**Brief Description of Task:** Staff visits to residents confined to their rooms via suspected or confirmed cases of COVID-19. For the purpose of meal delivery and welfare check during self – isolation of suspected or a confirmed case.

**Particular Hazards:** Exposure to COVID -19, potential disruptive occupant and persons at risk of self-harm

**Special Safety Precautions:** Staff undertaking room visits must not be from the current GOV.UK shielded at risk group of persons (ie: pregnant workers, those with serious underlying medical conditions as described and updated within the national GOV.UK briefings)

**Special Equipment, Procedures or PPE needed:** PPE to be be used for the purposes of visiting residents whom are self isolating within their rooms (assessed via medical practisioner as suspected or confirmed COVID-19 Case). Escorting suspected or confirmed cases within and outside of the Prison only. PPE should not be used other than within these circumstances.

PPE ( Room Visits – x1 staff member to be wearing/ x1 staff member to have ready and in possesion):
1. Fluid Resistant Surgical Mask ( x2)
2. Nitrile Glove ( x2)
3. Apron ( x2)
4. Goggle/Face Sheild/Eye Protective glasses ( x1)

PPE ( Long Term Use/Escorting Confirmed Cases):
1. FFP 3 Masks ( x2)
2. Long Length Nitrile Glove with lower arm covering ( x2)
3. Apron/Gown or clinical overall ( x2)
4. Goggle/Face Sheild/Eye Protective glasses ( x1)

**Equipment:**
1. Clinical waste bags ( x1)
2. Hand sanitisation (60% alcohol rub) – (x1)
3. Access to hand washing facility post task.

Door handles to be disinfected as part of the current cleaning guidance.

Hand sanitisation to be available to the staff immediaetly after completion of the tasks and at the point where used PPE is placed into clinical waste bags. Clinical waste bags are to be removed from residential units at the earliest opportunity and placed within the local clinical waste containers.

A minimum of two members of staff are required for the visits to those self isolating (where a local assessment requires foreseeable issue, this will be increased via the local unit manager).

Prisons are required to ensure they are up to date with all relevant HMPPS COVID-19 guidance especially regarding identification and categorisation of a symptomatic/confirmed person (this information may change reguarly)

**Emergency Procedures and/or Contact Point:** Staff detailed visiting residents self-isolating must receive a fresh briefing via the unit manager prior to each visit. Information must contain relevant instruction and refresh on the donning and doffing of PPE, hand washing and refreshing of the included steps to follow. The unit manager must also outline the condition of each resident and where potential
issues may be evident.

The manager will arrange that staff undertaking the visits remain within immediate visual contact of a further member of staff positioned away from the two but able to summon assistance via radio if required.

Staff undertaking the visits will feedback occupants conditions to the unit manager on each occasion, this will be recorded within the necessary handover documents.

**DETAILED STEPS TO FOLLOW**

1. A minimum of two members of Staff to be detailed visiting self isolating residents
2. The Unit manager will brief all staff prior to commencement as detailed within the emergency procedures
3. Staff will check their PPE, one Staff member will done as per the attached guidance. The accompanying member of staff will carry the PPE only ( and have ready to done in the event of assiting the other member of staff during a potential entry to the room)
4. Staff will check the delivery items are ready and in place prior to entry into the areas.
5. Staff to open the observation flap and confirm the location of the occupant within the room
6. Staff will talk with the resident and ascertain how they are and if they have got everything they need at present?
7. Staff will ask that the resident washes their hands and places their chair close to the door so that they may deliver items ( food/canteen/letters/other)
8. Staff will request the occupant moves to the end of the room so staff may open the door and place items on the chair, staff will also request the occupant places their mask on.
9. Staff will check via the observation panel and proceed to open the door once this is visually confirmed.
10. The door will be opened
11. One of the staff members (wearing googles/eye protection) will carefully place the items on the chair ensuring no hand/other contact is made with the chair or other part of the inside of the room. **Staff are NOT to enter further into the room at any point of this task.**
12. The door will be closed
13. Staff will check via the observatin panel that the occupant is content with the items.
14. Staff will move to the next area requiring a visit
15. Once all areas have received a visit staff will remove PPE as contained within the attached guidance, , the PPE will be placed within a clinical bag and removed to clinical waste, staff will further carry out hand sanitisation and hand washing. If the accompanying member of staff does not use the PPE this **must not** be placed in the clinical bag and is to be recycled for further use.
16. Staff will brief the unit manager/healthcare with any relevant observations from the visits.

**Annex Guidance**
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

NHS
National Patient Safety Agency
Putting on personal protective equipment (PPE)

The order of putting on PPE is: apron, facemask, visor and gloves.

**Apron**
- Pull over head and fasten at back of waist

**Facemask**
- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to bridge of the nose
- Fit snug to face and below chin

**Visor**
- Place over face and eyes and adjust to fit

**Gloves**
- Extend to cover wrist

Use safe work practices to protect yourself and limit the spread of infection.
- Keep hands away from face
- Change gloves between tasks and when torn or heavily contaminated
- Limit surfaces touched
- Regularly perform hand hygiene

Removing personal protective equipment (PPE)

PPE should be removed in an order that minimises the potential for cross-contamination.
The order of removing PPE: is gloves, apron, visor and facemask.

**Gloves**
- Grasp the outside of the glove with the opposite gloved hand; peel off
- Hold the removed glove in the gloved hand
- Slide the fingers of the ungloved hand under the remaining glove at the wrist
- Peel the second glove off over the first glove

**Apron**
- Unfasten or break ties
- Pull apron away from neck and shoulders lifting over head, touching inside only
- Fold or roll into a bundle

**Visor**
- Handle only by the headband or the sides

**Facemask**
- Unfasten the ties – first the bottom, then the top
- Pull away from the face without touching front of facemask

Perform hand hygiene immediately after removing all PPE.

All PPE should be removed before leaving the area and disposed of in a sealed plastic bag in a household wheelie bin.