

Guidance to Caseworkers & Technical Officers on visiting clients' homes and other locations

This Guidance sets out the baseline operational requirements for Care & Repair frontline staff as they resume work in clients' homes and meetings with others outside of the office.

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Purpose of the Guidance

1. Every Care & Repair agency must resume delivery of its repairs, adaptations and improvements services in line with the relaxation of the *Coronavirus Act* pandemic control measures introduced by the Welsh and UK Governments.
2. This Guidance recognises that Covid-19 presents an ongoing threat, that older people have a heightened clinical vulnerability and that most Care & Repair services are delivered in the client's home where there will remain the potential for respiratory, airborne and/or surface transmission.
3. **The Guidance aims to minimize, so far as practicably possible, the potential for Covid-19 transmission to or by its frontline staff whilst working in clients' homes and elsewhere in the community.**
4. The Guidance sets out a practical risk-based approach for agencies' operating procedures. It seeks to reassure staff, clients and others with whom they work of the seriousness with which Care & Repair takes health and safety. It cross-references with our *National Guidance on Personal Protective Equipment*.
5. The Guidance is not a statement of law but is based on government advice on [physical distancing](#) and [shielding](#), on [workplace arrangements](#), [travelling safely](#) and [working safely in other people's homes](#), and on [housing adaptations](#). It is subject to ongoing review in line with updates to official information and advice.

Appendix B provides a 'Summary Checklist' of this Guidance.

Requirements on Agencies

Government expectations on resuming 'business as usual'

6. Every Care & Repair agency must start resuming delivery of its repairs, adaptations and improvements services. In so doing, agencies should have regard to [Welsh Government Guidance](#) (13 July 2020) which:
 - makes clear its expectations are not about **whether** a business operates but about **how** - "*taking proportionate action where it is practicable to do so*";
 - anticipates reasonable, organisation-specific measures to be required in line with the nature of the business;
 - expects risk assessments to consider not only the risks of virus transmission but also the risks of not resuming a service/business activity - "*As an example, most medical practitioners and carers can't stay 2 metres away from a patient when giving treatment ... Stopping treatment would obviously not be a reasonable measure, and would not and should not be required*";
 - puts physical distancing (2 metres) at the centre of virus transmission control but accepts it is not always possible – "*working in confined spaces, for example repairing infrastructure for utilities*" – and requires additional measures to be in place in such circumstances.

Safe employment practices

7. All agencies must have in place locally specific '[safe working during coronavirus](#)' policies for their employees. Local procedures will include: fitness for work, safe office (including agile, flexible, remote and/or home) working arrangements and safe return to work procedures for those who have been recovering from Covid-19, shielding or isolating (including under [test, trace, protect](#) requirements).

Safe operating practices

8. **This Guidance applies to home visits and meetings outside the office.** All agencies must follow its procedures, and/or reflect them within their own local procedures, to ensure safe working throughout Wales. The Guidance addresses:
 - travelling to, from and between places of work
 - home-visiting, including a specific risk-assessment process
 - visiting and/or meetings in other 'non-office' locations.

Scope of and responsibilities for this Guidance

9. This Guidance relates specifically to:
 - Care & Repair Caseworkers, Technical Caseworkers and Technical Officers
 - Project Staff, including Managing Better Caseworkers and Attic Project Decluttering Officers

- Hospital to a Healthier Home Caseworkers¹
10. The **Chief Officer** is responsible for ensuring that all agency staff are familiar with this Guidance and the operational implications for their work.
11. **All staff** to which this Guidance applies must operate within its procedures. Any case-specific difficulties in compliance must be discussed with the Chief Officer and recorded in the relevant case record and/or incident book as appropriate.

