

Ward Patient Family/Friends Visiting Arrangements – November 2022

The following inpatient visiting guidance has been reviewed and updated to minimise as far as possible the risk of respiratory illnesses that include COVID and influenza being brought into the trust. NHSE acknowledges that COVID-19 is now in general circulation. Other respiratory illness must also be considered, and we must recognise that inpatients in healthcare settings can be more vulnerable to severe illness.

The health, safety, mental health and wellbeing of our patients, communities and staff remain the priority. Visiting should be accommodated for at least one hour per day and ideally for longer.

The changes that we have made to our current arrangements aims to support patients, families and friends and recognises the important contribution that visiting makes to patient wellbeing and person-centred care.

1. Daily visiting will continue to be permitted by appointment only; this arrangement is remaining in place to reduce the potential of COVID-19 and other respiratory illnesses being brought into our inpatient areas and will continue to be reviewed in line with changes in national and local transmission rates and guidance.
2. The requirement for visitors to take a lateral flow test prior to visiting has been discontinued however if visitors have access to tests we would encourage that they are used.
3. Before visiting visitors must contact the ward to discuss appropriate local arrangements. This will include having to answer a number of questions to assess the risk of transmission of COVID-19 and other respiratory illnesses.
4. There will be a maximum of **two** visitors per patient – in exceptional circumstances such as end of life the Ward Manager / Nurse in Charge can increase this to **four** members of the same family. The visiting area should never exceed the maximum number of people allowed in that area according to COVID and respiratory illness guidelines and all visitors must have been risk assessed when booking the visiting slot.
5. There will continue to be staggered visiting appointments across each area. Ward Managers will be responsible for ensuring that all visiting appointments are booked in advance and visiting times will be restricted to avoid having multiple visitors in any one location at the same time.
6. Family visiting will continue at The Darwin Centre where current safeguards to reduce the risk of transmission will remain in place.

Specific Information for visitors:

1. Before visiting - visitors must contact the ward to discuss appropriate local arrangements. This will include having to answer a number of questions to assess the risk of transmission of COVID-19 and other respiratory illnesses.
2. We recognise that there are currently no restrictions specifically or COVID contacts in the wider community however, anyone showing any symptoms of COVID-19, has had a positive test for COVID, who has been told to self-isolate, or who has had contact with a known COVID positive contact in the last 7 days should not visit.
3. Anyone feeling unwell, should not visit.
4. All visitors will be assessed prior to entry to a clinical area and for PPE compliance. This includes the need to wear a surgical face mask before entering the building – these will be provided at closest point practicable upon entering the building or at the reception desk. These must be worn until visitors have left the main building.
5. If a visitor declares they are exempt from wearing a mask, this may be due to an underlying medical condition; this must be considered in managing the visit to protect the ward and the visitor and will be a crucial factor in the risk assessment. If the visitor is NOT wearing a mask the patient should be encouraged to wear their mask and socially distance at all times.
6. All visitors must go directly to the ward they are visiting where they will be directed to the visiting area and must stay in that room for the duration of the visit.
7. All visitors should decontaminate their hands as they enter and exit the main building and ward (hand sanitise dispensers are located by all entrances to our buildings and at entrances to the wards). All visitors should remove coats or jackets, roll up their sleeves to support bare below the elbows and support good hand decontamination.
8. Social distancing has been removed however, visitors should be encouraged to maintain a 1 metre distance at all times. If visits can be facilitated outside, this should be the preference. Section 17 leave arrangements and risk assessments may allow for additional visiting in gardens or outdoors.
9. Each visiting slot will be for 1 hour, with a maximum of two consecutive slots being booked by the same visitors. Staff will need to ensure that all visitors have equity in booking slots so that no one is unfairly excluded due to multiple two hour slots being booked.
10. The visiting area will be decontaminated using disinfectant wipes between visits.
11. There are no waiting areas for other family members such as escorts and drivers – therefore only the visitors must enter the main building.

Updated visiting guidance 15.11.22

12. Wards must keep a list of hospital visitors' names and contact details. Contact tracing has been suspended but there may be occasions when visitors may need to be contacted.
13. Any visitor who tests positive for COVID-19 within 2 days of visiting should inform the ward immediately.
14. Where a face-to-face visit is not practical then virtual visits should be supported and facilitated. Mobile devices should be managed and decontaminated in line with good infection prevention and control measures, based on [National Infection Prevention and Control Manual for England](#).

End of life visiting

We will ensure that end of life visits are as flexible as possible to meet the needs of the patient and the family. We recognise that these are often highly emotional and difficult times for both patients and families and that individual requirements will vary from one family to another. The multi-disciplinary team and Ward Manager / Nurse in Charge will always be available to support these discussions.

Clinical Need

We recognise that there may be some very specific circumstances, whereby some patients may require the support of a personal assistant or carer to help with communication and/or meet health, emotional, spiritual or religious care needs. These decisions will need to be made with the support of the ward multi-disciplinary team.