

CLINICAL STANDARD OPERATING PROCEDURE:

Guidance for Healthcare Professionals undertaking visits during the COVID-19 Pandemic

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Contents

1.	Document Control	2
2.	Overview	2
3.	Infection Prevention and Control Objectives	3
4.	Preparation for a visit	3
	Visiting Professionals – Considerations	4
	The Individual – Considerations	4
5.	Vaccination Requirements	5
6.	Testing Requirements	5
	NHS professionals visiting care homes who are part of regular staff testing	5
	Testing for CQC inspectors visiting care homes	6
	Professionals not regularly tested through NHS or CQC staff testing	6
7.	Personal Protective Equipment	7
8.	The visit	7
9.	Exceptional Exemptions	8
	O. Visiting professionals under the age of 18 do not need to show proof of vaccinatio atus but may need to prove their ageEscalation of Concerns	
11	Further advice & Support	g



1. DOCUMENT CONTROL

Title	Guidance for Healthcare Professionals undertaking visits during the COVID-19 Pandemic
Related Policies and Guidance	Guidance on care home visiting (23 August 2021) Testing for professionals visiting care homes - GOV.UK (www.gov.uk) (29 th September 2021) Vaccination of people working or deployed in care homes: operational guidance - GOV.UK (www.gov.uk) (4 August 2021)
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V1.1	25/11/2021	Updated to incorporate updated guidance on Vaccination of people working in care homes	Julie Stokes, LCC Amelia Diallo, LCC
V1.2	30/11/2021	Minor amendment to clarify guidance for professionals working in the community.	Amelia Diallo, LCC
V1.3	14/12/2021	Amendment to clarify requirements to notify Care homes of a planned visit. Moved and strengthen content ref exemptions to this guidance.	Amelia Diallo, LCC Tracey Thorpe, LCC

2. OVERVIEW

This guidance is for care home responsible persons and managers, social workers, and other healthcare professionals that undertake home visits or have face-to-face direct contact with service users in high consequence settings e.g. care homes or services delivered within community settings.

Whilst the vaccination requirements are only mandated through government regulations for Care Homes, as outlined in Section 5 below, the principles within this guidance are also recommended for professionals who deliver non-emergency services in the community.

Health care professionals are required to balance the need to carry out face-to-face visiting of vulnerable individuals for the purpose of providing of care and treatment, with the need to avoid harm by the risk of spreading infection.



Health care professionals should examine whether other *safer* ways of working are possible (such as working remotely), would provide the care and support an individual needs.

There will, of course, be some incidences where only face-to-face visiting will be effective in supporting an individual, particularly since face-to-face visits may have been terminated or suspended during the last 12 months due to the risk of infection, or where a service user's need is so great that the visit must take place. Therefore, professional visitors must ensure that all steps within this guidance are taken to minimise or remove the risk of infection to themselves, the individual and the community.

3. INFECTION PREVENTION AND CONTROL OBJECTIVES

Lincolnshire County Council Health Protection Team (HPT) recognises that the prevention of infection is a fundamental part of the quality of care delivered to local communities. The HPT are committed to supporting not only the individuals within the settings but also the health care staff working within the wider community.

The HPT have used national guidance to develop this practical guidance to support healthcare professionals to plan and carry out visits safely. This guidance incorporates national initiatives, such as the <u>Health and Social Care Act 2008: code of practice on the prevention and control of infections - GOV.UK (www.gov.uk)</u> and will be updated regularly.

This guidance should be used to underpin and endorse specific advice and decision making by your organisation but is not exhaustive.

4. PREPARATION FOR A VISIT

All professionals must first assess whether contacting service users face-to-face is necessary. Face-to-face visiting should not put the visitor, the individual or other staff at risk.

An initial risk assessment of a pending visit must include the following considerations:

- Has the setting or where the individual resides had notification of any positive COVID-19 cases on site?
- Is the setting currently experiencing an outbreak?
- Has the service user tested positive in the last 10-14 days or currently isolating?
- Is the service user currently unwell?
- Is the service user classed as a close contact of a positive case or recently returned from abroad?
- Is the visiting professional concerned about their own health in relation to COVID-19 symptoms? If so, they should follow the <u>COVID-19</u>: <u>guidance for households with possible coronavirus infection GOV.UK (www.gov.uk)</u> and notify their line manager.
- Has the individual or household completed a COVID-19 course of vaccinations?



