



COVID-19 Hospital Discharge Service Requirements (Wales)

Update to Guidance in respect of Step-up & Step-down Care Arrangements during the COVID-19 period. Issued 29th April 2020

The Discharge to Recover then Assess (D2RA) model forms the basis of the COVID-19 Hospital Discharge Requirements published by Welsh Government on 7th April 2020 https://gov.wales/covid-19-hospital-discharge-service-requirements.

The D2RA model and the 'Home First' ethos remain the default for as many people as possible during the COVID-19 pandemic.

This update aligns the COVID-19 Discharge Guidance with the new approach to testing on discharge for people normally resident in care homes or potentially being discharged to a care home on Discharge to Recover then Assess Pathway 3 or 4.

The same principles will apply to people in Extra Care and supported housing, adult placements (Shared Lives) and those requiring reablement/domiciliary care at home (either returning to their existing care package or being discharged to their own home on Discharge to Recover then Assess Pathway 2).

This updated guidance sets out in detail, the two main options that need to be considered, and also describes the range of scenarios in which the principles could be applied.

The two main options are:

- 1. Discharge back to an existing placement or care package, where the individual has received a negative COVID-19 test result prior to discharge; and
- 2. Step-down (or step-up) within a designated NHS facility, where an individual has received a positive test result for COVID-19 prior to discharge, are still symptomatic or within the 14 day initial isolation period

1. <u>Discharge back to an existing placement or care package, where the individual has</u> received a negative COVID-19 test result prior to discharge

Where an individual has been admitted to hospital and has received a negative test result for COVID-19, they can be discharged back to their placement or package of care, if the provider agrees that the appropriate isolation and Personal Protective Equipment (PPE) arrangements are in place, and they are able to support a 14 day period of self-isolation.

Factors to be taken into account when considering this option will include:

- The ability to practically implement isolation precautions¹ in the home environment (wherever that may be) and with available staffing arrangements;
- The risk to, and impact on, other residents/service users; and
- Whether the receiving care home (or other supported housing arrangement) has a confirmed COVID-19 outbreak.

Return to the individual's familiar environment for further recovery will always be the preferred option, as this will provide the best outcomes for them. Providers should be supported to implement this option wherever possible.

2. Step-down (or step-up) within a designated NHS facility, where an individual has received a positive test result for COVID-19 prior to discharge, are still symptomatic or within the 14 day initial isolation period

Where an individual has been admitted with or has contracted COVID-19, is ready to move from acute hospital to their next stage of care (see Annexe B of the COVID-19 Hospital Discharge Service Requirements) and is COVID-19 test positive, an additional **'Step-down whilst Covid +ve'** phase will be added to the discharge pathway. This additional phase is aimed primarily at people who:

- Require support for recovery and further assessment for ongoing care via one of the D2RA Pathways; or
- Are returning to an existing placement; and
- Are still symptomatic or testing as positive for COVID-19 after hospitalisation or are still within the initial 14 day isolation period.

The revised COVID Discharge Flow Chart is attached as Annex A.

https://www.gov.uk/government/publications/covid-19-how-to-work-safely-in-care-homes

¹ Within a care home, isolation precautions mean that the resident should be in a single room, ideally with en-suite or designated toilet facilities and not leave the room (including for meals). Staff would be expected to wear PPE as outlined in guidance document linked below:

Whilst multiple moves are generally to be avoided, in these exceptional circumstances the revised pathway will:

- ✓ Mitigate the risks to vulnerable people of cross-infection;
- ✓ Protect the scarce social care staff resource; and
- ✓ Maximise the opportunity for active therapeutic input during the early recovery phase, potentially mitigating the reduction in reablement, where community teams may have been redeployed to other services.

The same service should be provided for 'step-up' from placement or a person's own home where appropriate. For example, where a care home has a confirmed COVID outbreak, there may be a case for transferring residents who are testing positive for COVID-19 or are still symptomatic, to a step-up facility to mitigate the risks of further cross infection and provide any required therapeutic input.

This guidance will be reviewed on a regular basis.

ACTIONS REQUIRED

Health Boards, Local Authorities and their partners will need to identify suitable facilities in their area for the additional 'step-down/step-up whilst Covid +ve' phase in the COVID-19 Discharge Pathway.

They should also consider how this provision can accommodate people who have a cognitive impairment/delirium/learning disability/other mental health needs and ensure the right skill mix, including mental health advice and support, is available.

All patients leaving the 'step-down/step-up whilst Covid +ve' phase of their care (including transfer to one of the main D2RA pathways) must be tested and their COVID-19 negative status confirmed with the receiving service provider, prior to transfer taking place.

As testing does not provide a definitive outcome of whether someone is infectious to others and is only true for the time at which the test was taken, the national policy of 14 day self-isolation will still be necessary for patients admitted for non-COVID related reasons (in case they have acquired the infection whilst in hospital but are not symptomatic on discharge).

SUMMARY OF DISCHARGE SCENARIOS

Patient Covid-19	Discharge action / scenario	Desired outcome
Status		
Admitted for non-	Provider agrees it is appropriate to	Individual recovers in their
COVID-19 related	transfer back to placement/care package	optimal environment, with
reasons.	and they can comply with requirements	risks to themselves and to
	for isolation for 14 days.	others mitigated
COVID-19 Test	Provider does not agree that it is	Individual is supported until
Negative	appropriate to transfer.	such time as safe transfer
	appropriate to transfer.	home is arranged.
	Individual is transferred to a suitable	The tree are all all go an
	step-down facility until the 14 day self-	
	isolation period is complete.	
	Further negative test required prior to	
	transfer at the end of the 14 day period.	
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Admitted with	Transfer back to placement or own home,	Individual recovers in their
COVID-19 and	on Discharge to Recover then Assess pathway if required.	optimal environment.
COVID test negative	patriway ii required.	
on discharge	No requirement to isolate; care can be	Risks to other service users
	provided as normal	are mitigated.
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Admitted with or	Transfer/remain in 'step-down/step-up	Individual receives
contracted COVID-	whilst Covid +ve' facility.	appropriate support for
19 in hospital		recovery and rehabilitation.
	Transfer back to placement/care package	Dialog to a the co
Ready to move on	or to non-COVID step-down facility, once COVID test negative and symptoms have	Risks to other residents/service users are
from acute phase of	resolved.	mitigated.
treatment.	resolved.	mingateu.
	Some patients may continue to test	Individual is supported to
COVID test positive	positive for some time after they become	return to their familiar
	asymptomatic. Where positive testing is	environment as soon as it is
	prolonged e.g. during 'virus-shedding',	safe and appropriate to do
	advice should be sought from Public	so.
	Health Wales and the case discussed with	
	the provider to ascertain whether	
	transfer to the care home is safe and	
	appropriate.	

