

# Social Care Visiting Guidance

## Care Homes, Extra Care & Supported Living care settings reintroduction of visiting during COVID-19 pandemic

Over the last few months, you as providers have been working incredibly hard to prevent and manage outbreaks of Covid-19 in your settings. The majority of residents in care settings are some of the most vulnerable to Covid-19 in our community, many of them having had to shield or self-isolate. As part of these efforts, face to face visits were put on hold as the benefits of a visit by a relative were felt to be outweighed by the risk posed to the health of residents and staff.

These have been challenging times for all, with residents and their families unable to see their loved ones. The lack of social contact is known to cause deterioration in the health and wellbeing of residents, particularly those with dementia.

The Government has made a decision to place and subsequently lift restrictions in part of the District. To find out the restrictions in your area please refer to the Provider Bulletin. In line with this, the latest [Department of Health and Social Care Guidance](#) and the decision taken by the local Director of Public Health (DPH), Sarah Muckle in conjunction with the Director for Health and Wellbeing, Iain MacBeath, is that visiting arrangements in care homes across the District can start in line with the latest guidance. The emphasis is on adopting a dynamic approach, personalised to each individual, to limit risks, with **visiting to be limited to one designated visitor per resident, where possible.**

It is recognised limited visiting (exceptional circumstances) has taken place throughout and in conjunction with the BCA you have been reintroducing safe visiting in line with previous best practice since infection rates in Bradford Care Homes have come down, in the interests of residents and their families.

The latest [DoHSC](#) guidance sets out that the process of considering visitors will

be led by the DPH who will provide a regular professional assessment of whether visiting is likely to be appropriate, taking into account the wider risk environment.

This will be based on:

- All local testing data
- National or local intelligence in an area on transmission risks, such as concentration of locations where there is a higher potential risk
- The readiness of the individual care setting to respond quickly when there is a confirmed or suspected COVID-19 case and return to essential visiting only.

Each care setting is different; therefore Covid-19 guidance should be reflected in a local risk assessment to help inform any decisions/recommendations for visiting so that the individual circumstances can be factored into the local arrangement. This guidance will be updated as the risk posed by coronavirus continues to change.

The individual care home's visiting policy should be made available and/or communicated to residents and families, together with any necessary variations to arrangements due to external events. The Care Provider Alliance has published a sector-led [protocol for enabling visiting](#) based on this model.

### Definitions - There are two types of visitor:

**Essential visitor:** someone such as a family member or significant other who should be able to see a resident in the circumstances where their loved one may be dying. It also includes social care or health professionals, or contractors who undertake essential service and maintenance within a care setting such as the repair of essential equipment.

**Designated visitor:** someone chosen by the resident who they would like to be their named visitor. This might be a family member, friend or advocate. This guidance is designed to support the introduction of **designated visitors** into the care home setting.

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## Ability to Suspend Visiting

At a District level, as mentioned previously the Director of Public Health (DPH) is responsible for risk assessing whether visiting in care homes is permitted or will be stepped down.

For individual care homes:

- In the event of an outbreak of Covid-19, and/or evidence of community hotspots or outbreaks, *it is the care homes responsibility to follow their local risk assessment*. As a result of which a decision may be taken by the setting for visitor restrictions to be immediately implemented including exclusion of any non-essential visitors.
- This should be implemented in a transparent manner with open and clear communication to residents and relevant family members and visitors. You will vary your own responses to enabling visits in person as COVID-19 risks change within their local community, using the dynamic risk-based approach and based on advice from the director of public health.
- Visiting should be able to re-start at the end of the outbreak when your home is Covid-free (28 days following the onset of the last case).
- If visiting is suspended, care providers should communicate this to the Local Authority and other key stakeholders including families, and revert to virtual and telephone communication with family, friends and advocates.

## Key Considerations for Social Care Visiting

- Current government guidance & restrictions- Ensure you continually review your visiting policy to ensure it takes account of the latest government guidance. [Shielding Guidance](#) is most relevant to the people supported by social care.
- Infection Prevention & Control- All policies and procedures should adhere to strict IPC measures and best practice. [IPC Links](#).
- MCA- Visiting policies and procedure should clearly state how a provider will obtain consent & approach best interest decisions. Individuals should be

supported in the least restrictive way possible within these guidelines and in line with [Ethical Care Framework guidance](#).

**MDT support** - There maybe circumstances where complex best interest decisions may need to be made. Providers will be able to access support from the wider system to ensure a full MDT approach can be taken. Contact your Care Home Liaison Offer during office hours or Telemeds out of hours.

**End of Life Visits** - Providers should continue to support visiting at EoL as per current government guidance. [COVID19 Visiting at the EoL](#).

**Virtual Visits** - Sadly, it will not be possible for everyone to physically meet for a variety of reasons, shielding, ill health, proximity etc. Providers should continue to support by facilitating virtual visits. Please see NHS Technology resources available for providers. [care@home newsletter 3/articles](#)

**Family & Carer support** - [Carers Resource](#) are available to provide support to friends or relatives who may be struggling at this time.

## Good Practice

[Visiting Guidance for Adult Care Homes in Scotland](#) describes a staged approach to visiting. Every providers approach to visiting will slightly differ to take in to account the needs of the people they support and the environment.

Recommendations around visits include:

- Asking each resident if they want visits, make sure they are aware of the risks. Where the individual lacks capacity to make a decision, then a best interest decision should be made by the care setting
- Care Providers may choose to develop a short individual plan for each resident
- Providers will need to carefully regulate and limit the number of visitors initially to one person
- Time Limiting visits, for example 30 minutes.
- It is not possible to enable visits by young people under the age of 16 at present, given the current guidelines and PPE and social distancing measures as of the end of July 2020

**Effective Communication** - Care providers will ensure that they communicate effectively with people and other key stakeholders in an open, transparent and accessible way about their approach to visiting. Care home staff will be expected to uphold the guidance with residents and visitors and report any breaches to the senior person on duty.

## **Resources**

<p><a href="#">Latest Government Guidance on care home visits</a> <a href="#">GOV.UK resources for adult social care on coronavirus</a> <a href="#">How to work safely in care homes – GOV.UK</a> <a href="#">Ethical Care Framework guidance</a></p> <p><b>Resources – Risk Assessments</b> <a href="#">Visiting Risk Assessment</a> <a href="#">Individual Service User Risk Assessment</a></p> <p><b>Resources – Standard Operating Procedures</b> <a href="#">Visiting Procedures</a> <a href="#">Manager Guidance</a> <a href="#">Staff Guidance</a> <a href="#">Flow Chart</a></p> <p><b>Resources – Visitor Information</b> <a href="#">Visitors Guidance &amp; Agreement</a> <a href="#">Easy Read Guidance</a></p>
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