

# Standard Operating Procedure Inpatient Visiting – COVID 19

# For Exceptional Circumstances

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For Completion by SOP Author	
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## 1. INTRODUCTION

Following the release of the updated guidance titled, Visiting healthcare in inpatient settings during the COVID-19 pandemic: principles, 1 January 2022, Version 3. This guidance supersedes the previous version.

Inpatients in healthcare settings can be more vulnerable to severe illness because of coronavirus (COVID-19). We expect and encourage providers to facilitate visits wherever possible, and to do so in a risk-managed way.

It is important to recognise the contribution that visiting makes to the wellbeing and the person-centred care of patients; lack of access to visitors causes distress to them and their families.

Careful visiting policies remain appropriate while COVID-19 continues to be in general circulation and organisations can exercise discretion where COVID-19 rates are higher. The health, safety, mental health and wellbeing of our patients, communities and staff remain the priority. Additional measures are therefore advised to facilitate visiting and healthcare providers are encouraged to actively find ways to ensure that visiting can take place.

This guidance advises on how the Trust should facilitate visiting, as far as possible, across healthcare inpatient settings, including mental health, learning disability and autism and children and young people. It is consistent with 'Coronavirus how to stay safe and prevent spread' and infection prevention and control guidance.

During any period of national lockdown in England a full review of NHS England/ Improvement guidance around visiting protocols within healthcare settings is undertaken.

In the light of these recent developments, we have revised ward visiting and leave protocol for patients within inpatient settings at LPT. As an NHS provider we have a duty to comply with Trust policies and instructions as well as advice from the Government for the safety of our patients, staff and members of the public, in view of the rapidly rising number of Covid-19 cases within our communities.

The decision for the patient to go on leave rests legally with the Responsible Clinician (RC), after discussions with the Multi-Disciplinary Team. The discussions will include decisions relating to the Covid-19 status of the patient and the implications for that patient and others on the ward. Infection Prevention and Control guidance, in line with national and Trust policy will be followed, if leave is agreed.

LPT has issued the following update regarding Covid-19 visiting to our inpatient wards to facilitate visits to patients on our wards in exceptional circumstances only.

Exceptional circumstances include the following; this is not an exhaustive list. Where the lack of family contact is identified as causing a patient distress or limiting recovery a visit can be agreed.

- Patients with a Learning Disability
- Patients with Dementia
- Adults, Children and Young People with Severe Mental Health Issues
- Patients at End of Life will be allowed visiting where possible. Two visitors at a time may visit throughout the day (and night if appropriate) and it can be different members of the family as per agreement by the Matron/ Nurse in Charge.

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A patient's Mental Capacity must be assessed in relation to ability to adhere to social distancing and best interests' decisions to be made regarding visiting, where applicable.

# Additional considerations to support visiting at end of life

This section relates to people who are ill enough that they could die within the next few days, recognising this can be difficult to determine with accuracy. Sometimes a patient dies very suddenly or unexpectedly. Families need to be reassured that if they are not present when their loved one dies, staff will always be with and comfort their patient.

## Adults who are dying.

- A compassionate approach is essential in balancing the importance of close family members (including children), and others important to the dying person, being able to spend precious time with them and say goodbye, with the need to manage infection risk and maintain the safety of the visitor, staff and other patients.
- It may be especially important for the dying person (or their family) to receive spiritual, emotional, or religious support at this time. This can be assessed and provided by the healthcare chaplain, who is part of the multidisciplinary team. The healthcare chaplain can assess and provide this or contact an external faith leader if required. Provision of the extra practical and emotional support that visitors may need in this situation should be co-ordinated.
- Staff require training and preparation to sensitively support visitors of people who are dying and support to manage the impact of this on their own wellbeing. Health Education England offers some practical learning around end-of-life communication.

An individualised approach needs to be taken on a case-by-case basis to manage the balance between compassionate visiting and infection risk management.

## Children and young people who are dying

The same compassionate approach is needed when a child or young person is dying. Healthcare teams always make every effort to ensure that a parent, guardian or carer can be present.

If the parent, guardian or carer is suspected of being infected with coronavirus it may be possible to enable visiting by moving the child or young person to a separate location or providing the parent, guardian or carer with appropriate PPE. Staff will ensure the parents/guardian are updated if they cannot visit and allow another family member or someone close to the child to visit instead

Visiting will take place at the bedside on CHS wards: On inpatient mental health wards visiting will take place in a visiting room or an identified room off the main ward area accessible following confirmation of a booked visiting appointment time. Visiting may take place in a garden area if assessed as suitable. The areas and means of booking these visits will be outlined in the process section of this SOP.

