

**Committee for Health Room 410
Parliament Buildings
Stormont
Belfast BT4 3XX**

14 October 2020

Your Ref: C221/20

Dear Chair,

Thank you for giving the BMA NI GP committee the opportunity to respond to the inquiry into the impact of COVID-19 on Care Homes.

The overriding feedback from members is the issue of communication. It has been emphasised how important it is that GPs are kept informed of the details of outbreaks within care homes in their Trust area. This is clearly very variable across the different Trusts but an outbreak in a care home will always be difficult and it will need everyone involved to be informed as early as possible to mitigate against further risk to residents and all staff involved in their care. This also enables us to continue to provide the best level of care, and if a care home starts to get into difficulty with infection, appropriate and safe visits can be maintained through the covid centres which minimises the infection and cross contamination risk.

Since the pandemic began, GPs have had to change the way in which we work which involves a greater reliance on technology. It would be very beneficial for all concerned that care home staff are resourced and enabled to interface with these new working practices and engage with GPs through the use of phone calls, video calls and sending photographs when appropriate to keep staff and patients as safe as possible. This can also help considerably with continuity of care and also helps to minimise footfall and hence risk.

We do recognise that great strides have been made since the beginning of the first wave and we commend the work being done to ensure that the areas where improvements have been made are adhered to consistently as we face into the second wave. These include ongoing testing of both residents and staff with timely results so appropriate precautions can be taken and contingency plans put in place to ensure that additional staff are available in the event of staff having to self-isolate; access to the right quality and quantity of PPE; a safe process for the discharge of patients from hospital back into care homes; and strict visiting guidelines with flexibility for those residents nearing end of life. Crucially, care homes need to be supported

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and resourced, not just when an outbreak occurs but consistently throughout the pandemic and beyond.

I have contributed to the group reviewing care homes which has involved a variety of participants with experience and expertise to support the health care needs of residents in care homes during the pandemic. A range of options have been explored from a primary care perspective, with a focus on a new model providing much more proactive and anticipatory management to patients in care homes, and importantly improving the support, the education and the peer support to the staff in the homes. An outcome of this is highly likely to be a link of one practice to one care home to enable this level of care. This is very different to the current reactionary model, with practices having patients in multiple homes and homes having multiple practices covering which can result in variance and in confusion, particularly in a challenging situation. We would also agree that GPs should contribute to residents' anticipatory care plans and link with Trust based multidisciplinary support teams with escalation to Acute Care at Home as appropriate.

What covid has highlighted is the need for us all to work together, to provide a more proactive and dedicated service for care homes which will include advanced care planning, education and peer review and a consistency for all homes in terms of contact and of management.

GPs very much appreciate the difficulties experienced by care home staff and the vulnerability of the residents in their homes. We are very familiar with the care homes who look after our patients and are keen to work together to ensure the best possible care is given to residents and to keep them and all staff as safe as possible.

Yours sincerely

Dr Alan Stout
Chair
BMA Northern Ireland GP Committee