

Fife COVID-19 Assurance Visit Tool

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| Name of Care Home: | Orchard Head House | Date and time of visit: | 22/04/2021 10:00 hrs |
| | | Person in charge at time of visit: | Sally Eady |
| Visiting team names: | Mary Kinninmonth | Care Home Manager: | Sally Eady |
| Status of Service | | | |
| Number of beds in care home: | 34 beds | Number of residents: | 32 |
| Number of residents positive for Covid-19 | 0 | Number of residents nearing end of life: | 1 |
| Number of residents tests still to be carried out: | 5 sample tested each month | Any Staffing Concerns Highlighted? | Yes/No (Please circle) |
| Normal Staffing levels: (RN & nRN) | Early: 6 staff plus staff member to support with visits | Current Staffing Levels: (RN & nRN) | Early: 6 staff plus staff member to support with visits |
| | Late: 6 staff | | Late: 6 staff |
| | Night: 3 staff plus 1 on call | | Night: 3 staff plus 1 on call |
| | | Has the Business Continuity Plan been updated to include Covid Contingency planning? | Yes/No |

This tool should be used as a mechanism to ascertain the current practice in relation to Standard Infection Control Precautions and the provision of fundamental nursing care. This should be done in a supportive manner providing recognition and praise for areas of good practice and as an opportunity for the provision of advice and support for any identified areas for improvement. Further education can be arranged if required to address any gaps in knowledge or practice.

Senior nurses undertaking the visit should use their observational skills but should also ask to see evidence of care plans and may speak to staff and residents in order to answer the questions below.
At all times this should be done using a collaborative and supportive approach to achieve a mutually positive outcome.

| Nursing Tool | | | | |
|--|------------|-----------|------------|---|
| Observations | Yes | No | n/a | Comments & Recommendation |
| Entrance and corridors | | | | |
| Signage is present at the front door and all delivery entrances noting the service is closed to visitors because of Coronavirus restrictions? | X | | | |
| Alcohol Gel and face masks available at entrance? <ul style="list-style-type: none"> • Is the PPE covered? Is there a clinical bin for removal of masks? Are there wipes available to decontaminate equipment (e.g. thermometer) after use? | X | | | Wipes, gel and extra masks available at entrance and throughout the home. |
| Are there any floor markings to indicate the 2 meter social distancing rule for visitors? | X | | | Not on floor as falls risk but visible on handrails throughout the home |
| Review visitor's log - Is there evidence of only essential visits being undertaken? | X | | | Family visits are now taking place also as per government guidelines, with designated areas for this. Family and residents also have access to gardens all round the care home. |

| Nursing Tool | | | | |
|--|-----|----|-----|--|
| Observations | Yes | No | n/a | Comments & Recommendation |
| Is there a 'Covid 19 visiting professional's questionnaire' form to complete before entry? | X | | | There is also a separate questionnaire for family members. All family members/ visiting professionals who have not already carried out a lateral flow test have lateral flow test at care home before visit, |
| Premises appear clean, tidy, clutter free and in good repair? | X | | | Care home very well looked after with beautiful gardens |
| Hand Hygiene | | | | |
| Hand washing facilities are designated for staff in their changing area and on each floor or unit within the home? Are there facilities at point of care? | X | | | All bedrooms also have en suite facilities |
| Do all wash hand basins have liquid soap, paper towels and a pedal bin or open bin for waste towels (no "flip bins")? | X | | | |
| Is there a hand washing poster displayed at each sink? | X | | | Also visible throughout the home |
| Is there a ready supply of alcohol gel dispensers and/or personal hand gel provision? NB - If alcohol gel is not at every resident's room or point of care then do staff carry personal hand gels? | X | | | Very visible throughout the home on all corridors |
| Staff are observed carrying out effective hand washing and/or use of alcohol gel technique at the correct times? | X | | | |
| Are there documented checks by manager on hand hygiene compliance? If no audit in place – NHS Fife audit can be offered | X | | | Evidence of 2 hours hand washing supervision |
| Staff Uniforms | | | | |

