



## POLICY: CORONAVIRUS COVID 19

### Document Control

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#### B. Document Details

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11	08/12/2021	Heather Mitchell Head of Nursing Services/RM	Helen Makaritis - CEO/NI	Logo and CQC paragraph/Kloes added
12	21/03/2022	Heather Mitchell Head of Nursing Services/RM	Helen Makaritis - CEO/NI	New PCR requirement added
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14	12/09/2022	Heather Mitchell Head of Nursing Services/RM	Helen Makaritis - CEO/NI	Revised LFT testing process

## Policy

Campden Home Nursing CIO is committed to protecting and promoting the health of its employees and the people to whom they provide healthcare.

## **Introduction**

The policy and procedure apply specifically to employment issues relating to the protection of staff against the COVID 19 virus.

## **Corona Virus COVID 19- Definition and risks associated with the virus**

The coronavirus, more specifically COVID 19, is a virus which affects your respiratory system. Risks associated with the virus apply to all healthcare professionals who are or could be working in close contact with people who have been affected by the virus.

## **Symptoms of coronavirus**

Symptoms of coronavirus, specifically COVID19, vary and range from mild to severe illness. Symptoms appear 2-14 days after exposure to the virus. Some symptoms include:

- A sore throat
- A cough- New and continuous
- A high temperature/ Chills
- Shortness of breath
- Loss or change to sense of smell or taste.

Such symptoms are very similar to other illness's including the common cold and influenza.

## **Staff at Risk**

All staff in regular contact with patients/families/carers who may have the virus are at risk of contracting COVID19. Similarly, all staff undertaking physical tasks with patients or being within close proximity (within 2 meters), mainly doctors, nurses and healthcare assistants are also at risk of transmitting the virus.

## **Aims**

The aims of the organisation are to ensure procedures are in place to:

- Identify staff who are at risk of contracting COVID19 and to provide Personal Protective Equipment (PPE) to minimise risk of contracting the virus.
- Identify any infected staff member or patient who may pose a risk to other people and guide them with the appropriate action.

## **Locums, Agency Staff, Students and Visiting Staff**

All of the above must comply with this policy.

## **Refusal to Comply with Policy**

Any member of staff who work with potentially infected COVID 19 patients/families/carers or may have the virus themselves, will be provided with appropriate infection control guidance and advised of potential risks. Failure to comply with guidance if you are known to have contracted the virus can result in a fine and will result in isolation as recommended by the World Health Organisation (WHO, 2020) and the National Health Service (NHS, 2020) guidance for healthcare workers.

## **Infected Employees and contact with an infected individual**

In both of the above cases an employee can return back to work after two consecutive negative LFT's.

## **Treatment for Coronavirus**

At present, vaccinations are available to adults. Antibiotics are ineffective as they do not work against viruses. Treatment aims are to relieve any symptoms that you may have while your body fights the virus. Do not self-administer non-steroidal anti-inflammatory's as these can worsen any respiratory symptoms. You must stay in isolation away from other people until you have fully recovered (to gain clarification regarding recovery, please call 111 for advice). Such treatment should be reiterated to patients/families and carers.

## **Personal Protective Equipment (PPE) and Safe Working Practice**

Campden Home Nursing will provide PPE, to prevent contamination of the virus. It is the responsibility of staff to use this equipment in line with manufacturers guidance and Public Health England (2020) guidance whenever there is a risk of contamination. The risk of transmission should be minimised through safe working procedures. Where possible, nurses should maintain a distance of patient's and families/carers of 2 meters.

Registered Nurses should use personal protective equipment for activities that bring them into close personal contact, such as personal care, administration of medication and contact with bodily fluids. Aprons, gloves, fluid repellent surgical masks and visors must be used in these situations. New personal protective equipment must be used for each episode of care and must be applied in a separate clean and well-ventilated room. It is essential that used personal protective equipment is stored securely within disposable rubbish bags.

These bags should be placed into another bag, tied securely and kept separate from other waste within the room. This should be put aside for at least 72 hours before being put in the usual household waste bin for disposal.

