

*The Magdalen & Lasher Charity  
Old Hastings House CIO  
132 High Street, Hastings TN34 3ET*



## Coronavirus 19 Risk Assessment

**Old Hastings House Assessment carried out by: Jason Denny**

**Date of next review: Ongoing or 19-09-21 Date: assessment was carried out: 19-07 -21 last update 01-07-21**

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1. Covid-19 local infection rates have increased from being very low (1 case per 100,000 as of 01-06-21) but have increased due to the delta variant to 1 per 1,000 of the population as of July 16th and 250 per 100,000 locally. However, the peak is expected by mid-August and the risk of death or serious illness leading to hospitalisation is much reduced due to	Residents become infected. Staff become infected. Visitors become infected.	The risk remains low despite an increase in local cases given the rate of vaccinations with all but two residents now having had the 2 <sup>nd</sup> dose. This dramatically reduces the risk of serious harm to residents or prospect of hospitalisation due to Covid-19. This takes into account the access to visitors and outside areas is carefully controlled.  <b>See new visitors' policy dated 19-07--21 which balances and manages risks with benefits and rights chiefly: that residents should now have access to an</b>	<b>Low risk:</b> No major action. Just monitor for changes. Current low risk despite. new variants such as delta from India which the current vaccine is effective against shown in only 1 in 1,000 dying after contracting Covid-19 which is lower still when vaccinated plus low hospital admissions. Low risk is also based on the effectiveness of measures already in place shown in no evident resident cases (one false positive 08-01-21) and	Everyone	With immediate effect unless stated otherwise.	Ongoing

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<p>the vaccine programme as the risk of death is now only 1 in 1,000 compared with 1 in 50(pre -vaccination programme) for those previously contracting the virus.</p> <p>All other local care homes have had resident cases – but not Old Hastings House since the Pandemic started. 4 staff cases out of a team of 102 (of which 3 are contested). <i>National rates and the relaxation of travel restrictions from July 19<sup>th</sup> to amber list countries and without the need to self-isolate on return does increase the risk of the virus spreading.</i></p> <p>From 16<sup>th</sup> August anyone is who double -</p>		<p>unrestricted list of nominated relatives and others and without the need to self-isolate on return from trips to hospital or other areas.</p> <p>All prospective new residents have to be double-jabbed prior to admission.</p> <p>Visitors who take out residents have to be double-jabbed.</p> <p>Advising those who have had contact with Covid-19 affected person(s), to self-isolate for 10 days and until they are clear of any Covid-19 symptoms (cough, fever, shortness of breath) or have had a negative test result or been informed by Track and Trace when to cease self-isolation.</p> <p>Brought forward the next round of infection control training for all staff to January/ February/March 2021- will be repeated from October</p>	<p>all but two residents vaccinated. The key lies in timely monitoring of the situation.</p> <p>The risk rating takes into account the need for vigilance given the reopening of the economy and relaxation of restrictions which has translated to an increase in local cases: was low-medium risk in the RA of March 2021. Further relaxation from July 19<sup>th</sup> will lead to higher cases but is expected to peak in mid - August which will coincide with more than the 67% of the population currently double-jabbed.</p> <p>Keep abreast of PHE and local guidance as it is changing in line with Covid-19 dynamics.</p> <p>Continue to LFD test all visitors: see latest policy</p>			

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<p>vaccinated no longer needs to self-isolate after coming into contact with someone who is Covid-19 positive. This raises the risk given the vaccine does not give 100% protection against spreading the virus.</p>		<p>Maintain the reserved shielding area rooms 214-218 used for new or (re admissions from hospital) and Covid- 19 affected residents leaving rooms 217-218 to last</p> <p>Maintain current restrictions on visitors unless for essential works or End of Life.</p> <p>Ensure all people entering the care home:- 1.wash their hands for 20 seconds with alcohol-based sanitisers; 2. have temperature checks; 3. non - medical personnel and care staff, such as tradespeople and social workers have LFD tests before entering the home.</p> <p>All residents are temperature checked twice daily along with incoming shift.</p> <p>Use room 218 for testing of staff and newly admitted residents due to being on the end of corridor with fire exit entrance and egress and ventilation.</p>	<p>published on 19-07-21 - unless evidence of test in last 24 hours.</p> <p>Encourage outdoor socialisation where possible given warmer weather.</p> <p>New infection control audit being undertaken this month by our independent clinical lead CH.</p> <p>Indoor visits to continue to occur in the conservatory (not bedrooms) due to space and ventilation and reduced access and egress risk-via use of the same door without passing others.</p> <p>No current visits to residents in their bedrooms unless for medical or EOLC situations.</p> <p>From August we are allowing one of our entertainers (R - Pianist) to visit twice weekly as he is double- jabbed and</p>			

