

VISITING POLICY

THIS POLICY HAS BEEN DEVELOPED TO PROVIDE A MANAGED AND CONSISTENT VISITING PATTERN FOR WARDS AND CLINICAL AREAS WITHIN THE TRUST

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SIGNATURE Deputy Nursing, Midwifery and AHP Director	SIGNATURE CHIEF EXECUTIVE	REVIEW DATE	
		July 2020	

TRUST POLICY

This Policy has general application throughout the undertaking of Lancashire Teaching Hospitals NHS Foundation Trust. It represents the governing principles outlined within the document and which are fully supported in every respect by the Board of Directors.

All members of staff are required to adhere to the principles involved as outlined within this document, together with any related procedures, which are enabled by this policy.

This Policy was produced in consultation with:

Julie Seed – Associate Director of Governance	Denise Morris – Dementia Lead
Nora Kerrigan – Matron	Wendy Mc Loughlin – Dementia Team
Anita Hore – Matron	Rachel Sansbury - Divisional Nurse Director
Catherine Silcock – Divisional Nurse Director	Michael Dudley - Divisional Nurse Director

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Lancashire Teaching Hospitals NHS Foundation Trust Impact Assessment Screening

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Policy Author: SARAH CULLEN

1.	Does the policy/strategy affect one group more or less favourably than another on the basis of:	Yes/No	Evidence in support of either positive or negative impacts, including references to research and national documents must be provided for the sections below
	1. Race	No	Click here to enter text.
	2. Disability	No	
	3. Gender	No	
	4. Sexual Orientation	No	
	5. Religion or Belief	No	
	6. Age	No	
	7. Marriage and Civil Partnership	No	
	8. Gender reassignment	No	
	9. Pregnancy and Maternity	No	
2.	Is there any evidence some groups will be affected differently?	No	Click here to enter text.
3.	If potential discrimination has been identified is this justifiable (you must explain why)?	NA	Click here to enter text.
4.	What methods of consultation have you used and with whom please describe?		Policy shared with carer representative, matrons and divisional nurse directors and dementia team.
5(a)	Is the impact identified likely to have a negative impact on the Policy/Strategy?	No	Choose an item.
5(b)	Can the impact be avoided?	NA.	Click here to enter text.
5(c)	Are there alternative ways of achieving the aims of the Policy/Strategy to remove the impact?	NA	Click here to enter text.
5(d)	Can measure be put in place to reduce the impact?	NA	Click here to enter text.
Comments: Click here to enter text.			Action to be taken (or not applicable) Click here to enter text.

If anyone reading this form identifies any potential discriminatory impact that has not been identified on this form, please contact the Policy Author named above, along with suggestions how the impact can be eliminated or reduced. Further advice can be sought from the Trust's Equality and Involvement Lead.

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1. SCOPE

This policy applies to all patients and visitors to Lancashire Teaching Hospitals NHS Foundation Trust, in all wards, departments and inpatient areas. It is to be implemented by all health and social care professionals, including temporary and agency staff that are employed by the Trust.

There will always be circumstances where patients will benefit from additional support from carers or significant others. Carers should be seen as partners in care and staff should always seek to understand the needs of the carer as part of the patients' holistic assessment.

This may be particularly relevant, although not limited to:

- Patients with a mental health, learning disability or other vulnerable groups.
- Young people between the ages of 16 – 25 who may be transitioning from children to adult services or using hospitals for the first time.
- Patients who receive care through a family member of carer and either one are particularly anxious to maintain more frequent contact.
- Patients who do not speak English as a first language and require extra support.

2. INTRODUCTION

Visitors play a crucial part in the care and recovery of patients. The Trust actively encourages visiting and the involvement of carers while patients are in hospital.

Visitors can help maintain patient morale, provide valuable information about the patient that helps to inform the planning and delivery of safe and effective care and treatment, and may actively participate in the delivery of care, for example assistance with meals, mobilising and activities that stimulate the patient in the clinical environment.

