

Care Home Visitor Protocol March 2023

Status: RED/AMBER/GREEN

Introduction

West Berkshire Council provides 24 hour care for people in three local care homes.

We developed this Responsible Visiting Protocol and Code, designed to allow safe and responsible visits to be made to any of the West Berkshire Council run care homes, in July 2020 and have updated it on a number of occasions since.

This edition is dated March 2023 and takes account the withdrawal of the [National Guidance](#) (“**the Guidance**”) by the Department of Health and Social Care on 1 April 2022.

Whilst there is no longer a requirement for vaccination or to undertake asymptomatic testing; West Berkshire Council feel that it is appropriate to continue to offer guidance regarding visiting restrictions or conditions within Care Homes.

NB This protocol is specifically for families and friends of residents and NOT for visiting professionals.

This Protocol and the Responsible Visiting Code

The protocol should be read by all care home staff – it contains a wealth of detail, for example regarding the precautions to be taken to facilitate visits.

In developing this updated Protocol and Code we have also referred to the Alzheimer’s Society Report [Worst Hit; Dementia During Coronavirus](#), ensuring that we have considered the ongoing mental health implications of reduced/removal of visiting in our care homes on our residents. This highlights the importance of the continuation of safe and responsible visiting in care homes and that, by continuing to facilitate these visits safely, we will be able to mitigate some of the psychological and emotional harm which has been identified in the report as having occurred during the first National Lockdown in March 2020.

The Registered Manager (“**RM**” - to include their deputy or a delegated person where the context requires) of each care home will keep the Responsible Visiting Protocol under constant review and will return ensure that the relevant visitor protocol is introduced dependent upon the status allocated at the time. RED, AMBER or GREEN

Each care home is unique in its physical layout, surrounding environment and facilities. Residents vary in their needs, health and current wellbeing. RMs are best placed to decide how their care home can best enable visiting in line with this guidance and in a way that meets the needs of their residents both individually and collectively.



Key changes

The principal changes to the protocol introduced are:

We are moving to a RED, AMBER, GREEN status. Guidance will be provided by the home manager regarding any change in status and the relevant protocol to follow.

GREEN – low numbers of community transmission, no outbreak within the home

AMBER – rising number of community transmission, potential impact on staff and residents within the home.

RED – high numbers of community transmission, outbreak within the home or lockdowns have been implemented.

RED – Status: In the event of an outbreak in a care home, the home should implement the guidance around limiting the number of visitors to residents (minimum one person per resident alongside their named care giver to protect vulnerable residents, staff and visitors. (Exceptions to this can be agreed by the RM especially regarding exceptional circumstances such as end of life visits)

Visitor Definitions

GREEN status

Visitors are no longer required to be tested using LFD tests before every visit but will be offered the opportunity to test prior to their entry into the home, and they must wear the appropriate PPE and follow all other IPC measures (which the care home will guide them on) during visits.

A maximum of 3 visitors will be able to visit at any one time or on a given day, unless agreed with the RM in advance.

Visits can take place at unrestricted times, however we would like to request that all visitors plan in advance and be prepared for short notice changes in RAG (Red, Amber, Green) status. If you wish to clarify any aspect of your visit please contact the home prior to arrival.

Visitors and residents are advised to 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.

AMBER status

Although visitors are no longer required to be tested using LFD tests, they will be offered the opportunity to test prior to their entry into the home, and they must wear the appropriate PPE and follow all other IPC measures (which the care home will guide them on) during visits.

A maximum of 2 visitors will be able to visit at any one time or on a given day, unless agreed with the RM in advance.

Due to this increased level of infection control, except in exceptional circumstances, all visits must take place during office hours so that a member of the Management Team is available to support staff and visitors with the process. Visits out of office hours will be granted only with the specific agreement of the RM.

Visitors and residents are advised to 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.

RED status

RED – Status: In the event of an outbreak in a care home, the home should implement the guidance around limiting the number of visitors to residents (minimum one person per resident alongside their named care giver to protect vulnerable residents, staff and visitors. (Exceptions to this can be agreed by the RM especially regarding exceptional circumstances such as end of life visits)

Special/Exceptional Circumstances visits – status RED

This refers to visits that will take place with enhanced risk assessments completed by the RM. They include visits taking place due to residents being acutely unwell and unable to access the designated visiting room, for example in end of life situations when the RM will support visiting in the resident's rooms. These are only to be undertaken in special or exceptional circumstances.

VISITS

GREEN status

In room visits allowed along with designated spaces, garden visits, external outings. Essential Care Giver visits

AMBER status

Visits should happen in the open air wherever possible (although recognising that for many residents, and indeed visitors, this will not be appropriate in the winter).

