Clinical guide for supporting visiting arrangements

The national suspension on visiting imposed under the direction of NHS England has now been lifted and visiting arrangements are now at local discretion. The health, safety and wellbeing of our patients, communities, individuals and teams remain our absolute priority and the restriction will remain in place for those wards that have confirmed COVID-19 cases.

Practical considerations to support visiting

- **Before visiting** the visitor must contact the clinical area to discuss appropriate arrangements including being provided with an agreed time to visit for no longer than one hour. There will be a gap of 15 minutes between visits to allow for cleaning of the room between each visit. Visits may be shorter if there is a high demand for visits.
- Visiting outside of the unit is preferable and social distancing measures must be adhered to. You will be requested to use hand sanitiser on arrival to, and departure from, the unit.
- A suitable room will be provided. This room will have been cleaned prior to and post visits. Personal protective equipment (PPE) will be available for use by the visitor and patient. A clinical waste bin will be placed within the room. Furniture will be arranged to support social distancing and excess furniture will be removed.
- The number of visitors is limited to one close family contact or somebody important to the patient. However, where it is possible to maintain social distancing throughout the visit a second additional visitor could be permitted which should be discussed when arranging the visit with the clinical team. The visitor does not need to be the same person at each visit.
- Visitors should be informed in advance about what to expect when they see the patient and be given practical advice about social distancing and wearing personal protective equipment. Visitors must be made aware that good hand hygiene (handwashing) is needed to facilitate visiting.
- **Personal protective equipment (PPE)** should be provided and visitors will be required to wear a mask (or face covering) and gloves. Staff should explain that the mask must not be touched or removed whilst the visit is taking place.
- Anyone showing symptoms of coronavirus must not visit, even if these symptoms are mild or intermittent, due to the risk they pose to others. This is important for infection prevention and control. If a visitor has been contacted by the Track and Trace service and advised to self-isolate they must not visit during this 14-day period.
- Other people who are in attendance to support the needs of the patient, for example a familiar carer/supporter/personal assistant, should not be counted as an additional visitor. Patients may be accompanied where appropriate and necessary to assist with the patient's communication and/or to meet the patient's health or social care needs.
- **On arrival** the visitor should report to reception before being escorted to the visiting room which will be via the shortest route possible. The nurse caring for the person must



ensure that the visitor knows how to contact the ward if they need anything or to signal when they want to leave.

• **On leaving** reassure the visitor that self-isolation is not required following the visit as they have been protected from the risk of transmission by using PPE and performing hand hygiene.

Where a face-to-face visit is not practical then virtual visits should be supported and facilitated. Successful examples of 'virtual visits' and other arrangements include: –

- Arrangements for getting messages to those important to the patient supported by voluntary services.
- Central email arrangements and delivery to patients of laminated messages/photographs
- o Taking delivery of a phone for patients from their families/friends
- Making internet connected kit available to staff to facilitate contact between patients and the people important to them
- Providing physical symbolic tokens that create physical connection between the patients and the people important to them.

Area specific guidance

Hartington Unit

- Visits will take place in the Seminar Room
- Visits will be facilitated in 45-minute slots, allowing for 15 minutes between visits for cleaning
- Visits taking place in the hospital grounds can be accommodated outside of these times. However this will be subject to good weather and in cases of bad weather inside visits can only be accommodated during the times outlined above and if there is availability
- The Seminar Room can accommodate three visits at a time, with one-two visitors per patient
- Each ward will accommodate one visit per visiting slot
- The wards will have a rota for facilitating each visit. The ward facilitating the visit will ensure that all surfaces are wiped down with Clinell wipes before and after the visit. They will supervise the visit to ensure that social distancing is maintained throughout
- All visits must be agreed by the MDT before the visit is arranged. Consideration should be given to whether the patient has the capacity to have a visit within the hospital grounds rather than the Seminar Room, and if the MDT is confident that the patient and their visitors will maintain social distancing without supervision from



staff. Inside visits will be supervised by staff. The MDT will decide on an individual basis if patients need to be escorted to the visit and collected afterwards. This discussion must be documented within the EPR

- Patients on level 1 or 2 must have the appropriateness of a supervised visit considered. Where a visit is agreed, the staff member facilitating the visit will not be the same staff member carrying out the level 1 or 2 observation. It is the responsibility of the ward to provide the observing staff member
- Visits with people under 18 will need to be arranged on an individual basis and outside of the times outlined above. There must be no joint visits with anyone under 18 present
- Swabbing will not be required following periods of ground leave to accommodate visits with friends and family.