Patients and the visitor will be informed verbally before the visit on what to expect e.g. PPE, hand washing, hand sanitiser, social distance, taking belongings, no gifts, touch etc. and be

directed to the Trust website if they require further information and contact details for PALs for further support in respect of the visit.

Visiting professionals e.g. advocates, social care, facilities, or other LPT colleagues that are not usually based on the ward are instructed to follow COVID 19 PPE guidance. They are also advised to turn off the NHS track and trace app whilst at work. All professional visitors must complete the professional visitor's record. (Appendix 11)

### Before visiting the visitor should:

- Contact the ward/department/service setting to discuss appropriate local arrangements. This should include an individual risk assessment.
- Be informed about what to expect when they see the patient and be given practical advice about social distancing, wearing personal protective equipment (PPE) and handwashing.
- Take a lateral flow test, regardless of vaccination status and provide proof of a negative result.

#### Number of visitors at the bedside:

- Limited to one close family contact or somebody important to the patient, e.g., a family member or someone important to the patient receiving end-of-life care; a familiar carer/parent or guardian/supporter/personal assistant including both parents/guardians where the family unit can be maintained (if possible facilitate this within a side room or an area that allows for social distancing).
- Patients may be accompanied where appropriate and necessary to assist their communication and/or to meet their health, emotional, religious, or spiritual care needs.

#### Face coverings:

- All visitors must always wear a face covering, including when entering and moving through the healthcare setting, unless medically exempt for which evidence should be provided.
- Visitors will be asked to wear a surgical facemask if visiting a high-risk area or a patient with suspected/known COVID-19.
- Parents/guardians must always wear a face covering when entering and moving through the healthcare setting and when a healthcare professional is treating their child/young person. If they are with their child and/or young person and in side rooms or physical environments that afford separation, they can remove their face covering.

Anyone showing any symptoms of COVID-19 should not visit. This is essential for infection prevention and control. If visitors display symptoms of COVID-19 or have a positive test result they should stay at home and self-isolate immediately. If they have symptoms of COVID-19, they should arrange to take a PCR test as soon as possible, even if they've had one or more doses of a COVID-19 vaccine.

**Anyone feeling unwell**, even if they have tested negative for COVID-19 and are fully vaccinated and have received their booster, should not visit.

Any decision to cease visiting across the Trust will be made and communicated by the Clinical Reference Group, Director of Infection Prevention and Control and the Incident Control Centre (ICC).

Staff should continue to promote and facilitate alternative arrangements for patients to keep in touch with their families, loved ones and friends via virtual visit arrangements for example: facetime, Skype, message to a loved one.

The details of arrangements for each of the inpatient sites are described below and apply to all relevant ward areas: -

- Patients on adult or older adult wards should not be encouraged to meet somebody from a different household in the hospital grounds, regardless of the social distancing they maintain, due to the patients being in a higher risk group.
- Patients on an inpatient wards, especially informal patients should not be encouraged to meet somebody from a different household in the hospital grounds.
- If patients are unable or unwilling to comply, a decision will be made by the clinical team about discharge, if it is appropriate and safe to do so.

If a visitor has not pre booked a visiting slot, it is at the discretion of the Nurse in Charge as to whether the visit can take place following COVID 19 triage screening and patient/ward risk assessment.

# 2. PURPOSE

The purpose of this document is to outline the visiting guidance in ward areas, designated rooms, courtyards, gardens and outdoor spaces within our inpatient wards.

- Appendix 1 Inpatient Visiting in Mental Health Acute/PICU/Low Secure Services
- Appendix 2 Inpatient Visiting for the Community Hospital Inpatient Wards
- Appendix 3 Inpatient Visiting for Adult Eating Disorders
- Appendix 4 Inpatient Visiting for Mental Health Services for Older People Wards
- Appendix 5 Inpatient visiting for Mental Health Rehabilitation Services
- Appendix 6 Inpatient Visiting for the Agnes Assessment and Treatment Unit
- Appendix 7 Inpatient Visiting for Beacon
- Appendix 8 Script for staff booking visiting appointments
- Appendix 9 Patient information on inpatient visiting during the COVID-19 pandemic
- Appendix 10 Inpatient visiting log
- Appendix 11 Professional visiting log

Guidance related to this SOP will be updated accordingly in line with government advice and updated trust guidance related to this.

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# 3. SCOPE

The SOP is applicable to all LPT, external staff and patients.

