

Undertaking Factual Reviews for Residents Who Acquired COVID-19 Within the Care Home Sector

Good Practice Guide

v1.1

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1. Purpose

This good practice guide is to support care home providers in Wales if they wish to conduct a factual review of cases where residents acquired COVID-19 whilst living in care homes. It is not a mandatory requirement for care home providers to use this good practice guide. However, it is intended to be a useful tool for care home providers wishing to reflect on their practice and experience during the pandemic and any learning arising from it. It may also be useful if responding to concerns raised by residents or their families.

NHS Wales is leading a separate National Nosocomial COVID-19 Programme of investigations into cases of healthcare-acquired infection. This good practice guide for the care home sector is consistent with the learning approach adopted by the NHS.

2. Background

During the COVID-19 pandemic, many care home residents and staff sadly acquired COVID-19. Whilst the circumstances surrounding how they acquired COVID-19 are varied, we know that despite very best efforts, in what were very difficult circumstances, some residents acquired COVID-19 whilst living in a care home.

COVID-19 was a new infection, of which little was known beyond the fact it posed a serious threat to population health globally. Whilst infection prevention and control (IP&C) measures are routine practice, COVID-19 proved difficult to manage, particularly at times when community prevalence was high and initial testing capacity was limited. The initial unclear cause of transmission of COVID-19 further hindered the ability of services to reduce the spread of the virus within care homes, particularly amongst vulnerable communities.

Whilst infections are a recognised risk in care homes, identifying actions that can directly improve the quality and safety of services, remains an important element of learning and improving safety for both service users and staff alike. It is also important for residents and/or their families, who may have concerns regarding the circumstances of how they or their family member acquired COVID-19 whilst living in a care home, to be able to understand the circumstances surrounding their specific case and what learning has taken place.

This good practice guide is intended to support care home providers if they wish to undertake factual reviews into COVID-19 outbreaks which occurred in their services. It is based on a learning approach that seeks to maximise the opportunity for learning and improvement — not as a means of placing or apportioning blame. Identifying areas of good practice together with areas of improvement, will help improve services and outcomes.

National Health Service Approach

In April 2022, the NHS in Wales established a national programme to support NHS organisations investigate all incidents of acquired COVID-19 for patients under their care. A national framework document was developed to ensure consistency of approach for all organisations with which the NHS must comply. Whilst the same regulations do not apply in the care home sector, this good practice guide, in undertaking factual reviews, is based on the techniques used by the NHS and informed by its learning from the programme to date.

3. Scope

This good practice guide is intended to support responsible individuals and registered managers of care home services in Wales who wish to undertake a factual review of any COVID-19 cases and outbreaks at their care homes. Factual reviews may be initiated in response to requests from residents or family members or may be part of the service's own quality and improvement processes.



4. Review Process

4.1 General Principles

To minimise hindsight bias, reviews should ensure care is benchmarked against the specific guidelines and policies in place at the time of infection transmission. Consideration must be given to all relevant facts at the time including infection prevalence, staffing levels and all other operational difficulties experienced during the pandemic.

The depth of review may vary according to the issues under consideration and the outcome for the affected person/persons. It may not be appropriate to conduct in-depth reviews for all cases and so you may consider it more proportionate to review an outbreak, rather than individual cases linked to an outbreak.

4.2 Identification of cases requiring review

Identify COVID-19 positive cases:*

- suspected or confirmed acquisition of COVID-19
- outbreaks or Period of Increased Incidence (PIIs)
- surveillance data via Public Health Wales
- concerns processes, including complaints from residents, their families and representatives.

* Data is available from the TARIAN system via Public Health Wales. Environmental health officers may also assist.

5. Review methodology

A simple review tool has been developed (**Appendix A**) to support organisations to undertake proportionate reviews. Where outbreaks have occurred, the tool can be used to undertake aggregate/cluster reviews.

5.1 Aggregate and cluster reviews

In the case of outbreaks, where several residents are infected through the same source, consider undertaking one review to determine the cause, but ensure that any aggregate or cluster investigation methodologies also capture the individual resident outcome.

5.2 Transferred from other healthcare settings

In instances where a resident is suspected to have contracted COVID-19, and/or tested positive for the disease within 14 days of being transferred from an NHS facility, there may be a duty on the local NHS organisation to conduct a formal investigation in line with NHS procedures. In these circumstances, please liaise directly with the local Health Board/Trust COVID-19 Nosocomial investigation team to make them aware. Where indicated, local NHS organisations will undertake the relevant investigations without the need for further review. You may however wish to support the NHS investigation by providing any relevant information, in this instance please discuss at the time of making contact. A full list of all local NHS COVID-19 investigation team contacts can be found at the end of this guide.

5.3 Setting review scope

In most cases, the scope of factual reviews will be to establish as best as possible how and when a resident contracted COVID-19. There will however be instances where the scope needs to extend beyond this purpose to address additional questions or concerns from residents, their families and representatives, for example, acquired pressure damage, falls, medication etc.

This guide is intended to support reviewers to undertake a proportionate review and to support reviewers to extend the scope when required to do so by other factors such as queries from residents or somebody on their behalf. Complaints should be managed in accordance with your complaints policy and procedure.

Information required:

- To identify if the resident meets inclusion for the review (for example, contracted COVID-19 whilst in the place of residence)
- To establish **relevant** key facts that may be pertinent to the resident acquiring COVID-19
- Identify key dates and review the episode of care which is applicable to the infection
- To triangulate information from all other sources (for example, outbreak reviews available from the health protection team at Public Health Wales)
- To identify through reviews any learning and improvement.

5.4 Scoping tips

How far back do I need to look?

In most cases, it will be sufficient to look back at the 14 day period prior to the first positive test result for COVID-19. However, there may be instances where you need to go back further.