Where possible, appointments should be notified in advance to the home or residence, to ensure safe planning for your visit. All visitors must work in line with the locations COVID-19 safe working practices as other professionals as well as regular visitors may also be attending at the same time. You may find your visit takes place in the garden in a dedicated visiting space and not inside the building.

When arranging your visit ensure you explain fully what you will need to do during the visit (such as people or areas you will need to access), how long you think the visit will take and what support, if any you will need whilst on site.

If you are planning to visit more than one location in any given day you will need to carry out the pre-visit planning and risk assessment for each location. You *may* also be asked to change clothing in-between locations such as care homes to further reduce the risk of cross contamination. Professionals should be prepared to either change clothing or change into other clothing provided by the location such as 'scrubs' whilst on site.

Visiting Professionals – Considerations

As a visiting professional you will be asked to provide evidence that you are fully vaccinated or exempt and have completed a COVID-19 antigen lateral flow device (LFD) in line with the guidance on vaccination and testing in sections 5 and 6 below. Other considerations include:

- Has the visitor completed Infection prevention & control training?
- Has the visitor completed PPE (<u>Donning & Doffing</u>) training?

The Individual – Considerations

It is important to note that 'residents' in a care home do not fall under the vaccination requirement and therefore may not have been vaccinated at the time of your visit.

The following should be considered as part of your assessment prior to visiting:

- Has the individual you are visiting consented to your visit, and do they fully understand the increased risk your visit may have on their safety from infection?
- Will your visit instigate further visits? If so, is this necessary and could the subsequent visit take place online?
- Is it possible for the visit to take place within the recommended 2 metre social distancing whilst on site?

Consider whether your visit may cause the individual distress or confusion (especially if there have been no visits for the past 12 months). What action you would take within the risk assessment to manage this situation, e.g. abandoning the visit if necessary.



5. VACCINATION REQUIREMENTS

The registered person of the care home is responsible for ensuring that visiting professionals entering the care home are either vaccinated or exempt, and must therefore establish:

- Has the visiting professional completed a full course of Coronavirus-19 Vaccinations?
- Has the visiting professional obtained evidence of medical exception which has been accepted by their employer's Occupational Health department, and accepted by the care home prior to their visit?

The registered person should keep a record of the vaccination or exemption status of those entering the care home and the date that the status was last checked.

There is no requirement for registered persons to record the clinical reason behind an exemption - they should only record whether a person is medically exempt or not.

Individuals that have been vaccinated by the NHS in England may demonstrate their vaccination status using the NHS COVID Pass service via the following 3 routes:

- the NHS App
- the NHS website NHS.uk
- the NHS COVID Pass letter

An individual's NHS appointment card cannot be used as proof of vaccination status. Visiting professionals must agree ahead of time with the registered person how evidence of vaccinations or exemption will be provided.

The visiting professional is responsible for providing evidence of their vaccination status, and should have this ready for inspection upon arrival, without the need to be prompted.

6. TESTING REQUIREMENTS

Visiting professional must provide for proof of a negative COVID-19 antigen lateral flow test as outlined in the <u>Testing for professionals visiting care homes - GOV.UK (www.gov.uk)</u> guidance, which is separated into the following three categories:

NHS professionals visiting care homes who are part of regular staff testing

The default position is that a visiting health professional should not be allowed entry to a care home without proof of a negative test **within the last 72 hours** – demonstrating they are following the testing regime for NHS staff. Care homes must ask the NHS professional when they were last tested and see proof of the result and date of the relevant professional's test.

Proof may include:



- An email or text from NHS Test and Trace
- A screenshot of where the professional has to upload their test result
- A date-stamped photo of the test cartridge itself
- Signed confirmation from their manager
- the NHS signed log included with the test kits provided to NHS staff

If it has been more than 72 hours since the NHS professional was tested, the care home should test the individual before entry to the care home.

If you are unable to provide this, then you may be asked to complete testing on site prior to entering the main area of the residence. You should ensure your visit includes an extra 30-40 minutes to complete this process if required.

Testing for CQC inspectors visiting care homes

Like NHS staff, Care Quality Commission (CQC) inspectors have a regular testing regime. In addition to their current weekly PCR testing, CQC inspectors should be tested using rapid **on the day of their visit** to a care home or care setting (including extra care or supported living settings). This should be conducted at home by the CQC inspector, in line with the MHRA's recommendations on use of such tests as close as possible before their visit to the care home or care setting.

Proof may include:

- An email or text from NHS test and trace
- A photo of the rapid LFD test cartridge with the time and date stamp

As CQC inspectors by law have a right to enter a care setting as part of an inspection, they should not be denied access if they do not provide this evidence.

