

Annex 1

Visiting healthcare inpatient settings while COVID-19 is in general circulation principles including Children and Maternity

Current	New	Action
LFT required	No LFT required	Agreement via strategic to remove the requirement for LFT testing from policy for all inpatient areas.
One visitor per patient	Two visitors – there is no reference to the visitors needing to be from the same household	Continue with current
Length of time – 30 mins	At least one hour – ideally longer	Continue with current
Virtual Visits – in place loosely	Recommendation to continue with virtual visits	Policy to reflect this Improve access for the ward areas – may need to have devices update – patient experience /clinical digital lead to review
Social Distancing – recommended 2m minimum of 1m	No change	No change
Feeling unwell do not visit	Feeling unwell do not visit	Same – Development/update of patient leaflet
<u>Outpatient/diagnostic:</u> patients not to be accompanied unless care needs	Principles of visiting to be applied to outpatient areas – patient to be accompanied by somebody important to them. No patient should have to attend on their own unless it is their personal choice	Remain with current arrangement of visitors can accompany if patient is vulnerable or if they are a child due to space and maintain social distancing
Face Coverings must be worn	Face coverings must be worn	No change – reinforcement of comms and information that this patient facing
<u>Children and Young People who are dying</u> Compassionate approach – parents only	Siblings can attend Suspected positive parents/siblings, to facilitate moving to a separate location to enable visiting and appropriate PPE	Communication to the team and identification of a plan to facilitate good IPC practices and isolation of the patient
End of life (adult) compassionate approach	Relaxed approach based on need of the patient and relatives/carers	Individual risk assessments for patients who are dying Full explanation of risks to visitors and patients

		Visitors who are known positives need to be considered –would recommend individual approach , isolation and correct use of PPE.
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