Thorough handwashing techniques should be used before and after any activity involving a patient/family or carer and as a part of day to day general hygiene

procedure. All staff will be provided with a guide to handwashing techniques. Alcohol gel should also be used if possible, after washing your hands **(See Appendix A)**

All PPE issued must be worn when completing any clinical task which puts you at risk of acquiring COVID19 and disposed of in accordance with the infection control policy and attached recommended guidance (Gloucestershire Covid-19 Outbreak Management Plan, 2020). **(See Appendix B)**

If a patient is suspected of or positive to COVID19, a settling service will be offered to patients if they wish to receive this service, based on individual risk assessment to staff, patients and families. Guidance from Gloucestershire and Worcestershire states that a surgical mask and visor must be worn whilst nursing a patient positive to covid19. Campden Home Nursing have been given a small supply of FFP3 masks. Staff who have been fit tested for FFP3 masks may wear these instead of a surgical mask during a settling visit, in conjunction with a visor and other standard PPE.

To minimise any unnecessary contact or time required with the patient and their family, nurses will arrive with the patient at the usual start time of a shift, or a negotiated time between patients, family and nurses to ensure safety and continuity. The nurse will then undertake any nursing intervention required to ensure the patient is safe and comfortable and to reiterate appropriate contact details for out of hours services before leaving the patient's home. The Coordinator will then contact the patient and/or family in the morning to assess any symptoms and liaise with the district nursing team if required. Such implementation reduces risk to our patients, their families, and Campden Home Nursing staff.

Should a patient die, their notes will be collected by a nurse co-ordinator undertaking the bereavement visit. The nurse co-ordinator must ensure that the plastic folder containing the patient's notes is cleaned using wipes provided and stored safely and securely in a locked cabinet for 72 hours before they are handled by administrative staff to be filed away. If the patient were covid19 positive, we will request that the family keep the notes for at least 10 days before the nursing coordinator collects these.

### **Aerosol Generating Procedures and PPE**

Patients who require aerosol generating procedures such as Continuous Positive Airway Pressure (CPAP) devices and high flow oxygen therapy will be considered as a risk, regardless of being confirmed to have Covid19 or negative to the virus. Therefore, all clinical staff will be expected to wear a surgical mask and visor in addition to their standard PPE when undertaking a shift. If the patient were positive to covid19, a settling service would be offered to the patient.

### **Lateral Flow Tests, Fit Testing and Vaccinations**

All staff are no longer required to complete regular LFT's unless they have come into direct contact with an infected individual as discussed above.

Please refer to the Standard Operational Procedure **(See Appendix C)** for guidance on how and when to undertake the testing and the procedure for reporting results.

All clinical staff who have expressed willingness to nurse patients who are positive to covid19 have been fit tested with the FFP3 masks provided by Campden Home Nursing. Nurses and HCA's in possession of FFP3 masks following approved fit testing, will therefore be expected to continue to nurse patients who have been confirmed to be positive to covid19.

Any concerns should be raised immediately with the Co-ordinator on call, the Head of Nursing Services. Each patient and their home environment will be individually risk assessed prior to allocating a settling service to ensure safety of our clinical team. All staff will be offered the opportunity to receive a vaccination to additionally increase their safety.

### **Standard Operating Procedure and Guidance for Covid19**

Campden Home Nursing Standard Operating Procedure and Guidance for Covid19 for staff, patients and relatives have been developed and implemented since April 2020 **(See Appendix D)**. The Nurse Coordinator will be responsible for undertaking a risk assessment verbally with the patient/relative prior to a Nurse commencing their shift. Should any suspected or positive cases of Covid19 arise, patients' will be assessed on an individual basis and discussed with the Registered Nurse to implement an individual plan of nursing.

### **Confidentiality**

As with any medical condition, strict confidentiality will be maintained within Campden Home Nursing regarding an individual's identity. However, if you are known to contract or suspect that you may have COVID19, necessary precautions must be undertaken, and information shared with appropriate professionals to minimise the risk of further contamination to other people.

### **Sickness Absence**

An employee who is absent from work due to coronavirus COVID 19 symptoms or diagnosis is subjected to normal procedures as per your contract or Campden Home Nursing Sickness Policy for long/short term sickness.

