

Guidance	Recommended Action
Every care home resident will be able to nominate a single, named visitor who will be able to enter the care home for regular visits. Visitors should be tested using rapid lateral flow tests before every visit.	 Discuss with the resident who their named visitor will be. For Residents who lack capacity, discuss with the named significant other or the named power of attorney. Update Visiting Care Plans to identify the named visitor. Communicate with all residents and relatives what your proposed approach is going to be. This needs to take into account the clinical vulnerability of residents, the vaccination status of residents and staff and circulating levels of COVID-19 in the local area. Carry out a risk assessment; the QCS template is available to support this. Ensure staff who are supporting visiting know how to use the QCS Visitor tracking app. Ensure sufficient stocks of lateral flow tests. Check the manufacturer's instructions as the approach to swabbing varies; some are just nose, some are nose and throat. Provide information on how to swab. Ensure you have staff available to support the process.
Visitors must wear the appropriate personal protective equipment (PPE) and follow all other infection control measures (which the care home will guide them on) during visits.	 Ensure sufficient supplies of appropriate PPE. Review the rota to ensure staff can support the donning and doffing of PPE. Ensure there is a suitable area to don and doff and wash and dry hands. Review the cleaning schedule to allow for additional cleaning between visitors if required.

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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. There should not be close physical contact such as hugging.	 Complete a risk assessment for each resident to identify the levels of appropriate interaction. This will vary from resident to resident, and it is important not to apply a blanket policy (<u>See CQC guidance</u>). Manage resident and visitor expectations by communicating clearly. Good infection control measures still need to be followed irrespective of vaccine status.
Residents with the highest care needs will also be able to nominate an essential caregiver (e.g. where a resident needs support from a significant other with personal care or support at mealtimes to reduce anxiety or where these activities are triggers for emotional expression of needs).	 Discuss with the resident who their essential caregiver will be. For residents who lack capacity, discuss with the named significant other or the named power of attorney Update Visiting Care Plans to identify their essential caregiver. Communicate with all residents and relatives what your proposed approach is going to be. This needs to take into account the clinical vulnerability of residents, the vaccination status of residents and staff and circulating levels of COVID-19 in the local area. Carry out a risk assessment; the QCS template is available to support this.
Care homes can continue to offer visits to other friends or family members with arrangements such as outdoor visiting, substantial screens, visiting pods, or behind windows.	 Agree how this will work within your home. Consider staff capacity. Consider additional cleaning requirements. Consider PPE requirements. Ensure staff are trained on how to use the QCS Visitor Tracking app.

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When the data shows it is safe, the Government wants to go further and allow more visitors. At step 2 of the roadmap (no earlier than 12 April) the Government will look carefully at the effectiveness of the vaccine for people living in care homes (and for the clinically extremely vulnerable generally), as well as levels of infection in the local community, especially of any new variants. The Government will decide at that point on extending the number of visitors to 2 per resident, which was the approach in December before the national 'stay at home' restrictions came into force. and set out a plan for the next phase of visits for people in residential care.

- 1. Keep up to date with national guidance.
- 2. Keep up to data with COVID-19 case numbers and variants in the local area.
- 3. Encourage staff who haven't been vaccinated to take up the vaccine.

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