A Standard Operating Procedure for use of Skype, aTouchAway and vCreate for Virtual Visiting During Covid-19

For Use in:	All staff groups responsible for patients using Virtual Visiting (Skype, aTouchAway and vCreate)
By:	All staff groups
For:	Patients during Covid-19 Pandemic to be able to connect with friends and family
Division responsible for document:	Corporate – Digital Health
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If Yes - does the strategy/policy deviate from the recommendations of NICE? **If so why?**	

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Version and Document Control:

Version No.	Date of Update	Change Description	Author
1	17/04/2020	New document	Emily Wells

This is a Controlled Document

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Introduction

Supporting patients, families and staff communication is one of many pressing priorities during the COVID 19 pandemic which is presenting a significant challenge to Trusts and in particular Intensive Care Units across the country.

As a Trust we have considered platforms to best suit our Critical Care Complex, paediatric, neonate and adult inpatient areas.

aTouchAway is an e-platform designed to create a circle of care for patients and family. Co-designed by intensive care clinicians to enable a secure communication strategy from the Intensive Care team to families of patients under their care it supports secure text, audio and video communication.

Skype is a voice-over-internet-protocol (VOIP) service that will allow patients within our adult inpatient areas to communicate with family and friends by voice, video, and instant messaging over the Internet. Lots of people use it all over the world to talk to family and friends who do not live near each other.

vCreate is a Secure Video Messaging service that allows clinical teams in Neonatal and Paediatric Units to send video updates to parents for those times when they're unable to be with their child.

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Objective

To enable patients, families and clinical staff to connect while visiting restrictions are in place during the Covid-19 pandemic.

Rationale

This SOP will:

- Provide staff with the guidance for assisting patients and families to be able to communicate via the Trust chosen apps, aTouchAway, Skype and vCreate.

- Provide details of the apps that will be in use across the Trust

Scope

This document should provide guidance to all staff within Norfolk and Norwich University Hospitals Foundation NHS Trust who are responsible for patients who may want assistance in being able to communicate with family and friends.

Principles

1. While visitation restrictions are in place during the Covid-19 pandemic, the Trust have introduced applications to facilitate communication between patients and families and friends and staff.

2. Patients will not be able to receive incoming calls from family members or friends unless previously organised through ward/department staff.

3. The Ward Staff will arrange a convenient time for patients to place a Skype video call to their families

4. When being used to facilitate end of life conversations, the contact might not be in line with the patients request (because they may be unable) but at the nurse's discretion to update family.

5. aTouchAway, vCreate and Skype may also be used to explain and update the family on a patient's condition. In some situations, this may be more beneficial 'face to face' than on the phone.

6. aTouchAway will be used for CCC areas – See Appendix A for more details

7. Skype will be used for inpatient areas – See Appendix B for more details

8. vCreate will be used for Neonates – See Appendix C for more details

9. iPads must be decontaminated

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     a. Between each patient and after patient use;

     b. After blood and body fluid contamination;

     c. At regular intervals as part of equipment cleaning.

     d. More details around cleaning of devices available in Appendix D

iPads

- The Tablet is for the use of patients who may wish to contact their family/friends.

- Once the patient has finished with it, it needs to be wiped clean following infection control and prevention procedures.

- The Tablet will need to be charged regularly through the provided wire, plugged into the charging cable plug socket.

- Between patients, any accounts/login details and contacts must be deleted - this can be done at the same time as cleaning.

- The iPads have been provided by Digital Health but are the responsibility of the ward/department in which it has been allocated. Please ensure it is looked after as resources are limited and it may not be possible to replace it.

- If the iPad is lost/stolen, please contact the Digital Health Service Desk and report it on Datix.

Storage

- The iPads should be kept in a secure place on the ward/department they are allocated too.

- iPads should be on charge when not in use

- iPads should be cleaned before/after patient use and returned to safe storage location.

Confidentiality

Passwords will be given/chosen by nominated family members and must be requested by staff member who is helping to facilitate call to ensure in contact with correct person.

Information Governance

New guidance has been published in relation to Covid-19 Information Governance advice for health and care professionals and can be found here.

The guidance does not directly refer to the use of electronic devices to enable families/carers to communicate but NHSX have stated that during the current emergency situation where a patient is critically ill due to COVID-19 they do not think that the Information Commissioner's Office (ICO) would consider it harmful to use mobile devices in order to communicate with families and patients. The ICO has

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advised that video conferencing is acceptable in supporting individual care and further encourages the use of videoconferencing where it will reduce the spread of COVID-19. The advice has also been endorsed by the National Data Guardian and NHSX guidance will be reviewed to take account of communication with families/carers.