Radbourne Unit

- Visits will take place in the Family Room
- Visits will be facilitated in 30 minute slots, allowing for 15 minutes between visits for cleaning.
- Visits taking place in the hospital grounds can be accommodated outside of these times. However this will be subject to good weather and in cases of bad weather inside visits can only be accommodated during the times outlined above and if there is availability
- The Family Room can accommodate one visit at a time, with one-two visitors per patient.
- The ward facilitating the visit will ensure that all surfaces are wiped down with Clinell wipes before and after the visit
- All visits must be agreed by the MDT before the visit is arranged. Consideration should be given to whether the patient has the capacity to have a visit within the hospital grounds rather than the Family Room, and if the MDT is confident that the patient and their visitors will maintain social distancing without supervision from staff. Inside visits will be supervised by staff. The MDT will decide on an individual basis if patients need to be escorted to the visit and collected afterwards and if staff are required to observe the visit. This discussion must be documented within the EPR
- Patients on level 1 or 2 must have the appropriateness of a supervised visit considered
- Visits with people under 18 will need to be arranged on an individual basis
- Swabbing will not be required following periods of ground leave to accommodate visits with friends and family.



The Beeches

The Beeches is a self-contained mother and baby inpatient unit located within the Radbourne Unit. It has single rooms but no en suite bathrooms. There is a foyer area, but this has been assessed as unsuitable as it is more difficult for staff to have any oversight of the visit without being overly intrusive; it is the entrance to the ward area so there is a lack of privacy; and there is no way to exit the area without a swipe card, which could cause difficulties if either party became distressed.

- Visiting will take place in the MDM room
- Visits will be booked in advance and will last no longer than an hour. Subject to demand for visiting slots they may be shorter
- The MDM room will be ventilated and cleaned in between visits; there will be at least 15 minutes between visits in the room
- Furniture will be arranged to support social distancing. Excess furniture will be removed
- A clinical waste bin will be placed in the MDM room for waste PPE
- PPE will be provided and visitors should wear face coverings and gloves
- Visiting parents who wish to have physical contact with baby must be living in the same household as the mother and must wear mask, gloves and apron
- Children visiting must be from the same household and must be risk assessed individually
- Visitors will enter the unit via the foyer which gives exclusive access to The Beeches.

Cubley Court

- Visiting will take place in the Family room only which is next to the reception area and away from the wards
- Visits will be booked in advance and will last no longer than an hour. Subject to demand for visiting slots, they may be shorter
- Visitors are required to report to reception as access and egress is controlled via a swipe card
- The Family room will be ventilated and cleaned in between visits; there will be at least 15 minutes between visits in the room
- Furniture will be arranged to support social distancing. Excess furniture has been removed
- PPE will be provided in the reception area and hand washing facility is available
- A clinical waste bin is in reception just outside the Family room for waste PPE
- A staff member will oversee the visiting session



• The entrance and exit is through the main door to the unit and is the shortest route to the Family room. The PPE station is in the same area.

Ward 1

- Visiting will take place in the External OT room only, situated on the main corridor and away from the ward
- Visits will be booked in advance and will last no longer than an hour. Subject to demand for visiting slots they may be shorter
- Visitors are required to report to reception as access and egress is controlled via a key fob
- The OT room will be ventilated and cleaned in between visits; there will be at least 15 minutes between visits in the room
- Furniture will be arranged to support social distancing. Excess furniture will be removed
- PPE is available in the main reception, staffed by DCHS staff, and alcohol gel facility outside the ward
- A clinical waste bin will be placed in the OT room for waste PPE along with additional PPE for that visit in case it is required
- A staff member will oversee the visiting session
- The entrance and exit is through the same door and is the shortest route to this room. Corridors are marked to support social distancing.

Cherry Tree Close (CTC)

CTC is an inpatient rehabilitation unit of six bungalows. The bungalows have single bedrooms but shared bathrooms and communal areas. There is a staff bungalow for visitors and patients to report to with a bell. Due to the logistics of the bungalows there is a restricted number of rooms available due to the need for changing rooms for staff and suitable donning and doffing areas. Previously, visiting has taken place in the conservatory area of the bungalow the patient is residing in, however to reduce the footfall through the bungalows it was agreed that this would not be suitable and therefore a room has been designated specifically for visiting. Patients have a capacity assessment to determine the level of understanding in relation to Infection Prevention Controls across the unit. As stated in the overarching guidance, all information will be provided to patients and visitors prior to visiting. It will be explained that the toilet and kitchen facilities on CTC will not be available to visitors during their visit.

