



NHS England and NHS Improvement
Cardinal Square
10 Nottingham Road
Derby
DE1 3QT

17 November 2021

Dear Colleagues,

Re: Midlands Guidance: Discharges to Care Homes

In order to support you to continue to deliver safe care for residents who are discharged from hospital settings, colleagues from NHSE/I Midlands, UKHSA East Midlands and UKHSA West Midlands have summarised the key points from the national guidance to reinforce good practice principles across the region.

<https://www.gov.uk/government/publications/coronavirus-covid-19-admission-and-care-of-people-in-care-homes/coronavirus-covid-19-admission-and-care-of-people-in-care-homes>

We have split this guidance into two sections: management of positive patients and the management of contacts.

- The hospital should always confirm the COVID-19 status of the resident they are proposing to discharge. Swabs should have been taken within the last 48 hours. However we acknowledge that on occasion this may sit just outside the 48 hours, such as when relying on transport, in these instances we would ask that you apply professional judgement and a pragmatic approach to safely facilitate these patients returning to their home.

Management of positive patients

- The Care Home should have adequate IPC measures in place to safely manage residents within the home.
- The guidance states that COVID-19 positive individuals should continue to be discharged into designated settings:
<https://www.gov.uk/government/publications/designated-settings-for-people-discharged-to-a-care-home/discharge-into-care-homes-for-people-who-have-tested-positive-for-covid-19>
- A joint risk assessment between the hospital and the care home should be carried out before a resident is being discharged. This needs to consider the resident's COVID-19 status, IPC measures - including isolation facilities, staffing, PPE - available in the setting, resident's ability to follow COVID-19 safe measures, safety and comfort of the resident and others at the setting.

Management of contacts.

In order to safely manage patients who would be considered contacts:

- A negative PCR test should have been taken 48 hours prior to discharge to the setting. Swabs should have been taken within the last 48 hours. However we acknowledge that on occasion this may sit just outside the 48 hours, such as when relying on transport, in these instances we would ask that you apply professional judgement and a pragmatic approach to safely facilitate these patients returning to their home.
- A joint risk assessment with the care home should be carried out before a resident is being discharged. This needs to consider the resident's COVID-19 contact status, IPC measures - including isolation facilities, staffing, PPE - available in the setting, the resident's ability to follow COVID-19 safe measures, safety and comfort of the resident and others at the setting.
- Contacts should continue to isolate for the remainder of the 14-day isolation period and infection prevention and control precautions should be used to deliver care or for the full 14 days in line with your care home processes.
- The care home should complete a PCR test on the patient on admission and on day 7 following admission and should consider daily lateral flow testing for the patient during this time. A PCR test should be completed immediately if the resident becomes symptomatic.
- Infection prevention and control precautions should remain in place in line with the current guidance.

We would be most grateful if the above information can be shared so that staff are reminded of the guidance and we can all continue to work together to protect all patients within the system.

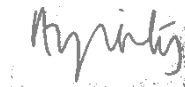
Yours faithfully



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