

GOSPEL STANDARD BETHESDA FUND

Registered Charity 209376

Visiting Policy – COVID-19 Guidance for Visitors

Updated: 29/07/2021

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1. Introduction

The government published their updated guidance on care home visiting on 16th July 2021 for the rules apply from 19th July 2021 and is summarised as follows. [major changes shown in blue for ease of reference]

- every care home resident will be able to nominate **an unlimited** number of named visitors who will be able to enter the care home for regular visits.
- **There is no longer a national limit on the maximum number of people visiting a resident per day, but whilst infection rates remain high, we will wish to remain cautious and maintain the current booking system.**
- This means that ad-hock visiting is not allowed.
- These people may come together or separately.
- These visitors should be tested using rapid lateral flow tests before every visit, must wear the appropriate personal protective equipment (PPE) and follow all other infection control measures (which the Home will guide them on) during visits.
- Visitors and residents continue to be advised to keep physical contact to a minimum. **The wording of the government guidance strongly discourages, but does not forbid, hugging and advises that this is only safe when both resident and visitor are double vaccinated.**
- the guidance stating that 'residents with the highest care needs will also be able to nominate an essential care giver'.
- Bethesda can continue to offer visits to other friends or family members with arrangements such as outdoor visiting, the visitors rooms or behind windows.

Having considered this guidance on Care Home visiting, our approach to this in Bethesda will be as follows.

2. Visitors coming to the Homes

Visits from a Resident's *Nominated* persons

The process will be as follows:

- Each Resident or their Health and Welfare Power of Attorney will be asked to choose **those they wish to be their 'named' visitor(s) and there is no upper limit on this number. However, as infection rates continue to be high in the community, people are asked to remain cautious, as the more people who come into the Homes, the more likely, naturally speaking, it is that the virus will be accidentally transmitted to residents or staff.** [The Home will need to keep a list of the nominated/named individuals or households so that named person visits and other types of visits (such as visitors room or outside) can be differentiated.]
- These people will remain unchanged as far as reasonably practical.

- In order to limit the numbers of people coming into the homes whilst infection rates are high and to avoid a situation where staff are overwhelmed by having to carry out LFT tests, visits will still need to be booked via the Bethesda website or by telephoning the Home. **Visitors who turn up ad hoc cannot be admitted.** It is anticipated that this situation will not cause undue inconvenience, as not all visiting slots are taken up, however, if this does cause concern or difficulty for anyone, they are requested to contact the General Manager who will discuss this with them.
- Whilst there is no longer a national limit on the maximum number of visitors that a resident can receive in a day, whilst infection rates remain high we request that visits remain limited to two people at a time. If more wish to come, this will need to be by prior arrangement, and preferably held in the garden, rather than indoors.
- Managers will be keeping an eye on the booking system to ensure that each resident has a fair opportunity to get a visit and will advise relatives where they may need to scale back the number of their visits in order to give others an opportunity.
- On arrival for the visit the following process applies (*Fit to enter rules*):
 - You will be asked to confirm that you have read this policy as this is now a condition of the visit going ahead. If not, the Home will provide you with a copy to read prior to proceeding with the visit.
 - temperature check,
 - a declaration of being free of symptoms, the questions that will be asked are:
 - Have you been feeling unwell recently?
 - Have you had a recent onset of a new continuous cough?
 - Have you noticed a loss of, or changing, normal sense of taste and smell?
 - Have you tested positive for COVID-19 in the past 10 days?
 - Have you had recent contact (in the last 14 days) with anyone with COVID-19 symptoms or someone with confirmed COVID-19? (If yes, should you be self-isolating as a family member or as a contact advised to do so by NHS Test and Trace)
 - Have you returned from an overseas visit recently and are you still in the quarantine period?
 - Testing route 1: LFT test at the start of the visit. You will be asked to give your consent to this, however if consent for the test is withheld, then the visit cannot go ahead. The Home will ensure that an appropriately trained member of staff is on hand to assist with testing for booked visits and.
 - Testing route 2: if you have tested 'off site' (see heading 3 below) please show proof of negative LFT test result to the member of staff attending. This must either be text message from NHS Test and Trace or a date stamped photo of the test cartridge.
 - If testing at the Bethesda Home, where there is not a waiting area in the Home, you will be expected to wait for the result in your car.
- During the visit the following applies (*Visiting rules*):
 - Once a negative LFT result has been demonstrated, you will be provided with moisture resisting face mask and provide clear instruction on how to correctly don and doff PPE where you are new to this. **Although there is no longer a legal requirement to wear face masks in any location, the government guidance makes it clear that wearing these in a Care Home environment is the expectation, and for the safety of the residents, staff and visitors the wearing of masks at all times whilst in the building remains Bethesda's policy.**
 - A peddle bin has been provided at the point of exit for you place the removed PPE.
 - Visits must take place in the Resident's rooms (which will need to be well ventilated for the duration of the visit), not the common areas of the Home,