| Nursing Tool | | | | |
|--|-----|----|-----|--|
| Observations | Yes | No | n/a | Comments & Recommendation |
| There is evidence that staff are not travelling to and from work in their staff uniform/work clothes that are worn in service? (ask to see changing room) NB - Staff clothing should not be stored together or hanging exposed. Should be stored in locker or box with lid (which should be wipeable) | X | | | Staff do not travel in uniform, written guidance given to all staff on what to do on arrival home to protect family i.e. change own clothes in separate room, wash uniform in laundry bag provided at appropriate temp. Uniforms taken back to work in separate bag and changed into uniform in changing room. |
| Is manager is checking compliance? | X | | | |
| Are staff compliant with recommended uniform guidance? <ul style="list-style-type: none"> • forearms exposed (bare below the elbows) • hand and wrist jewellery removed (a single, plain metal finger ring is permitted but should be removed (or moved up) during hand hygiene) • finger nails are clean, short and that artificial nails or nail products are not worn • cuts or abrasions are covered with a waterproof dressing | X | | | |
| Is staff uniform being laundered on premises? Or appropriate advice available on home laundry? | X | | | As above |
| If staff are taking uniform/work wear home for washing is it being carried in a disposable or water soluble bag and brought back in clean bag? | X | | | Care home staff are issued with laundry bags |
| PPE | | | | |
| Is appropriate PPE available in appropriate areas? E.g. disposable aprons, eye/face protection, FRSM and nitrile gloves. This should be available at point of care throughout the home appropriate to size of area. Clinical bin should be inside resident's room/point of care for staff to doff PPE | X | | | Clinical bins clearly visible |

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|--|------------|-----------|------------|---|
| Observations | Yes | No | n/a | Comments & Recommendation |
| Is PPE seen to be used appropriately? Staff should be wearing droplet PPE when providing direct care or carrying out a task. Staff should not be wearing PPE in between – point of care only. FRFM to be worn at all times. Gloves not required for tasks such as handing out refreshments – when only apron is required. | X | | | |
| Is there clear guidance on PPE use e.g. Poster? | X | | | Visible on all corridors |
| Is PPE don and doffing technique correct with used PPE disposed of correctly? (Both observed and posters available) | X | | | |
| Cleaning | | | | |
| Ask staff to show the products in use for cleaning and disinfection and ask about dilution of disinfectants/sanitiser? (This must be a combined detergent/disinfectant, at a dilution of 1000 parts per million available chlorine (or whatever product has been recommended for use by the facility). | X | | | Seen in laundry room |
| Is there a poster to remind staff about correct products and dilution? | X | | | |
| Is there a robust cleaning schedule (min. twice daily) for equipment and frequently touched surfaces such as handrails, door handles etc? There should be a domestic, nursing and the 'Covid Stop and Pause' cleaning schedules. If residents are unable to leave their room, then they should be on 'Stop and Pause' schedule. | X | | | Handrails/ banisters/ door knobs cleaned hourly, cleaning regime twice daily and de fogging also carried out. |
| Is there dedicated reusable care equipment available for use for individuals with confirmed COVID-19 or is any equipment removed from isolation/cohort areas cleaned and disinfected before any use elsewhere? Is there a system in place to know how the equipment is clean? E.g. stickers/signs | X | | | |
| Infection Control Measures | | | | |
| Are staff cohorted to care for either confirmed/symptomatic or non-symptomatic individuals? | X | | | No covid positive patients at present |

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| Observations | Yes | No | n/a | Comments & Recommendation |
| Are confirmed and possible cases isolated; doors should be closed where possible; and appropriate signage in place (maintaining confidentiality as appropriate)? | X | | | If needed |
| In the event of a suspected COVID outbreak, has this been reported to Public Health? (Two or more confirmed or suspected cases of COVID-19 within the same setting over 14 days or a single new case with symptoms consistent with COVID-19 infection, likely to be due to spread of the virus within the care home) | X | | | |
| Are residents' personal items stored in their room and not left in communal areas? NB: Surfaces should be kept uncluttered, where possible, to aid regular cleaning. | X | | | All communal areas uncluttered |
| Have portable cooling fans been removed from areas (risk of airborne dissemination of virus)? | X | | | None in place |
| Residents Health & Care | | | | |
| Do residents look well kempt? | X | | | |
| Is there evidence of good interaction between staff and residents? | X | | | |
| Are staff checking residents for symptoms of COVID 19, such raised temperature, a new continuous cough, or loss of/ change in sense of smell or taste, or other signs of illness? (Please comment) | X | | | Twice daily |
| If a resident becomes unwell staff have contacted the GP (or other appropriate clinician e.g. DN, ANP, Palliative Care, UCSF) for clinical advice? | X | | | |
| Are residents' weights being regularly monitored (minimum monthly) and appropriate action taken in the event of significant weight loss? E.g. evidenced in care plan | X | | | Close communication with dietician if needed |
| Are food and fluid charts used for any residents at increased risk to ensure that they are adequately hydrated and are eating? | X | | | If any concerns fluid balance in place |
| Are Staff providing additional fluids and nutritional supplements to residents who have reduced intake and seeking professional advice if required e.g. for supplements? | X | | | |