# 4. ABBREVIATIONS & DEFINITIONS

- SOP Standard Operating Procedure
- PPE Personal Protective Equipment
- IPC Infection Prevention Control

# 5. DUTIES AND RESPONSIBILITIES

Visitors will need to book time slots directly via the ward, visits will need to be booked within the appointed visiting times. Preliminary triage questions will be asked by the ward team during the booking arrangements and visiting will be restricted for areas that are in local lockdown unless in exceptional circumstances. A patient information leaflet to support the visit will be emailed across to the visitor where possible via the wards nhs.net account or given to the visitor on entry to the ward.

Restricted local lockdowns information will be available via Trust communication updates.

The ward sister/Charge Nurse/Matron will risk assess the number of visitors which can be supported per day, this will be dependent on the acuity of the ward and the numbers of staff available to adequately supervise visitors. There should be no more than 4 visitors in the ward area at one time.

In exceptional circumstance if the ward is able to accommodate a visit outside of the arranged visiting hours this may be agreed by the Ward Sister/Charge Nurse/Matron for the ward.

# 6. PROCESS

The ward will have a booking system in place and a Covid-19 questionnaire (Appendix 8 - triage questions/booking form tbc) must be completed by staff as part of the visitor's call to the ward and in booking a visiting slot.

Visitors will also be requested to provide their full name and a contact number on confirmation of appointment time and on arrival to the ward. This information will be stored confidentially on the ward/unit until the end of the pandemic, for 2 years and then confidentially destroyed.

Visitors will be requested to provide evidence of a lateral flow test, regardless of vaccination status and provide proof of a negative result.

Masks will be available to visitors to be worn for the duration of the visit (except when the visitor confirms that they are exempt). Masks will be available from the main reception and can be disposed of in clinical waste at the exit via main reception.

On arrival to the ward the visitor will need to report to reception/a member of the multidisciplinary team at the entrance to the ward, the staff member will confirm that the visitor has no symptoms and the triage question answers remain accurate. The visitor will be escorted by a member of the team to the patient. If visitors display symptoms of coronavirus they should be asked to leave, and follow the latest <u>Stay at home: guidance for households with possible or confirmed</u> <u>coronavirus (COVID-19) infection - GOV.UK (www.gov.uk)</u>

Handwashing/the use of hand sanitiser will be advised and requested on entry to the ward at each visiting session. Visitors will have to wear the appropriate level of PPE but as a minimum a face mask will be provided by the ward.

If visiting at the bed space, privacy curtains between the beds are recommended to be drawn/used to act as a physical barrier, and act as a reminder to minimise opportunities for close contact.

At the end of the booked slot a member of staff will escort the visitor/s off the ward/unit and ensure PPE is disposed of appropriately and hand washing takes place. Please ensure that any personal alarm is handed back from the visitor and sanitized with a clinell wipe.

All furniture, surfaces and touch points e.g. visitor's chairs, tables must be wiped down in between visits with Clinell wipes.

# 7. TRAINING REQUIREMENTS

All staff should be in date with the IPC training and PPE donning and doffing training.

### Inpatient Visiting in Mental Health Acute/PICU/Low Secure Services

#### Bradgate Unit

In order to undertake visits within ward designated rooms, gardens and outdoor spaces, time slots will need to be booked with the relevant ward.

Visiting will be restricted to one visitor (immediate family members/significant other) per patient and for a maximum 1 hour period. All visitors will be greeted on entry to the ward area and requested to maintain 2 meters social distancing, apply hand sanitizer and wear a face mask provided by the ward unless an exemption is in place.

Contact numbers are as follows to arrange:

Aston	0116 225 2579
Ashby	0116 225 2567
Beaumont	0116 225 1023
Belvoir	0116 225 2706
Beacon	0116 225 2556
Heather	0116 225 2737
Thornton	0116 225 2747
Watermead	0116 225 2784

Each ward will provide the receptionist daily with their list of pre booked visits for the day ahead. The receptionist will ring the ward to inform them that the visitor has arrived. A staff member from the ward will collect the visitor from reception

The need to supervise visits will be based on risk assessment which will include the level of therapeutic observations during the visit.

The visitor will be given a personal alarm (with no Salto fob on) to call for help if needed and a demonstration of how to use.

At the end of the booked slot a member of staff will escort the visitor off the ward to the front entrance and ensure PPE is disposed of appropriately and hand washing is undertaken.

All visits need to be documented in the electronic patient record in the progress notes clearly detailing; who the visit was with, how long for and how the visit went.

There will be only one visit taking place at any one time with a maximum of one visitor.

If visitors include children under the age of 16 years old, the family room is to be used for visit.