- a wipeable chair will be provided for the visit, and cleaned afterwards,
- Stringent hand hygiene must be maintained at all times, including washing your hands on entering and exiting the building and entering and exiting Resident's rooms [clear instructions on this are given throughout the Home on posters and/or leaflets],
- You are advised to keep physical contact to a minimum. Physical contact like handholding is acceptable if hand washing protocols are followed. Close personal contact such as hugging presents higher risks but will be safer if it is between people who are double vaccinated, without face-to-face contact, and there is brief contact only.
- Two metre social distancing must be maintained from all staff and residents not part of the visit.

Visits from people *other* than the residents nominated persons

To ensure that the residents get as wide a range of visits as is practical from other relatives, Pastors and friends, the following rules apply:

- Visits from people other than the nominated person(s) may continue as before using the 'Visitor's rooms'.
- Outside visits are allowed, subject to residents welfare considerations. External structures may be used for this purpose, as well as window visits. Where external structures are used, wipe clean furniture and surfaces must be available.
- There is no longer a limit on the maximum number of visitors that a resident can receive, however, whilst infection rates remain high, we will encourage visits to remain limited to 2 people at a time. If more wish to come, this will need to be by prior arrangement, and preferably in the garden, rather than indoors.
- The same 'fit to enter' rules apply as above, except that LFT testing will not be required.
- The same 'visiting rules' as listed above apply **except that:**
 - if visiting outside, the visitor may not hold hands, and,
 - must maintain 2 metre social distancing at all times.

The difference in approach is because LFT testing is not provided for this type of visit.

Visits involving Children and young people under the age of 18

It is possible for someone aged under 18 to be among these nominated as visitors, if the resident, family, and the Home Manager all agree that is appropriate.

Any visits involving children should be carefully considered by the family. The arrangements for the visit – in particular the numbers involved and where the visit will take place – must be planned and agreed with the Home Manager in advance of the visit.

Children aged 11 or over must wear the same PPE as adults, be able to follow IPC measures carefully and no physical contact with the person being visited.

Children aged 3 and over count towards the maximum number of people allowed to visit (two). Babies and children up to the age of two do not count towards the maximum number of people allowed to visit.

The government does not currently recommend that children under the age of 11 participate in regular asymptomatic testing. If a test is to take place for a child, it should be done with their consent and that of their parent or guardian, and following the appropriate steps in [this guidance on how to test a child](#).

Length and Frequency of Visits

The existing 45 minutes visit duration as set out in the visitors booking page remains, but local managers have the discretion to allow longer periods of time where circumstances

allow. Please speak to the Home at the time of your visit if you would like to stay longer and they will see if this can be accommodated around other visits and the resident's wishes.

Evening visiting slots have been added for the Brighton and Studley Homes and will be considered for the Harpenden Home by request.

Essential Care Giver

In the governments guidance there is allowance for residents to nominate an essential care giver. The essential care giver role is intended as a way of supporting residents who need some element of care and support that could only ever be provided by someone with a unique personal relationship with the resident, perhaps formed over many years.

The essential care giver arrangements are intended for circumstances where the visitor's presence, or the care they provide, is central to the immediate health and wellbeing of the resident, and their health or wellbeing could deteriorate rapidly without it. Having read the detailed guidance around this, we believe that there are currently no residents in Bethesda who require this kind of support, however, if you believe that the person you are visiting does qualify for an 'essential care giver' please do not hesitate to let us know and we will be happy to talk this over with you.