General considerations

12. **Everyone** has a duty to take care of their own health and safety, and that of others affected by their work. Everyone must assess and manage the risks of COVID-19.
13. **Agencies** have a legal responsibility to protect their staff, and those with whom they work, from any risk to their health and safety. They must have safe working procedures in place specifically to minimize the risk of coronavirus transmission. This includes following the [Government's Covid-19 advice to business](#) to:
- enable and encourage increased handwashing, sanitising and surface cleaning;
 - consider and, if possible, facilitate home or agile working;
 - make provision for physical distancing (a 2m distance between individuals) in the office and when working elsewhere, so far as practicable;
 - consider the need for activities that cannot maintain physical distancing and, if essential to business, put in place mitigating actions to reduce the risk of coronavirus transmission;
 - provide, train and guide staff in the safe and appropriate use of Personal Protective Equipment (PPE);
 - have consideration for any employees' individual vulnerability to COVID-19 as a result of, for example, age, health, ethnicity or caring responsibilities;
 - ensure all frontline staff understand their roles as coronavirus critical (key) workers² and have access to [Test, Trace, Protect](#) opportunities for which they are eligible.
14. **Staff** must:
- monitor their own health, follow agency procedures in the event of having any concerns about having symptoms suggestive of Covid-19 and take advantage of their eligibility for Covid-19 testing as appropriate;
 - follow, and encourage others to follow, all protective procedures put in place by the Agency;

¹ Hospital to a Healthier Home Caseworkers should have regard to this Guidance but be aware that NHS/Local Health Board requirements may take precedence in NHS/LHB settings.

² <https://gov.wales/coronavirus-critical-key-workers-test-eligibility>

- be strict about [handwashing](#), coughing and sneezing hygiene (following [catch it, bin it, kill it](#) procedure), and avoid touching face, eyes, nose or mouth;
- always have with them, and understand its safe use, appropriate PPE - hand sanitiser, sanitising wipes, tissues, disposable masks, disposable gloves and small bags for secure disposal of used PPE;
- ensure that phones/tablets, bags, pens, paperwork, folders, files and tools, carried between and used in different places of work, can be and are sanitised before and after use.

15. Agencies may wish to consider the value of incorporating temperature testing into Caseworkers' and Technical Officers' PPE routine and/or specifically prior to carrying out a home visit. If considered appropriate, Agencies are advised to consult with staff and ensure the consent of those directly affected, and ensure the completion of a Data Protection Impact Assessment due to the sensitive nature of the employee information being recorded in the process.

Specific situations

Travel

16. Staff should aim to:

- ▶ Limit the amount of travel and especially shared travel.
- ▶ Maintain physical distancing throughout the working day and wherever possible including on arrival at, departure from and travelling between the office, clients' homes, external meetings and other community locations.
- ▶ Ensure hands are sanitised, PPE changed and any essential work items (for example, phones, tablets, bags, stationery, tools) regularly cleaned/sanitised.

17. **Before and during every journey** to, from and between workplaces, Staff should:

- a. consider the purpose of the journey - can phone, email, video calling, onsite colleagues, online/mail delivery services or other remote working offer an alternative means of achieving its purpose or a part of its purpose?
- b. wash/sanitise hands prior to the journey, and travel to/from work and between places of work alone in your own clean, private transport;
- c. if travel with others is unavoidable and/or a shared vehicle is in use, deploy the following mitigating measures:
 - limit the number of people in or using the vehicle;
 - maintain good ventilation - windows open, passengers facing away from one another;
 - clean the vehicle regularly using gloves and standard cleaning products (paying particular attention to handles, seat belts, steering wheels, gear sticks and other driver and passenger 'touchpoints');

- d. on arrival and departure, sanitise hands and any essential work items (for example, phones, tablets, bags, stationery and tools) in use, and maintain physical distancing throughout, including when entering and exiting a building;
- e. change single-use and sanitise other PPE between locations - donning clean PPE prior to getting out of the car, doffing used PPE before getting into the car and double-bagging used PPE for secure disposal after 72 hours (see [National Guidance on PPE](#) for full details).

Home visits

18. Staff should aim to:

- ▶ Limit the number and duration of home visits.
- ▶ Undertake, and record in CARIS, a Risk Assessment of every home's Covid-19 status and priority of the work required **before** visiting (**Appendix A**).
- ▶ Ensure that clients understand their role and responsibility for minimising coronavirus transmission, and the consequences if these are not fulfilled.
- ▶ Maintain physical distancing wherever possible throughout the home visit, including when arriving, departing and moving around the home, and use the appropriate PPE in line with the Risk Assessment.