Visiting Slots available: 1 hour slots

Weekday / weekend visiting for **Adult Mental Health Wards** 15.00 hrs – 1730hrs 18.30hrs – 20.00hrs

Visiting for Beacon – contact the nurse in charge who will confirm available visiting slots.

#### Visiting for **Belvoir Ward** SOP for Inpatient Visiting Covid-19 for Exceptional Circumstances v9 4.1.2021

Visitors will report to Belvoir reception area at the pre booked time of their visit, staff will go into to the reception area to greet them and ensure that visitors adhere to PPE and hand washing

Visiting Slots available: Weekday / weekend visiting

Times are; 3.00-4.30 and 6.00-8.00

### Herschel Prins – Phoenix and Griffin Ward

Visitors will report to Herschel Prins Centre (HPC) reception area at the pre booked time of their visit, staff will go into to the reception area to greet them. PPE and hand washing facilities will be available for the visitor to wear during the visit.

Phoenix – will follow their Low Secure visiting policy in place with added PPE during the COVID situation.

Griffin The need to supervise visits will be based on risk assessment which will include the level of therapeutic observations during the visit

For visits in hospital grounds up to 2 visitors can meet based on risk assessment

The visitor will be given a personal alarm (with no Salto fob on) to call for help if needed and a demonstration of how to use

Only one visit will be allowed /facilitated on the ward at one time – in the identified room not on the main ward area.

At the end of the booked slot a member of staff will escort the visitor off the ward to the front entrance and ensure PPE is disposed of appropriately and hand washing undertaken.

All visits need to be documented in the electronic patient record in the progress notes clearly detailing; who the visit was with, how long for and how the visit went.

Visiting Slots available:

Weekday / weekend visiting Times are: 3.00-4.30 and 6.00-8.00

### Inpatient Visiting in Community Hospital Wards

Visiting arrangements for all community hospital wards during the COVID 19 pandemic for the low risk pathway.

- Beechwood Ward, Evington Centre
- Clarendon Ward, Evington Centre
- Dalgliesh Ward, Melton Hospital
- East Ward, Hinckley and Bosworth Community Hospital
- North Ward, Hinckley and Bosworth Community Hospital
- Feilding Palmer Hospital
- St Lukes Stroke Unit, St Lukes Hospital
- Ward 3 St Lukes Hospital
- Ellistown Ward, Coalville Hospital
- Snibston Stroke Unit, Coalville Hospital
- Thringston Ward, Coalville Hospital
- Rutland Ward, Rutland Memorial Hospital
- Swithland Ward, Loughborough Hospital

Visitors need to book prior to visiting by calling the relevant ward and complete a Covid-19 questionnaire (staff will provide this as part of the call to the ward).

The ward sister/Charge Nurse/Matron will risk assess the number of visitors allowed per day; this will be dependent on the acuity of the ward and the numbers of staff available to adequately supervise visitors.

• One visitor per patient between 1.30pm - 4.30pm and 6.30pm -7.30pm each day for duration of 60 minutes will be allowed. No more than one visitor will be permitted in a bay area at a time.

Visitors must wear personal protective equipment (PPE) – a mask and socially distance (2 meters) from the patient during the visit at the bed side. There is no need for visitors to self/household isolate for 14 days after visiting (because a mask is worn and good hand hygiene is followed).

Masks will be provided and must be worn, unless medically exempt, for the duration of the visit from main reception and can be disposed of in clinical waste at the exit via main reception.

All visitors will be greeted on entry to the ward area and requested to maintain 2 meters social distancing, apply hand sanitizer and wear a face mask provided by the ward unless an exemption is in place.

Privacy curtains between the beds will need to be drawn to act as a physical barrier and reminder to maintain 2 meters social distancing.

At the end of the booked slot a member of staff will escort the visitor off the ward and ensure PPE is disposed of appropriately and hand washing takes place.

#### Inpatient Visiting for Adult Eating Disorders

In order to undertake visits within ward gardens and outdoor spaces or meeting rooms, time slots will need to be booked with Langley ward on the below contact number:

#### Langley ward: 0116 295 1511

Visitors need to book prior to visiting by calling Langley ward and complete a Covid-19 questionnaire (staff will provide this as part of the call to the ward).

Visitors will report to reception at the Bennion Centre, the receptionist will ring the ward and make them aware the visitor has arrived. Visits out of hours will need to ring the ward to let them know that they have arrived. Visitors will be expected to wear a face mask that will be available in reception and appropriate PPE.

Visits will take place in a designated meeting room or the grounds / ward garden. Visitors will access the meeting room or ward garden via the door in the 'air lock' at the entrance to the ward on notifying staff that they have arrived at the ward entrance.

