**Face to Face Visit Checklist During Covid-19**

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| --- | --- | --- | --- | --- |
| **\*Name:** |  |  | **\*School/Location to be visited:** |  |
| **\*Job Title:** |  |  | **\*Manager Name:** |  |
| **\*Date:** |  |  |  |  |

During the COVID 19 pandemic guidance recommends face to face visits to clients and schools are kept to a minimum, only take place when essential and once all other options have been considered. Any visits should be based on managing the risks to the person/s and staff. This checklist should be considered as an addition to relevant local and national guidance. It does not take the place of local safety protocols unless explicitly agreed with your manager/organisation.

One form should be completed per school/location being visited or per client is visiting at home. If the visit is recurring e.g. weekly, the form should be updated and resubmitted if circumstances in the location change.

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| --- | --- | --- |
| **Is the visit essential?** | **Yes (Comments)** | **No (Comments)** |
| **Is there a legal/statutory requirement?** |  |  |

|  |  |
| --- | --- |
| **What is the purpose of the visit?** |  |
| **What are the current identified risks** |  |
| **What are any known safeguarding concerns?** |  |

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| **What other ways of assessing/meeting with the clients/school have been considered?** | **Other ways to carry out assessment - (Comments)** | **Why they have been ruled out** |
|  |  |
| *Consider: Skype, Telephone, other visiting carers, family or professionals?* | | |

**Risk Assessment - Before the visit - HAVE YOU:**

|  |  |  |  |
| --- | --- | --- | --- |
| **HAVE YOU** | **Yes (Comments)** | **No (Comments)** | **Don’t Know** |
| **Contacted the school directly to check current risks and COVID-19 situation?** |  |  |  |
| **Checked with the client (or their family/carer) that they need and/or want the visit at this time?** |  |  |  |
| **Checked who will be present during the assessment** |  |  |  |
| **Identified any environmental risks in the location?** |  |  |  |
| **Identified the health status of any individuals where the assessment / visit is taking place?** |  |  |  |
|  | | | |
| **Does anyone who you may come into contact with have COVID-19 symptoms?** |  |  |  |
| **Is anyone self isolating due to exposure to COVID-19?** |  |  |  |
| **Are they or anyone in the location in the shielded group?** |  |  |  |
| **Identified if the person has hearing or visual impairments?** |  |  |  |
| **Explained requirements for social distancing?** |  |  |  |
| **Made the client/school aware you may be wearing PPE which covers your face if this has been deemed necessary?** |  |  |  |
| **Discussed the need for this visit with your line manager?** |  |  |  |
| ***UNKNOWN INFORMATION ON INFECTION STATUS SHOULD BE TREATED AS HIGH RISK*** | | | |

**Preparing for the visit (risk planning) HAVE YOU:**

|  |  |  |
| --- | --- | --- |
| **HAVE YOU** | **Yes (Comments)** | **No (Comments)** |
| **Notified your line manager of the time, venue of your visit and your contact details?** |  |  |
| **Considered if this requires a colleague to attend with you? If so, that you can travel independently?** |  |  |
| **Confirmed you will be able to maintain 2 metres physical distance throughout the visit?** |  |  |
| **Identified what PPE you will need throughout the visit if this has been deemed necessary by the School?** |  |  |
| **Got/can you get appropriate PPE?** |  |  |
| **Got your mobile with you?** |  |  |
| **Given visit details to your team?** |  |  |
| **Confirmed your risk plan with your manager?** |  |  |

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| **Further Guidance** |
| **For your safety; wash your hands before and after the visit as soon as possible. Touch minimal surfaces, retain 2 metres social distancing, sanitise any equipment used and sanitise items such as car steering wheels.**  **If you cannot be sure to maintain social distancing, ensure you use appropriate barrier PPE – mask, goggles, gloves as appropriate**  **REMEMBER PPE is to protect you and the person you are visiting**  **DO NOT travel with other colleagues – use separate vehicles and dispose of PPE as per guidance.** |

This form should be sent to [humanresources@cognus.org.uk](mailto:humanresources@cognus.org.uk) and your line manager once completed so this can be stored securely.