Professionals not regularly tested through NHS or CQC staff testing

Professionals such as social care staff, who are not regularly tested through NHS or CQC staff testing should be tested, using rapid LFD testing, on the door of the first care home they visit **on that day**. These professionals should then use the email or text received from NHS Test and Trace with their result and show this as proof at each care home they visit.

As above, care homes should ask professionals when they were last tested and **request to see proof of the result and date** of the relevant professional's test. There is no requirement for the care home to record details from the results barcode or keep a copy of the evidence provided. If the professional is unable to provide proof, they should be tested at the care home door.

Many employers provide access to LFD testing for their staff through workplace schemes. For information on how to access LFD testing through the national portal, please visit:



Order coronavirus (COVID-19) rapid lateral flow tests - GOV.UK (www.gov.uk)

7. PERSONAL PROTECTIVE EQUIPMENT

Health professionals who carry out visits should use the appropriate personal protective equipment (PPE) relevant to the setting and its status in relation to COVID-19. This will be in line with the settings risk assessment and following <u>national guidance</u>.

All visitors should inform the setting if they suffer from any PPE relevant allergies (such as latex). If the location cannot provide PPE that is suitable the visitor may need to provide their own PPE which is safe for them to wear. PPE which you may be required to wear includes:

- Disposable single use gloves (ensure correct size is available)
- Disposable single use apron
- Disposable (or reusable following decontamination) Visor or goggles
- Disposable single use fluid-resistant surgical facemask

All visiting professionals/personnel should complete training on donning (putting on) and doffing (taking off) of PPE. If you have not completed training prior to the visit, you must ask the location if they have a member of staff who is able to support you in putting PPE on and off safely in line with COVID-19 PPE safety guidance. This process is vital in preventing cross contamination.

The visitor will also be required to regularly <u>wash their hands</u> for minimum 20 seconds and apply hand gel whilst on site.

8. THE VISIT

In extreme circumstances if you cannot contact a household (such as a private household or residence) before a visit, you must treat the incident as a COVID-19 high risk situation, taking proactive infection-prevention precautions as necessary.

During your visit be prepared for appointment times to take longer than anticipated. This may be due to the COVID-19 restrictions in place in some locations. Regular communication and patience with the care home for example, will help overall as they make you welcome on site.

You will be expected to:

- Give as much notice as possible ahead of your planned visit, allowing flexibility on timelines once on site for unforeseen changes.
- Prove your Vaccination or exemption status



- Prove evidence of your negative antigen lateral flow device test result prior to entry, in line with the guidance above, or be prepared to test on site.
- Wear/remove PPE correctly using the dedicated PPE stations.
- Regularly hand wash and apply gel.
- Adhere to COVID-19 restrictions whilst on site, remaining in the areas that you previously agreed with the home.
- Communicate with the home/staff first if you need to access any other areas not already agreed during your visit.
- Take your own drink; don't expect the location to provide this.
- Take a change of clothing or be prepared to wear the location's 'scrubs' if asked, especially if coming from another site.
- Feedback, debrief with the manager if you feel there were concerns during your visit.
- Feedback if you feel your visit went well to endorse that COVID-19 visiting safety measures at the home went well.

9. EXCEPTIONAL EXEMPTIONS

Visiting professionals must be fully vaccinated, or provide medical evidence of exemption, and comply with the testing requirements outlined above. However, there are exceptional circumstances when a professional can enter a care home without either proof, these may include (but not limited to):

- Social workers responding to immediate safeguarding concerns
- Members of the health service deployed for emergency response
- Professionals delivering emergency or urgent palliative care
- Members of the public assisting in the event of a fire or flood

10. VISITING PROFESSIONALS UNDER THE AGE OF 18 DO NOT NEED TO SHOW PROOF OF VACCINATION STATUS BUT MAY NEED TO PROVE THEIR AGEESCALATION OF CONCERNS

It is likely that deviation from this guidance will be limited to isolated instances or misinterpretation of the guidance. Therefore, if issues arise pertaining to practices covered in this guidance while planning for, or during a visit from a professional, in the first instance you should attempt to resolve the matter locally through discussions between the setting registered person and the visiting professional(s).

If the matter cannot be resolved locally, is of a persistent or serious nature, or requires technical support or oversight, please escalate this to the Health Protection Team using the contact details below.



11. FURTHER ADVICE & SUPPORT

If you require any further advice or support, please contact Health Protection Team on: 01522 552993 or via email: healthprotectionteam@lincolnshire.gov.uk