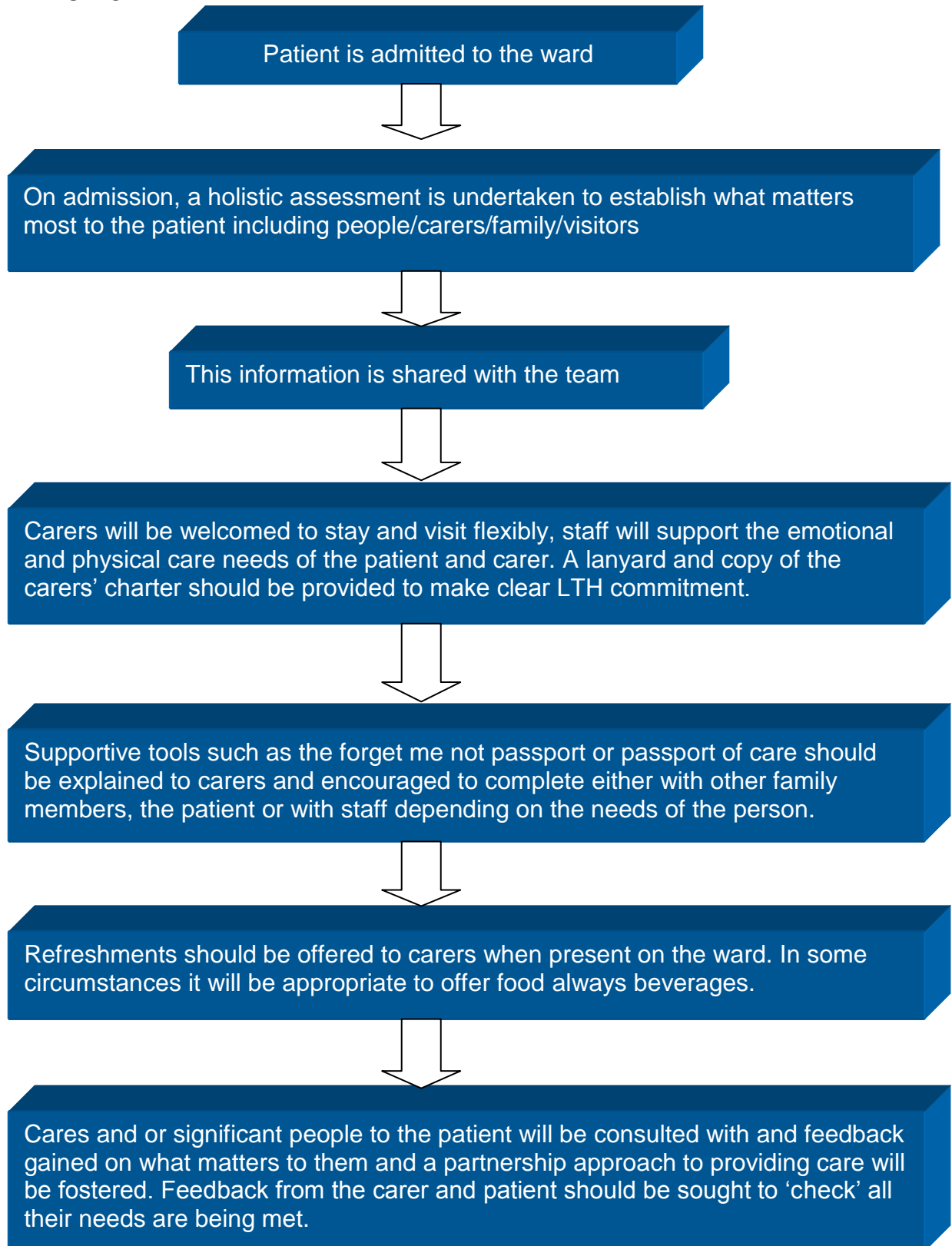
3. PURPOSE

This policy aims to balance the therapeutic effect of patients spending time with relatives, carers and friends with the patients' need for rest, the need to provide privacy, dignity and maintain confidentiality to patients, and the need for clinical staff to manage care safely and efficiently.

It has been developed to promote a culture that recognises carers needs in our hospitals and ensures a supportive, caring atmosphere for patients, carers, visitors and significant others at Lancashire Teaching Hospitals NHS Foundation Trust.

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4. FLOWCHART



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5. JOHN'S CAMPAIGN

Lancashire Teaching Hospitals NHS Foundation Trust has signed up to John's Campaign across all areas of the organisation.