Handwashing/the use of hand sanitiser will be advised and requested on entry to the ward at each visiting session. Visitors will have to wear the appropriate level of PPE. A face mask will be provided by the ward which must be worn throughout the visit.

The visitor will be given a personal alarm (with no Salto fob on) to call for help if needed and a demonstration of how to use

The need to supervise visits will be based on an individual patient risk assessment which will include the level of therapeutic observations during the visit.

In the meeting room/hospital grounds, up to one visitor can meet based on risk assessment. All patients should have a care plan to reflect their individual needs and potential risks during visits off the ward. This can be incorporated onto their Risk Assessment.

In poor weather conditions, outside visiting will cease and patient visiting will continue in an identified room. Patients cannot, for any reason, sit in their visitor's car.

Patients who are currently supported on therapeutic observations should follow the Trust guidelines for time out to visit hospital grounds and the ward policy. Risk should be considered according to why they are nursed on these observations. Any patient, who is on therapeutic observations, will need consultant agreement and documentation in notes that they are permitted to have leave off the ward for the purposes of seeing visitors.

A Clinical risk assessment must be completed to ensure the patient is fit to participate in a visit off the ward/unit. All visits will be in adherence to guidance and at the nurses' discretion.

At the end of the booked slot a member of staff will escort the visitor off the ward and ensure PPE is disposed of appropriately and hand washing/hand sanitising takes place.

All visits need to be documented in the electronic patient record, in the progress notes clearly detailing; who the visit was with, how long for and how the visit went.

Visiting Slots available: Weekday 1400hrs – 1700hrs 1830hrs - 2000hrs

Weekend 1000hrs-1200hrs 1400hrs- 1700hrs 1830hrs -2000hrs

### Appendix 4

### Inpatient Visiting for Mental Health Services for Older People

Visiting arrangements for MHSOP wards during the COVID 19 pandemic:

- Welford Ward
- Kirby Ward
- Coleman Ward
- Wakerley Ward

On arrival to either site Bennion or Evington Centre the visitor(s) will need to report to the main reception and the receptionist will let the ward know so the staff are able to escort the visitor(s) to the garden area/ Visiting room.

Visitors will be expected to wear a face mask that will be available in reception and appropriate PPE

At the entrance to the ward, the staff member will confirm that the visitor has no symptoms and the triage question answers remain accurate. The visitor will be escorted by a member of the team to the patient.

For the Bennion site access will be for Welford to the garden to the right of the airlock or the large garden area that is accessed through the link corridor next to CMHT base.

For Kirby ward access will be to the rear gate of the large patient garden and then the gate to the right which will allow for visiting to occur.

If due to weather conditions, visiting in garden is not suitable, and then Meeting room 1 is to be used for visiting purpose for Kirby ward and the quiet room on Welford ward. The room will accommodate maximum of 1 visitor.

For Coleman and Wakerley ward access to the gardens is obtained through the corridor before access to the wards.

If due to weather conditions, visiting in garden is not suitable, then the Eden lounge is to be used for visiting purpose. The room will accommodate maximum of 1 visitor

Due to the nature and vulnerability of the clients group at the Evington Centre, in exceptional circumstances where visiting in garden is not suitable visit due to weather conditions and The Eden lounge not deemed as appropriate, visit will be allowed in the quiet room on Coleman ward and Wakerley ward.

The need to supervise visits will be based on risk assessment.

At the end of the booked slot a member of staff will escort the visitor/s off the ward/unit and ensure PPE is disposed of appropriately and hand washing takes place. Please ensure that any personal alarm is handed back from the visitor.

All visits need to be documented in the electronic patient record in the progress notes clearly

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detailing; who the visit was with, how long for and how the visit went.

Visiting times will be bookable at the following times 7 days per week however is limited to time slots of 60 mins with a maximum of 1 visitor per patient. The areas will be accessible for 1 patient and 1 lot of visitors at a time and this will be weather permitting.

10.00-1200

1400 --1630

18.00 - 20.00

### Inpatient visiting for Rehabilitation Services & Inpatient Units

Visiting arrangements for Rehabilitation Service & Inpatient Units during the COVID 19 pandemic:

- Willows
- Stewart House
- Mill Lodge

In order to undertake visits within ward designated rooms, courtyards, gardens and outdoor spaces time slots will need to be booked with the ward the patient is being cared for on contact numbers are as follows to arrange:

Willows: Through the Co-coordinator 0116 2255820 Stewart House: Nurse in Charge 0116 2955750 Mill Lodge: Nurse in Charge 0116 2951615

Willows:

On arrival the visitor(s) will need to report to the main reception and the receptionist will let the coordinator know so the staff are able to escort the visitor(s) to the relevant area.

