

Coronavirus response

Care home visiting policy during the period of national restrictions

1 Introduction

This policy revises arrangements for visits to Friends of the Elderly (the Charity) care homes during the coronavirus pandemic reflecting the issue of government guidance on 5 November 2020 concerning visiting arrangements in care homes for the period of national restrictions. The policy also reflects the Charity's recognition of the importance of visits to the emotional health and wellbeing of residents.

Due to their age and frailty, our residents are among the most at risk of being seriously and possibly fatally ill if they are infected by the coronavirus. This means that regular open visiting to our care homes still cannot resume. However, the latest government guidance does allow for appropriate limited visits in line with prevailing guidance from local Directors of Public Health.

The Charity is becoming increasingly concerned about the impact on residents of being deprived of visits and the length of time that these restrictions may remain in place. Under human rights legislation (Equality Act 2010 and Human Rights Act 1998) all people living in care settings have the right to freedom of movement and association. This includes a resident's right to see their family and friends. In the unprecedented circumstances of the Covid-19 pandemic, the Charity's policy seeks to balance the rights of an individual with the rights of others in the care setting – residents and staff – and our responsibilities as a care provider.

The Charity has been at the forefront of setting sector-wide visitor protocols and has been exploring how these can work for some time, having started with opening up our care home grounds for socially distanced garden visits from June 2020.

The Charity was part of the working group (including Alzheimer's Society) which wrote the [Visitors' Protocol – briefing for care providers](#) published by the Care Provider Alliance. This protocol was issued in June 2020 after a long and protracted period of 'lockdown', in line with changes within the wider community. Representatives from the Charity also sat on the Guidance, Good Practice, and Innovation Advisory Group of the [Social Care Sector COVID-19 Support Taskforce](#), which informed the government's Adult Social Care Coronavirus Winter Plan 2020-2021.

Finally, the Charity has added its voice to the coalition, led by the National Care Forum, of leading social care organisations calling on the Government and policy makers to ensure visiting in care homes is safely enabled for everyone.

2 Policy summary

In line with the latest guidance, where visits to a care home are permitted based on the local Director of Public Health's assessment and local circumstances, it is our policy to enable

limited, controlled visits to residents based on dynamic risk assessments which consider the vulnerability of individual residents and their wellbeing. The assessments consider the circumstances and needs of the individual care home, including employee availability, resident demographics and outbreak status. They also take into account the local and regional external Covid environment, including epidemiological risk and presence of outbreaks in the community, to minimise the risk of Covid-19 infection and transmission. In order for visits to happen, the Charity needs to assess the risk of local prevalence, and the ability of the care home to manage the visit safely.

The Charity will continue to involve residents and families, and relevant local professionals such as social workers and clinicians where appropriate, in our decision-making process about visiting. We have developed working relationships with local Clinical Commissioning Groups (including Infection and Prevention Control Leads) and Public Health England Health Protection Teams during the pandemic and will continue to take, and act on, their advice.

As winter approaches, our homes have had visiting spaces adapted or introduced to facilitate visits from family members and friends as safely as possible. With indoor visits, the risks of introducing Covid-19 into the care home increase significantly and the Charity has a duty to ensure that residents are not put at avoidable risk of contracting Covid-19. Because of this we have put in place extra safety measures including a full clean of the area/ room prior to and after each visit and maximised ventilation. At present, because of the extra time and resources these precautions take, we are not able to offer indoor visits at every home or to every resident.

Current government *advice* is that:

- To limit risk, where visits do go ahead they should be limited to a **single constant visitor**, per resident.
- There should be an **absolute maximum of two constant visitors** per resident (taking into account individual resident circumstances) to limit risks of disease transmission from different sources.
- In cases where there is a confirmed or suspected case of Covid-19 in a care home, visitor restrictions are to return immediately to essential visits only (for example, end-of-life), with no exceptions.
- For visits inside a care home, there is to be a substantial (eg floor to ceiling) screen between the resident and visitor – designed to reduce the risk of viral transmission.

Based on the dynamic risk assessment, the individual needs and wishes of residents and relatives, and in line with government guidance, the following types of resident visit are available at the Charity's care homes:

- Outdoor gazebo visits in garden area.
- Outdoor window visits.
- Log cabin/ pod visits with fixed screen – where available.
- Indoor visiting room – with fixed screen – where available.

The new guidance mandates floor to ceiling screens and we have already fitted these in many locations. Where these have yet to be fitted this work is in progress.

