

## Process for PICs and Reablement Workers Returning to Visits During COVID-19

### Step 1

Proposal accepted by Localities Board. PPE ordered.

### Step 2

Team Leaders meet with each staff member to do a personal risk assessment. This will ensure they are safe and able to return to visits with no underlying health conditions. Form to also be retained by HR.

### Step 3

All staff trained on correct use of PPE- using the PowerPoint [here](#). This to include: each staff member evidencing to their line manager that they are donning and doffing PPE correctly (via zoom).

Clear instructions on disposal of PPE to be given [See Appendix 1](#)

Staff to understand process of collecting PPE from CH or BR- authorisation needed to attend the building and PPE for a month (maximum 10 sets per PIC) to be collected. If staff member cannot attend in person, they can authorise another staff member to deliver or post PPE.

### Step 4

All staff to understand how to use the Visit Risk Assessment [here](#), and how to upload onto Charitylog. All staff to attend the introduction session on 23/06/20. [See Appendix 2](#)

### Step 5

Visits start. Each visit must be COVID – 19 risk assessed before attending, including consent that the client has agreed for the visit to go ahead.

Visit [Checklist](#) to be completed before each visit. GP guidance has been given- [see Appendix 3](#)

Visits should only be made if the PIC and their line manager agree this is appropriate. [See Appendix 4](#)

If staff member has already visited then previous COVID 19 Risk Assessment to be checked and any changes noted.

Car journeys are preferred but if public transport has to be used this should be outside of busy times.

### Step 6

Case management to check that all visits are being carried out in line with the agreed process, and following normal PIC delivery. Service Manager to be alerted to any problems immediately, who will add to the risk log.

## Appendix 1

### Disposal of PPE

It can be wrapped in a normal black sack/ plastic bag, tied and placed in the outside rubbish bin belonging to the client.

If that is not possible it should be double bagged to go in a workers car (or in PIC's bag if on public transport) for disposal in another waste bin.

## Appendix 2

### Storing Risk Assessment on Charity Log

- Risk assessment uploaded onto the client record
- Add that RA has been done in the Risk Assessment tab
- If additions need to be made to RA- these to be noted in RA tab and new RA uploaded.

## Appendix 3

PIC should update the huddle on people they are planning to visit at home. The huddle will be able to let them know if a patient is shielding and should not be visited. PICs are able to obtain a same day update on the COVID symptom status of a patient before visiting, from a member of the GP team. PICs remain at theoretical risk whether or not the test is positive or negative. They should therefore, wear PPE in all circumstances. Visit should be delayed if a patient is symptomatic and this can be screened by the PIC prior to the planned visit

## Appendix 4

We are looking to deliver a service that is a blended mix of virtual connection and safe home visits. We understand this will often be a judgement call and you know your people best.

We recommend you visit people if there are things you need to do that cannot be done by phone or email – such as the GC, signing of forms, mobilisation etc. Please discuss with your team leader.