North Lincolnshire

Safeguarding Adults Learning Briefing: Visiting a person with an infection

January 2021

Purpose of this briefing

The purpose of this briefing is to explore care home visits, focusing on infection control measures that may be in place and what that means in terms of visiting a person.

The current Covid 19 pandemic is significantly impacting visits to care homes and therefore this briefing looks at ways people can stay in contact with loved ones during this time. It will also cover infection prevention and control measures and discusses how effective communication can ensure families are able to stay in touch.

It is vitally important that care home residents and their families are supported to set up and maintain contact with their loved ones.

Preventing infections in care homes and protecting staff and residents is a high priority. Care homes face many challenges in safeguarding their residents from infection, and the particular risks of outbreaks of infection in care homes.

The current climate requires information/advice to be changed on a weekly if not daily basis, so please refer to the governments Covid information at www.gov.uk .

Policies and legislation

During the current COVID-19 outbreak information on [visiting arrangements in care homes](#) is being updated regularly to reflect necessary changes to visiting guidance.

Care homes must carry out individual dynamic risk assessments which take into account the significant vulnerability of residents in most care homes, and they must also ensure compliance with obligations under the [Equality Act 2010](#) and the [Human Rights Act 1998](#). Care providers must take a person-centred approach, taking account of individual needs and capabilities.

Care homes must have visiting policies which should be made available and/or communicated to residents and families. [The Care Provider Alliance](#) have published a [protocol for enabling visiting](#) as a resource to support care home providers.

Providers must consider the rights of residents who may lack mental capacity to make particular decisions and, where appropriate, their advocates or those with lasting power of attorney/deputyship should be consulted. For example, some people living with dementia and learning disabilities may lack the capacity to decide whether or not to consent to a visiting policy. Care homes must consider the legal, decision-making framework offered by the Mental Capacity Act (2005), individually for each person.

The government published advice [on caring for residents without relevant mental capacity](#), and on the [MCA and Deprivation of Liberty Safeguards (DoLS)](#), specifically for during the current pandemic.

Communication

Staff can do a great deal to allay fears and promote good understanding, allowing informed decisions by communicating effectively, without breaching confidentiality. Residents and their families can, and do worry about infections, including those caused by MRSA and *C.* difficile. They will need support to understand the risks of infection and the precautions they need to take to prevent transmission. The information given to families needs to be clear, accurate and documented in line with infection prevention and control measures, for example:

- easy read or simple information for residents and visitors should be available and any questions that may arise from the information answered in a timely manner
- ensure all staff understand the actions they need to take and advice they need to give visitors
- display notices which describe precautions needed
- talk to residents and family about how they can help themselves and support staff in preventing infection (consider consent).

Include multi-disciplinary support staff in team meetings during outbreaks, inform general practitioners on discharge or transfer if their resident has an infection or an infectious condition and ensure all documentation is completed.

Communication

Care providers may wish to consider developing a short individual visiting plan for each resident tailored to their visiting wishes and preferences. This would take account of their individual needs and capabilities and the circumstances of the family/friends who the resident would like to be able to visit them.

Visitors must follow any guidance, procedures or protocols put in place by the care provider to ensure compliance with infection prevention control.

If there is a restriction to visitors in place, alternative ways of communicating between residents and their families and friends should be discussed and offered. The care home should also provide regular updates to residents' loved ones on their mental and physical health, how they are coping and identify any additional ways they might be better supported, including any cultural or religious needs.

Maintaining contact

Below are some suggestions of how care home staff can support communication between residents and their families and friends:

- A Facebook group. You should set it to private so that you decide who can access it. You could post photos and updates as to activities and other goings on within the care home. You can also view Facebook accounts of your residents' families/friends and share these with residents.

- Video calls. There are many applications such as Skype, WhatsApp, FaceTime, etc that can be used on a smart phone, tablet device or laptop. This can facilitate a 2-way (or group) video call so that both parties can see and talk to each other. Some residents will need more help than others with this. You could schedule in a regular time for this to happen and build it into care plans.