All visits will be considered on a case-by-case basis, assessing risks and benefits for all involved. The final decision as to whether a visit goes ahead, and what type of visit is permitted, rests with the care home Registered Manager, who approves visits or otherwise at their sole discretion.

External factors may mean that visits of all kinds must be suspended where there is a local outbreak of Covid-19 in a care home, or the local Director of Public Health (DPH) requires this. DPHs also have powers to issue directions to homes to close to visiting, or to take further specific steps.

It is also our policy to permit the following individual visiting arrangements, subject to dynamic risk assessment:

- Family and friends visiting a resident who is critically ill or at the end of their life.
- Maintenance and other essential visits to ensure the safety of people, services, premises and equipment.
- Management visits from the charity to ensure that standards and performance are maintained, with specific reference to safeguarding.
- Healthcare and allied professionals visiting to treat people where required.

Personal Protective Equipment (PPE) will be freely available to all visitors. With the exception of end of life, all visits will be subject to prevailing social distancing rules.

As ever, we remain vigilant within our homes and apply robust infection prevention and control measures, including PPE, good hand hygiene, heightened cleaning regimes, maximised ventilation, and social distancing. Employees working in our care homes are being tested weekly, and residents monthly. These measures help us to be *Covid-Wise*. More detail about what this involves is available on the Charity's website: www.fote.org.uk.

3 Covid-wise visiting protocol

3.1 All visits

The following conditions apply to all visits:

- A maximum of two constant visitors will be agreed per resident.
- If the two constant visitors are from the same household or linked household (support bubble) they can visit together.
- If the two constant visitors are not from the same household or linked household (support bubble), they can only visit separately.
- Visits to be scheduled in advance, through a booking system (phone and email). You cannot turn up unannounced.

- In line with test and trace guidance, a record must be maintained of each visitor as well as anyone they interact with, for example if a person visiting their loved one is also visited by a Chaplain in the course of the visit.
- Visitors should have no contact with other residents and minimal contact with care home staff. Where needed, conversations with staff can be arranged over the phone following an in-person visit.
- Social distancing (between visitors and residents, staff, and visitors from other households) must be maintained at all times – during the visit, and around the care home buildings and grounds.
- Visitors must complete a visitor assessment form before being allowed to visit. Visitors' temperatures will be taken on arrival. No-one who is currently experiencing, or first experienced, coronavirus symptoms in the last ten days can visit.
- Visits may be supervised, according to needs identified through risk assessment, to ensure that social distancing and infection prevention and control measures are adhered to at all times.
- Visitors must catch coughs and sneezes in tissue and clean their hands after disposal of the tissues.
- Gifts must be capable of being easily sanitised by care home staff to prevent cross-contamination. They must be left outside reception for staff to sanitise before passing on to the resident. An example might be a box of chocolates, that can easily be sanitised; but not a bunch of flowers.
- Visitors to bring a mobile phone, if possible, to contact the care home on arrival.
- Dogs are only permitted at external visits and in internal sealed areas. They must be kept on a lead and always under strict control.
- No smoking permitted.
- Toilet facilities will not be available to visitors.
- Visitors should not pass any objects to residents.
- Visitors will be allowed to take photographs and videos on their mobile phones, seeking the appropriate permission if capturing the image of a person other than the visitor/s and the resident they are visiting.
- Each visit will last 30 minutes, other than specific exceptions agreed in advance with the manager.
- Visits may include children aged 16 years and over, subject to prior agreement with the manager.
- Visitors must follow the one-way routes marked and practice strict social distancing.

3.2 Outdoor gazebo visits in garden area

Gazebos are in our communal gardens, fitted with partitions and infection control measures including hand sanitising stations and provision of appropriate PPE.

- Visitors are required to wash (for 20 seconds) or sanitise their hands and don an appropriate face covering before entering the gazebo area. Visitors must wear their face covering throughout the visit. Gloves will be available should visitors wish to wear them. Please practice good hand hygiene again on leaving.

- Visitors are to remain at least two metres apart from the resident, with the Perspex barrier and table between them.
- Visitors must not bring personal items other than small handbags, mobile phones, and other essential items into the gazebo. Large bags, coats and other belongings should be left in the visitor's car or, if they travel by public transport, outside the gazebo.
- A resident's two agreed constant visitors may visit together, if they are from the same household or linked household (support bubble).
- If the two constant visitors are from different households, they must visit separately.