Visitors will be expected to wear a face mask that will be available in reception and appropriate PPE

The escorting staff to ensure that no patients are in the core area if the visit is taking place in the central courtyard or Redwood or seminar room.

The visitor will be giving a personal alarm (with no Salto fob on) to call for help if needed and a demonstration of how to use

The need to supervise visits will be based on risk assessment which will include the level of therapeutic observations during the visit, which will be a minimum of level 2, 15 minute observation in the core garden area

At the end of the booked slot a member of staff will escort the visitors to the front entrance and ensure PPE is disposed of appropriately and hand washing takes place and to ensure any call bell or alarm is handed back from the visitor. Visitors will be offered the opportunity to discuss the visit and ask about any patient care issues before leaving.

Visiting Slots available: Weekday 1400hrs – 1600hrs 1800hrs - 2000hrs

Weekend 1000hrs – 1200hrs 1300hrs- 1600hrs 1800hrs – 2000hrs

#### Stewart House:

Visitors contact the ward to book a visit, NIC completes the inpatient visitors log sheet to book the visit (Inpatient visitor log to be kept in reception)

No visits to be booked during protected meal times.

For visits to grounds at front of the building the staff will meet the visitor with the patient at the front door and complete a welfare check for visitor and patient. Member of staff to confirm time the visit will end and will go back at this time to escort the patient back onto the ward, ensuring hand hygiene

For visits to the visitor/telephone room in reception

NIC to clear reception of other patients, they will be asked to go into the mixed gender lounge

On the day of the visit, the NIC meets the visitor at reception and asks whether their covid-19 status has changed from their original phone call booking.

If visitor reports there had been changes visit is terminated.

NIC to give visitors PPE and ask them to sanitise their hands, then discuss current social distancing guidance/hand hygiene

NIC to escort visitors straight to the family room in reception

Personal alarm can be offered to visitors if patient or visitor is deemed a risk (Via risk assessment)

Patient's observation status to remain the same during the visit

At the end of the booked visit slot the NIC will escort the visitors to doff PPE, use hand sanitiser and leave.

Visiting Slots available:

Weekday 1400hrs – 1600hrs 1800hrs - 2000hrs

Weekend 1000hrs – 1200hrs 1300hrs- 1600hrs 1800hrs – 2000hrs

Mill Lodge:

On arrival on site visitor to phone the ward to let staff know they are in the car park.

Staff to go and escort the visitor to either the garden or ladies lounge or family room (according to weather conditions). Visitors will be expected to wear a face mask that will be available in reception and appropriate PPE

To access the garden staff to escort the visitor via side gate, accessible directly from car park.

To access the family room staff to go and escort visitor to the family room via side of ward access that leads to main Mill Lodge corridor.

The need to supervise visits will be based on risk assessment which will include the level of therapeutic observations during the visit

At the end of the booked slot a member of staff will escort the visitor out of the building as they arrived ensuring PPE is disposed of appropriately and hand hygiene is conducted.

### Inpatient Visiting for the Agnes Assessment and Treatment Unit

Visiting arrangements for Short Breaks, The Agnes Unit and Learning Disability Treatment and assessment Unit during the COVID 19 pandemic.

In order to undertake visits within the wards designated rooms, gardens and outdoor spaces family will need to book with the ward the patient is being cared for on contact numbers are as follows to arrange:

Main Reception and Shift Leader contact out of hours: 0116 295 4007 From here you can be transferred to the designated Pod; 1,2,3,4, 5 or Extra Care

Each ward will provide the receptionist with their list of pre booked in visitors daily. Visitors will report to reception, the receptionist will ring the ward and make them aware the visitor has arrived. The receptionist will make the visitor aware of the PPE to wear and washing facilities available at reception. The visitor will be then given directions to either the family or visitor room to await patient.

All visitors are to be Covid-19 screened as per government guidelines.

All patients to have a Covid-19 risk assessment completed via the electronic patient record prior to visit taking place.

All patients to have a Covid-19 care plan which documents individual family and carer contact arrangements

The visitor will be giving a personal alarm (with no Salto fob on) to call for help if needed and a demonstration of how to use/ Staff to escort visitor and patient to the family room and confirm time that the visit will end

The need to supervise visits will be based on risk assessment which will include the level of therapeutic observations during the visit.

At the end of the booked slot a member of staff will escort the visitors to the side entrance and ensure PPE is disposed of appropriately and hand sanitising takes place and to ensure the alarm is handed back from the visitor.