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		<p>Additional hand washing/ sanitiser stations (14 in total) set-up in strategic locations along corridors: review end of July.</p> <p>Remaining 6 of 95 staff who are not vaccinated to be LFD tested before every shift.</p> <p>Maintain long established ban on agency staff and current ban on staff being allowed to work in other care settings.</p> <p>Ensure people sneeze and cough into tissues and dispose of tissues immediately and then wash their hands.</p> <p>Do not shake hands on greeting visitors to care home</p> <p>Send staff home as soon as they become symptomatic.</p> <p>Maintain social distancing whenever possible despite the limitation of a care home.</p>	<p>will do an LFD test: risk balanced with benefits.</p> <p>Additional hand washing/ sanitiser stations: add 6 further points to the recent 14 (20 in total) to be set up in strategic locations along corridors -review end of August.</p> <p>Review use of room 218 for testing in August due to building works for the extension which will close the fire exit access. Possibly use the conservatory every Wednesday morning 8-11am for PCR testing which will hopefully cease by October.</p> <p>All staff continue to have 2 LFD tests per week one to occur on the day of weekly PCR testing.</p> <p>The remaining 6 staff without the vaccine to continue having LFD tests before every shift.</p>			

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		<p>Limit the possibility of crowded areas such around drinks areas- only two staff in the kitchenettes at any one time.</p> <p>Combination locks added to all kitchen doors to prevent residents from entering food preparation areas uninvited.</p> <p>Wearing of suitable aprons when in the main kitchen.</p> <p>Parcels are wiped down on receipt with residents and staff handwashing immediately after handling post and along with cleaning surfaces.</p> <p>Option of Staff for training to occur in the conservatory given greater space and ventilation and additional exits compared with training room. Training room has been used successfully in recent months.</p> <p>LFD all residents and staff daily for a minimum of 7 days should</p>	<p>Encourage those 2 residents not currently vaccinated to do so. Both lack mental capacity. Safer not to permit outdoors trips for these residents not vaccinated unless for medical situations until national Covid -19 restrictions are fully lifted.</p> <p>Continue to Minimise staff trips into work for testing. Staff have a constant supply (box) each of LFD tests to store at home to test before arrival at work.</p> <p>Continue to maintain the reserved shielding area rooms 214-218 used for new or (re admissions from hospital) and Covid- 19 affected residents, leaving rooms 217-218 to last.</p> <p>Continue to ensure that staff stick to their allocated floors to minimise the risk of transmission; better identify</p>			

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		there be one confirmed or suspected case of Covid 19 in the care home. Repeat for staff where a colleague on their shift tests positive and for those residents who were in contact. This advice lasts until August 16 <sup>th</sup> whereby staff will not need to self-isolate if double-jabbed and not showing symptoms.	infection pathways; and reduce the numbers who would need to self -isolate if there was a positive Covid-19 case, thereby not seriously disrupting the running of the service. Encourage the remaining 15% of staff to be vaccinated via an educational approach.  Ensure <u>all</u> shift teams wipe down high-risk areas such as lifts and handrails when housekeeping staff have clocked off. The head Housekeeper continues to brief all her team via monthly meetings or when the RA is updated.			
<b>2. Covid-19 may infect those in our care</b>  <i>Government guidance effective from August 14<sup>th</sup> 2021 is that those double vaccinated don't need to self-isolate as</i>	Residents become infected. Staff become infected. Visitors become infected.	<b>Low</b> risk due to effectiveness of measures already in place, vaccination programme and local and national low rates identified rooms in the Magdalen Suite. End of corridors for self- isolation so that infected residents should	Ensure staff are using PPE appropriately in line with the current policy and procedure especially when indoors and within a metre of residents.  Maintain a strong, positive and open culture so that any	Everyone	With immediate effect.	

