

## COVID-19 SUPPORT TEAM

Supporting people to support others

# Care Home Visiting Supporting Information

### **NATIONAL GUIDANCE**

#### **Care Home Visiting**

<https://www.gov.uk/government/publications/visiting-care-homes-during-coronavirus/update-on-policies-for-visiting-arrangements-in-care-homes>

#### **Summary For Visitors**

<https://www.gov.uk/government/publications/visiting-care-homes-during-coronavirus/summary-of-guidance-for-visitors--2>

# Key things to consider...

- ▶ Discuss your current position and what your future plans are with staff, residents and family members.
- ▶ Plan what options you can make available, or what the building can accommodate.
- ▶ Set out clear visiting rules for staff, residents and family members
- ▶ Do not rush, only facilitate visiting on a level that you and the home can safely provide, this will allow visiting to continue
- ▶ Slowly support (with decrease / increase meeting dependent on issues/success)
- ▶ Please ask for support when you need it, the Covid-19 Support Team is here to help you.

# Communication...

There are a number of options available in order to keep staff, residents and family members updated on your current visiting availability...

- ▶ Emails – This will allow one message to be sent simultaneously to a number of people, but very little space for people to discuss this before it is confirmed.
- ▶ Telephone – Although this will be done one-to-one, the message can be discussed on a personal level with each individual, sometimes allowing you to go into further depth to provide more rationale on why you've decided on the message you have chosen.
- ▶ Face to Face – This would currently be reserved for staff and residents, consider IPC and Social Distance protocols when using this form of communication. This is usually the preferred choice, as discussions over the phone or in text can sometimes be miscommunicated.
- ▶ Virtual – Similar to face to face, but allows this to take place safely and with all parties at once. Can lead to a healthy discussion and sometimes allow others to interpret your message and rephrase it in a way others can understand.

Always consider the message you wish to send out, allowing any discussions to take place and providing any easy way for people to feedback, for example, if you wish to feedback on this guidance, please contact the team through [Covid19SupportTeam@bradford.gov.uk](mailto:Covid19SupportTeam@bradford.gov.uk).

# Visiting options..

Please note, this will depend on both the grounds and the type of building your care home uses...

## ▶ **Outdoor – Garden, open shelter, enclosed shelter**

### **Garden**

The visitor and resident can meet within the grounds, or garden, of the home, adhering to social distancing rules. This will be weather dependent, but would mitigate the risk of the spread of infection during the visit.

### **Open Shelter**

This would be a roofed shelter without any walls, for example a gazebo, this would allow the visitor and resident to socially distance, much like a garden visit, but would also offer limited protection from the weather.

### **Enclosed Shelter**

This would be a sheltered visit, such as a visiting pod, where the resident and visitor would be separated by a screen or socially distance from each other, the visitor would be required to wear PPE to reduce the chance of the spread of infection.

# Visiting options continued..

## ▶ **Indoor – screened, designated visiting room, resident’s room**

### **Screened**

This would require a large single screen to be in place within the room, preferably with the visitor entering from outside the care home. The screen would have to reach from the floor to the ceiling and not have any gaps present, completely separating the visitor from the resident.

### **Designated Visiting Room**

This would be a single room dedicated to visits, preferably accessible by the visitor from outside the home. The room would either need a partition or be large enough for the visitor and resident to socially distance from each other. The furniture within the room would have to be easily cleaned between each visit to prevent any chance for a spread of infection. Should your home be able to facilitate this, the room should ventilate easily, allowing air in and out, between each visit.

### **Resident’s Room**

This would be reserved for end of life, exceptional circumstance and essential care giver visits, where the resident would potentially be bed bound or require care in their room. Risk assessments would need to be in place and the visitor aware of their role and responsibility to protect staff and residents through adherence to PPE and IPC procedures.

# Visiting options continued..

## ▶ **Drive-thru**

The visitor would park up in their car whilst the resident sits outside of the car. This type of visiting is weather dependant and will also be determined by the safety needs of the resident. With drive-thru visiting, the essential family/friend/carer wouldn't be able to get out of the car and would need to keep 2m distance.

## ▶ **Window**

There would need to be a distance of 2m between the essential family/friend/carer and the resident as, although not in direct company, other ways of supporting communication such as portable phone handsets can be used so the window can stay closed.

# Testing for...

## Nominated Individuals

1 LFD upon arrival, they will need to submit to testing, by an LFD, for each visit, they should not be allowed to enter the home until the result returns as negative.

## Essential Care Givers

1 PCR and 2 LFD per week, they will be considered as a member of the workforce, requiring the same level as testing as your staff. Should staff be subject to additional testing, for example, rapid response daily testing or outbreak testing, they must also be included in these tests.

## Exceptional Circumstance visits

1 LFD before each visit, again requiring a negative result before they are permitted to enter the home.

## All (the 90 day rule)

visitors who have recently tested positive for COVID-19 should not be retested within 90 days unless they develop new symptoms. These visitors should use the result of their positive PCR result to show that they are currently exempt from testing until the 90-day period is over.