Johns Campaign was founded by Nicci Gerrard and Julia Jones on November 30th 2014. Its catalyst was the death of Nicci's father, Dr John Gerrard, earlier in that month. John Gerrard was 86. He had been diagnosed with Alzheimer's in his mid-70s but had been living well until he was admitted to hospital earlier in the year for leg ulcer treatment. Family visiting was severely restricted during his five week stay and the effect was catastrophic. He entirely lost his ability to function and required 24 hour care for the rest of his life

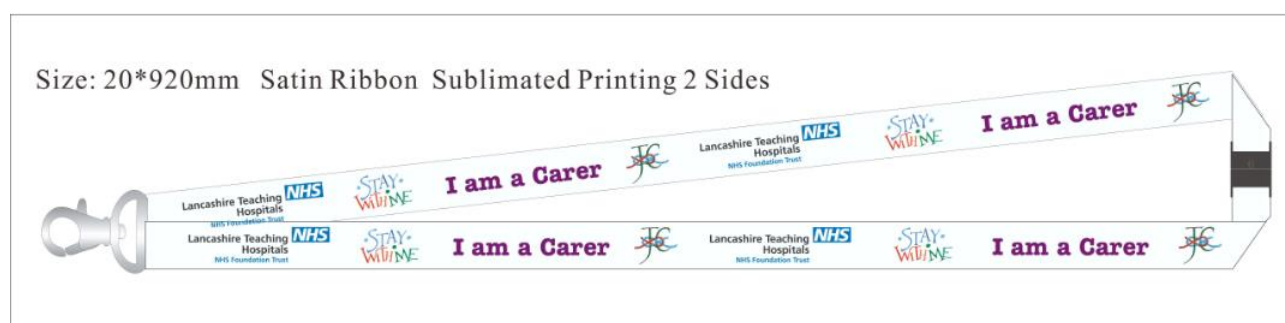
Introducing Johns campaign at LTH means patients' significant others will be welcomed to stay on the ward to support patients who are vulnerable to feel more secure and cared for in the hospital environment. This is not unique to patients with dementia. This applies to in and outpatient units including clinical investigations. Carer lanyards (see picture below) can be used to help carers be easily identified and feel part of the environment. It is important a balance is achieved with all patients' needs and privacy and dignity and, therefore, local arrangements should be made with carers so they understand any areas that are not appropriate to go to.

Carers should be offered hydration and snacks routinely when patients are being offered these. Meals can be accessed through the canteen, however, in some circumstances it will be appropriate to arrange a meal for the carer with the patient.

To ensure patients, visitors and carers receive consistent information through the organisation a standardised approach to the information displayed is as follows.

Picture 1: Carer Lanyard

These can be ordered through the LTH dementia lead nurse.



To ensure consistency of information, the carers poster is given in appendix 1.

6. FORGET ME NOT and PASSPORT OF CARE

The 'Forget Me Not' document and 'Passport of Care' are in place for patients who require additional support with activities of daily living or orientation to their environment. The Forget Me Not document is dementia specific. The Passport of Care can be used for any patient with additional specific needs. These documents are intended as a shared care approach to planning care involving relatives, carers or significant others. These documents should be used to understand more about how a patient's needs can be met in

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a holistic way. These should be stored at the end of the patients bed for easy access for staff and significant others.

7. VISITING TIMES

Normally visiting times take place each day as follows:

- Afternoons 2.30pm until 4pm.
- Evenings 6pm until 8pm.

Where visiting hours differ from the default times above, this information must be made available on the Trust website at <http://www.lancsteachinghospitals.nhs.uk/visiting-times>

Lancashire Teaching Hospitals NHS Foundation Trust provide a number of regional services, as such patients' significant others may be travelling a significant distance, this should be considered within the context of visiting and as much flexibility provided to support families and significant others, whilst facilitating the safe delivery of care.

Visiting hours vary in the following departments:

Maternity wards:

- Partners (or single other support person) may visit between 9am and 10pm.
- Other visitors are restricted to 3.30pm until 5pm and 7pm until 8pm.

Neonatal unit:

- Parents, guardians and siblings may visit at any time (although children should be supervised by an adult).
- Other adult visitors between 2pm and 4pm and 6pm and 7pm (maximum of 2 people by the cot side at any time, which includes parents so staggered visiting is recommended. No children other than siblings are able to visit).

Ward 8:

- Parents and guardians may visit at any time.
- Other visitors are restricted to 3.30pm until 5pm and 7pm until 8pm.

Critical Care unit:

- On admission to the unit visiting will be discussed with relatives. Level 3 patients' families and significant others are supported with open visiting.
- Level 2 (more stable) patients visitors should visit during afternoons from 2.30pm until 4pm and evenings 6pm until 8pm.
- A consistent approach to carers is adopted in the critical care units.

Visitor accommodation

Bowland house is available to visitors with patients on Critical care, neonatal unit, major trauma unit, neurosurgery and end of life patients. The operational policy for Bowland House can be found on the trust intranet and should be used to guide advise in this area.

