develop quickly and often fluctuate during the day.

It can happen to anyone but there are some things that put a person at higher risk. These include older age, hearing and sight loss, a diagnosis of dementia, having multiple health problems, being in hospital with a broken hip or serious illness. Delirium is also known as 'acute confusion'. It is treatable - but if it is undetected then it can be a life-threatening condition.

The THINK DELIRIUM resources are aimed to increase general awareness of delirium in the hope that it can be prevented or treated quickly when found early so that any serious complications can be avoided.

E-Learning Module

A new e-learning module provides the baseline knowledge and skills required by all staff working in health and social care settings and also for those working in an individual's own home. It is also aimed at carers of people who may be more at risk of developing delirium.

<https://portal.e-lfh.org.uk/Component/Details/664995>

Delirium Dramas are acted out scenarios of people experiencing delirium in different setting, in the acute hospital, in a care home and in a domiciliary care setting. They should be a useful tool for skilled educators to use in delirium awareness sessions.

My Future Wishes

Associate Clinical Director for Frailty, Dementia and Learning Disability at Bradford District and Craven NHS Clinical Commissioning Group and GP with a Special Interest in Older People, Dr Sara Humphrey, said: "Recording and sharing information about delirium is key and our tool, My Future Wishes, provides a useful place for people in primary care and carers to share information about delirium with other health care professionals and the person's family.

Recording an episode of delirium in the tool will ensure others are aware of future risks once someone has had delirium, helping everyone to deliver the best and most appropriate care."

https://www.wyhpartnership.co.uk/application/files/2415/8885/4485/My_future_wishes_Advance_Care_Plan_May2020.pdf

4. Advance Care Planning and Bereavement Training Officer

West Yorkshire and Harrogate (WY&H) Health and Care Partnership Personalised Care Programme in collaboration with Wakefield Hospice, St Gemma's Hospice and Overgate Hospice are offering specialist training in advance care planning and bereavement support to our health, care and volunteer workforce, across West Yorkshire & Harrogate, to have better, person centered conversations with individuals, families and carers about advance care planning and bereavement.

COVID-19 has widened existing inequalities, and the impact of the virus has been particularly detrimental on people living in areas of greatest deprivation, people from Black, Asian and Minority Ethnic communities (BAME) and people with a learning disability to name but a few.

We are inviting applications from across the sector in particular those who have experience and expertise working with learning disabilities and/or BAME communities, to apply for this exciting opportunity.

(See Item 4.1 – ACP and Bereavement Support Facilitator Training Flyer; 4.2 – ACP Bereavement Support Application Form)

5. PROTECT TRIAL

PROTECT is a UK-wide clinical trial to identify treatments that can protect care home residents from developing COVID-19.

Residents in care homes have suffered greatly during the COVID-19 pandemic. Many potential treatments have been proposed that might prevent COVID-19 but none have been tested in care homes. PROTECT is a platform trial that will test one or more treatments with the aim of reducing the risk of care home residents catching the virus that causes COVID-19 and of developing severe disease. We will make the results of the study rapidly available to ensure that treatments can be introduced without delay and COVID-19 guidelines quickly updated.

People living in residential and nursing homes across the UK can take part, but first their care home must be part of the study. If you are a care home manager and want to take part, please complete this survey.

Further information about the study is available in this summary PLEASE VISIT www.protect-trial.net

6. Yorkshire and Humber Clinical Networks Dementia and OPMH whole system events – March 2021

The Dementia and Older People's Mental Health programme team will be running two whole system events in March to pull together the resources developed with the support of the Network and to share learning from staff who've contributed and implemented the resources in their local areas. We'll also be looking ahead at what's next.

At the second event, we'll be sharing the work that the Network has supported as part of the WYH HCP national dementia pilot.

Please hold these dates in your diaries and we'll circulate the links to book your place next week.

Both meetings will be held using Microsoft Teams.

- **Wednesday 10th March, 9.30-12.30pm**
- **Tuesday 23rd March, 9.30-1pm**

For Further information please contact:

Penny KirK

Quality Improvement Manager (Dementia and Older People's Mental Health)

Mental Health Clinical Networks

NHS England and NHS Improvement (NE and Yorkshire)

Email: penny.kirk@nhs.net Mobile: 07825 242493 web: www.yhscn.nhs.uk

Twitter: @YHSCN_MHDN and #yhdementia

7. Skills for Care

Standard of Education and Practice for Nurses New to Care Home Nursing

The Queen's Nursing Institute (QNI) was commissioned by NHS England and NHS Improvement (NHSE/I) to develop standards of education and practice which would support the transition of a Registered Nurse who is new to working in the Care Home sector.

For the purpose of this report the focus will be on Care Homes for older residents who require nursing care to be provided by the home.

https://www.skillsforcare.org.uk/Documents/Learning-and-development/Regulated-professionals/Registered-nurses/Standards-of-Education-and-Practice-for-Nurses-New-to-Care-Home-Nursing-2021.pdf?_cldee=YmV2LmdhbGxhZ2hlcjBicmFkZm9yZC5uaHMudWs%3d&recipientid=contact-7e232db840aee61194120050568779ad-15ed5fd1ce5f42cc979ee167be0b8b37&esid=0bcf7ea7-1666-eb11-a812-0022481a8863

8. Adult oral health in care homes: Toolkit

Public Health England and stakeholders have produced a toolkit to support care homes and commissioners to implement the **NICE guideline (NG48): Oral health for adults in care homes**.

<https://www.nice.org.uk/guidance/ng48>

The toolkit contains useful links for care home staff, residents, their families and friends to support good oral health and reduce oral health inequalities.

<https://www.gov.uk/government/publications/adult-oral-health-in-care-homes-toolkit>

9. Dementia Care mapping: Care home manager and staff need more support to improve care

Dementia Care Mapping (DCM), aims to improve practices in care homes for people living with dementia by asking staff to put themselves in the place of residents, through watching and

assessing residents' experiences. The observations are fed back to the staff team who work together to develop action plans to improve care.

A previous study found that DCM did not lead to improvements in homes. This follow-up study explores why. It finds that implementation is patchy and vulnerable to issues such as: staff and manager turnover; staff lack confidence or skills to lead changes in practice; and inadequate staffing and funds.

The **report** suggests that how well managers understand, value and engage with DCM has a key influence, as does their leadership style.

Please click on link for further reading:

<https://evidence.nihr.ac.uk/alert/dementia-care-mapping-dcm-more-support-care-home-managers/?source=chainmail>