A Data Protection Impact Assessment (DPIA) has been completed and authorised for all 3 applications (aTouchAway, Skype, vCreate).

IT Resources

Digital Health Service Desk for reporting issues with iPads and connectivity

Summary of development and consultation process undertaken before registration and dissemination

The authors listed above drafted this document on behalf of the Digital Health team who have agreed the final content. During its development it has been circulated for comment within Patient Experience team and senior nurses.

Associated Documentation

Cleaning and Disinfection (Trust Guideline)   Document ID: 9695
Incident Management and Investigation Policy Document ID: 15736
COVID-19 National PPE Guidance   Document ID: 17173

Covid-19 Information Governance advice for health and care professionals and can be found here.

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Equality Impact Assessment (EIA)

Name of the Standard Operating Procedure:	For use of Current Health Wearable Devices During Covid-19		
Type of function or policy	Existing ☐		Proposed ☒

Division	Corporate	Department	Corporate – Digital Health
Name of person completing form	Emily Wells	Date	April 2020

Equality Area	Potential Negative Impact	Impact Positive Impact	Which groups are affected	Full Impact Assessment Required YES/NO
Race	None		N/A	No
Pregnancy & Maternity	None		N/A	No
Disability	None		N/A	No
Religion and beliefs	None		N/A	No
Sex	None		N/A	No
Gender reassignment	None		N/A	No
Sexual Orientation	None		N/A	No
Age	None		N/A	No
Marriage & Civil Partnership	None		N/A	No
EDS2 – How does this change impact the Equality and Diversity Strategic plan (contact HR or see EDS2 plan)?				

- **A full assessment will only be required if: The impact is potentially discriminatory under the general equality duty**
- **Any groups of patients/staff/visitors or communities could be potentially disadvantaged by the policy or function/service**
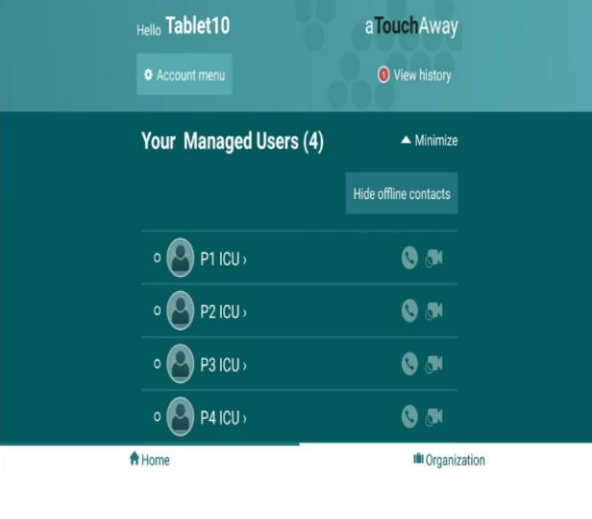- **The policy or function/service is assessed to be of high significance**

IF IN DOUBT A FULL IMPACT ASSESSMENT FORM IS REQUIRED

The review of the existing policy re-affirms the rights of all groups and clarifies the individual, managerial and organisational responsibilities in line with statutory and best practice guidance.

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Appendix A - aTouchAway-Supporting virtual communication and visiting for ICU families during COVID 19 Pandemic

aTouchAway is an e-platform designed to create a circle of care for patients and family, presents a potential solution that supports secure text, audio and video communication. How it works –

Step 1: Each institution/ICU creates a digitally secure dashboard using aTouchAway of those patients that require virtual family communication. Patients are added on admission (or when deemed appropriate by the clinical team) and similarly discharged from this dashboard at discharge (or again when deemed appropriate by the clinical team). ICUs will require dedicated tablets to take into patient's rooms – however all patients can be viewed on any tablet so can be used throughout the ICU.	
Step 2: Family members are then invited to join their family member's circle of care via aTouchAway using their email contact. This requires family members to download the aTouchAway app from the app store (is compatible with smartphone, tablet, PC, Mac). Once a family member accepts the invite they are now visible as a circle of care member for that patient. Steps 1 and 2 could be done by a ward clerk or similar.	

Step 3: To contact a family member (or members via creation of a group chat), any member of the ICU team, using an aTouchAway enabled device (with its own secure login) such as a unit supplied tablet, can click on a patient, see their family circle of care, and select a family member(s) to send a text update, or make an audio or video call. We envisage ICU teams could send status and other update messages, establish times for virtual visiting and family meetings etc.
Step 4: Family members can respond to messages sent via aTouchAway, and can also use the messaging features to send questions to the ICU clinical team. There are also audio and video options but we imagine most ICUs would want to design their own communication strategies and which functions they enable for families to contact the ICU team.