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8. STANDARDS AND PRACTICE

- Visiting times will be clearly displayed in the ward area.
- A maximum of 3 visitors per patient is reasonable, however; there may be some circumstances where more can be supported. If larger numbers are visiting staff should consider side rooms or curtains to maintain the privacy of surrounding patients. Staff may limit the number of visitors depending on the clinical needs of patients on the ward. If impacting on the ability to provide safe care nursing staff may ask some visitors to leave.
- Children under the age of 13 should always be accompanied by an adult and be appropriately supervised at all times.
- Visitors including children, who have colds, stomach upsets or other infections should be advised not to visit.
- Visitors should be advised that babies and young children are more vulnerable to infection. If they are to visit contact should be restricted only to the patient and their direct family.
- The Trust promotes the use of protected meal times to minimise interruptions from staff. However, patient's mealtimes must be protected unless dining support is being provided by the carer/visitor. Staff should be aware of the privacy of other patients nearby in these circumstances and use curtains to maintain privacy so as not to discourage others from eating.
- In order to maintain confidentiality and protect privacy and dignity, it is acceptable to ask visitors to leave the ward during medical ward rounds. Decisions regarding this should be made on an individual basis and where possible with the involvement of the patient.
- Clergy of any faith or denomination should be accommodated at any time outside of mealtimes, unless the patient is unwell and requires pastoral support immediately.
- Visitors are not permitted to take photographs in the clinical area due to the risk of breaching confidentiality and disclosure of sensitive material into the public domain. Any exceptional circumstances should be discussed with the shift leader.

9. TELEPHONE ENQUIRIES FROM CARERS WHERE VISITING IS NOT POSSIBLE

Where next of kin, family members or carers are unable to visit and with the consent of the patient, a password may be agreed that will allow nursing staff to provide information by telephone. The password should be recorded in the care record and the arrangement made known to all staff. In addition, the scope and detail that can be shared should also be agreed with the patient and recorded in the care record.

Where this arrangement exists, it should only apply to one person who other significant others should use as a point of contact or liaison if they are also unable to visit.

10. ROLES AND RESPONSIBILITIES

10.1 Ward/department manager

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Responsible for ensuring implementation of this policy and for managing visiting in the interests of all patients in order to:

- Welcome visitors/carers to the department ensuring staff introduce themselves and make visitors feel welcome.
- Create a culture where carers are welcomed and actively encouraged to be partners in care provision where appropriate.
- Ask carers/visitors if they have any questions or would like to provide any feedback on their experience and respond to this with humility and openness.
- Ensure a balance is achieved between feeling supported by visitors/carers and gaining sufficient rest.
- Support staff to develop the confidence to work with carers/visitors as part of delivering care.
- Protect patients' meal-times.
- Ensure staff proactively encourage mealtime support from significant others for those patients who may benefit from this support.
- Enable visitors/carers to obtain appropriate information about the patient they are visiting, with the consent of the patient where applicable.
- Ensure comfortable facilities at the bedside are available for carers who stay for long periods of time, including blankets overnight.
- Proactively resolve local concerns in partnership with visitors/carers.
- Ensure PALS information is available for patients and visitors.

10.2 Nurse in charge

Responsible for ensuring that the following are observed and will provide advice in person or on the telephone to ensure that:

- Welcome visitors/carers to the department ensuring staff introduce themselves and make visitors feel welcome.
- Proactively encourage mealtime support from significant others for those patients who may benefit from this support.
- Ensure visitors can access alcohol hand gel or hand washing facilities and understand the need to do so.
- Ensure staff inform visitors of any important information regarding infection prevention or other measures in place in the department.
- Approach carers and check that they are comfortable, feel involved and offer support where necessary.
- Proactively resolve local concerns in partnership with visitors/carers.
- Ensure PALS information is available to patients and visitors/carers.
- In an emergency during visiting times visitors will be asked to leave as appropriate.

11. VISITOR COMMUNICATIONS

It is important staff understand that most circumstances relating to loved ones being in hospital evoke emotional responses. Whilst this is understandable and staff will always seek to comfort and reassure visitors, taking steps to deescalate any situations that are becoming volatile. Lancashire Teaching Hospitals has a zero tolerance approach towards

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aggressive or violent behaviour towards staff and is firmly of the view that all those who work in or provide services to the NHS have the right to do so without the fear of violence or abuse.

Staff should identify any situations where behaviour may escalate and discuss with the senior nurse and agree a plan to deescalate the situation, attempting to resolve the situation avoiding violent and aggressive behaviour.

The nurse in charge should refer to the Violence and Aggression Policy and Procedure if necessary if there are any concerns about the behaviour of visitors, and seek appropriate advice and support from security staff if necessary. This Trust will take the appropriate steps working in partnership with Lancashire Police to protect staff.