Visits may occur in a number of ways: Window Visits, Garden Visits, Designated Areas and Special Circumstance visits within the resident's room where agreed. Essential Care Giver visits

RED status

Due to this increased level of infection control, except in exceptional circumstances, all visits must take place during office hours so that a member of the Management Team is available to support staff and visitors with the process. It is recommended that 1 visitor be allowed during outbreak status, and visits can take the form of Window Visits, Garden Visits, Designated area visits and Special Circumstance visits where agreed. Essential Care Giver visits are unrestricted.

Visits out of office hours will be granted only with the specific agreement of the RM.

End-of-life visiting will always be supported and testing is not required in any circumstance

Definitions

Window visits & Special/Exceptional Circumstances

These will need safe ground floor window access for both residents and their visitors and the relevant social distancing and PPE measures will need to be observed. Such visits will generally be restricted to residents with a ground floor room.

Garden visits & Special/Exceptional Circumstances

- Relevant PPE measures and social distancing will apply.
- Independent access to the garden will be used to avoid visitors moving through the care setting to the garden.
- Gazebos will be used if weather is inclement, but conditions are warm and settled enough for vulnerable residents and family members to use safely.
- The Risk Assessment for outdoor visits will consider weather conditions, for example inclement weather/icy conditions to prevent slips and falls.

Designated areas for internal visits & Special / Exceptional Circumstances

- Areas have been identified and reserved in all homes for safe in-house visits. These are generally conservatories or garden lounges which can be accessed by residents through the home and visitors from the outside (removing any need for visitor access through residential areas).
- Where however there is a single access point to the visiting area, the resident and visitor(s) must enter at different times to ensure that safe distancing and seating arrangements can be maintained effectively.
- Each visiting area needs to have good ventilation, for example keeping doors and windows open where safe to do so and using ventilation systems at high rates (but only where these circulate fresh air).
- Each visiting area also needs to have good space for social distancing.
- The designated visiting areas must only be used by one resident and visiting party at a time.
- Between visits there will be appropriate cleaning (and an appropriate time interval to undertake this).

In room Visits Special/Exceptional Circumstances

This refers to visits that will take place with enhanced risk assessments completed by the RM. They include visits taking place due to residents being acutely unwell and unable to access the designated visiting space, for example in end of life situations when the RM will support visiting in the resident's rooms. These are only to be undertaken in special or exceptional circumstances.

Lateral Flow Device Testing

Introduction

Asymptomatic LFD testing is no longer a requirement for care home staff and residents. Symptomatic testing is continuing for residents and staff as part of the overall Covid testing regime. Although there is no longer a requirement for visitors to have taken an LFD test prior to visiting, we will continue to offer the opportunity to test prior to their entering the home.

Process - GREEN

Upon arrival the visitor will be asked if they wish to undertake a test. There will be a supply of LFD test available for visitors to utilise.

The visitor will be required to swab their nose (with direction from the staff member if required) and the test allowed to develop for the specified time. The result will then be able to be read.

- should the test be negative then the visit can go ahead as planned.
- should the test be positive, the visitor will be asked to leave the care home without visiting and advised to follow the current guidelines.

PPE in the form of Masks, Gloves and Aprons will be provided for use by all visitors.

Process – AMBER / RED

Having booked their visit, each visitor will be asked to arrive 30 mins before the visit is due to start, if they choose to undertake an LFD test before the visit.

Tests will be completed by care home staff (who are already using these tests on a daily basis and are very clear on how they should be conducted).

The visitor will be required to swab their nose (with direction from the staff member) and then the test will be taken into the home to allow time to receive an accurate result.

Once the test is complete, the staff member will inform the visitor of the results:

- should the test be negative then the visit can go ahead as planned (see below)
- should the test be positive, the visitor will be asked to leave the care home without visiting and advised to follow the current guidelines.

Essential Care Giver

Introduction

For some residents a visit with a greater degree of personal care may be central to maintaining their immediate health and wellbeing.

In such cases, *in addition to the Visitor's* and with the agreement of the care home, the ECG will be enabled and supported to provide this care and they will be able to visit more often. They will have access to the same Polymerase Chain Reaction ("PCR") and LFD testing, and PPE arrangements, as a member of care home staff.

Each resident's needs will be different, and the exact arrangements will need to be agreed between the care home, resident and their family (with professional support if helpful). This should follow an individualised assessment of the resident's needs.

The ECG 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.

Testing

ECGs no longer required to test before visiting a care home.