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<i>a result of coming into contact with a Covid-19 positive person.</i>		not pass others. <i>Main House shielded area is rooms 214-218.</i>	issues are raised quickly and without fear. Ensure good communication regarding any updates <i>Government guidance effective from August 14<sup>th</sup> 2021 is that those double vaccinated don't need to self-isolate as a result of coming into contact with a Covid-19 positive person. In such cases staff will need to do an LFD test before commencing their next shift followed up by the next available PCT test.</i>			
<b>3. Staff with pre-existing conditions will be at risk of significant ill health if exposed to virus</b>	Staff become seriously ill or even die if they acquire the virus.	Carried out fresh risk assessment of all staff in case of changes: all Green, except four who are amber, have shielded at various times with including the three who returned February to March 2021  Add more detail to back to work interviews forms for staff who have shielded.	<b>Low risk</b> /impact as the three current staff shielding at the time of the last RA have successfully returned to work and updated their personal RA.  Review risk assessment for shielded staff every 3 months and all others 6-monthly or where new medical issues arises especially cardio related. Next review is end of	Management	With immediate effect.	

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		<p>RAG rate all staff based on known health status with action taken for those at high risk: provide type-3 masks where necessary.</p> <p>Protect those at significant risk from exposure to the virus.</p> <p>Seek medical advice as necessary.</p> <p>Stick to shielding advice (relating to high-risk staff) so staff don't return to work prematurely.</p> <p>Consider supporting those vulnerable staff to work from home or re-deploy to minimise any risk to them (<i>not applicable to care or activity, shielding or kitchen staff but applicable to admin team</i>).</p> <p>Added more detail to back to work interviews forms for staff who have shielded.</p>	<p>July 2021 which coincides with the expectation that final restrictions are lifted such as social distancing rules.</p> <p>Ensure that RAG continue to be followed.</p> <p>Current data suggests that those with health issues and who have been double vaccinated are at low risk of serious symptoms requiring hospitalisation. This is despite the new more infectious delta variant which is disproportionately affecting under 30s.</p>			
<b>4. Covid-19 will affect a significant number of staff</b>	Staff	<p>Keep all relevant people (Staff, Residents, Visitors) informed and up to date.</p> <p>Ensure all staff have knowledge of those they are supporting</p>	<p><b>Low risk</b> given low numbers (4 out of 102) of staff who have contracted Covid-19 with only one having symptoms. (2 of these cases</p>	Management.	With immediate effect.	



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		<p>Train staff so they offer safe support and update policies, procedures, and risk assessments as appropriate. Have clear emergency procedures &amp; policy (including Covid-19) should there be an event that results in 'serious and imminent danger to persons at work'.</p> <p>Communicate emergency and Covid 19 procedures to staff and ensure they understand them via an electronic signing sheet.</p> <p>Continue to pay staff their full wages where this is Covid-19 related such as the need to self-isolate to avoid unnecessary risk of transmission.</p> <p>Wear masks where car pooling.</p>	<p>appear to be false positives given antibody test.</p> <p>Remind staff regularly to ensure they stick to their working team bubble of and avoid unnecessary risks.</p> <p>Staff training to remain in the conservatory given several exits and better ventilation compared with the standard training room.</p> <p>Maintain the current regime of double cleaning of the home when there is a suspected Covid-19 case or someone is symptomatic, including surfaces whenever they are used.</p>			
<b>5.Shortage of PPE (Personal Protective Equipment)</b>	Staff at risk of being infected. Visitors at risk of being infected.	Purchased enough stock of PPE looking 6 months in advance. Ensure sufficient budget using reserves if necessary.	<b>Low risk</b> Continue to audit stocks ensuring we have a minimum of at least 3 months' supply should Brexit or other factors affect supplies.	Management	With immediate effect	