12. TRAINING

The introduction of this policy will be supported at departmental level by matrons and professional leads via the departmental managers. Communication to teams and discussion of the principles of this improved approach is essential to ensure our staff understand our approach to supporting visitors in Lancashire Teaching Hospitals.

13. MONITORING OF COMPLIANCE

The introduction of this policy and the principles of John's Campaign and What matters to me' is aimed at improving the experience of patients and significant others and therefore reducing the number of complaints.

14. EQUALITY IMPACT ASSESSMENT: THE EQUALITY ACT 2010

Lancashire Teaching Hospitals NHS Trust is committed to ensuring that the organisation plays its part in promoting a fairer society by addressing discrimination and providing equality for all.

Public bodies have a duty to consider the needs of all individuals in shaping policy, delivering services and in relation to our own employees. This is termed "Equality Duty" and is set out in Section 149 of The Equality Act 2010.

Prior to the development of this document and the processes of decision making involved, the author confirms that **due regard** has been given to ensure the document and its application has been developed to facilitate the following:

- **Eliminate unlawful discrimination**, harassment, victimisation and any other conduct prohibited by the Act.
- **Advance equality of opportunity** between people who share a protected characteristic and people who do not share it, and
- **Foster good relations** between people who share a protected characteristic and people who do not share it.


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Regard for the aims of the Equality Duty is a continuing duty and the Trust regularly reviews its position and approach in line with The Equality Act 2010.

The author of this document has given due regard to the Equality Duty in terms of this document, which is summarised in the Equality Impact Assessment overleaf.

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Appendix 1: Carers Charter Leaflet



Information for patients
and carers

Carers Charter

We want to know what
matters to you



@LancsHospitals

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We welcome the carers of our patients in our hospitals and on our wards

Lancashire Teaching Hospitals NHS Foundation Trust welcomes and values the important support that carers can provide for their loved ones. We recognise that you know the person best and want us to provide the most compassionate, kindest care possible. We are committed to working in partnership with you to understand how we best support our patients.

Carers are people who care for people. They may, but do not always hold the formal title of carer, but are an important person in the patient's life who offers physical, emotional or psychological support to patients with varied physical, psychological or communication needs.

By recognising the importance of you as a carer and the support you provide we will ensure that:

- We identify you as carer for the patient as soon as possible.
- You are valued and treated with respect by all of our staff.
- Your opinions are listened to.
- We will ask if you have had a carer's assessment as is your right under the Care Act 2014.
- We will provide advice and guidance about organisations that can carry out a carers assessment.
- Young carers are supported and the value of your role recognised.
- With the appropriate consent, we will provide information that is timely, appropriate and in an accessible format.
- We will listen, consult and involve you throughout the planning and care of the person you are caring for.
- We will involve you in discharge planning and provide information to support you and the patient following discharge regarding care, medication and any follow up treatment.
- We will ask 'What matters to you' and remember this.

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Contact details

If you are a carer, please talk to our staff about the person you care for, they want to work with you. If you have concerns please consider PALS if your concerns are not resolved.

Patient Advice Liaison Service (PALS) can be contacted on 01772 522 972.

Lancashire Teaching Hospitals NHS Foundation Trust supports



Lancashire Teaching Hospitals NHS Foundation Trust is not responsible for the content of external internet sites.

Please ask if you would like help in understanding this information. This information can be made available in large print and in other languages.

Lancashire Teaching Hospitals is a smoke-free site

On 31 May 2017 Lancashire Teaching Hospitals became a smoke-free organisation. From that date smoking is not permitted anywhere on any of our premises, either inside or outside the buildings. Our staff will ask you about your smoking status when you come to hospital and will offer you support and advice about stopping smoking including Nicotine Replacement Therapy to help manage your symptoms of withdrawal.

If you want to stop smoking you can also contact the Quit Squad Freephone 0800 328 6297.

Department: PALS
Division: Nursing
Production date: May 2017
Review date: May 2020



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Appendix 2 – Carers poster



NHS
Lancashire Teaching Hospitals
NHS Foundation Trust

Carers are welcome
We want to know what matters to you

If you are a carer, please talk to our staff about the person you care for, they want to work with you. If you have concerns please consider PALS if your concerns are not resolved.

Patient Advice Liaison Service (PALS) can be contacted on 01772 522 972 - also ask for a copy of our Carers Charter leaflet.

Lancashire Teaching Hospitals NHS Foundation Trust supports  **John's Campaign**

Excellent care with compassion

  @LancsHospitals

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