### **Related Policies**

This policy should be read in conjunction with the NMC Code and other policies:

- Record Keeping Policy
- Infection Control Policy
- Incident Reporting Policy
- Sickness Reporting Policy
- Health and Safety Policy

## **CQC KLOES**

CHN strives to exceed the expectation of the stated CQC Key Lines of Enquiry at all times. We try to ensure that all our services or actions mean that we are giving the highest quality of care and our patients or carers have the best quality of life possible. We aim to meet as many of the following criteria as possible:

Safe, Effective, Well Led, Caring and Responsive

This policy in particular relates to the following KLOE's:

- Safe
- Well Led
- Caring
- Responsive
- Effective

## **Policy Implementation**

CHN Nurses should also print off and place in their nursing file, a hard copy of this policy in conjunction with the current version of the Staff Handbook and other policies with them to all nursing shifts. It is the CHN Nurse's responsibility to ensure that the hard copy they retain of any policy, is up to date. The simplest way of achieving this is to print off the copy attached to the email alerting staff of a new or amended policy and replace the previous version. You should also ensure that you have to hand in your nursing folder, the latest version of the Mental Capacity Act Code of Practice (2016) found online at; <https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice>

## **References**

Gloucestershire Covid-19 Outbreak Management Plan (June, 2020). *Prevent. Contain. Respond. Monitor.* Available at: <https://www.gloucestershire.gov.uk/media/2099097/covid-19-local-outbreak-management-plan-first-edition.pdf>

National Health Service (2020) *Corona Virus (COVID19): Guidance.* Available at: <https://www.gov.uk/government/collections/coronavirus-covid-19-list-of-guidance>

Public Health England (2020) *Covid-19: Guidance for supported living provision-community health services.* Available at: <https://www.gov.uk/government/publications/covid-19-residential-care-supported-living-and-home-care-guidance/covid-19-guidance-for-supported-living-provision#personal-protective-equipment>

Public Health England (2020) *Guidance for Contacts of People with Confirmed Corona Virus (Covid-19) Infection who do not Live with the Person.* Available at: <https://www.gov.uk/government/publications/guidance-for-contacts-of-people->

[with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person/guidance-for-contacts-of-people-with-possible-or-confirmed-coronavirus-covid-19-infection-who-do-not-live-with-the-person#:~:text=If%20you%20have%20been%20informed,of%20COVID%2D19.](#)

World Health Organisation (2020) *Stay at home: guidance for households with possible coronavirus (COVID19) infection.* Available at: <https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>



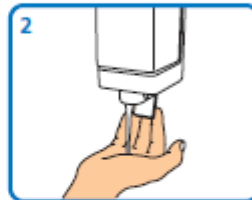
## Appendix A- Handwashing Procedures



# Hand-washing technique with soap and water



1  
Wet hands with water



2  
Apply enough soap to cover all hand surfaces



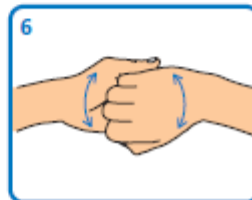
3  
Rub hands palm to palm



4  
Rub back of each hand with palm of other hand with fingers interlaced



5  
Rub palm to palm with fingers interlaced



6  
Rub with back of fingers to opposing palms with fingers interlocked



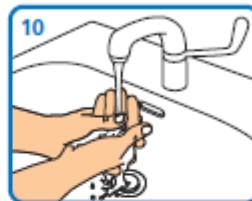
7  
Rub each thumb clasped in opposite hand using a rotational movement



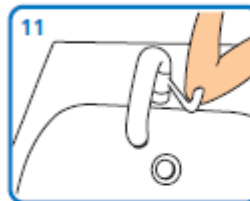
8  
Rub tips of fingers in opposite palm in a circular motion



9  
Rub each wrist with opposite hand



10  
Rinse hands with water



11  
Use elbow to turn off tap



12  
Dry thoroughly with a single-use towel

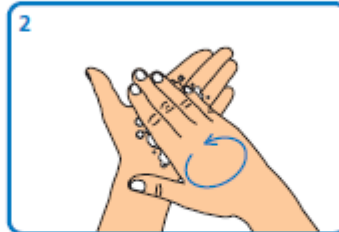


13  
Hand washing should take 15-30 seconds

# Alcohol handrub hand hygiene technique – for visibly clean hands



1 Apply a small amount (about 3 ml) of the product in a cupped hand



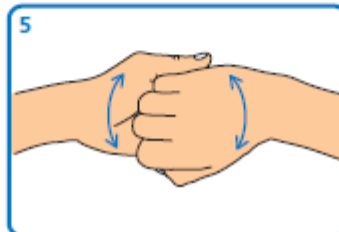
2 Rub hands together palm to palm, spreading the handrub over the hands



