



Welcoming back our professional colleagues

Evolve Care Homes

The on set of COVID has brought about a number of drastic changes into Health and Social Care that many of us have had to run with. One significant change was the restriction of visits into Care Homes.

As the coronavirus [COVID 19] started to spread in the UK we dramatically reduced external visits to the home. The primary reason for this was to reduce the risk of the virus being brought into the home and exposing vulnerable people to situations where transmission has the potential to be high and fatal.

There is overwhelming evidence correlating exposure to the virus, transmission, and the physical proximity to.

We would like to thank our colleagues from across all the disciplines and geographic areas of the county who have engaged with us to continue to support Evolve homes remotely. For many this has required working outside of their comfort zones and we would like to express our appreciation.

The trial MDT in the North of the County with Heanton Nursing Home, CQC, DCC, DPT, and CCG has been very successful and has demonstrated how much we really can achieve remotely together.

The only visits that have been supported since March 18th are emergency professional visits, where a family member has required immediate medical treatment

This decision was made as part of the overall Group Infection Prevention Strategy (Covid 19). The Evolve Covid documents are available online at www.evolvecaregroup.com/covidsupport

A number of different risks were taken into account when created a balanced strategy for the Company and each Nursing Home to follow



COVID 19 Visiting Health Professionals

We recognise that the professionals that work with our sector are seeking to provide support and so this document has been produced in order to be able to develop a process that recognises everyone's needs and anxieties and hopefully suggests a compromise

We have a duty of care to look carefully at the type of professional visits the home may require, developing a risk assessment based on several identified variables to aim to ensure the opportunity for the virus to enter the homes is reduced as far as possible.

Principle 1

We will always attempt to complete all interactions using phone, email, and teams before arranging a face to face visit for non urgent interactions.

We have found that there is a huge amount that can be achieved in this manner albeit it may require some lateral thinking and perseverance.

In order to facilitate this we have made arrangements for a computer with a Microsoft Teams account to be available at each home.

We have created a process for notes to be made available from our system via secure pdf to support good communication

We have purchased mobile tablets for each house in order that a skype call can be made from any lounge or bedroom.

We are in the process of upskilling our House Leadership in order that they have confidence to interact with a range of professionals so professionals are not limited to the nurse in charge. We have used the SBAR to good effect for this purpose

When the booking system is used we are more often than not able to make a dedicated member of staff free for pre organised meetings

Where the interaction is not successful over a call of some sort and the interaction is considered essential for the person requiring the support, then a visit is to be considered.

Professionals should be aware that all Evolve homes operate in a significant different manner than they did before March.

All Evolve homes operate a zoned policy meaning that the building does not operate in one. Each House operates as an independent zone and there is no movement of people between zones. The full detail of this can be found in the active policy at www.evolvecaregroup.com/covidsupport.

It is important that that anyone seeking to enter a zone is familiar with the policy in place to avoid breaches of this policy by omission

The overall infection control strategy is set along the following guiding principles



Despite PPE being used during the pandemic and this playing a critical role in slowing and preventing the spread of the disease, it is not enough to only consider the use of PPE. A wider view of risk must be taken.

With a risk of this magnitude of potential impact only the most robust prevention strategies could have been engaged.

The dynamic risk assessment that we must complete together in order that professionals are able to provide vital input and the home is able to maintain physical safety, can only be effectively completed with a significant information flow.

The unknown is the concern that therefore we must seek to make the unknown known.



The risks posed by outside professionals visiting the care home are high and the table on page 2 gives a visual representation of the risks of Visiting Professionals based on their occupation present.

Therefore, all factors must be carefully considered when agreeing to external professional visits

Different occupations that make up the care home community and identified risk factors