19. **Before every home visit**, and in conjunction with the travel procedures, Staff should:

- a. consider the purpose of the home visit and the nature of the work - can phone, email, video calling, onsite colleagues, online/mail delivery services or other remote working offer an alternative and/or reduce the time spent in the home?
- b. before the visit, complete the Appendix A Home-visit Risk Assessment with the client and agree the practicalities of the home visit, including:
 - the nature/urgency of the work required, together with any Covid-19 risks specific to the household - these will determine the timing of the visit and any PPE additional to face mask and disposable gloves;
 - making clear the need for physical distancing and good hygiene, attendance by the client/household alone and the potential for a visit to be terminated if these requirements are not followed;
 - ways of avoiding face-to-face contact (in particular at the front door), identifying areas in the home where physical distancing is not possible, the potential for using an area outside for discussions and the client's ability to use (and any need for the agency to supply) PPE during the visit;
 - arranging for internal doors to be open beforehand in order to minimise contact with handles.

20. **During every home visit**, Staff should:

- a. review the Risk Assessment with the client immediately before/on arrival to establish any changes in circumstance, being prepared to increase the use of PPE and/or reschedule as necessary;

- b. use the PPE required by the Risk Assessment, putting it on in the car and removing it before getting back into the car, sanitising hands before and after donning/doffing, and follow any locally agreed temperature check procedure;
- c. ensure all and only those items essential to the visit (for example, phones, tablets, bags, paperwork, equipment and tools) are brought into the house, already sanitised, that there is no need to return to the car during the visit and that they are sanitised following every visit;
- d. provide the client/others present with any PPE agreed, ensuring no-one is present other than those previously agreed, maintain physical distancing throughout the visit, avoid being in small rooms/spaces with others, minimise contact with household surfaces/items, refuse any hospitalities offered and hold discussions outside wherever possible;
- e. avoid shared use of items, providing pens and ensuring any stationary for signing is managed in duplicate, using polypockets/plastic folders in which to store paperwork handled by client;
- f. if physical distancing is not possible or is compromised during the visit, the following mitigating measures may be appropriate:
 - sanitising hands and items more frequently, and particularly after any coughing, sneezing or nose blowing nearby;
 - the additional use of PPE, such as eye protectors, aprons and foot protectors, in order to limit respiratory and/or surface contact;
 - increase physical distancing, increase indoor ventilation (opening windows and/or doors if safe to do so) and/or hold discussions outside;
 - terminate the home visit until such time as it can be completed safely.

Other locations

21. Staff should aim to:

- ▶ Satisfy themselves of the need to visit other locations, including community and public settings such as shops, pharmacies, health and community centres, and other office environments not under the agency's control.
- ▶ Assess the nature of the location and/or people involved, the Covid-19 safeguards in place, and the necessary Covid-19 precautions required, including the need for PPE.
- ▶ Maintain physical distancing wherever possible throughout the visit/meeting, washing or sanitising hands and any items in use (including bags, phones, tables, tools) on arrival and departure.

22. **Before and during every visit to a non-office location**, and in conjunction with the travel procedures, Staff should:

- a. consider the purpose of the visit/meeting - can phone, email, video calling, onsite colleagues, online/mail delivery services or other remote working offer an alternative and/or reduce the time spent at the location?

- b. ensure all and only those items essential to the visit/meeting (for example, phones, tablets, bags and equipment) are in use and that they are sanitised/washed with water and detergent before and after every location;
- c. maintain physical distancing throughout, especially at entrances and exits, in queues or at counters, avoid being in small spaces with anyone else, minimise contact with surfaces/goods and avoid shared use of items;
- d. if physical distancing is not possible or is vulnerable to compromise during the visit, the following mitigating measures may be appropriate:
 - wearing a disposable face mask (following the donning, doffing and disposal rules above);
 - washing hands more often than usual, for 20 seconds using soap and water, or sanitising hands - particularly after any coughing, sneezing or nose blowing;
 - the use of additional PPE – visors and aprons – in order to limit potential virus transmission by respiratory and/or surface contact (following the donning, doffing and disposal rules above);
 - increasing indoor ventilation (opening windows/ doors if safe to do so);
 - terminating the visit/meeting until such time as it can be done safely
- g. ensure any paperwork is managed in duplicate, using polypockets/plastic folders in which to store paperwork handled by others.