Infection Control

ECGs 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 put on and remove the PPE on a video or by a staff member. It is also sensible for the visitor to be observed by an experienced member of staff as they put on and remove the PPE on the first few visits, to ensure they are doing so correctly. This remains the case regardless of whether the resident and/or the visitor have received a vaccine. If the resident being visited is believed to have Covid-19, or is coughing, and the visitor will be within 2 metres of them, this should include eye protection such as goggles or a visor.

ECGs must be reminded that PPE is only effective if worn properly, put on and taken off safely and combined with infection prevention and control measures such as hand hygiene and avoiding touching your face with your hands. Care home staff should provide visitors with guidance on how to safely put on and remove PPE and visitors should also be encouraged to view the video demonstration.

Care home staff should also ensure that these visitors have been provided with appropriate information regarding how frequently they should change their PPE and are supported to change their PPE where necessary, for example changing gloves after supporting a resident with personal care. This must include appropriate guidance on local arrangements for disposing of soiled PPE.

These visitors should also be briefed on the relevant IPC measures in the areas of the care home they will have access to and reminded of the importance of remaining at least a 2 metre distance from staff and any other residents they might encounter.

Babies, children and young people

It is possible for someone aged under 18 to visit, if the resident, family, and the care home all agree that is appropriate. It is also possible for a young person under the age of 18 to be an essential care giver – although clearly this would be only be appropriate for older teenagers, and must be with the agreement of the care home manager who must satisfy themselves that the young person is confident, capable and willing to provide the care or support agreed.

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 care home in advance of the visit.

It is very important that any children visiting are able to follow IPC measures carefully. This will include social distancing, PPE use (where appropriate), and advice on minimising physical contact – as well as being able to follow any other instructions or advice the care home staff might provide.

Visits including babies and very young children may also take place with the agreement of the care home manager. As is the case with visitors of all ages, there should be no close physical contact between babies or young children and the residents they are visiting.

Children aged 11 and over should wear the same PPE as adult visitors. Children between 11 and 3 may choose to wear a mask if they are able to and children under the age of 3 should not wear masks, for [safety reasons](#).

Responsible Visiting Code

Responsibilities of Visitors

- To book visits in advance for a specific day, time and length of visit where applicable.
- To check in with the care provider on the day prior to the visit that the status of the service has not changed and the visit can go ahead.
- To be free of any Covid-19 symptoms for at least 10 days prior to the visit, as per Government guidance, not be unwell on the day of their visits, and not be self-isolating.
- To provide the necessary information required by the provider at the visits (eg an honest response to screening requirements about Covid-19 risk factors, etc).
- To comply with the infection prevention and control measures, including a temperature test, mandatory hand hygiene, the use of PPE as required and social distancing requirements, and to remain in the designated visiting area when the RAG status requires it.
- To ensure that any gifts brought to give to the individual they are visiting can be sanitised, in line with relevant infection prevention and control guidance when applicable.

Tips for Visitors

- The Guidance includes tips for visitors on how to communicate if face coverings are mandatory or required, for example:
 - speaking loudly and clearly;
 - keeping eye contact;
 - not wearing hats or anything else that might conceal their face further;
 - wearing clothing or their hair in a way that a resident would more likely recognise.
- The Guidance also warns visitors that some residents with dementia might struggle at first to remember or recognise them.

Responsibilities of care homes/RMs

- To follow national and UKHSA guidance, including guidance on visitors.
- To clearly display the designated status of RED, AMBER or GREEN and ensure the relevant visiting protocol is communicated and followed.
- To provide clear information about how each visit will take place and the infection control measures that must be followed.
- To appropriately support staff in order to facilitate visits including written processes and procedures.
- To treat all visitors with respect and courtesy, and to provide clear instructions about the visiting protocol.
- To seek to prepare residents for visits where necessary (eg for those with dementia by looking with them at photographs of the person who is due to visit and talking to them about their relationship).
- To proactively communicate with residents and families where an outbreak occurs, and the impact on the visiting protocol.
- To ensure that, if the care home is closed to all but essential visitors, that virtual visiting is undertaken using the IT equipment in the homes to facilitate contact.
- To ensure that the West Berkshire Council Responsible Visiting RAG Rating document is completed weekly (this will include up to date information from the UKHSA about local
- Community transmission - the responsibility of disseminating this information to all providers in a timely and effective manner sits with the UKHSA.
- To maintain a record of any visitors to the care home as well as the person and/or people they interact with, for example if a person visits their loved one who is also visited by a chaplain in the course of the visit.

