Clinical Practice Innovation Infection control

Keywords Infection prevention/ Primary care/Nurse-led clinic/Covid-19

In this article...

- Barriers to healthcare for extremely clinically vulnerable patients during the pandemic
- Setting up a 'super green' clinic for shielding patients
- Infection prevention and control procedures used to keep shielding patients safe

A 'super green' primary care clinic for shielding patients during Covid-19



This initiative won the **Infection** prevention and control category in the 2020 Nursing Times Awards. To find out more about the NT Awards go to

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Key points

It was recognised early in the pandemic that GP nursing services would need to adapt to meet the needs of extremely clinically vulnerable patients

A 'super green' clinic was set up to provide nursing care to shielding patients in a safe environment

Rigorous infection prevention and control protocols were used, including cleaning clinical rooms twice between each patient

Care offered included vaccinations, blood tests, dressings, chronic disease management and electrocardiograms **Author** Cate Lamport is practice nurse long term condition lead at Herefordshire and Worcestershire Clinical Commissioning Group.

Abstract At the start of the coronavirus pandemic, it was recognised by the primary care team in Herefordshire that extremely clinically vulnerable patients who had been asked to shield would need access to nursing care. In three weeks a nurse-led super green clinic was set up from a GP practice site in Hereford operating under strict infection control procedures. Nurses with a wide range of experience and skills managed patients both in the clinic and at home. This article describes how the service was put in place and what it achieved.

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n March 2020, as a response to growing concerns about the spread of coronavirus and its impact on the health service, the government announced that people who fell into an extremely clinically vulnerable category would be asked to shield for at least 12 weeks. The measures affected around 1.5 million people who were sent a letter strongly advising them to stay at home at all times and to avoid any face-to-face contact with other people.

Herefordshire is a challenging rural county in which to provide healthcare. However, the GP federation (Taurus Healthcare) worked closely with partners from across the healthcare system (GP practices, the local authority and Wye Valley NHS Trust) to develop an efficient and effective plan to manage the pandemic locally. This process was helped by the strong relationships already in place; working together throughout the coronavirus pandemic has cemented and improved collaborative working across the county.

It was recognised early on in the pandemic planning process by a GP who was himself a shielded patient that GP services would need to adapt to meet the needs of extremely clinically vulnerable patients and that those needs would include nursing care. A 'super green' clinic in primary care was, therefore, proposed to provide safe nursing care to shielding patients.

Planning

The aim of the super green clinic was to ensure that patients across Herefordshire, who had been asked to shield, could receive the nursing care they needed while being exposed to as little infection risk as possible. A site was identified in a central location that had a car park and access to clinic rooms that could be completely separated from the rest of the building.

A site manager and clinical support lead nurse were appointed. The clinic area was emptied, deep cleaned and restocked with the necessary equipment and the rooms for the clinic were shut off from the main building. The clinic was meticulously cleaned with the appropriate chlorine concentration.

A team of 12 practice and community nurses and healthcare assistants were identified to work in the clinic. These were members of staff from the GP practices

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within the federation, and Wye Valley NHS Trust, who were either shielding themselves or at low risk of Covid-19 infection, because of the work they had been doing (limited patient contact) or the household they were living in. The goal was to provide a team with a wide range of expertise and competencies to deliver the variety of nursing care that the shielded patients might need. Sister Deborah Suer was appointed to lead the team. The clinical team were supported by a practice manager, three administrators and four volunteers.

Rigorous infection control protocols involving cleaning clinical rooms twice between each patient with daily symptom and temperature checks for all staff were developed. Referral templates and guidance were developed for EMIS (GP medical system) to use across GP surgeries in Herefordshire.

Staff practised infection control processes and the patient flow pathway before an infection control inspection, ahead of going live to verify the facility was as safe as possible to meet the nursing care needs of shielded patients during the coronavirus pandemic.