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	Residents at risk of being infected.	Liaise with Suppliers, Local Authority and PHE to secure PPE. Ensure effective handwashing takes place. Continue to monitor that used PPE is disposed of correctly. Provide regular training and guidance.				
<b>6. Schools and Nurseries may close again at any time due to outbreaks /local advice, meaning staff have no childcare so cannot work</b>	Residents, due to lack of staff availability to support their needs.	Maintain current low turnover of staff less than 5%. Continue to employ a large and predominantly part time staff team to ensure flexible cover, even if up to 10 care staff are sick at the same time Maintain high staffing levels based on a fully occupied home without reducing staffing in line with Covid-19 current vacancies.	<b>Risk is currently low in terms of its impact on OHH</b> Staff sickness and absence rates are less than 5% week on week. Despite school reopening from March 8 <sup>th</sup> the risk is low due to good staffing numbers with low sickness levels. Consider further flexible working where staff cannot do their full shift but can do some of their standard shift or evenings due to school closures.	Management	Plan with immediate effect.	
<b>7.Social Care will have general shortage of staff</b>	Residents	See section above	<b>Low risk</b> Very good levels of staffing maintained with no use of	Everyone	As and when this	

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		Remain local care home of choice in terms of reputation, job satisfaction, and remuneration. Current waiting list of applicants. Recruited three quality staff this month on the care side and have induced two housekeepers onto the care side.	agency and a waiting list of applicants with the plan to recruit to 2 further full-time carer posts, based on increasing staffing in the Main House in anticipation of returning to full occupancy. Have moved from six vacancies. July-August is the peak time for annual leave - therefore encourage staff to cover for each other.		becomes an issue	
<p><b>8. One or more residents will die from Covid-19</b></p> <p><b>Low risk, given all but two residents are vaccinated</b></p>	Resident dying. Relative grieving. Staff grieving.	<p>We are already a GSF accredited home (only the second in East Sussex) with advance care planning and living well fully embedded.</p> <p>New residents and relatives are written to at the end of the four-week trial period with regard to the principles of GSF-information throughout the home, which is also referred to at the pre-assessment stage prior to admission.</p> <p>Supporting Residents and Families to create an Advance Care Plan where appropriate.</p>	<p><b>Low risk</b>-for the few remaining residents without ACPs with Paula Duffel (Community Frailty Nurse) completing RESPECT forms. Currently around 75% of new RESPECT forms completed and 80% ACPS.</p> <p>Raise at GSF monthly coding and staff awareness meetings.</p> <p>Prioritise the remaining 20% of residents with regard to missing ACPs.</p>	Staff Residents Relatives Paula Duffel, Community nurse	From point of admission	

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		<p>Educating Residents, Relatives and Staff as to the importance of Advance Care Plans.</p> <p>Ensure all staff know what each Resident's Advance Care plan states and that staff take all necessary steps to support the Resident's wishes.</p>	<p>Establish specific preferences for what the last days should look like: use "Thinking Ahead form".</p> <p>Complete Respect form i.e. establish wishes re allowing natural death/ DNACPR wishes.</p> <p>Establish preferences for preferred place of care if needs could not be met at OHH.</p> <p>Reduce the possibility of hospitalisations given Covid 19 outbreaks at Conquest and EGH.</p>			
<b>9. Misinformation on Social Media</b>	Everyone by following incorrect information.	<p>Keep abreast of reliable information on <a href="http://www.gov.uk">www.gov.uk</a> site and from PHE.</p> <p>Maintain effective communication with whole staff team.</p> <p>Make people aware that as knowledge of Covid-19 increases guidance may change.</p> <p>Advise staff with concerns about the vaccine to take professional medical advice.</p>	<p>Staff will continue to be signposted to reliable information.</p> <p>Stamp out misinformation regarding known side effects of the Covid-19 vaccination: For example, infertility or unusual head growth!</p> <p>Check that the home's website is fully updated</p>	Management	With immediate effect	