Key dates

23. This is a live, working document. Care & Repair Cymru will continue to review any updates in PPE guidance from WG, PHW and the NHS to ensure these guidelines are as specific and robust as possible.

- Date of introduction : 21 July 2020
- Date of next review : August 2020

Additional Care & Repair guidance

24. This guidance is supported by the following Care & Repair documents:

- ▶ **Care & Repair clients' guide for workers in their homes -**
www.careandrepair.org.uk/files/8915/9413/7111/Client_guide_for_workers_in_their_homes_July_2020.pdf
- ▶ **Contractors' guide for working in Care & Repair client homes -**
www.careandrepair.org.uk/files/3015/9413/8528/Contractor_guide_for_safe_working_in_client_homes_July_2020.pdf

National Guidance on Care & Repair Operations and Personal Protective Equipment

Home-visit Risk Assessment – for completion and recording on CARIS before every client home visit.

Client Name _____ CARIS/Case Reference _____
 Agency Officer Name _____ Agency Officer Role _____
If not client, name of person with whom form completed and their relationship to client _____ Date of risk assessment _____

1. GENERAL HOUSEHOLD INFORMATION & PURPOSE OF HOME VISIT			
Number of people in household (including client)?		Age of client (and others in household)?	
Purpose of intended visit		Nature of any works required	Essential ¹ / Other <i>[delete as appropriate]</i>
Will/should anyone else be present during the visit?	Yes / No	If Yes, who & why?	

2. GENERAL HEALTH VULNERABILITY TO COVID-19			
a. Might the client/anyone in the household be regarded as especially 'vulnerable' to Covid-19 as a result of any relevant demographic factors or health conditions ² ?	Yes / No	If Yes, give details?	
b. Has the client/anyone in the household had a letter from the health authority stating that they need to 'shield' ³ ?	Yes / No	If Yes, date of letter?	

IMPLICATIONS FOR HOME-VISIT AND PPE

- ✓ **Households answering 'No' to both the above** may be visited. **Minimum PPE required:** surgical mask and disposable gloves.
- ✓ **Vulnerable households²** may be visited. **Minimum PPE required:** surgical mask and disposable gloves.
- ✓ **Shielding households³** may be visited. **Minimum PPE required:** surgical mask, disposable gloves and any locally defined additional PPE (face protectors, disposable apron/coveralls and foot protectors, per *National Guidance on PPE*).

3. SYMPTOMS AND/OR EXPERIENCE OF COVID-19			
a. Has the client/anyone in the household had any of the following symptoms in the past 14 days :			
• a persistent cough?	Yes / No	<i>If Yes, start date?</i>	
• a high temperature of fever?	Yes / No	<i>If Yes, start date?</i>	
• loss of taste or smell	Yes / No	<i>If Yes, start date?</i>	
• difficulty in breathing / shortness of breath?	Yes / No	<i>If Yes, start date?</i>	
• any other symptoms that might be relevant?	Yes / No	<i>If Yes, start date?</i>	
b. Is the client/anyone in the household recovering from Covid-19?	Yes / No	<i>If Yes, have they been tested and confirmed as no longer having Covid-19?</i>	Yes / No

IMPLICATIONS FOR VISIT AND PPE:

① **Households with symptoms AND recovering households without negative test result** – may be visited for essential¹ works only. **Minimum PPE required:** eye/face protection, fluid-resistant mask, disposable gloves and disposable plastic apron/coveralls (and any locally defined additional PPE, in line with National Guidance). **Non-essential visits** may be subject to further risk assessment in 14 days.

✓ **Recovering households confirmed as no longer having Covid-19** – may be visited. **Minimum PPE required:** surgical mask, disposable gloves and, if any member of the household is ‘shielding’ (see Section 2 advice above), any locally defined additional PPE, in line with National Guidance.