Exception to visitor and family room is the Extra Care Suite; this is sole occupancy, a large area and a robust design. Therefore visits to the extra care suite can be facilitated adhering to social distancing guidelines, outdoor space available together with minimising risk of incidences. This area has access via internal corridors that mean that patient corridors will not be entered.

All visitor contacts are to be recorded on the electronic patient record, risk assessment to be reviewed after each visit to ensure maximum safety for patient, staff, family and other in the hospital.

### Inpatient Visiting for CAMHS Beacon

Visiting arrangements for CAMHS Beacon during the COVID 19 pandemic.

In order to undertake visits within Beacon designated rooms and outdoor area family/ carers will need to book with the ward directly on the contact number below to arrange:

Main ward: 0116 295 0950/295 0953/ 295 0954

Beacon will advise parents/ carers/ families from the same support bubble of the visiting time available and provide guidance regarding PPE and social distancing prior to any visiting.

Visitors will report to Beacon at the agreed visiting time and press the intercom to alert staff to their arrival. During office hours the receptionist will notify the ward team and make them aware the visitor has arrived. Out of hours (where agreed) a member of the ward team will meet the visitor at the main entrance. The receptionist/ ward staff will make the visitor aware of the PPE to wear and hand washing facilities available at reception. The visitor will be escorted to the designated visitor room to await child/ young person.

All visitors are to be Covid-19 screened as per government guidelines.

All patients to have a Covid-19 risk assessment completed via the electronic patient record prior to any visit taking place.

All patients to have a Covid-19 care plan which documents individual family and carer contact arrangements.

The visitor will be advised that they can call for help via the intercom in the visitor room and to notify the ward team when visiting is ending to support safe escort of the visitor to the exit and patient back to the ward area.

Patients who are currently supported on therapeutic observations should follow the Trust guidelines for time out to visit hospital grounds as per ward policy. Risk should be considered according to why they are nursed on these observations. Any patient, who is on therapeutic observations, will need consultant agreement and documentation in notes that they are permitted to have leave off the ward for the purposes of seeing visitors. The need to supervise visits will be based on risk assessment which will include the level of therapeutic observations during the visit.

All visitor contacts are to be recorded on the electronic patient record, risk assessment to be reviewed after each visit to ensure maximum safety for patient, staff, family and other in the hospital.

# Booking Appointment – Script for staff booking with Visitors

Booking will be made in line with the SOP for each ward (see relevant appendix)

The following pre-screening questions must be asked (see ward booking form):

- 1. Have you, or any member of your household, returned from abroad in the past 10 days?
- 2. If yes, was your lateral flow test or PCR test result negative?
- 3. Have you or any member of your household had a Covid-19 test through the 'Test to Release' scheme after leaving the non-exempt country?
- 4. Have you or any member of your family who have travelled abroad, fully adhered to the Covid-19 travel rules?
- 5. Are you or anyone in your household, either Covid-19 positive or awaiting the result of a Covid-19 test?
- 6. Have you, or anyone in your household, had contact with someone with a confirmed diagnosis of Covid-19, or been in isolation with a suspected case in the last 10 days?
- 7. Do you or anyone in your household have any of the following symptoms:
- a high temperature or fever?
- a new, continuous cough?
- a loss or alteration to taste or smell

When booking an appointment for visiting please feel free to use the following script:

"We are advising all visitors on to the ward to adhere to our visiting charter. This will involve all visitors (as agreed with the ward) will be required to:

- clean your hands using the disinfectant hand sanitiser provided, or soap and water on both entering and exiting the hospital and on entering or exiting any ward or department you visit
- keep a 2 metre distance away from other patients at all times and from staff when at all possible
- bring as few belongings as possible to minimise the risk of infection
- not enter any of our buildings unless you are receiving care for yourself, you are a carer supporting a patient or you are visiting an inpatient
- provide evidence of a negative lateral flow test, regardless of vaccination status
- bring and wear a face covering on entering the building. Whilst in the building, you will be required to wear a face covering at all times
- if you refuse to wear a face covering you will be asked to leave the hospital.
- follow the visiting guidelines on our website
- not attend your appointment if you have any of the symptoms below
  - o a new, continuous cough
  - o a high temperature
  - o a loss or change in your sense of smell or taste.