End of Life Care

Our approach to end-of-life care continues to be as follows:

- the government guidance makes it clear that 'end-of-life' does not just mean the last few days. There is an expectation that care homes will identify those residents who may be in the last few months of their life and to facilitate access to their loved ones.
- It would be appropriate to permit any number of visits per week and that up to two people at a time may attend.
- The same 'fit to enter' rules as listed above apply, **except that weekly PCR testing** will be required in addition to LFT testing.
- Physical contact such as holding hands and assisting with personal care will be permitted. However, the visitor needs to be advised that this will increase the risk of infection and the need to wash hands thoroughly.

Risk Assessment

In all cases where face to face visiting is taking place the Home has produced a 'dynamic' risk assessment. This is specific to the individual concerned, will take into account their individual needs and the wider circumstances and will be reviewed, and if need be, updated, on every visit.

COVID-19 Outbreaks

Should there be a COVID-19 outbreak in the Home all visits to the Home will cease, except for those relating to end-of-life; in which case the visitors will be told of the situation and given advice. What constitutes an outbreak varies from CCG to CCG, but in general this means two or more connected cases of COVID-19 among residents and/or staff.

These restrictions will continue until the outbreak is confirmed as over, which will be at least 14 days after the last laboratory confirmed or clinically suspected cases were identified in a resident or member of staff in the Home.

Recovery testing on all those that had previously tested negative will be carried out 14 days after the last positive test result. If all recovery testing shows negative results, outward visiting may be restarted but with the usual infection prevention and control measures and any enhancements required due to any risk identified following the recent outbreak.

Where there is an outbreak of variant of concern, outward visiting will need to stop for at least 28 days after the last positive test in a resident or staff member.

You will be kept informed of the situation on a regular basis, either through personal contact for next-of-kin, or the website for everyone else.

3. Testing arrangements for named visitors

As noted in the procedure above, persons visiting residents within the home must be LFT tested.

It is important to bear in mind that whilst rapid testing can reduce the risks around visiting, it does not completely remove the risk of infection. It is therefore important that you understand the expectations placed upon you in respect of PPE use, social distancing, and hygiene, and any physical contact as set out in the procedure above. It is essential that you follow all such advice and instructions carefully - to minimise the risks to yourselves and loved ones as much as possible. Where you are observed not to be following these rules staff have been asked to offer a polite reminder and you are requested to please co-operate with them.

LFT testing on-site in the Home is preferable for assurance purposes, however, it is recognised that some individuals have to travel long distances to visit and may have access to testing through other routes. Therefore, it is now permissible for the Homes to accept evidence of a recent negative test undertaken through other means, if the test has been taken the same day. Alternative routes of testing may include:

- Assisted testing at another lateral flow site such as an asymptomatic testing site,
- Self-testing at your own home through test kits provided by the care home using packs of seven test kits,
- Self-testing at your own home using test kits provided by the government such as through a school, workplace, the universal testing offer or collected from a pharmacy.

Currently, the Bethesda Home's have not been able to access to the packs of seven test kits. As a stop-gap measure managers or their deputy, may issue a maximum of two tests at a time for you to take home from the packs of 25 provided to the Bethesda Home. The Home cannot distribute whole packs of 25 tests.

In order to address the additional risks that may arise from testing off-site the following process needs to be followed:

- where you request to be able to test off-site, you will be asked to do the first two tests in the Home under supervision of a member of staff,
- This is to ensure that you are confident in conducting the tests yourself,
- That the test is being done satisfactorily, and,
- That the test results are being reported satisfactorily.
- The Home will make a record of this supervision.

Wherever the test is done, it has to be on the same day as the visit, and you must show proof of the result, which may be an email or text from NHS Test and Trace or a date stamped photo of the test cartridge itself. If you are unable to produce evidence of a negative test, you will be asked to take the test at the Bethesda Home, or to reschedule the visit.