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Appendix B – Skype - Supporting virtual communication and visiting for inpatient wards during COVID 19 Pandemic

What is Skype?

Skype is software that will enable our patients to make free video and voice one-to-one or group calls and send instant messages. Within the Trust You can use Skype on whatever works best for you – on your mobile, computer or tablet.

Skype is free to download and easy to use.

1. Families/friends download Skype – Email address, password, mobile number and full name is stored in the database.

2. Families login with their user credentials – Ready to receive call at date/time organised by Ward/Department Staff

3. Agree to the user agreement.

4. Help can be found here for information about:
- ✓ Getting started
- ✓ Calling
- ✓ Messaging
- ✓ Troubleshooting

5. Any videos, photos and contact details are deleted before device is used by another patient.

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Appendix C – vCreate - Supporting virtual communication and visiting for Neonates during COVID 19 Pandemic

vCreate is a secure video messaging service for children's units to securely produce and deliver video/photo updates for families when they are unable to be at the unit.

To help provide reassurance and minimise separation anxiety in parents of babies/children when they are unable to be at the unit.

The videos/photos provide reassurance to parents and minimise separation anxiety. It allows parents to share child wellbeing updates with extended family and is part of the proven Family-Centred Care initiative.

It allows units to communicate more effectively with families and in a more visual way

1. Families register for an account – Email address, password and full name is stored in the database – mobile phone number optional

2. The account is approved by the unit – The account is set to active

3. The unit produce videos and photos which are assigned to the family account via a scanned QR code at the bedside. Videos and photos are stored on vCreate and referenced to the account by a unique ID

4. The family is alerted by email or sms that there is a new video or photo

5. Families login with their user credentials – vCreate records last access statistics by ID

6. The video or photo is accessed – vCreate serves the file and tracks views and video events such as pause, referenced to the account by ID

7. Videos and photos can be downloaded upon discharge – vCreate downloads all the videos and photos to a zip file for families to save. The zip file is then deleted.

8. The videos and photos are deleted – Data, videos, photos and the account are permanently deleted from the system including tracking data.

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Appendix D – Cleaning of devices

An increased frequency of decontamination should be considered for devices when used in isolation/cohort areas.

Cleaning is the process, which physically removes micro-organisms and organic matter but does not necessarily destroy infectious agents. It is carried out using detergent to help remove debris.

The IP&C team recommends Trust staff to use Clinell wipes and Trust approved detergent, eg. Hospec to clean. Please follow manufacturer's instructions for dilution, application and contact time.

- Clean your hands and apply PPE.
- Clean the piece of equipment from the top or furthest away point.
- Discard disposable cloths/paper roll immediately into the clinical waste bin.
- Remove and discard PPE.
- Perform hand hygiene.
- Please see Appendix 1 for further guidance on cleaning.

Disinfection/Decontamination is the removal of micro-organisms to a safe level, carried out by heat or chemicals.

The IP&C team recommends Trust staff to use a chlorine releasing agent, e.g. Actichlor Plus is used to disinfect. Please follow manufacturer's instructions for dilution, application and contact time.

- Clean your hands and apply PPE.
- Clean the piece of equipment from the top or furthest away point.
- Discard disposable cloths/paper roll immediately into the clinical waste bin.
- Remove and discard PPE.
- Perform hand hygiene.

NB Actichlor plus tablets must be kept in locked cupboards e.g. dirty utility room. Instructions for use must be displayed close to the cupboard.

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iPad Cleaning

Before the iPad is used please ensure that the person who is using the iPad washes their hands using soap and water or alcohol gel.	**Between different patient use** please ensure that the iPad is cleaned using a clinell wipe and allow to dry for at least 2 minutes	**Daily Cleaning Protocol** 1. Wear appropriate PPE 2. Turn off iPad 3. Clean all external surfaces with clinell wipes 4. Put the equipment on charge
If contamination with bodily fluids has occurred, please ensure that the following is completed: 1. Wear appropriate PPE. Immediately remove the iPad from use and ensure that the following is completed: 2. Turn off iPad. 3. Remove all contamination and change gloves 4. Clean all external surfaces with Clinell wipes and allow to dry for at least 2 minutes. 5. Once contamination has been rinsed/washed off with a Clinell wipe and allowed to dry for 2 minutes	6. Open protective cover to check for any fluid ingress; if ingress has occurred it must be removed using Clinell wipes and allowed to dry for at least 2 minutes before replacing any protective cover. 7. Change gloves and replace the cover. 8. Give the outside cover a final wipe using a disinfectant wipe before being put back into use. 9. It is not waterproof – do not immerse in fluid.	If there are any questions relating to this, please liaise with the Infection Prevention Control Department.

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