3 Rub back of each hand with palm of other hand with fingers interlaced



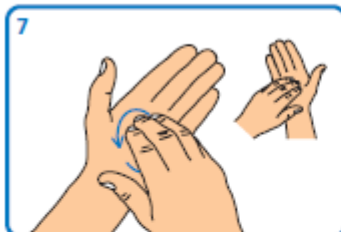
4 Rub palm to palm with fingers interlaced



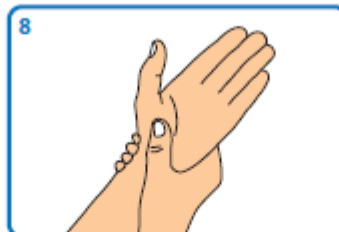
5 Rub back of fingers to opposing palms with fingers interlocked



6 Rub each thumb clasped in opposite hand using a rotational movement



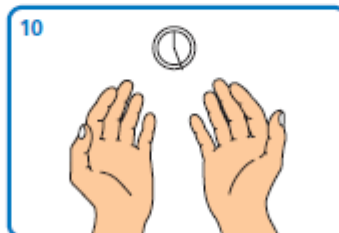
7 Rub tips of fingers in opposite palm in a circular motion



8 Rub each wrist with opposite hand



9 Wait until product has evaporated and hands are dry (do not use paper towels)



10 The process should take 15–30 seconds

## Appendix B- PPE Gloucestershire NHS Guidance

**Direct patient contact: All patients**

### **DONNING Personal Protective Equipment (PPE) for Risk of Coronavirus HOSPITAL, HOME & CLINIC SETTING**

**Type IIR face mask, visor\*  
Apron and nitrile gloves**

\* For patients who are not suspected or confirmed risk assess visor use: for risk body fluid splashing

**1<sup>st</sup> action: PERFORM HAND HYGIENE**

Before donning, healthcare workers should ensure hair is tied back securely and off the neck and collar, remove jewellery or pens, ensure they are hydrated.

Healthcare workers should put on PPE in the following order before entering the room where the patient is being nursed:

**IN A HOME SETTING; FACE PPE TO BE APPLIED PRIOR TO ENTRY TO PATIENT**

**HOME**

**Before entering patient room** (behind the closed door between you and the patient)

1. Perform **hand hygiene**
2. Staff to put on **Type II R fluid resistant surgical mask** (in community apply this & visor outside house)
3. **Visor\*** (note: some type IIR masks have a visor attached this can be worn instead of separates)
4. Plastic **APRON**
5. Nitrile **GLOVES**

During donning each item must be adjusted as required to ensure it fits correctly prior to entering the patient environment.

**Please check you have the kit you require prior to entering the room where the patient is**



## PPE Removal

PPE should be removed in an order that minimises the potential of cross contamination.

- **LEAVE ON Respiratory (Face) PPE until after LEAVING the home.**
- **Avoid contact between soiled items and any area of the face (eyes, mouth, nose)**

In separate room to patient: the outside of respiratory protective hood (**if worn for AGP**) should be cleaned whilst in situ. Assume that outside and front is contaminated. Clean with Universal Clinell wipes.

1. **GLOVES** – carefully grasp the outside of the glove and peel down into the palm of the other glove, place fingers inside other glove without touching the outside of the glove (as illustrated below), peel other glove off. Discard into waste bag.



**PERFORM HAND HYGIENE – 30 seconds alcohol rub/foam**

- Loop fingers inside front of plastic outer apron at the neck area and GENTLY pull the apron, this will break the ties gently so as not to generate dispersion
- Pull apron away from neck & shoulders touching inside only & roll apron down towards waist ties
- GENTLY pull the apron, to break the waist ties so as not to generate dispersion, keep rolling the apron into a bundle and discard into waste bag

### 2b LONG SLEEVED GOWN (if worn for AGP)

- Unfasten neck & undo waist ties & peel to shoulders
- Wearer will then slip arms out of the inner gown and gather the gown into a bundle
- Hold removed gown away from the body, roll into a bundle
- Discard into waste bag.