4. POTENTIAL EXPOSURE TO COVID-19			
a. Has the client/anyone in the household been abroad within the last 14 days?	Yes / No	<i>If yes, where and date of return?</i>	
b. Is the client/anyone in the household subject to any 'test & trace' advice to self-isolate for 14 days?	Yes / No	<i>If yes, start date?</i>	
c. Is the client/anyone in the household aware of having been in contact with anyone diagnosed with or suspected of having Covid-19?	Yes / No	<i>If yes, when?</i>	

IMPLICATIONS FOR HOME-VISIT AND PPE

① **Households answering 'YES' to any of the above** – may be visited if the work is essential **and** urgent. **Minimum PPE required:** fluid-resistant mask, eye/face protection disposable gloves, disposable plastic apron/coveralls (and any locally defined additional PPE, in line with National Guidance). **Non-essential visits** may be subject to further risk assessment in 14 days.

✓ **Households answering 'No' to the above** – may be visited. **Minimum PPE required:** surgical mask, disposable gloves and, if any member of the household is 'shielding' (see Section 2 advice above), any locally defined additional PPE, in line with National Guidance.

5. CONSENT			
a. Does the client have any concerns about the need for any additional protection or their own PPE?	Yes / No	<i>If Yes, what?</i>	
b. Does the client believe that physical distancing will be possible throughout the visit?	Yes / No	<i>If No, what actions will be taken?</i>	
c. Does the client understand the coronavirus control measures discussed, their own responsibilities and the consequences of breaching the agreement?	Yes / No	<i>If No, are there cognitive reasons?</i>	Yes / No
d. Does the client consent to the visit proceeding?	Yes / No	<i>If Yes, date of visit? If No, next action</i>	

FINAL CHECK : IMMEDIATELY BEFORE LEAVING FOR or ON ARRIVAL AT HOME VISIT

<p>Review, with the client, the answers to Sections 1 – 5 above to record any changes since the initial Risk Assessment?</p>	<p>Yes / No</p>	<p>If No, sign, date & proceed If Yes, re-assess</p>	
<p>If locally agreed temperature checking procedures are in place, a temperature check may be recorded and signed as accurate here.</p>			

Definitions

1. **Essential works** are those that, were they not done, would leave a client at risk in terms of their health and safety. Essential works include: works to facilitate hospital discharges, urgent and/or vital repairs, and preventative work that supports health and well-being such as housing adaptations, falls prevention works and improvements to heating and property insulation.
2. **Coronavirus vulnerability:** people over 70 years old and/or those of a BAME background and/or those with a pre-existing medical condition including asthma, diabetes, obesity, respiratory illness and heart disease, are considered to have additional vulnerability to Covid-19 and its impact.
3. **Shielding:** people who have received/will imminently receive an official letter from the NHS confirming their need to ‘shield’.

CORONAVIRUS CONTROLS SUMMARY CHECKLIST

For Staff visiting clients' homes and other locations

These procedures aim to minimise, so far as practicably possible, the potential for Covid-19 transmission to or by frontline staff as they deliver repairs, adaptations and improvements services in older people's homes.

Fit for work

- Everyone is responsible for monitoring their own health and following local employment processes.
- Agencies will have in place clear fitness for work and safe return to work procedures specific to Covid-19.

Office working

- Agencies will consider the potential for agile working, take account of individual staff members' vulnerability to Covid-19, put in place safe office working procedures, and ensure appropriate PPE is available.

pages 2 - 4

On the road

- Alternative ways of working should be found to reduce the need for travel. Vehicles must be clean, items in transit sanitised, and correct PPE donning, doffing and disposal procedures are followed on arrival/departure.

pages 4 - 5

Risk Assess

- Home visiting staff will undertake a formal Risk Assessment with clients before a visit to establish urgency and the household's Covid-19 vulnerability, and agree the coronavirus control measures required.

Home visit

- Home visiting staff will review the Risk Assessment immediately before a visit. They will maintain physical distance, use facemask and disposable gloves, ensure items are clean and deploy further mitigation if needed.

APPENDIX A and pages 5 - 6

Other visits

- Staff will establish the Covid-19 safeguards in place at other locations. They will maintain physical distancing, ensure hands and items in use are washed/sanitised on arrival and departure, and wear PPE as necessary.

Pages 6 - 7