- Telephone calls. This could be on the landline or done through a mobile phone. Some people might not want to be on video. A telephone call will allow conversations or at least the sound of a familiar voice to be heard. As above, a telephone call could be scheduled into care plans to happen regularly.

- A newsletter. You could compile a regular newsletter, perhaps weekly. This could be emailed/posted to family and friends to include photos and information about activities and what has been going on in the care home.

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- Twitter. Like Facebook, it is advised that this be set to private. You can share photos and updates from the care home. You could also 'follow' residents' family/friends and share their news with residents. An example of a game of 'Human Hungry Hippos' at a care home is shown on Twitter here.

- Post. Some residents may be able to write a letter or make a card, draw a picture, etc and these can be posted to family and friends. Similarly, you can encourage residents' family/ friends to send letters and cards. There may be children in the family who could draw pictures and send them to residents. This could make a lovely display in bedrooms or lounge areas

- This isn't strictly speaking a form of family/friend contact, but you may have some residents without family or friends. You could contact local primary schools to invite them to send you cheerful pictures from their children to be shared with residents.

It is essential that care homes put in place methods of maintaining contact between residents and their family/friends. Care home managers will need to consider their own resources and, of course, ensure General Data Protection Regulations and consent requirements are in place. Consideration also needs to be given to the most appropriate communication for the resident, for example some may get upset or confused by a video call. **It is important to liaise with families when determining how contact can be maintained**.

Infection prevention and control

[Standard infection control precautions](#) underpin routine best practice, protecting both staff, residents and visitors from infection. By applying standard precautions at all times and to all residents, best practice becomes embedded as a core element of professional practice and the risks of infection are minimised. It is vital to remember that not everybody who carries harmful micro-organisms will be ill or show any symptoms, so you must work in ways that prevent infection at all times. Standard precautions are the actions that should be taken in EVERY situation to reduce the risk of infection.

These include:

- Good hand hygiene
- Safe disposal of waste
- Safe management of laundry
- Correct use of Personal Protective Equipment (PPE)

In the workplace it may be necessary to take additional measures when supporting people who are known to be carrying some harmful microorganisms to protect others from contamination. This is particularly important if the pathogens travel through air.

Infection prevention and control continued

The Royal College of Nursing and the Infection Prevention Society (IPS) have published an [infection prevention and control toolkit](), aimed at reducing infections and managing the risks associated with antimicrobial resistance. The toolkit highlights the importance of sepsis and its two main causes – pneumonia and urinary tract infections, estimated to be responsible for a third of all health care associated infections, and a leading cause of ill health outside of hospitals.

The toolkit is the first step towards reducing two serious burdens of infection in England, combatting antibiotic resistance and, most importantly, improving public health and patient care. The toolkit is supported by NHS England.

All local hospitals and community nurse teams have infection prevention and control specialists who can support and advise. Currently there have been Nurse Led support teams working closely with all local care homes regarding Covid 19 and Infection Prevention and Control.

References

NHS England and NHS Improvement (March 2019) Standard infection control precautions: national hand hygiene and personal protective equipment policy

Public Health England (September 2017) Infection Prevention and Control: An Outbreak Pack for Care Homes "The Care Home Pack"

Healthcare-associated infections: prevention and control in primary and community care (NICE guideline)

Infection prevention and control (NICE quality standard)

Code of practice on the prevention and control of infections (Department of Health)

Care homes: infection prevention and control - an information resource (Department of Health/Public Health England)

Infection control: break the chain (YouTube) (University Hospitals, Birmingham NHS Foundation Trust)

Residential adult social care: information for providers (Care Quality Commission)

Essential practice for infection prevention and control (Royal College of Nursing)

COVID-19 Infection, Prevention and Control

http://www.careengland.org.uk/care-providers-alliance-cpa

https://careprovideralliance.org.uk/business-continuity-infection-control