**PERFORM HAND HYGIENE – 30 seconds alcohol rub/foam**

## LEAVE THE PATIENT'S HOME

**PERFORM HAND HYGIENE – 30 seconds alcohol rub/foam**

### 3 Mask and Visor (or Respiratory Hood) – THE STEP MAY NEED TO BE REPEATED TO REMOVE BOTH ITEMS

- Outside of mask & visor is contaminated
- Handle only by head straps – do not touch the front of the visor or mask
- Close eyes and tip head forward
- Lift away from face and allow mask/visor to fall away from face
- Discard into waste bag (Clean the respiratory hood before returning to storage box)



**PERFORM HAND HYGIENE – 30 seconds alcohol rub/foam**

PPE Waste should be double bagged (in a household waste bags) and left at the patient's home. This can go in their patient's waste stream after 72 hours as by this time any viral load will be significantly reduced.

### CATB Waste Management flow chart for non-compliant patient

This is **ONLY** for **home visits** where the **service user or carer is unable** to follow the Trust guidance on PPE waste disposal as could result in **physical or mental harm to the patient (Staff member to risk assess if the patient or carer is unable to comply with process)**. For all other patients the waste management trust policy must be followed as stated in **action card 4a**.

Unsuitable to leave contaminated PPE at the property and waste collection is within the next 72 hours follow this flow chart and staff member take x1 clinical waste bag to visit.

If waste collection *after 72 hours* and it is safe to for patients' mental health, follow instructions on bottom of action card 4a

#### **At patient's home:**

1. Staff generate clinical waste at the patients' home via following action card 4a
2. Place clinical waste from action card 4a into 1x clinical waste bag and tie up bag  
(You now do not need to double bag waste)

#### **At Car: (If ever applicable to Campden Home Nursing Staff)**

1. Put the clinical waste bag into a fitted plastic box (with lid)
2. Take box with waste in it to vehicle and transport to the **nearest clinical waste disposal point**- ideally immediately but if this is not practical or possible, this it should be done at end of the clinical shift

#### **Once parked at clinical waste disposal point: (If ever applicable to Campden Home Nursing Staff)**

1. Take the following from the car to the clinical waste disposal point:
  - A) Plastic box with waste from the patients' home
  - B) Alcohol gel or green universal wipes
  - C) 1x clinical waste bag: so gloves (and wipes if used) can be disposed of after usage

#### **Once at clinical waste disposal point: (If ever applicable to Campden Home Nursing Staff)**

1. Perform Hand Hygiene with Alcohol Gel or Green Universal Clinell Wipes (dispose of wipes into clinical waste bag)
2. Put on gloves
3. Take clinical waste bag out of plastic box and put into external 770 litre yellow bin
4. Dispose of Gloves into clinical waste bag and perform hand hygiene
5. Decontaminate plastic box with green universal clinell wipes and dispose of wipes into clinical waste bag
6. Dispose of clinical waste bag into 770 litre yellow bin

## **Appendix C- Lateral Flow Testing Standard Operational Procedure**

### **Standard Operating Procedure- Lateral Flow Testing**

#### **Covid-19**

<b>Version</b>	<b>1</b>
<b>Title</b>	<b>Use of self-administration Covid-19 Lateral Flow devices for Asymptomatic Staff testing</b>
<b>Author</b>	<b>Helen Makaritis Campden Home Nursing CIO</b>
<b>Date Issued</b>	<b>January 2021</b>
<b>Location</b>	<b>Jecca's House, Chipping Campden</b>
<b>Review Date</b>	<b>March 2021 or sooner if Government Guidance changes</b>

#### **Scope**

This Standard Operating Procedure details the use of self-administered Covid-19 Lateral Flow devices for twice weekly asymptomatic staff testing

#### **Introduction**

Lateral Flow Antigen tests detect the presence of Covid-19 viral antigen from a nasal swab sample. The test is self-administered using a handheld device which produces results in 30 minutes

It is anticipated that twice weekly testing of staff will reduce the risk of transmission of Covid-19 and will enable staff who have a positive result to arrange a PCR test and self-isolate promptly thus protecting colleagues, patients and their families.

#### **Inclusion criteria**

Lateral flow test kits are being provided to all staff who have direct patient contact and those staff that are working in clinical areas, catering staff and housekeeping.