3.3 Outdoor window visits

Window visits may proceed where there is safe ground-floor window access for both residents and their visitors, and the relevant social distancing and PPE measures can be observed.

- Visitors are required to wash (for 20 seconds) or sanitise their hands and put on a visor before going to the designated window area. Visitors must wear an appropriate form of face covering throughout the visit. Gloves will be available should visitors wish to wear them. Please practice good hand hygiene again on leaving.
- Visitors are to remain at least two metres away from the window, directed by markings on the ground.
- Visitors must keep personal items to a minimum when visiting at the window i.e., coats, small handbags, mobile phones.
- A resident's two agreed constant visitors may visit together, if they are from the same household or linked household (support bubble).
- If the two constant visitors are from different households, they must visit separately.

3.4 Log cabin/ pod with fixed screen

Cabins in our communal gardens are fitted with a sealed partition (fixed screen), to form two separate but co-joined environments. A cabin has two entry doors, one either side, allowing safe visiting for both residents and their visitor/s.

- Visitors and residents are required to use separate designated entrances to the cabin.
- Our position is that neither party will be required to wear PPE, because residents are separated from visitors by the sealed partition. However, this may be subject to change on a home by home basis depending on the view of the local Director of Public Health.
- A resident's two agreed constant visitors may visit together, if they are from the same household or linked household (support bubble).
- If the two constant visitors are from different households, they must visit separately.

3.5 Indoor visiting room with floor-to-ceiling screen

Some rooms have been fitted with a sealed partition (fixed screen), to form two separate but co-joined environments.

- Access for visitors is from outside of the care home, without needing to enter it.
- Residents will access the area from the inside of the care home.
- Our position is that neither party will be required to wear PPE, because residents are separated from visitors by the sealed partition. However, this may be subject to change on a home by home basis depending on the view of the local Director of Public Health.
- A resident's two agreed constant visitors may visit together, if they are from the same household or linked household (support bubble).
- If the two constant visitors are from different households, they must visit separately.

4 Visiting decisions for particular residents or groups of residents

We acknowledge that some residents will not be able to access or benefit from using technology (mobile phones, iPhones, iPads, Facebook Portals, electronic care planning family portal), outdoor visits, cabins, or even indoor designated visiting spaces. It is often these residents who need extra support from a family member or a friend to meet their physical and/ or emotional needs to help prevent significant distress.

Government guidance recognises too that some residents will have particular needs (for example, those who are **unable to leave their rooms or those living with advanced dementia**) which will make Covid-wise visits challenging. Where a resident needs individualised visiting arrangements, the Charity will actively involve the resident, their relative or friends, any advocates, commissioners and appropriate members of the multi-disciplinary team to develop a tailored visiting policy.

Factors relevant to this decision may include, among others:

- The extent of the harm that will be experienced by the resident from a lack of visitation or whether the individual is at the end of their life.
- The provisions and needs outlined in the person's care plan.
- The appropriate level of staff to enable safer visiting practices.

Other than in end-of-life circumstances, visits to a resident in their room will be limited to a single constant visitor. The visitor, where possible, will be added to the care home's weekly Covid-19 testing routine.

5 Advice for visitors

Our care homes will liaise with families and others prior to visits, to get the best possible outcome from the event. When communicating wearing a face covering, visitors are advised to:

- Speak loudly and clearly.

- Keep eye contact.
- Not wear hats or anything else that might conceal their face further.
- Wear clothing or their hair in a way that a resident will more likely recognise.

It is possible that a resident living with dementia might struggle at first to remember or recognise a visiting relative or friend. Our care home staff will try and prepare the resident for a visit, for example by looking at photographs of the person due to visit and talking to the resident about their relationship.

In exceptional circumstances, a designated constant visitor may be changed in discussion with the care home manager.

5.1 If a visitor does not feel able to visit

Feeling nervous or anxious about seeing a relative face to face again is a normal response to recent events. Relatives should only visit when they feel able to do so and when the resident agrees, as they may also be worried about the health of anyone coming into the home. It is perfectly normal to feel anxious about returning to a place that may have been through such difficult times. The care home itself may have changed significantly since the last time the visitor was there. Seeing staff in PPE may be a reminder of the impact of Covid-19 in the home. It is likely that relatives will have become close to residents other than their loved one over the time they have visited before the pandemic. If these residents have died then it is likely to have an emotional impact.