Operation

The super green clinic was opened to patients on 21 April 2020. A triage list was created from GP practice referrals (via EMIS) and a team of volunteers from Cantilupe Surgery (a Herefordshire GP practice) oversaw the administration process, checking patients were shielding, clarifying nursing care and booking appointments.

Nursing services available to patients included blood pressure checks, blood tests, glucose testing and International Normalized Ratio calculation for patients taking anti-coagulant medication, cervical smears, dressings, electrocardiograms, injections including hormone injections, urinalysis, pessary fittings, vaccinations and weight management. Under the guidance of community nurses, the service also provided urinary catheter care, PICC line care, disconnecting chemotherapy and palliative care.

The number of patients accessing clinic services steadily grew to 80 a week. After two weeks, the service expanded to home visits for patients unable to drive or be driven to the clinic, as the team considered it inappropriate for shielded patients to use taxis, walk or use public transport. All patients were asked to verify that they and their household members were compliant with the shielding advice. To limit cross-infection, any patient who could not give satisfactory assurance "The early recognition and provision of access to protect the most vulnerable patients in communities, ensuring they received treatment and care, was inspiring" (Judge's feedback)

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was instead seen in a green or amber clinic for patients who might have Covid-19.

The service would not have been able to run without our team of co-ordinator volunteers who helped out with escorting patients and also assisted with the rigorous cleaning requirements.

Outcomes

This nurse-led service was a pioneering example of the possibilities of sharing of care and expertise of practice and community nurses in rural Herefordshire. The service was set up incredibly quickly in response to rapidly changing needs while ensuring effective healthcare governance and patient safety.

The super green clinic ran until formal shielding finished at the end of July 2020. In that time, the service saw 1,119 patients, including 121 home visits. The team was able to meet every care requirement including:

- A doppler for a housebound patient;
- Teaching someone with diabetes how to self-monitor blood glucose readings;
- Changing a ring pessary;
- Removing a contraceptive implant;
- Dressings;
- Injections;
- Cervical cytology screening;
- Immunisations.

Box 1. Advice for setting up similar projects

- A leader who shares a clear mission goal with the team can trust the team to deliver, using their individual skills, rather than dictating every move
- Making the most of the wide mix of skills, experience and ideas among the team can help an idea turn into reality and even exceed expectations
- When nurses believe they can make a difference to patient care they have a real 'can do' attitude and will work extremely hard to deliver
- Pooling ideas, resources and experience can produce imaginative solutions to overcome financial constraints

General practices across the federation adopted and made use of the infection control protocols that had been developed through the super green clinic as this service came to an end. From the moment the clinic began, morale among the staff and volunteers was high.

Patients were incredibly grateful to be cared for in this way and told us how safe they felt once they saw the extent of the infection prevention and control measures being taken.

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The service was entirely nurse-led, with a GP available in the building if necessary, but not within the super green clinic area. We were fortunate to have a wide range of skills to call on within the team, including an experienced director of nursing from Taurus Healthcare; a deputy director of nursing who had experience with infection control guidance; an experienced practice nurse who stepped up to the site manager role; a Queen Alexander Royal Army Nursing Corps officer reservist with an MSc in disaster healthcare and a clinical commissioning group practice nurse with leadership experience; and two practice managers who were able to implement change, set up the booking service, and offer IT support.

Practice nurses and community nurses have an extraordinary breadth of experience and a common goal to care for all patients with the highest evidence-based quality care. To provide safe care during the pandemic, practice nurses had to work outside their historic role in GP surgeries. The nurse-led super green clinic provided an incredible opportunity for nurses in Herefordshire to demonstrate their leadership skills.

Conclusion

The coronavirus pandemic has been an extraordinary time in healthcare and NHS staff and volunteers have responded with outstanding adaptability and vision. The super green clinic to provide nursing care to extremely clinically vulnerable patients, who had been asked to shield, was set up remarkably quickly while ensuring healthcare governance and patient safety. The nurses involved in this unique project have developed skills and leadership experience that have already led them to work in more senior roles. **NT**

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