All other staff will continue with the weekly Polymerase Chain Reaction (PCR) swab test

#### **Distribution**

All eligible staff will be issued with a self-test kit

#### **Testing Procedure**

Each Innova SARS- CoV-2 kits contains

- 25 foil pouches containing test cartridge
- 2 vials of 6mls buffer solution
- 25 extraction tubes and caps
- 25 sterilised swabs for nasal collection only

- Manufacturer's instructions (Do not follow the instructions to include throat swab. Nasal swabbing only has been agreed for NHS staff, approved by the MHRA and manufacturers informed)

Box to be kept at home and stored between 4C and 30C

### **Scope of use**

Tests must **not** be used:

- Instead of a PCR test. If lateral flow is positive or you have any signs or symptoms of Covid-19 a PCR swab is required
- Within 90 days of a positive Covid-19 PCR swab
- To test other household members

### **Regime**

Staff should test themselves twice a week, every 3-4 days

The test can be performed any time of the day

The test should be performed in sufficient time before your next shift to allow absence to be reported in a timely way for example if you due to work an early shift self-swab the evening before thus preventing the risk to operational cover for our patients.

### **Before you start**

- Watch the following demonstration video (4 minutes 30):

<https://learninghub.nhs.uk/self-swab>

- Wash your hands thoroughly for 20 seconds using soap and water
- Blow your nose
- Clean and dry a flat surface where you will take test and have a timer ready
- Check your contents, check expiry date
  1. Nozzle cap
  2. Extraction buffer bottle
  3. Extraction tube
  4. Rapid test strip
  5. Sealed swab

You will also need a small container (1 inch deep ie medicine pot / egg cup)

### **Prepare your Test**

1. Gently blow your nose
2. Wash hands or use sanitiser
3. Check the swab
4. Place the extraction tube in a small cup to keep upright
5. Place 6 drops of extraction buffer into extraction tube

#### **Take swab sample**

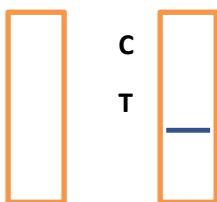
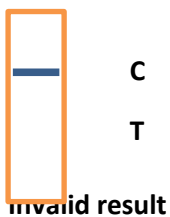
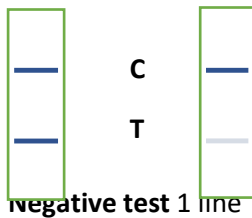
1. Open package and remove swab

2. Put the swab gently into one nostril (insert 1.5cm / half an inch) You may feel some resistance. Roll swab head slowly along the inside of the nostril 10 times. Remove the swab and repeat 10 times in other nostril
3. Place the fabric end of the swab into the extraction tube. Press the swab head against the edge of the tube with force while rotating the swab around the tube for 10 seconds to squeeze as much fluid as possible.
4. Take out the swab while squeezing the tube and fabric end of the swab. Place swab in wrapper and dispose of in household rubbish bin.
5. Press the nozzle cap tightly on the tube to avoid any leaks
6. Turn the tube upside down and lightly squeeze 2 drops into the specimen well
7. Dispose of the test in normal household waste

## Results

Leave the test for exactly 30 minutes

**Positive result** 2 lines, even faint lines will indicate positive result.



## Reporting and Recording Results

All results must be recorded within 24 hours of test completion on the Google form (link below)

[https://docs.google.com/forms/d/1i8ag0\\_MAFh24O3xV2MFXkIINtmXvGY3EIdoWmFTgJMY/edit?ts=5feb572b&gxids=7628](https://docs.google.com/forms/d/1i8ag0_MAFh24O3xV2MFXkIINtmXvGY3EIdoWmFTgJMY/edit?ts=5feb572b&gxids=7628)

Taking the test is voluntary, however if you choose to take the test you are agreeing to report positive or negative results which is mandated by Public Health England

### Information required:

Name



Date of Birth

NHS Number

Date and Time of swab

Any symptoms

**Result of swab**

This information is recorded on a spreadsheet and stored securely within CHN Covid folder.

Heather Mitchell, Emily Guest and Helen Makaritis have access to the results, it is necessary for this access to maintain accurate records and report as required to PHE.

By accepting an Innova swab kit you are agreeing to the consent of access to your results by the above staff only.