5.2 When a visitor leaves

This will be a difficult moment for both the visitor and their relative. Visitors should start preparing 10 minutes before they have to leave. The care home manager should agree with the visitor when they can come again so they can let their loved one know when to expect them. It might be an idea to write this down and for staff to leave in a place for the resident to refer to. Arranging the date and time of the next visit will create a focus for the resident and their visitor. It will also help to prepare them for ending the visit by preparing for the next one. At all times our staff are here to help visitors and our residents; visitors should not be afraid to speak to staff about their loved one or things that are worrying them. Staff will continue to support residents after visits end.

6 Mental capacity

In making these arrangements, care homes will observe the rights of residents who may lack the relevant mental capacity to make decisions about their needs for visits. Our care and support teams will make all such arrangements in line with individual needs by following best interest decision-making as set out under the empowering framework of the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards (DoLS) and where appropriate in consultation with the resident's advocate, those with power of attorney, or multi-disciplinary teams.

7 Communicating with families

This policy will be shared with our residents and their families as appropriate and we will involve them in our decision-making process to ensure that individual resident needs are met wherever possible. In light of the Charity's obligations to residents' rights and wellbeing, it may be appropriate or necessary for the Charity to apply different rules for different residents or categories of resident, based on an assessment of risk of contracting Covid-19 in relation to such residents, as well as the potential benefits to them of having visitors.

In the event of an outbreak in a care home and/ or evidence of community hotspots or outbreaks, the Charity may rapidly impose visitor restrictions to protect vulnerable residents, staff, and visitors. In this situation the Charity will set out alternative options to maintain social contact for residents while providing regular, personalised updates to residents' loved ones.

8 The requirement to suspend visiting

We have mentioned that visits may be cancelled in the event of a Covid-19 outbreak situation affecting one or more of the care homes, the local community, or the region.

Visits may also be cancelled because of:

- Adverse weather conditions.
- Data received from results of weekly and monthly testing of staff and residents.
- Information received from the local Director of Public Health or through their dedicated care home outbreak management team or group, having assessed the suitability of visits for the area considering the wider risk environment.

In such circumstances we will communicate with residents, families, and other stakeholders to make them aware of the situation and keep them updated.

9 The role of our registered managers

Our registered managers (along with the Charity as registered provider) are legally responsible and accountable for compliance with the requirements of the Health and Social Care Act 2008 and associated regulations, including the Care Quality Commission (Registration) Regulations 2009. All our care homes have recently passed their Emergency Support Framework (ESF) inspections conducted by the CQC and the results of each home's ESF review can be found on the Charity's website.

Leading a care home through the pandemic has been a huge challenge, with managers striving to maintain 'business as usual' in very unusual times. They have a support structure around them in the form of a team, headed by care home directors, but as the Charity's eyes and ears on the ground in our care homes they have full authority to make individual decisions based on local circumstances regarding the implementation of the Charity's care home visiting policy.

Whatever their decisions, there will be some family and friends, and residents, who feel aggrieved at a decision not to allow a visit inside a care home. The Charity asks that the professional decision of the local registered manager be respected, but should a relative or friend wish to raise a formal appeal against a visiting decision, the manager will enable direct contact with a care home director who will consider the matter fully.

10 Further guidance

10.1 Visits out of a care home

With Christmas and New Year fast approaching, the Charity is acutely aware of the need and wishes of families and friends to get together with residents to celebrate the festive season outside of the care home.

When residents return from such visits, however brief, there is a risk of them having been exposed unwittingly to Covid-19, and the Charity has to balance the benefit of such visits to the threat they introduce to the general care home resident population and staff.

The previous government update on policies for visiting arrangements was issued on 15 October 2020 and stated: "Guidance for visits outside the home, for example to a family home, is in development and will be provided shortly". The Charity will issue an addendum to this policy as soon as we have had an opportunity to review such updated guidance, which was not included in the 5 November edition.

In the absence of this guidance, residents returning to the care home from an external visit will be required to self-isolate in their room for 14 days to ensure the safety of all residents, without exception.

Residents attending hospital outpatient visits and other necessary appointments will be accompanied by a staff member to ensure infection prevention and control measures are not compromised.

10.2 Volunteering

Previous government updates have raised the possibility that family and friends could be assigned to support their relative living in a care home as volunteers; however in discussion with other not-for-profit care and support providers the national view, which the Charity shares, is that such volunteers should still be viewed as visitors and not equivalent to staff members for the purpose of this policy. For the safety of all our residents and staff, all volunteer visiting has been stopped, even though there is mention of volunteers in the most recent guidance.