Occupation	Visit likely to Involve Direct Contact with a family member [less than 1 metre]	Visit likely to involve physical touch	Face to face communication required	Visits can only be observational	Potential for Aerosol Generated Procedures [AGPS] to happen in the care home	Contact with multiple care homes or other patients in high risk areas in the same day
General Practitioner [GP]	Yes	Yes	Potentially possible to work at the side of the person	Possibility	Potential if examination or therapy is likely to induce coughing or sputum production	Highly likely
District Nurse [DN] (non essential in nursing homes)	Yes	Yes	Potentially possible to work at the side of the person	No	Unlikely	Highly likely
Occupational Therapist [OT]	Yes	Yes	Potentially possible to work at the side of the person	Dependent on reason for visit	No	Highly likely, risk increases if working in a hospital setting
Physiotherapist	Yes	Yes	Potentially possible to work at the side of the person	Dependent on reason for visit	Potential if examination or therapy is likely to induce coughing or sputum production	Highly likely, risk increases if working in a hospital setting
Speech and Language Therapist [SALT]	Yes	Yes	Yes	No	Potentially if the assessment results in coughing and sputum production	Highly likely, risk increases if working in a hospital setting
Social Worker	No	No	No	Yes	No	Likely
Mental Health Nurse	No	No	No	Yes	No	Likely
CQC/CIW Inspector	No	No	No	Yes	No	Unlikely
Chiropodist/podiatrist	Yes	Yes	Yes	No	No	Likely
Optician	Yes	Yes	Yes	No	No	Likely
Dentist	Yes	Yes	Yes	No	Potentially if the dental work results in coughing and sputum production	Highly likely

A Professional COVID Secure Bubble

To reduce the risks that all care homes are exposed to, the opportunity to create a professional bubble would be welcomed.

The creation of a Professional COVID Secure Bubble would mean:

1. Each home has named Professional Practitioners – this will reduce the likelihood of transmission between services as the named Professional Practitioners cover an identified number of homes
2. The honesty and transparency of the homes in this Professional COVID Secure Bubble should mean there can be an open line of communication and sharing of test results of family members, team members and visiting professionals
3. The ongoing monitoring of visited locations would mean that in the event of a positive test being identified in any party, planned visiting professional visits would be stood down immediately. A full analysis of the situation and presenting risks would then be completed. This would form a significant part of the ongoing track and trace work required as part of the lines of defence against this virus
4. The use of video calls will become more effective as relationships will be built quicker owing to consistency of professionals between homes
5. The sharing of notes and information will become more effective as the knowledge of the service by the professionals in the COVID Secure Professional Bubble will be greater
6. Visits can be planned, and liaison for visiting, including agreed time on site, can be between the Home Manager and the identified professional within the bubble on the agreed days
7. The home will be able to ensure that a known dedicated team member is available to meet and greet professionals and complete all front door checks
8. The working Infection Control Practices of each home will be understood, a higher rate of compliance achieved and there will be less confusion and time wasted when preparing for the visit

Processes for Accepting a Planned Professional Visit

In the absence of a Professional COVID Secure Bubble and in preparation for a second wave of infections the following processes have been outlined by the home to reduce the risk of transmission of COVID 19

Outline of Procedures before the Planned Visit

1. On site visits will only be explored once a virtual meeting has taken place or the concept explored and mutually agreed that a virtual meeting is not going to achieve the desired outcome
2. On site visits that are not an emergency will be planned and agreed with the home manager
3. On site visits will require the visiting professional to have complete background work around the family member prior to the visit reducing the time on site. Information can be shared securely upon written request
4. The number of professional visitors will be limited to one person from each department – where there is a possibility that one professional can completed the work for two people this is politely requested
5. An agreed plan of work before arrival will be agreed
6. Completion of forms at the end of this pack
7. An agreed time on site will be arrange prior to the visit
8. Coats, excess clothing will not be allowed in the home
9. Bags will not be excepted unless they carry equipment required for the visit
10. Note pad and pen are excepted
11. Upon arrival the visiting health care professional will be required to complete all the outlined front door checks
12. If there any concerns re the status of the home or the person, they are visiting then the visit will be cancelled

Outline of Procedures Upon Arrival

- 1) The Visiting Professionals book is to be completed
- 2) Face mask applied*
- 3) Disinfection mat to be used prior to entering the building
- 4) Hands washed for a minimum of twenty [20] seconds
- 5) Pen to be wiped down hand sanitiser
- 6) Temperature taken and recorded. A temperature of 37.5 or above will result in entry being refused
- 7) Hairnet applied [COVID 19 lives on hair for up to 24 hours]
- 8) Overgrown applied
- 9) Gloves worn*
- 10) Apron over the over gown to be worn*
- 11) Track and Trace document in the visitor book to be completed*
- 12) If an agreed alternative entrance has been agreed upon completion of the visitor booklet the visiting professional will be taken to the agreed entrance
- 13) The visiting professional will be taken to the agreed location in the home and supported to leave the home when the visit has finished. The visiting professional will not be permitted to touch door handles or surfaces
- 14) If there is any risk that the visit will result in an AGP being performed, then visits will only be permitted in the person's bedroom. A face visor will be issued if this is a possibility