Bethesda Homes do not need to retain records of proof of negative test result, however, all tests done at the Bethesda Home or done off site must be reported using the 'Unique Organisation Number' (UON) of the relevant Bethesda Home and you will be provided with this. It is a legal duty to report the result of your test via Test and Trace.

4. Residents visiting out of the Homes

This part of the COVID-19 policy sets out how we will plan and support visits out of the Homes for our residents as safely as possible, where Residents wish to make them. In this, it is recognised that spending time with others outside of the Bethesda Home will increase the risk of exposure to COVID-19 for the residents and potentially to other residents and staff on their return.

The government no longer requires residents to self-isolate after visits out of the Homes, except in the following circumstances when a period of 14 days isolation will still be required:

- Overnight stays in hospital,
- Visits assessed to be high-risk following individual risk assessment

Homes do however still need to make visits out subject to carefully considered risk assessments.

Procedure

When considering a visit out of the Bethesda Home the following procedure will need to be followed:

- a. The person suggesting the visit out will need to speak to the Home Manager and describe what is involved, where the resident will be going and who else will be present.
- b. In conjunction with the resident and next-of-kin, the manager will carry out a specific risk assessment, taking into account full vaccination status, levels of infection in the community and variance of concern in the community.
- c. When going out residents may be (but are not required to be) accompanied by:
 - a member of Bethesda Home staff
 - one or more of their named visitors, and/or
 - their essential provider (where applicable).
- d. Residents may meet other people (subject to current COVID-19 mixing rules) but must maintain social distance from anyone who is not one of their named visitors. The organiser of the visit out will be asked to take responsibility for ensuring that social distancing requirements are met and that they understand the importance of this for the safety of their relative and the rest of the Home.
- e. Where possible residents should avoid close physical contact with those who are supporting their visit to minimise the risk of infection.
- f. Crowded places should be avoided.
- g. Visits to indoor spaces should normally be avoided, unless an individual risk assessment has determined the activity is necessary to maintaining the individual's health and well-being (such as attending a place of worship).
- h. When the visit out is to attend a place of worship, the Home Manager will review the chapel's own risk assessments and ensure that this provides sufficient consideration for the protection of care home residents and provide advice where it is felt that more needs to be done. The review of the place of worship's risk assessment will form part of the Homes own risk assessment.
- i. Public transport should be avoided but travelling in a family car or private taxi is acceptable. Face masks should be worn whilst in the car.
- j. Where a visit out is accompanied by a named/nominated visitor, visitors must be LFT tested (see section 3 above) and receive a negative test result first.

Risk Assessment

The risk assessment for visits out will take into account the following factors:

- infection risk,
- vaccination status of the resident,
- the likely vaccination status of those in the setting they are visiting,

- levels of infection in the community,
- prevalence of variance of concern in the community,
- the support needs that the resident may have during the visit,
- how the resident will be supported to follow good infection control practice, including social distancing, hand hygiene and face coverings and whether the resident's needs are likely to impact their ability to do so,
- transport for the visit, which should avoid exposing the residents to those outside the household they are visiting as much as possible,
- Review of third-party risk assessments where applicable.

In the event of an outbreak in the Home

In the event of an outbreak of COVID-19 in the Bethesda home, outward visiting will immediately stop.

These restrictions will continue until the outbreak is confirmed as over, which will be at least 14 days after the last laboratory confirmed or clinically suspected cases were identified in a resident or member of staff in the Home.

Recovery testing on all those that had previously tested negative will be carried out 14 days after the last positive test result. If all recovery testing shows negative results, outward visiting may be restarted but with the usual infection prevention and control measures and any enhancements required due to any risk identified following the recent outbreak.

Where there is an outbreak of variant of concern, outward visiting will need to stop for at least 28 days after the last positive test in a resident or staff member.

In the event of an outbreak, all movements in and out of the home will be minimised as far as possible and limited to exceptional circumstances only, such as a visit to a friend or a relative at the end of their life.

Date of Next review

This document will be reviewed 20 August 2021.

If there are any questions these should be directed to Adrian Topping at (01582) 460522 or adriantopping@gbsf.uk.