SOP for Inpatient Visiting Covid-19 for Exceptional Circumstances v9 4.1.2021

If you have any concerns in respect of your visit to our ward please speak to a member of the ward in the first instance, if you have any additional concerns or need support to enable to attend your visit you can speak to a member of our Patient Advice and Liaison Service who can be contacted via telephone on 0116 2950831 or via email at <a href="https://www.uptenstruet.com">https://www.uptenstruet.com</a>

# Patient information on inpatient visiting during the COVID-19 pandemic

Due to coronavirus (COVID-19) we have reviewed arrangements to allow inpatient visiting in a very careful and COVID-secure way. We know it is important for you to visit your loved ones and we have made the following exceptional circumstances where one visitor (a family member or friend) will be permitted to visit. Exceptional circumstances for inpatient visiting are:

- patient receiving end-of-life care
- a familiar carer/parent or guardian/supporter/personal assistant
- both parents/guardians where the family unit can be maintained
- patients may be accompanied where appropriate and necessary to assist their communication and/or to meet their health, emotional, religious, or spiritual care needs.

Anyone with a COVID positive test or showing symptoms of coronavirus (a new continuous cough, a high temperature or a loss of, or change in, your normal sense of smell or taste) should not visit, even if these symptoms are mild or intermittent, due to the risk they pose to others.

All visitors must wear a face covering and observe good hand hygiene (handwashing) to reduce risks to the visitor, other patients, and staff.

## What can I expect when I am visiting a loved one in hospital?

- You will need to arrange your visit in advance. Prior to visiting, a member of staff will ask you about any high-risk conditions you or members of your household may have. Depending on your answers, you may be advised not to visit.
- If your visit is agreed, you will be given instructions on where to go and who to ask for on your arrival at the hospital.
- If you are unable to visit in person, please talk to the staff about arranging a virtual visit.
- All visitors must always wear a face covering, including when entering and moving through the healthcare setting. Visitors will be asked to wear a surgical facemask if visiting a high-risk area or a patient with suspected/known COVID-19.
- If you are parents/guardians, you must always wear a face covering when entering and moving through the healthcare setting and when a healthcare professional is treating your child/young person. If you are with your child and/or young person and within your 'family unit' inside rooms or physical environments that afford separation, you can remove your face covering.

• Transport: you should arrange to be driven to and from the hospital by a member of your household, if possible, to minimise the risk of exposure to others: https://www.gov.uk/guidance/coronavirus-covid-19-safer-travel-guidance-for-passengers

- You should limit the number of personal belongings you bring with you.
- You should remove your outer clothing, e.g. coat or jacket, roll up your sleeves and clean your hands

Date:\_\_\_\_\_

# Inpatient Ward Visiting Log

Appendix 10

Patient Name			
Timeslot			
Visitor Name and Contact Number			
Do you or any member of your household have Covid-19?			
<ul> <li>Have you had contact with someone with a confirmed diagnosis of Covid-19, or been in isolation with a suspected/ positive case in the last 10 days?</li> <li>If you are aged 18 years 6months or over and you are not fully vaccinated and you live in the same household as someone with COVID-19, you are legally required to stay at home and self-isolate</li> <li>If you are fully vaccinated or aged 18years and 6months and you live in the same household as someone with COVID-19, you are strongly advised to take an LFD test every day for 7 days</li> </ul>			
Are you or any member of your household/family waiting for a Covid-19 test result?			
Are you or any member of your household especially vulnerable (previously know as Clinically Extremely Vulnerable) – If yes do you understand the risk of visiting an area with infections and happy to continue			
<ul> <li>Within the last 10 days, have you experienced a new cough that you cannot attribute to another health condition?*</li> <li>If yes, provide advice on who to contact (GP/NHS119)</li> </ul>			

Within the last 10 days, have you experienced new shortness of breath that you cannot attribute to another health condition?* <ul> <li>If yes, provide advice on who to contact (GP/NHS119)</li> </ul>			
Within the last 10 days, have you experienced loss of taste or smell that you cannot attribute to another health condition?* <ul> <li>If yes, provide advice on who to contact (GP/NHS119)</li> </ul>			
Within the last 10 days, have you had a temperature at or above 37.8°C or the sense of having a fever?* • If yes, provide advice on who to contact (GP/NHS119)			
If you answer yes to any of these questions, please reschedule. If no to all questions proceed with the visit			
Confirmation of COVID 19 screening on arrival to ward Staff Signature			

This visitor log should be kept for 2 years before being confidentially destroyed

# Appendix 11

# **External/Professional Visiting Record**

# Ward/Unit:\_\_\_\_\_

Date and Time of Visit	Print Name	Organisation	Contact Number	Are Lateral Flow Testing and negative result? Y/N	Have you had your Covid vaccination ? Y/N (please enter 1 or 2)	Time Out
	Please keep this record for 2 years before confidentially destroying					