How much detail is required once the timing and the cause of the transmission has been identified?

Once the key questions (how and when) have been answered (as best as possible), the key task is to establish what if any learning can help inform local practice to reduce the risk of infections.

The resident I am reviewing is subject to an outbreak, do I need to identify the cause of the outbreak?

Most residents who acquired COVID-19 were subject to an outbreak, the cause of the outbreak will in all probability be the same for all residents within that cluster. It is likely that IP&C teams would have conducted outbreak reviews at the time and concluded the cause of the outbreak. This may be used for the purpose of the factual review.

What does relevant key facts mean?

The purpose of the factual review is to identify the cause of a resident's acquisition of COVID-19, in the context of the pandemic and operating pressures at the time. Therefore, only the relevant key facts linked to the acquisition of COVID-19 infection and the key dates applicable for that episode of care. For example, reviewing other elements of the care plan around falls prevention and dietary needs, is unlikely to be beneficial in this regard.

What if I am unable to find a particular document or guidance, which I feel is important to the case?

Local Authorities may be able to assist with some of the documentation. IP&C teams are also a reliable source of information. Remember also, some of the guidance may have been referred to and referenced in outbreak reports, for example, local operating procedures and guidance applicable at the time.

Do I need to use a particular toolkit or methodology to conduct investigations?

The use of a particular review methodology is not mandated – you can choose to use whatever methodology suits your needs. The review tool provided as part of the good practice guide has however been designed to support you undertake a proportionate review in keeping with the review scope.

What is classified as an outbreak?

A healthcare associated infection outbreak is where two or more linked cases with the same infectious agent (for example, COVID-19 (SARS-CoV-2)) associated with the same setting over a specified time.

Have other investigations been undertaken?

Prior to starting your factual review, always ensure you have considered any other processes which may have investigated the resident's acquisition of COVID-19. Any cases of residents who tested positive for COVID-19 within 14 days of being transferred from an NHS setting, will be investigated as part of the National Nosocomial COVID-19 Programme. If you are unsure and wish to check whether an investigation has been undertaken, please use the local Health Board/Trust dedicated contact details for the programme below to ask.

6. Resident and family engagement

Engagement with residents and families will take place both informally and formally.

The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017 (as amended) place requirements on providers and responsible individuals of care homes and other regulated services. This good practice guide may support you in meeting some of the requirements set out in regulations.

Regulation 64 requires that service providers have a complaints policy and procedure with effective arrangements for dealing with complaints.

Regulation 76 requires that the responsible individual puts suitable arrangements in place for obtaining the views of residents and their representatives about the quality of care and support provided and how it can be improved.

Regulation 80 requires that the responsible individual puts suitable arrangements in place to establish and maintain a system for monitoring, reviewing, and improving the quality of care and support provided by the service. This includes reviewing any action taken in relation to complaints. It also includes preparing a report to the service provider making recommendations for the improvement of the service.



7. Health Board and Trust Contact Details

Aneurin Bevan University Health Board

Call: 0300 373 0652

Email: abb.covidinvestigationteam@wales.nhs.uk

Betsi Cadwaladr University Health Board

Call: 03000 846992

Email: BCU.HCAICovid19@wales.nhs.uk

Cwm Taf Morgannwg University Health Board

Call: 01443 443084

Email: CTM.NosocomialCV19@wales.nhs.uk

Cardiff and Vale University Health Board

Call: 02921 836407

Email: Cav.Covidsupport@wales.nhs.uk

Hywel Dda University Health Board

Call: 0300 303 8322

Email: covidenquiries.hdd@wales.nhs.uk

Swansea Bay University Health Board

Call: 01639 684440

Email: SBU.NosocomialReviewTeam@wales.nhs.uk

Powys Teaching Health Board

Call: 01874 442918

Email: PTHBNosocomialReviewTeam@wales.nhs.uk

Velindre University NHS Trust

Call: 02920 196161

Email: HandlingConcernsVelindre@wales.nhs.uk

Appendices

Review tool

Section 1 – Details of person completing this form

Detail	Answer
Name	
Job title	
Organisation name	

Section 2 – Resident information

Resident information question	Answer
Resident's/Residents' name/names	
Resident's date of admission to care home	
Place of residence at the time of infection	
Date of symptom onset (if known)	
Date of positive COVID-19 result (if applicable/known)	

Section 3 – Resident exposure to COVID-19

Exposure question	Yes/No	Details
Has the resident been in contact with another positive person?		
Has the resident been transferred from another healthcare setting (for example, a hospital) in the last 14 days? NB. If yes – please refer to section 5.2 of the good practice guide		
Was the place of residence subject to an outbreak prior to or at the time of resident testing positive for COVID-19?		

Section 4 – Environment, testing and personal protective equipment (PPE)

Environment, testing and ppe question	Answer
What infection prevention measures were in place within the home environment at the relevant time?	
What isolation measures were in place if a resident tested positive or become symptomatic?	
Following a positive COVID-19 result, was the resident isolated appropriately, as per guidance/advice from Public Health Wales?	
Was there difficulty isolating residents? (for example, due to resident's medical condition or lack of isolation facilities)	
Was personal protection equipment available and in use, as per the guidance?	
Was regular COVID-19 testing taking place, if so, how often?	

Section 5 – Visiting

Visiting question	Answer
What were the visiting arrangements at the time the resident become symptomatic and/or tested positive?	

Section 6 – Identified areas of good practice and/or improvement

Question about good practice and/or improvement	Answer
Please describe any elements of good practice identified	
Describe elements which you think can be improved	

Section 7 – Actions

List up to 5 actions you can implement based on the details in section 6

Description	Details
Action 1	
Action 2	
Action 3	
Action 4	
Action 5	