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|--|-----|----|-----|---|
| Observations | Yes | No | n/a | Comments & Recommendation |
| Individualised care plans are in place for residents including assistance required for ADLs? | X | | | Care Plans reviewed monthly or sooner if any changes |
| Is there evidence of appropriate Pressure Area Management and Care provision? e.g. risk assessment, care planning, equipment provision wound care and regular review | X | | | All beds have pressure relieving mattresses, higher risk patients have electric air mattresses. District nursing teams support with wound management, palliative care or any nursing support needed |
| Is there evidence that appropriate fundamental care is provided at regular intervals? | X | | | |
| Facilities are available for virtual visiting for residents and families? | X | | | Access to iPad if patients do not have their own, skype also available. Extra phones put in patient rooms to allow patients to communicate with family and friends |
| Communication and Anticipatory Care Planning | | | | |
| Residents with capacity are able to say why the precautions are being taken – ask one person? | X | | | |
| Records are kept if resident is being permitted to go out for exercise with staff supervision and adherence to social distancing rules? | X | | | Residents exercise within grounds |
| There is a clear record of patients fundamental care needs and pre-existing conditions to ensure external staff will be fully informed if required to support care delivery? | X | | | Evident in care plans |
| Family contact details are up to date and readily available? | X | | | |
| Records are being kept of all communications with relatives regarding precautions taken and any discussion with GP about anticipatory care planning? | X | | | |
| ACP in place with indentified ceilings of care? | X | | | |
| Anticipatory (just in case) medicines are available? | X | | | Just in case boxes prescribed when needed |
| AWI forms correctly completed and up to date? | X | | | In care plans |

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|--|-----|----|-----|--|
| Observations | Yes | No | n/a | Comments & Recommendation |
| DNACPR forms correctly completed and up to date? | X | | | In care plans |
| Education & Training of staff | | | | |
| Ask to see record of the training provided to staff around COVID-19 infection prevention and control? | X | | | In house training provided, staff have mandatory training to complete |
| Has the facility ensured that staff are aware of the correct PPE to use; when it must be worn and removed; and that it must not be used inappropriately? | X | | | Written guidance provided |
| Staff are aware and have received training on how to contact GP, Public Health, HSCP, Care Commission and relatives – check record? | X | | | Written information provided |
| Staff have up to date written briefing or access to web based materials to supplement verbal messages? | X | | | E learning plus in house training by manager with teaching qualifications |
| Staff Health & Wellbeing | | | | |
| Have staff who may be at increased risk due to underlying health conditions, immunosuppression or pregnancy been provided with appropriate advice from line management/occupational health? | X | | | One newly pregnant staff member |
| Is there signage to remind staff about reporting illness, COVID-19 testing and return to work? | X | | | |
| Have confirmed and possible staff cases been sent home from work for a minimum of 7 days? | X | | | All staff now use lateral flow testing |
| Have staff been provided with adequate access or signposting to advice and support, including psychological support? | X | | | Visible posters throughout home, manager has 1:1 support meetings with all staff |
| If staff have any concerns and who they can seek advice from? | X | | | |
| Laundry | | | | |
| Is the laundry being appropriately managed? Look at laundry for residents clothing and linen : <ul style="list-style-type: none"> • cleanliness • storage – should be in designated areas and preferably enclosed in boxes. If on trolley must have impervious cover • hand wash basin for staff • should have clean and dirty areas and one way system if possible | X | | | New washing machines in place to support with sanitizing laundry. All clean washing put in boxes with lids. Hand wash basin in laundry for staff |

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| Observations | Yes | No | n/a | Comments & Recommendation |
| Check temperature used in machine and verify that there are water soluble bags for soiled items? | X | | | |
| Waste Management | | | | |
| Look for poster about using paper tissues, binning after use and washing hands (cough/sneeze etiquette) | X | | | Posters visible |
| Is poster on waste segregation evident | X | | | |
| Is correct waste segregation adhered to (Check colour coding of bags and segregation is observed and ask staff about it) Do they have a contract for their waste? | X | | | |
| Traceability of any clinical waste generated (e.g. labeling) Should be ¾ full and swan neck closed or covered with tape and labeled. All waste should be traceable (source/dated) | | X | | No labeling required |
| Communal Areas | | | | |
| Is the Staff Room(s) Tidy? <ul style="list-style-type: none"> • Clutter? • Is it risk assessed for how many staff can use at one time? • Decontamination equipment and clinical bin (for masks) • Handwashing facilities and face masks to apply once finished break | X | | | Other area available if needed |
| Is the Dining room(s) tidy? | X | | | Some patients choose to have meals in own room |
| Is the Sitting Room(s) tidy? | X | | | Some rooms used for family visits |
| Is there evidence of social distancing of residents in communal areas such as dining rooms and sitting rooms? | X | | | Both inside and out |

