

Frequently Asked Questions

Can children visit?

We will discuss on an individual basis the possibility of children visiting a parent. This will be managed on a case by case basis. Children must not be brought to the hospice before there has been a discussion and an agreed plan made with a member of the senior nursing team. Our family support service has a number of resources and information available to help families support any children at this time. Please speak to the nurse in charge for more information.

Can we bring food in to the Hospice?

Food can be brought into the Hospice if you are visiting face to face. At present we cannot store any food at the hospice apart from in exceptional circumstances following discussion with a member of the senior nursing team.

How do we manage laundry?

Patients do still require their own clothes for their hospice stay: night clothes and possibly loose comfortable clothing for daytime depending on their situation. Nursing staff are able to place used clothing into bags and pass to visitors and receive clean clothing at face to face visiting times.

Can these arrangements change?

We appreciate that these guidelines are very prescriptive. This is not our natural way of working but they have been created to enable precious visits whilst maintaining the safety of our patients, staff and volunteers as much as possible. Ward staff are not able to change these rules, please do not place them in a difficult position by requesting any amendments. If the patient's situation changes different visiting arrangements may be required which will be communicated at that time.

Any specific concerns about these guidelines, to be directed to the senior nursing team: Liz Taylor - Director of Clinical Services, Debbie Evans - Ward Manager and Infection Prevention and Control Lead, or Louise Saville King - Deputy Ward Manager via the main hospice number 01244 851 091

Thank you for your understanding and cooperation

Guidance for visiting Inpatients displaying symptoms or with a positive test for COVID -19 during the Coronavirus Pandemic

The Hospice is constantly reviewing its practice with regards to compassionate visiting arrangements whilst working within government guidance and considering patient, staff and visitor safety at all times. By following these visiting guidelines, you will be assisting us to maintain the ongoing safety of all of our patients, staff and volunteers whilst enabling our patients to have as much access to those important to them as possible. Managing visiting in such a way is contrary to our usual ways of working and we recognise the additional stress and anxiety this can cause, however this continues to be necessary in this current situation.

Contact details of all visitors will be required when booking visiting appointments to ensure that we are able to meet the requirements of the NHS test and trace reporting programme. All visitors are asked to follow a specific protocol which includes answering questions in relation to COVID-19 at each visit which is explained inside this leaflet. We recommend that people identified as vulnerable or extremely vulnerable do not visit but this decision is ultimately your own. All adult visitors are required to complete a twice weekly lateral flow test prior to visiting. The nurse in charge will explain how this will be managed prior to your first visit .

If visitors need to speak with medical or nursing staff this may require a separate appointment to be made.

If there is no designated space in the small car park please exit the grounds, turn right onto the road and then take the first right turn into the large car park behind the hospice. Once parked please walk back to the old building entrance through the hospice grounds. If you have mobility problems please speak to the reception staff who will be able to assist with organising safe parking in the small car park.

At any one time there may be three different groups of patients within the hospice with different visiting arrangements for some groups. The three groups are:

1. Those who have no signs or symptoms of COVID-19 and have had a recent negative test (low risk)
2. Those who have recently been admitted and are required to be nursed in isolation for a specified time and until we a confirmed negative COVID 19 test result (medium risk)
3. Those who are required to be nursed in isolation because they are experiencing symptoms of COVID-19 or have recently had a positive test (high risk)

Your loved one is currently being cared for in line with the criteria for **group 3** above due to their recent positive test result or the onset of symptoms which may be due to COVID -19. We work closely with the Cheshire and Wirral Partnership Trust Infection Prevention and Control Team to ensure we manage this group of patients as safely and as supportively as we can. In addition to the visitor requirements set out overleaf this means the following information also needs to be taken into account:

- **Up to 4 visitors are able to visit with the patient daily via a closed window appointment which must be confirmed with the ward, in advance, for agreed time periods.** When the patient has no visitors, we are able to keep the window open but when visitors are present we are required to close it to reduce the risk of infection to the visitors. When visiting at the window visitors must sign in and out at reception each time to ensure we know who is on the premises at any given time. This also enables the visitor to complete the visitor assessment with a member of nursing staff who will then gain the patients consent and prepare them for the visit.
- **For patients identified as significantly deteriorating or being in the last few days of their life** we are able to be more flexible regarding the visit. In this situation the patient may have 1 or 2 visitors from the same or different households at any one time. The length of the visit will be flexible; 1 named visitor may stay overnight in same room. How this works in practice will depend on a number of factors and will be agreed for each particular circumstance. Up to another 2 close family or friends at a separate time may also have a one off 1-hour visit whilst the patient remains in isolation.

Visitors must accept the risk to themselves and the ward must be notified and agree the planned visits in advance. Visitors must self-isolate in their own home when away from the hospice for 14 days from the first face to face visit with the patient. Visitors will be required to wear PPE, as set out below, when in direct contact with the patient.

All visitors to the Hospice will be asked at each visit:

- to confirm with nursing staff that they have no symptoms of COVID-19, have not been in contact with anyone with COVID-19 symptoms, have not been identified as needing self-isolate through track and trace or to quarantine due to recent travel abroad. We appreciate that symptoms can develop suddenly and ask any visitor who develops these symptoms after a visit to contact the ward as soon as possible as there may be implications for both patients and staff.
- to sign in and out at reception each time they arrive and leave.
- **to wear personal protective equipment (PPE) throughout the visit** - face mask, apron and gloves, provided by the hospice. You will be greeted by a member of the team to explain handwashing and donning and doffing of PPE on arrival and exit from the unit. Where visitors are unable to wear the PPE due to health conditions or a disability, nursing staff will discuss with the visitor what other Infection Prevention and Control measures are required.
- to effectively wash their hands on entering the unit as guided by nursing staff.
- to cover the mouth and nose with a bent elbow or tissue when coughing or sneezing; to dispose of the tissue after use in the nearest closed waste bin; and to wash your hands after having contact with respiratory secretions.
- to maintain a two-metre distance with patients, other visitors and staff in line with government social distancing guidance at all times.
- **to avoid using the hospice toilets unless absolutely necessary and, if required, to alert staff with the patient call bell to ensure adequate cleaning can be maintained.**
- to refrain from moving around the inpatient unit and staying within the patient's room at all times.