

Visiting Guide

Please note that this guide is regularly reviewed and that there maybe additional requirements locally at the time of visiting which we ask all visitors to adhere to due to the changes with COVID infections at the Hospital and in the community. For example: requirement of wearing masks in clinical settings

Version 1

Trust Docs ID: 19968

Issue Date: 02/08/2022

Review Date: 02/01/2023

Visiting

- Visitors play a vital role in mental and emotional health/wellbeing for patients and are also part of the team to protect them – so we need their help to keep Covid at bay
- Visitors are expected **NOT** to visit if - tested positive for Covid OR have ANY symptoms for – Covid, cold, flu, norovirus, diarrhoea, vomiting, Monkey Pox etc
- The current **Covid** variant circulating has ‘cold-like’ symptoms and the range of symptoms varies from one individual to another. e.g.:
 - sore throat, headache, congested nasal passage, cough etc
- **Monkey Pox** symptoms – fever, headache, muscle aches, backache, swollen lymph nodes, rash after 1-5 days
- **When visiting, people are strongly encouraged to help keep patients and everyone safe by:**
 - Mask wearing
 - Space/distancing
 - Washing hands
- Visitors are strongly encouraged to undertake a Lateral Flow Test prior to visit but the emphasis is on NOT attending with any symptoms
- Visitors who have tested positive/have Covid symptoms should follow national guidance and are required to discuss with the ward manager appropriate measures to re-commence visiting after their infection has cleared

Visiting Process

All medical/surgical wards Including Emergency Assessment Unit Surgical (EAUS)

- Visitors allowed on wards from 2pm until 8pm 7 days a week. No need to book.
- Maximum of 2 visitors per bed (no children under the age of 12)
- Exceptions to this by arrangement with the ward manager
- **Family / Unpaid Carers:** use Carer's Passport and Contract to support open/agreed times to be on the wards (arranged via ward manager as not 'visitors')
- **Message to visitors:** to support mealtimes and essential care giving, you may be asked to leave the bed space/ward if it cannot be delayed until the end of visiting
- To help keep numbers down on the ward at one time, consider options off the ward such as side rooms, going outside or off ward etc where possible and relevant
- There is extra flexibility for End of Life patients (circa 6 in a side room but this is to be discussed and agree between the family and ward manager)
- **Positive patient** – Staff will follow latest Infection Prevention and Control advice and liaise with patient/family/visitors on case by case basis to inform them that the patient is positive, agree if visit is necessary as well as the approach to visiting (time/length/masks etc). Virtual visiting will be promoted as a preference as well as Family Liaison Officers contact etc (see final slide)

Visiting Process Maternity

- Two birth partners allowed for Delivery Suite and the Midwifery led Birthing Unit
- Wards (Cley Obstetrics/Blakeney); Visiting hours are 8am until 8pm for one birth partner only. From 2pm until 5pm there two visitors per bed space are allowed.
- Community midwifery antenatal and postnatal clinic appointments will remain as they are currently, this is constantly under review.
- One support person may attend for hospital appointments. For example, Maternity Assessment Unit and Antenatal Clinic.

Visiting Process

Children and Young People (CYP) – wards/areas/emergency

- **NICU:** Open visiting for parents. Additional family visiting from 4pm to 6pm but a maximum of 2 visitors at the bedside at any one time (including parent). Siblings are able to visit as per discussions with the unit team.
- **Children's Emergency Department (ChED) and Children's Assessment Unit (CAU) on Coltishall** – Maximum of 2 adults to accompany each child. Siblings in exceptional circumstances only.
- **Buxton and Children's Day Ward (CDW)** – Open visiting with a maximum of 2 parents/carers/visitors at the bedside at any one time. One parent/carer is able to be resident overnight. All visitors including siblings, bar the resident parent/carer, are able to visit between 10am and 7:30pm, there may be exceptional circumstances where this is flexible and decided by the Nurse in charge. During ward rounds and at some other times visitors other than the parents/carers will be asked to leave.

Accompanying someone to the Emergency Department or Outpatient appointments including Acute Medical Unit (AMU)

- **Outpatients:** patients are encouraged to attend alone. If the patient has been advised to be accompanied via letter, have additional needs or feel they would benefit from support, they may be accompanied.
- Where possible, we encourage taking a Lateral Flow Test before attending
- **Emergency Department:** encouraged to attend alone. If the patient has additional needs they may be accompanied, this remains at the discretion of the Nurse in charge.
- **All** areas strongly encourage wearing of masks and adopt appropriate hand hygiene

Visiting Process

Critical Care including Covid +ve patients

- **Visitors are strongly encouraged to undertake a Lateral Flow Test prior to visit** but the emphasis is on NOT attending with any symptoms for Covid, cold, flu, norovirus, diarrhoea, vomiting, Monkey Pox.
- **When visiting people will be required to help keep patients and everyone safe by:**
 - Mask wearing
 - Space/distancing
 - Washing hands on arrival to unit & before leaving patients bedspace (after removing PPE used in bedspace)
- Visiting times are 2.00pm – 7.30pm (no booking required)
- Maximum of 2 Visitors per patient / Next of kin (NOK) and immediate family only
- Exceptions to routine visits outside of normal visiting hours to be discussed and agreed by the Co-Ordinator & Multiple Disciplinary Team

If Patient Covid +ve:

- Family / NOK requests to visit Covid +ve patient
- Bedside Registered Nurse to liaise with Nurse in Charge and Co-Ordinator for arrangements with families
- Nurse in Charge/ Co-Ordinator to liaise with family/NOK and patient to assess risk on individual basis with each visitor. Risk assessment to include consideration of: covid vaccination status, health concerns e.g immunocompromised.
- Advise visitors on PPE requirements as per latest Infection, Prevention and Control advice. Explain use of FFP3 masks, these will not be fit tested but masks available for visitors to use when advised; e.g. patient receiving treatment generating Aerosol Generating Procedures
- Nurse in Charge/ Co-Ordinator to document visiting arrangements agreed in patient's metavisitation notes.
- Critical Care Complex team to support families with arranging Virtual Visits, if preferred for Visiting Covid +ve status patients or when family members are covid +ve themselves.

Keeping In Touch – Other Options/Support

In addition to face to face visiting there are other options/support which can help patients keep in touch with friends/family

- **Own Devices:** patients to use own personal digital device with video-chatting apps on phones and tablets.
- **Virtual Visiting:** each ward has an i-Pad for use for Skype – see Standard Operating Procedure for use of Skype, ATouchaway and vCreate for Virtual Visiting During COVID-19 (Trust Docs ID: 17336). Wards also have portable phones.
- **PALS Best Wishes Messages to Loved Ones:** PALS provides a service to ensure patients receive Best Wishes messages from their family and friends as quickly as possible. Messages can be sent to PALS by email to forward to the ward the next working day: PALS@nnuh.nhs.uk
- **Keeping Families Informed:** wards are to ensure named family members are kept up to date at agreed intervals, in lieu of visiting.
- **Chaplaincy:** support is available via the Chaplaincy for families. Chaplaincy will continue their visits on all wards as well as offering the virtual Chaplain service, bereavement support line and iPad Visiting.
- **Family Liaison Team (FLOs)** – temporary FLOs available via familyliaisonservice@nnuh.nhs.uk (can help with all of above as well as calls with basic updates)