This information will not be stored on your personal file and your personal details will be unavailable for access by anyone else. This data is the property of CHN and is fully compliant with GDPR

**Positive**

If your result is positive you must:

- Immediately self-isolate in accordance with current government guidelines
- Contact the Pillar One NHS staff testing hub on link below to arrange a PCR swab:  
[https://www.ghc.nhs.uk/coronavirus/testing-referral-form/#gf\\_38](https://www.ghc.nhs.uk/coronavirus/testing-referral-form/#gf_38)
- Contact your line managers, Emily Guest, Heather Mitchell of Nursing Services or Helen Makaritis, General Manager.
- If a positive PCR result is confirmed pause Lateral flow testing for 90 days

**Negative**

If result is negative and you have no signs or symptoms no further action is required

If the result is negative but you have signs or symptoms of Covid-19 arrange a PCR swab (as above) and self-isolate

**Invalid**

If your result is Invalid repeat the test with a new kit. This can be done straightaway

**Advice and Support**

Please discuss with your line manager if you have any concerns or questions or contact Emily Guest or Heather Mitchell directly.

.....  
**Please complete and return the form below to Emily Guest before you begin self-testing:**

**I have read this Standard Operating Procedure and understand the content**

**I agree to Self-Test for Covid-19 and record my results after each test**

YES
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**I have watched the NHS training video on the link shared and I am confident with the process required**

YES

**NAME**

**SIGNATURE**

**DATE**

## **Appendix D - Standard Operating Procedure and Guidance**



### **Standard Operating Procedure – COVID-19**

Please refer to the latest government guidelines for information for returning travellers as this will ensure you are following the most up to date information. This is available on the government website ([www.gov.uk/coronavirus](http://www.gov.uk/coronavirus)), your line manager or the COVID-19 folder which is available in the Campden Home Nursing Office.

If you suspect you have been exposed to COVID-19 either after travelling to an affected area or by coming into contact with others who have you should **NOT ATTEND YOUR ROLE WITHIN CAMPDEN HOME NURSING IN ANY CAPACITY.**

#### **Hospice at Home Service**

Hospice at Home should follow the latest information on the government website as outlined above.

If you enter a home and are presented with a potential COVID-19 patient, you must contact the Nurse manager as soon as possible. Guidance whilst nursing a patient positive to Covid19 as stipulated within the policy, must be followed.

It is advised that staff are supplied with:

- Facemasks
- Visors
- Clinell wipes
- Gowns (for suspected and confirmed cases)
- Gloves
- Clinical Waste Bags
- Hand Gel

#### **Staff Considerations**

Any staff who are involved in the care of any possible cases should contact NHS 111 as per government guidance especially if they have developed compatible symptoms. Should any staff member come into the building and then suspect they have COVID-19 – follow points 10, 11, 12 in the ‘Guidance for social or community care and residential settings on COVID -19. Please remember that handwashing is just as effective as hand sanitising. If you have any questions or queries, please speak with your manager.

## **Campden Home Nursing and COVID-19**

### **Patient and Relatives update**

**The spread of the coronavirus and subsequent risk of COVID- 19 infection is unprecedented and poses many challenges to us as a society and the Campden Home Nursing Team as a health care provider.**

**Our commitment to you is that we will provide as much support as we can to you and your family within your home environment during this difficult time and within the restrictions imposed that aim to keep us all safe from the virus.**

#### **What we ask of you THE PATIENT AND FAMILY/CARERS:**

- That you comply with Government advice regarding self-isolation or social distancing, dependent upon your circumstances.
- That you advise us immediately:
  - if you or a member of your family/carer become unwell with symptoms of coronavirus (e.g. a temperature above 38c and dry cough)
  - if you/ they have contact with somebody diagnosed with the virus.
- That you bear with us if we need to wear more protective equipment than normal e.g. masks and gloves, which can seem a barrier for communication but will protect us all.
- That we may ask you to provide us with facilities to sit a little farther away, at least 2 metres away) or in another room for any prolonged visits.
- That you ensure that there are facilities for us to wash our hands as often as necessary

#### **What you can expect of us THE CHN TEAM:**

- That we will communicate any changes to you as soon as possible including any changes in Government policy that may affect our service.
- That we will ensure, as far as we are able, that visiting clinical staff do not pose any further risk to you of transmitting the virus.
- That we will explore as many flexible options of providing care with you as reasonably possible, including telephone calls and messaging.

If you have any questions regarding our service and COVID-19 then please call our Nurse Coordinator Phone on **07780 660141**