Patient visiting times are as follows, Monday – Friday 2.30pm – 4.45pm and 6.15pm – 8.30pm with additional time on Saturday and Sunday 10am – 12.15pm. There are enough visiting slots to allow one hourly visit per week within the CTC visiting room;



these will be given on a first-come, first-served basis. Where a slot is not available at a requested time, visitors will be advised that visiting on the grounds is still available

- Children will be permitted, where possible they are to be supported by family from the same household staff are to be present where children are in attendance
- Visitors will be encouraged to take leave on the grounds where suitable. They will not be escorted by staff so both patient and visitor will still be provided with PPE to ensure appropriate IPC is in place
- It will be made clear that visitors are not to go in to any other clinical area with CTC whilst visiting including bedrooms or communal areas
- Visitors are to ring the bell on the staff bungalow and wait outside for staff to come to them, they will be requested to sign in and provided with hand sanitiser and PPE (face coverings and gloves)
- Visitors will then be taken over to the visiting room by staff, or, if utilising the grounds, advised of what time they need to return to the office and the parameters of the grounds and also reminded that the Trust is a non-smoking site.
- The room available for visitors will be in Bungalow 6. It will be the first room on entering the bungalow, reducing footfall within the clinical area
- Staff will remain present within the Bungalow at all times when a visitor is present. There is only one door into the room so staff should encourage visitors to sit closer to the door, should there become a level of distress
- The room will be ventilated and cleaned between visits. Furniture will be minimised
- At the end of the visiting hour, visitor and patients are to return to the Staff Bungalow to sign out. Staff should support patients and visitors to utilise the doffing area individually, where hand washing facilities are available.

Kedleston Unit

Kedleston is a male low secure unit comprising two wards. Both wards have limited space available. Visiting is not permitted in this area. Previously, visiting has been conducted in the family room; however this is currently being used as a changing area. Due to the limitation in space, the MDM room has been identified as the most suitable room for visiting to take place. This room sits outside the wards, and therefore not within the clinical areas, to ensure reduced footfall and to minimise risk of transmission of infection, and also to mitigate risks to visitors on the unit. The MDM room is currently the only available room in the building for all activities due to donning, doffing and changing rooms required, therefore there is a limitation of the times provided. We have ensured that there are enough time slots to meet the current bed numbers. Patients have a capacity assessment to determine the level of understanding in relation to Infection Prevention Controls across the unit. As stated in the overarching guidance, all information will be provided to patients and visitors



prior to visiting. It will be explained that the toilet and kitchen facilities on Kedleston will not be available to visitors during their visit.

- Patient visiting times are as follows, Monday Friday 6pm 8.15pm with additional time on Saturday and Sunday, 2pm 4.15pm. There are enough visiting slots to allow one hourly visit per week. These will be given on a first-come, first-served basis. Where a slot is not available at a requested time, visitors will be advised that visiting on the grounds is still available
- A minimum of 72 hours' notice is needed for booking visits due to the staffing requirements to support visits
- As per policy, a staff member will be present throughout the visit
- Children will be permitted on an individual basis and will be agreed in MDT prior to visiting arrangements being made
- Visitors will be encouraged to take leave on the grounds where suitable
- For those wishing to have visiting take place on the grounds, consideration of combining Section 17 leave to enable the full hour will be discussed in MDT
- Visitors are to report to reception, they will be requested to sign in and will be provided with hand sanitiser and PPE (face covering) if conducted on grounds or taken to the donning area with hand washing facilities
- Visitors will then be taken over to the visiting room by staff or escorted round grounds
- Visiting will take place in the MDM room
- Staff will remain present at all times; there is only one door into the room so staff should encourage visitors to sit closer to the door, should there become a level of distress
- The room will be ventilated and cleaned between visits. Furniture will be minimised
- At the end of visiting visitor and patients to be supported to utilise the doffing area and hand washing facilities. If leave is taken on the grounds PPE is to be collated in clinical waste bin and hand sanitiser provided within reception when signing out.

