

## V1 Visitors Procedure

To ensure all visitors to the service are identified, received in a courteous and welcoming manner and the health and safety of visitors, the people who use our services and staff are safeguarded.

<https://www.gov.uk/guidance/covid-19-coronavirus-restrictions-what-you-can-and-cannot-do>

<https://www.gov.uk/government/publications/infection-prevention-and-control-in-adult-social-care-settings>

### PROCEDURE

All reasonable steps to support people using the services to receive visits, go on visits or to be accompanied when attending appointments that do not require an overnight stay, unless this is against the person's wishes or, if they lack capacity to make the relevant decision, it is not in their best interests. There may be times when wishes of the person with the relevant capacity using the service is not the same as those people who want to visit them. In those circumstances, the manager should always give priority to the wishes of people using their service.

Where a person lacks the relevant capacity, it is important to be aware of the legal considerations for the circumstances and it may be appropriate to take legal advice.

Where a person lacks capacity, it is important to be aware of the legal considerations for the circumstance. CQC Regulation 11: need for consent will need to be considered.

Providers must support people who use their service to receive visits in person from people they want to see, when they want to see them, unless there are exceptional circumstances that prevent this from being possible. Individual risk assessments must be in place for any of those individuals where there are risks identified with visiting. People must be supported and encouraged to maintain social contact and community connections as far as practicably possible.

### General guidance for all visits to care services.

A visitor's book / file must be available at the main entrance of each building.

It is the responsibility of all staff to ensure that all visitors complete the visitors' book / file when arriving and departing the premises.

Information in the book / file must include times of arrival and departure, name, date, and purpose of visit.

In case of an emergency, staff must refer to the visitor's book / file to ensure complete evacuation of the premises.

Extra Care Housing Service	Support at Home Service	OA Day Services	Residential Services	DMH Day Services	DMH Supported Living Services	Community Equipment Services	Shared Lives Service
X	✓	✓	✓	✓	✓	X	X

The visitors' book / file must be made available for inspection and audit purposes if requested.

Doorbells must be responded to immediately as part of good customer care.

Visitors must be greeted politely and asked for the reason for their visit.

If the visitor is an official visitor e.g. G.P, gas, electric etc and is unknown to the person answering the door, he/she must be asked for means of identification.

If no identification is available further verification must be sought to confirm the legitimacy of the persons visit.

Staff should challenge unidentified visitors and inform the senior member of staff on duty about anybody acting suspiciously in the vicinity. Any concerns regarding visitor conduct should be discussed with the Manager or designated Supervisor.

Where staff or people that are using the service feel unsure about receiving a visitor they must contact the manager / supervisor for clarification and advice.

If the visitor is for a person using the service or a member of staff, the person using the service or staff member must be asked if they wish to receive the visitor.

If the visitor is welcomed ask the person to sign the visitors' book (see below) and escort them as appropriate.

All visitors to the service must be asked to read and agree the V1 visitors screening questionnaire (Appendix A). If visitors have any symptoms that suggest transmissible viruses and infections, such as cough, high temperature, diarrhoea or vomiting, they should avoid entering care services until at least 5 days after they feel better, however this cannot be enforced.

Face masks must be made available in the main entrance for those visitors that wish to wear a mask.

All people using the service will be supported to arrange and agree their visits. Where a person lacks capacity, this will be supported applying best interest principles, set out in the Mental Capacity Act.

All visits will consider the needs of the person using the service but also consider the safety and preferences of all other people in the service.

All visitors should be encouraged to complete hand hygiene before and after their visit. Either using handwash or a hand rub. Instructions should be laminated and be available for all visitors to refer to.

If a visitor is providing personal care, they should wear the same PPE as is required by staff. Including a fluid repellent type IIR mask, apron, gloves, and eye protection if required. Details on donning and doffing of PPE should be provided for visitors if required by suitable trained staff members. Instructions should be laminated and be available for all visitors to refer to if required

In the event of a Diarrhoea and Vomiting (D & V) outbreak Cumberland Care Services may need to limit some visiting following guidance from Cumberland Public Health Team to reduce the spread of infection.

Personal visits are recommended to take place in visiting rooms, the individual's bedrooms (in residential services) or in warm weather visits encouraged outdoors as this reduces any potential transmission risk. Indoor visiting areas should be well ventilated to help reduce any infection / transmission risk.

Each person's individual person-centred care plan should provide details on visiting and include any individual visiting risks and accompanying risk assessments.

Staff should provide any support required by the person using the service during visiting, referring to the individual's person-centred care plan.

Visitors should be advised regarding available toilet facilities in the service.

Refreshments may be offered if appropriate.

The manager / supervisor can ask a visitor to leave the premises if they find the visitor's behaviour is unacceptable. Where necessary the police can be summoned for assistance.

Any off-duty staff visiting the home should sign in the visitors' book.

All visits except where there are exceptional circumstances logged in the care plan must be accommodated including end of life which will always be supported.

## **Contractor**

If a contractor is visiting the premises, then M12 policy must be followed and all information regarding this work completed.

## **Training**

All staff attending training / meeting within any Cumberland Council establishment must sign the visitors' book.

## **Staff visiting people who use the service who live in their own homes**

Staff visiting people who use the service and live in their own homes must ensure the person is aware of roughly the time of the visit, carry and show identification and only enter if permitted to do so.

## **Visits outside the care environment (Residential Services only)**

Visits outside of the care environment must not be discouraged or restrict the person on their return after leaving the care home premises for any reason unless there are exceptional circumstances.

Families / visitors / advocates needs to sign into the visitors book as above and inform the manager where possible in advance if they wish to take the person using the service out of the service.

If for any reasons we use agency staff to support people who use the service to go out the arrangements as above must be the same. The member of staff must ensure they have contact details in case of emergency whilst on their outing.

Medication may also need to be taken therefore planning where possible in advance will help to support medication to be gathered and counted out. M4 procedure must be followed.

Discussions and decisions about visit out should be supported by individual risk assessments and written in the care plan. Decisions should not inhibit or discourage people from going out with their family, friends, or advocates.

If a person using the service needs to attend a hospital or hospice for care or treatment that does not require them to stay overnight, we must let the individual take someone with them to support. This can include day care treatment and outpatients appointments.

Exceptional circumstances should be based on their assessment on the health, safety and welfare of the person using the service or other people involved. Consideration and balance of the person rights the needs of the person using the services identified risks, including the risk of health and wellbeing resulting from restricting visiting.

Any restrictions must be reviewed and documented regularly. The manager must be able to demonstrate:

- What are the stated preferences of the person
- How they have made these decisions and who was involved
- How the balance of the persons rights has been considered
- Whether the restrictions are lawful, legitimate, and proportionate
- Whether they have implemented any mitigations to make sure they have used the least restrictive, most reasonable option. Manager must put in place any measures or precautions necessary and proportionate to ensure that visiting And accompaniment can continue to happen safely.

Where managers decide they cannot meet the person's preferences for a visit, they should consult with the person and their family, friends advocate and offer them as many options as possible. This is so the person can have as much control as possible over the arrangements where possible.

### **Appendix**

- Appendix A signing in sheet