Rules for visits – all status levels except where otherwise indicated

- Visits may only take place with the agreement of the home's RM. (AMBER & RED)
- Every visit will be risk assessed and agreed by the RM. (AMBER & RED)
- Visits must be arranged via an appointment so that the home can manage who is on the premises safely. (AMBER & RED)
- All visits will usually be for a maximum of one hour. (AMBER & RED)
- All individuals not part of the same household should remain two metres apart at all times during the visit. On occasions where social distancing is not possible, all visitors should wear masks, gloves and an apron.
- Purpose built clear screens will be used where necessary to provide a protective barrier and these/the visiting rooms will be subject to enhanced cleaning after each visit. (AMBER & RED)
- All visitors must wear masks/face coverings, unless advised by care home staff.
- The visitors and the resident must keep socially distant at all times.
- All visits may be supervised from a distance. (AMBER & RED)
- All visitors must report to the reception of the care home on arrival and departure and confirm who they are visiting, their contact details, etc (receptionist/office staff will be responsible for marking the visitor as present and recording when they leave).
- All visitors will be asked to read, agree and follow this Code.

- All visitors will be required to confirm that they:
 - have not been feeling unwell recently;
 - have not had a recent onset of a new continuous cough;
 - do not have a high temperature (nb that all visitors will have their temperature taken);
 - have not noticed a loss of, or change in, their normal sense of taste or smell;
 - have not returned from an overseas visit such that they are still subject to any applicable quarantine period;
 - have not to their knowledge had recent contact (in the last 10 days) with anyone with Covid-19 symptoms or with confirmed Covid-19.
- All visitors will have their temperature taken on arrival and anyone with a temperature of 37.8 °C or above will not be permitted to continue with a visit. (AMBER & RED)
- Visitors will be asked to NOT to bring any personal possessions into the home during visits - this includes mobile phones. (RED)
- Visitors need to discuss with staff any items they wish to bring with them on their visit, such as a gift (which will need to be something that can be easily cleaned by the care home to prevent cross contamination). (AMBER & RED)

Visits out of Care Homes (GREEN / AMBER status)

Spending time out of the care home has always been an important part of life for many people living in residential care. This might include visits with friends and family to outdoor spaces and leisure venues, or to celebrate special occasions. West Berkshire Council Care homes would like to be able to facilitate safe “out of care home visits”.

For some residents, regular visits may be part of their care plan – accessing care and support in day services, participating in community groups and volunteering. For many residents of working age, this might include regular overnight visits to the family home.

Every “out of care home visit” must be agreed with the RM or their delegated person at the relevant home and this should be done at least seven days prior to the visit being undertaken following an individual risk assessment. RM's or their delegated person has the right to deny an “out of care home visit” should there be any concern over the safety of this visit.

Individual risk assessments should take into account:

- the vaccination status of residents, visitors and staff
- any testing of those accompanying the resident or who they intend to meet on their visit out
- levels of infection in the community
- variants of concern in the community
- where the resident is going on a visit and what activities they will take part in while on the visit
- the mode of transport that residents intend to use

All residents (regardless of vaccination status) should not normally need to self-isolate following a visit out, but a risk assessment should be completed with consideration given to:

- the number of people involved in the visit (and whether they are 'usual contacts' of the resident or people they do not usually mix with)
- if the vaccination status of those involved in the visit is known or not
- whether those involved in the visit have received a recent negative lateral flow test result
- the characteristics of the setting (for example, enclosed settings would be higher risk than open air settings)

It is recommended that no external visits take place when the status level is RED

Returning from hospital (RED, AMBER, GREEN)

Residents should isolate for a maximum of 10 days from other residents following an emergency stay in hospital that is in **active outbreak** (as they are higher risk than an elective admission) The 10 days include the period of time that the resident may have started isolating whilst still being in the hospital. During this period of isolation within the care home, residents may continue to undertake visits out of the care home, if:

- a risk assessment by the care provider shows they can avoid other residents
- they are not visiting another social care setting
- consideration is given to the vulnerability of those they will be visiting
- Status is GREEN or AMBER

Residents who are able to take lateral flow tests should be able to end isolation as follows.

Residents who are:

- vaccinated (with their primary dose and any eligible booster dose) should take a lateral flow test on day 4, 5 and 6, following their return to the care home (day 0), and, if negative, can end isolation
- unvaccinated should take a lateral flow test on day 6, 7 and 8, and, if negative, can end isolation

Residents who are unable to test should isolate for 10 days.

If the resident is returning from a stay in hospital that is not in active outbreak there is no longer a requirement for them to self-isolate for 10 days

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Updated March 2023