| Nursing Tool | | | | |
|---|------------|-----------|------------|--------------------------------------|
| Observations | Yes | No | n/a | Comments & Recommendation |
| Is there evidence of social distancing by staff in : <ul style="list-style-type: none"> • changing room(s) – if limited to one room , are there staggered times? • staff room(s) • when giving handover • has a risk assessment for how many staff in room at one time | X | | | |
| Are staff appropriately removing PPE prior to breaks in staff rooms? | X | | | |
| Are staff washing hands before entering the premises if they have gone outside for a cigarette during their break? Is there social distancing in place? 1 staff member at a time? | X | | | |
| Areas of good practice | | | | |
| <ul style="list-style-type: none"> • Patients appear well looked after and are happy to be living here • Home very clean and de cluttered in communal areas • Evidence of recreational activities both inside and outside including bingo reiki, bowling and memory games carried out by activities co-ordinator • Beautiful garden areas surrounding home for residents to enjoy • Staff very approachable and appear to enjoy working here • Hand sanitizing and PPE available in each corridor • 2 hourly hand washing supervision in place • iPad in place to support with virtual communication for residents with family and friends • All staff carrying out lateral flow testing • Each resident has own key worker • Information available to staff on continence service, effects of hydration and up to date policies in relation to covid. | | | | |
| Areas for Improvement | | | | |

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|---|-----|----|-----|---|
| Observations | Yes | No | n/a | Comments & Recommendation |
| No areas of improvement identified. | | | | |
| Additional Support/Education Required? | | | | By Whom |
| None identified | | | | |
| Social Work Tool | | | | |
| Observations | Yes | No | NA | Comments |
| Care | | | | |
| How are residents coping? | X | | | Orchardhead House has a homely environment where staff are using a person-centred approach. During walking round the care home, it was evident residents were content and happy whilst conversing with them. Staff have been working extremely hard during visits for residents with their families, in person or visually. |
| Are you having any difficulties with care and support during this time? | | X | | Sally, staff, and residents all feel extremely supported and advised how they feel |

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|---|-----|----|-----|---|
| Observations | Yes | No | n/a | Comments & Recommendation |
| | | | | multi-agency working has improved significantly. |
| What sort of activities are available for residents to choose to participate in? | X | | | Variety of activities available from afternoon tea, quizzes, bingo, yoga, life story reminiscing and music. |
| Is it possible for you to arrange for me to have a conversation with one of your residents to ask if there is anything else that could be done to improve how they spend their day during these times? | X | | | Spoke to several residents whilst going around the care home and all advised they are happy and content with everything Orchardhead House staff do for them. |
| Is it possible for you to arrange for me to have a conversation with the family member of one of your residents to ask if there is anything else that could be done to improve how they stay connected with their loved one during these times? | X | | | Looked through recent social work reviews and in-house reviews were family expressed their views. All families of resident were happy and raised no concerns off staying connected with their family. |
| Do you have facilities available for virtual visiting for residents and their families? | X | | | |

Social Work Tool

| Observations | Yes | No | NA | Comments |
|--|-----|----|----|---|
| Care, Communication and Anticipatory Care Planning | | | | |
| Are you satisfied that records are kept if a resident is going out for exercise with staff supervision that assures you adherence to social distancing rules is being met? | X | | | Residents have their own bubbles with other residents and have daily garden walks. All appropriate records and guidance in place. |
| Are you satisfied that you have the appropriate documentation of a resident's abilities? | X | | | Informative care plans and care folders. |
| If you have any concerns that the correct legal framework is not in place for people who lack capacity, please let me know so I can enquire if further safeguards are necessary. | | X | | All appropriate documents in place. |
| Are you satisfied you have appropriate DNACPR? | X | | | |
| Are you satisfied that Anticipatory Care Plans are in place and are working well? | X | | | |
| Observations | Yes | No | NA | Comments |
| Education & Training for Staff | | | | |
| Are staff aware that there has been no change to adult support and protecting reporting during Covid-19? | X | | | |

Social Work Tool

| Observations | Yes | No | NA | Comments |
|---|-----|----|----|---|
| Staff Health & Wellbeing | | | | |
| Do staff (inc managers) feel additional support from the HSCP would be helpful? If so what form might this take? | | X | | Sally advised she has been receiving weekly calls from nurses or public health and does not require additional support. Sally stated she feels there has been a significant improvement on positive multi-agency working. |
| Areas of Good Practice | | | | |
| <p>Orchardhead House are promoting and demonstrating a person-centred approach to all residents. Staff are managing each resident identify by reminiscing about their life, giving them choice and control over their life. Management and Staff at Orchardhead House have got a high standard of infection control and are extremely organised with facilitating visiting, both in personal and virtually. Orchardhead House demonstrated a positive culture whereby encourage staff to learn together and involve families, evidencing a good working relationship with staff and families as good communication is being recognised.</p> | | | | |
| Discussion with Care Home Manager | | | | |
| Any additional support required from HSCP which has not been highlighted as part of the Assurance Visit | | | | |
| No, Sally advised she is feeling extremely supported by HSCP and highlighted she has recognised a good working relationship with health and social work. | | | | |