

## How to Work Safely in Care Homes (PPE Guidance)

PHE has updated the guidance this week. It has been renamed 'Personal Protective Equipment (PPE) – Resource for care workers working in care homes during sustained COVID-19 transmission in England'. The full document (which can be [accessed here](#)) has the following changes:

- The title of the resource has changed from "How to Work Safely in Care Homes" to better reflect the content
- Removal of table 3 for simplicity (the scenario previously described has been merged into Table 2)
- Addition of questions and answers to Section 2
- Addition of Section 3 relating to care for people with learning disabilities and/or autism
- Further explanation/minor changes to responses to selected questions in Section 2
- Further detail added to recommendations including specification of surgical mask types (defined in consultation with HSE and MHRA)

## How to Work Safely in Domiciliary Care (PPE Guidance)

PHE has updated the guidance this week. It has been renamed 'Personal Protective Equipment (PPE) – Resource for care workers delivering home care (domiciliary care) during sustained COVID-19 transmission in the UK'. The full document (which can be [accessed here](#)) has the following changes:

- Addition of questions and answers to Section 2
- Addition of Section 3 relating to care for people with learning disabilities and/or autism
- Further explanation/minor changes to responses to selected questions in Section 2
- Further detail added to recommendations including specification of surgical mask types (defined in consultation with HSE and MHRA)

## A Rise in The Number of Calls to CQC With Concerns

[CQC reported this week](#) that analysis of their data has highlighted that there has been a 55% increase in the number of calls from staff raising concerns. Although calls often covered multiple topics, many of the calls (26%) related to lack of PPE or other infection control products, 32% of calls included concerns about how infection control or social distancing was being practised at the service they worked in and 4% of calls referred to the quality of care being impacted by COVID-19.

## UK COVID-19 Alert Level Reduced From 4 to 3

On 19<sup>th</sup> June, the UK Government's Coronavirus Alert Level was reduced from a 4 to a 3. The risk of the virus is measured in 5 levels in a colour-coded alert system. The levels are:

- Level 5 (Red): A "material risk of healthcare services being overwhelmed" - extremely strict social distancing
- Level 4: A high or rising level of transmission - enforced social distancing
- Level 3: The virus is in general circulation - social distancing relaxed
- Level 2: The number of cases and transmission are low - minimal social distancing
- Level 1 (Green): COVID-19 is no longer present in the UK - no social distancing

The level is determined by the Reproduction number, the R number which is a scientific measure of how fast the virus is spreading. The alert system was introduced in mid-May at a level 4, when the virus was still being transmitted widely.

## CQC Published Data on Deaths in Care Settings Broken Down by Ethnicity

The data published by CQC includes death notifications in adult social care settings from 10 April - 15 May 2020 (and the equivalent period in 2019). While the vast majority of all reported deaths from adult social care settings were White people, the proportion of deaths in all adult social care services due to confirmed or suspected COVID-19 was higher for Black (49%) and Asian (42%) people compared to White people (41%) and people from mixed or multiple ethnic groups (41%).

This difference increases when looking at care home settings only, where 54% of deaths amongst Black people and 49% of deaths amongst Asian people are related to COVID-19 compared to 44% of deaths of White people and 41% for mixed or multiple ethnic groups.