

Assurance of MHA's Preparedness for the increasing threat presented by COVID-19

4th March 2020

Introduction

MHA is preparing for the significant increase in the threat posed by COVID-19. This is in line with the 'Coronavirus: action plan' issued by HM Government on 3rd March 2020.

As a responsible service provider, we have been monitoring the situation for some time and have already begun the process of incorporating the current challenges relating to CoVID-19 into our existing business continuity and contingency planning. Our preparations are based on the overriding objective of ensuring the continued delivery of safe services of as high a quality as possible commensurate with the level of resources available should our services be disrupted by the effects of COVID-19.

MHA's preparedness arrangements are categorised under six headings and are outlined below.

1. Coordination, control and direction

Several meetings of the 'Coronavirus Coordination Group' have taken place during the last month chaired by the CEO and attended by a number of key members of the Executive Leadership Team to include the Director of Operations and the Director of People and Corporate Services. Also in attendance has been the Head of External Affairs, the Standards and Policy Manager (Infection Control Lead) and the Head of Quality Improvement. The threat and associated planning has also been discussed at MHA's Executive Leadership Team Meetings.

2. Infection control policies

2.1 MHA has a named Infection Control Lead and a clear and fully tested Infection Control Policy and associated procedures to include:

- Handwashing and hygiene
- Handwashing technique
- Managing infection outbreaks (and recording those affected)
- Staff exclusion from work following infection
- Equipment cleaning and decontamination

2.2 Our policy is to work closely with the experts locally (Public Health / NHS infection prevention and control teams) and take advice from them to ensure the safety of residents, visitors and staff. We also have robust housekeeping procedures and a named Hotel Services Lead who advises on cleaning procedures when there is an infection outbreak.

3. Communications

- 3.1 A number of briefings, alerts and updates have been circulated within the organisation with care being taken to ensure these are based on the latest information from Public Health, the NHS and the Department of Health and Social Care.
- 3.2 The scale and nature of the communications challenge over the coming weeks and months is likely to increase significantly, and with this in mind all future communications (internal and external and for a wide range of 'audiences' will be version controlled and issued and coordinated from a central point. MHA have prepared communications for residents and members (service users), managers, relatives, volunteers, visitors, neighbours, staff, media, members of the public, regulators, suppliers and commissioners.
- 3.3 Appropriate media for different audiences is also being discussed with thought also being given to increased or new use of, for example, staff meetings and briefings, MHA intranet, the external MHA website and enhanced procedures.
- 3.4 Communications shared with staff to date include basic 'protection' information around, for example, hand washing and social distancing along with checking that all mandatory basic infection prevention and control training has been completed.
- 3.5 Alongside these messages, homes have been advised to increase orders of various supplies e.g. hand gels, liquid soap, paper towels and personal protective clothing to cope with anticipated increases in demand.

4. Managing our human resources

- 4.1 The more foreseeable staff related pressures and challenges have been considered and interim position statements issued relating to staff who might be asked to self-isolate dependent on their circumstances.
- 4.2 Managers and staff have been signposted to information from the Foreign Office regarding international travel and affected countries and we are advising on a case by case basis, seeking help from Public Health where needed.
- 4.3 Staff are a key resource and their safety is paramount. Individual services are considering the local initiatives they might adopt to make the best use of all the staff that are available throughout whatever period of disruption results from the COVID-19 situation in the UK. This includes:
 - a. Contact with agency suppliers for assurance of their own contingency plans
 - b. Asking staff to think of contingency plans relating to their carer responsibilities i.e. what to do if schools close
 - c. Asking staff to consider what self-isolating would actually mean and the implications and consequences of this for them and their families

- d. Establishing who would be prepared to pick up extra shifts if needed
 - e. Redeployment of staff from neighbouring homes
 - f. Cancellation of annual leave with additional payments for those who agree to do so
 - g. Additional use of volunteers
- 4.4 With regard to the support services at Epworth House (MHA's Head office) managers are prioritising all activities and considering the extent (if any) to which staff in various services could work from home, whether as a precautionary measure or in the event of 'self-isolating' or the temporary unavailability of their workplace.

5. Supplies

- 5.1 In terms of the risks associated with disrupted supply chains, we are working closely with our suppliers to ensure that they have the strategies in place to ensure we will not experience shortages of or disruptions to goods, equipment or services.
- 5.2 We are working to ensure that we increase our orders of various goods in line with anticipated increases in demand for them, and are taking care to not inadvertently contribute to problems caused by 'panic buying' or excessive stockpiling.
- 5.3 We have also contacted all suppliers to advised them how they might contribute to our ongoing efforts to contain the spread of Covid-19 by their actions when they visit or deliver to our sites.
- 5.4 Each of our kitchens holds at least one week's supply of dry, frozen and ambient goods. Dependent on capability we are looking at different options should we have a shortage of catering staff to include:
- Storage and availability of pre-cooked meals
 - Purchase of ingredients to ensure provision of home cooked meals and bakery
 - Provision from local restaurants, eateries and takeaways and caterers that may be able to provide a meal for residents short term
 - Use of existing suppliers to supply pre-pared food e.g. Bidvest and Apetito
- 5.5 Communications to our Chefs are being prepared in the event of service disruption and the main co-ordination will be through Chef Coaches (regionally based)

6. Training

A check has been made of compliance with our mandatory basic infection control training and enhanced on line training is being developed to support key messages already delivered to our staff