# Rules for visitors...

## **Nominated Individuals**

Visitors should wear appropriate PPE, as laid out in the guidance which can be found [HERE](#). This guidance sets out the appropriate levels of PPE for a range of scenarios, such as being in physical contact with a resident, or being within 2 metres of a resident but not touching.

Visitors should keep physical contact to a minimum. Visitors and residents may wish to hold hands, but should bear in mind that any contact increases the risk of transmission. There should not be close physical contact such as hugging.

## **Essential Care Givers**

These visitors must use the same PPE as members of the care home staff, and must follow appropriate guidance for using it after being shown how to correctly don and doff on a video or by a staff member.

It is important that these visitors agree with the care home what tasks they will and will not be undertaking, and that all involved are confident that the visitor has the skills to perform those tasks safely (this may well include risks not related to COVID such as skills for lifting and handling). These visitors must also agree to follow any advice or instructions on IPC from care home staff.

## **Exceptional Circumstance**

Visitors under exceptional circumstances would be expected to follow the same rules as “Nominated Individuals” above.

## **All**

Visitors should also be careful to ensure they observe strict social distancing from other residents, visitors and staff at all times.

# How to manage visits...

You may wish to consider the following to support visiting at your home...

- ▶ Booking system to allow visitors to book their visits to your home. You may wish to designate slots or allow family members to select theirs from those available.
- ▶ Allowing time to prepare for the visit, time for the visit to take place, without rushing the family member or resident, then cleaning after the visit to decontaminate the visiting area (if required).
- ▶ Management of expectations; communication with family will be important, especially if there are a lot of family wanting to visit, as this will limit how often each person can visit the home.
- ▶ Allocating a member of staff to visits would then allow other staff to continue with their support to residents. It would also allow this member of staff to be available when needed by residents or visitors, potentially escorting the visitor when moving around the home to prevent wandering.
- ▶ A testing room that can be easily accessed from outside the home and then ventilated between each visitor or use of the room.

# Decontamination...

Visiting areas must be effectively decontaminated before and after each visit. You may wish to consider:

- ▶ Fogging equipment as additional decontamination measures
- ▶ Wipe clean furniture
- ▶ Displayed cleaning schedule detailing when a visiting area was clean and by who
- ▶ Cleaning schedule should also include touch point cleaning and furniture that has been cleaned
- ▶ Where an essential family, friend and/or carer has visited a resident in a bedroom then the route taken should be decontaminated and clean after the visitor has commuted to the bedroom and after the essential family, friend and/or carer has left the bedroom and commuted out the building.
- ▶ In bedroom visits will also require cleaning of surfaces in the bedroom that the visitor may have touched as well as the nurse call system should that have been used.

All decontamination after a visit (including any changing areas) should be recorded, including the cleaning products used, by the employee facilitating visits and audited along with all other IPC records.

You should also allow enough time for the cleaning products to thoroughly dry between each visit.

# What happens during an outbreak?

In the event of an outbreak in a care home, the home should immediately stop visiting (except in exceptional circumstances such as end of life – and for essential care givers) to protect vulnerable residents, staff and visitors (see [HERE](#)).

Once you have followed the initial outbreak procedures and contact the [Health Protection Team](#) and local Public Health (IPC Team). Communication with staff, residents and family on what to expect and the impact that an outbreak will allow you to keep everyone reassured and updated on the situation at your home.

# Where to go for support...

Covid-19 Support Team – Bradford Council

[Covid19SupportTeam@bradford.gov.uk](mailto:Covid19SupportTeam@bradford.gov.uk) or 01274 431999

Infection Prevention and Control – Bradford Council

01274 432111 (ask for Michael Horsley or Darren Fletcher, the Public Health Team)

Bradford Care Association

[admin@bradfordcareassociation.org](mailto:admin@bradfordcareassociation.org)

Bradford District and Craven Clinical Commissioning Group

[c.healthcare@nhs.net](mailto:c.healthcare@nhs.net) or 01274 423003

Care Quality Commission

[enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) or 03000 616161

# Useful links...

- ▶ Connect to Support Provider Zone;

<https://bradford.connecttosupport.org/provider-zone/>

- ▶ Dynamic Risk Assessment;

<https://bradford.connecttosupport.org/media/3nlimdgv/dynamicrisk-assessment-template.docx>

- ▶ My Visiting Risk Assessment and Visiting Plan;

<https://bradford.connecttosupport.org/media/nwnlr0he/my-visiting-risk-assessment-andvisiting-plan.docx>

- ▶ Infection Prevention and Control;

<https://bradford.connecttosupport.org/provider-zone/infection-prevention-and-control/>

- ▶ PPE for Visitors (Home Care PPE guidance);

<https://www.gov.uk/government/publications/covid-19-how-to-work-safely-in-domiciliary-care>