*Please note we do not accept PPE being worn by any visiting professional as we have no knowledge as to where the PPE has come from

* Please note if the information cannot be completed or concerns in the track and trace section of the Visitors booklet then entry will be refused

Professional Visitors Information – all 3 pages are to be completed in full on each visit

The completed information is to be uploaded and saved in the correspondence file on SharePoint for the family member they are visiting

The following steps are to be completed in full before entering any conversations around symptoms/ contacts to ensure all parties are protected as far as possible. Ensure that a 2metre distance is maintained whilst the visiting professional is completing the required infection control measures to reduce the risk of potential transmission

This form needs to be completed in full and signed by the Visiting Professional.

A copy of the information can be photocopied, and a copy given

Home		House	
Visiting Professional		Name of Family Member	
Date		Time	
Temperature Reading		Temperature recorded to be the safe zone, under 37.5 C	Yes / No Circle as appropriate
Please sign to say the following have been completed			Signed by the member of staff supporting the visit
1) Mask given prior to entering through the front door			
2) Mask applied and worn appropriately (hence no food or drink)			
3) Disinfection mat used upon entrance			
4) No coats, excess clothing or bags brought into the home			
5) Handwashing completed for a minimum of 20 seconds			
6) Glow machine used; no signs of bacteria identified			
7) Hand sanitiser used on hands, lower arms, and elbows [and pen]			
8) Over robe taken from the hooks and worn correctly			
9) Hairnet applied			
10) The parameters of the visit are confirmed [please detail below]			

Home		House	
Visiting Professional		Name of Family Member	
Date		Time	
Temperature Reading		Temperature recorded to be the safe zone, under 37.5 C	Yes / No Circle as appropriate
Please sign to say the following have been completed			Signed by the member of staff supporting the visit
<p>11) If an AGP is expected to occur during the visit, then a face visor must be issued to the professional. If a team member is going to be present when this occurs, they must also wear the following protective items</p> <ul style="list-style-type: none"> ➤ Overgown ➤ Hairnet ➤ Face Visor ➤ Apron ➤ Gloves <p>Aprons and gloves will be changed upon the AGP being completed and new PPE donned</p>			
<p>12) You have talked the Visiting Professional through the following information and requirements whilst in the home</p> <ul style="list-style-type: none"> ➤ The face mask must always be worn (hence no food or drink) ➤ The nurse call bell is to be used to contact a member of the team if the visit is one on one. The Visiting Professional cannot leave the room to find a member of staff. Please advise to use the emergency button when calling for a member of staff ➤ The over robe must always be worn and tied ➤ If they require the use of a bathroom then the nearest facilities are to be identified ➤ When the planned visit is over a member of the team will come to the agreed area where the visiting professional is [if the visit is a one to one] and support them to leave the building ➤ The robe is to be disposed of with the team member facilitating the visit upon exiting the building using the designated skip/basket ➤ The Visiting Professional will be asked to wash their hands before leaving ➤ Their face mask can be disposed in a white plastic bag, tied, and placed in the yellow clinical waste bin on exiting 			
If any aspects of this policy are breached, then the visit will be stopped			

Visiting Professional Screening Form

	About Me	Yes	No
	I confirm I have not visited a high risk travel zone in the last 14 days		
	I confirm no one in my household is currently showing any signs or symptoms		
	I confirm that I have not displayed any signs or symptoms in the last 48 hours.		
	I confirm in that in the last 14 days I have maintained full PPE when in any care setting		
	I confirm that none of the care settings I have visited in the last 14 days (including people at home) resulted in my interacting with anyone with a positive test result or signs or symptoms of COVID19		

	My Visit	Yes	No
	I confirm that I have attempted to complete the required support via remote means.		
	I confirm that in my view a visit is absolutely necessary and I am safe to visit this setting		
	I confirm that I have read and understood the policy of this setting		
	I confirm that I am using the PPE provided by Evolve and not my own		
	I am aware that my movement within this setting is restricted and if I need assistance at any time I must ring the call bell		

Please note: If you answer no to any of the following questions or you are unable to give a positive answer with confidence and accurate knowledge the visit will be refused

Visiting Professionals Name [please print]	
Visitor Signature	

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