Advice and support to visitors at end of life

- **Preparing** the visitor for what they will see when they arrive in the care setting:
- Transport: visitors can be advised to consider being driven to the hospital by a member of their household, if possible, to minimise the risk of exposure to others. They should avoid the use of public transport – especially after the visit. Visitors driven by a person close to them may welcome the support that person can offer once the visit has finished
- What to do on arrival and arrangements to escort the visitor to the care setting by the shortest possible route



- Personal belongings: visitors should minimise the number of personal belongings they bring with them, such as bags, handbags, electronic devices. The visitor should remove outer clothing, roll up their sleeves and clean their hands before putting on PPE
- Going to the toilet and having a small drink before they don PPE helps to avoid the need to don and doff PPE more than once during the visit
- Visitors are informed about what to expect when they see their loved one.
- **Personal protective equipment (PPE)** should be explained, including the importance of handwashing and risks associated with the removal of gloves to hold hands. Staff should explain that the mask must not be touched or removed whilst the visitor is with their relative. Visitors must be made aware that good hand hygiene (handwashing) is needed to facilitate visiting.
- **Explaining** any limits to the length of time the visitor can stay. The number of visitors at the bedside is limited to one close family contact or somebody important to the dying person. However, where it is possible to maintain social distancing throughout the visit, a second additional visitor could be permitted. Other people who are in attendance to support the needs of the patient should not be counted as additional visitors
- **Notifying** the nurse caring for the person that a visitor has arrived and ensure that they know how to use the call bell if they need anything or signal when they want to leave
- **Providing** comfort if the visitor is distressed, hold the person's hand(s), and provide further appropriate emotional support away from the care setting
- **Providing** information to the visitor about what will happen next if their loved one has died
- **Reassuring** the visitor that self-isolation is not required following the visit as they have been protected from the risk of transmission by using PPE and performing hand hygiene
- **Signposting** opportunities to prepare for death, including emotional and spiritual support (chaplains and faith leaders may play an important role here).

Specific visiting advice

In the majority of cases, if a ward has a positive case of COVID-19, all visiting will be suspended.

1. Patients with coronavirus in exceptional circumstances or compassionate visiting

In this situation, the main potential risk is to the family or friend visiting a loved one. They should be made aware of the increased risk to themselves and of precautions to be taken.

- Advise the visitor of their increased risk of infection from entering the high-risk zone
- Higher levels of protection will be required if entering the COVID- positive area and staff should assist with putting it on and taking it off safely. As long as PPE is worn, the visitor does not need to self-isolate afterwards as a result of the visit
- Advise the visitor to:
 - stay at least two metres away from others as they enter and leave the setting and avoid touching any surfaces
 - \circ enter and leave the setting as quickly as possible using the most direct route
 - avoid touching their eyes, nose and mouth with unwashed hands
 - o cover any coughs or sneezes with a tissue, then throw the tissue in a bin
 - wash their hands again with soap and water for at least 20 seconds when they are leaving the setting and then again as soon as they get home
 - follow stay-at-home guidance if they become unwell.

2. Patients without coronavirus

The main potential risk is to other people in the setting (residents, patients and staff) from visitors entering the setting, but there is also a risk to the visitors themselves, given the high prevalence of infection in healthcare settings. It is important that any such risk is kept to an absolute minimum through strict adherence to social distancing and rigorous respiratory and hand hygiene.

Anyone who is showing symptoms of coronavirus (a new continuous cough, a high temperature or anosmia) should not visit, even if these symptoms are mild or intermittent, due to the risk they pose to others. Visitors may attend if they are asymptomatic and adhere to the following:

- stay at least two metres away from others as they enter and leave the setting and try not to touch any surfaces
- avoid touching their eyes, nose and mouth with unwashed hands
- cover any coughs or sneezes with a tissue, then throw the tissue in a bin
- wash their hands again with soap and water for at least 20 seconds when they are leaving the setting and then again as soon as they get home.

If the visitor is in a household that is self-isolating as they have been in contact with someone else who is suspected/confirmed to have coronavirus:

• If symptomatic they **must not** visit the setting



- If the visitor is asymptomatic and wears PPE the risk to others is minimal, although they may pose a risk to the person they are visiting if they are less than two metres away and stay for longer than 15 minutes (FRSM, apron, gloves)
- They should stay at least two metres away from others as they enter and leave the setting and try not to touch any surfaces
- They should enter and leave the setting as quickly as possible using the most direct route.

Heads of Nursing

26.06.20