

General guidance for people visiting patients who are approaching the end of their life in hospital during the COVID 19 pandemic

When visiting patients who are approaching the end of their life in hospital during the COVID-19 pandemic the following steps will be taken:

1. Communicate with patients and families to help patients and families make the decision to visit or stay at home. The use of technology will be encouraged to help maintain contact.
2. Visitors will be permitted only after discussion with the ward manager/nurse in charge about the risks and how these are mitigated. The length of the visit will be agreed with the ward manager/nurse in charge.
3. The number of visitors will be restricted to one individual per patient.
4. Visitors will follow the infection prevention and control requirements, including handwashing and appropriate PPE.
5. In order to minimise contact with other people and meet the requirements for social distancing:
 - Visitors will be asked to come directly to the ward and not to visit other areas in the Trust
 - Visitors will be advised not to have contact with other patients on the ward

Frequently Asked Questions

What does 'approaching end of life' mean?

For the purpose of this guidance, 'approaching end of life' means patients who have been assessed as likely to die within a few days.

Does this guidance apply to visitors of patients at end of life who are positive for COVID 19 or all patients?

This guidance should be applied for visitors to all patients regardless of their COVID 19 status.

The guidance says 1 visitor. Does this mean just 1 relative can ever visit or one at a time?

It is recommended that all attendances from visitors are reviewed by the specialty ward team and that there is a local assessment based on the individual family's needs. This needs to be agreed and confirmed with the family. Minimising the total number of people coming onto the hospital site at any one time and the total number that staff will be exposed to is important.

It is advised that only 2 visitors are on the hospital site at any one time and that only one member of the family is on the ward at any one time. Consideration should be given to elderly visitors or those with special needs who may require the support of another family member. In exceptional circumstances, this may lead to staff agreeing to 2 visitors at the same time.

The total number of relatives that attend the ward in rotation should be agreed in advance and advice is to limit these to a maximum 'pool' of 4 to reduce staff exposure to a wider group of people.

How long can visitors stay on the ward?

This needs to be discussed and agreed with the ward team. When patients are close to the end of their life, a visitor should be permitted to remain with the patient and this can be rotated through the restricted number of visitors as described above.

What PPE should be given to visitors?

Ward teams must ensure that the risks of visiting are clearly explained to visitors including the risks to staff of having additional people on the ward. Advice on hand washing and facilities for this should be provided. Visitors should be advised to wear an apron, gloves and mask if the patient is on an open ward. If they are in a single side room with minimal contact from staff this advice can be adjusted if the patient does not have suspected or confirmed COVID 19.

Visitors of patients with COVID 19 should also be advised to self-isolate at home during the period of visiting and for 14 days following the last contact as per PHE guidance.

What do we do if the visitor has, or has recently had, symptoms of COVID 19?

Although this will be very difficult, visitors who are displaying symptoms of COVID 19 should not attend the ward. If the visitor is >7 days since symptoms started and has not had a temperature for > 48 hours they can be allowed to visit but should follow the PPE guidance as above.

Are the chaplaincy team included in the numbers of visitors allowed?

No, the chaplaincy team are Trust employees and should not have any restrictions to their visits. They are aware of precautions required and the need to only attend ward areas when essential.

Can community faith leaders visit the patient?

Community faith leaders should not be attending the ward to visit patients. Where there is a special request from family members there should be a discussion with the Trust's chaplaincy team to see if alternative arrangements can be provided.

What do we do if visitors refuse to comply with the agreed plan?

Where visitors refuse to adhere to this guidance and the agreed plan, staff should seek support from their Matron or Head of Nursing (or CSM out of hours). Discussions should be had with visitors about the risk to staff and other patients of non-compliance. Staff should ensure they have listened to the family and that local resolution/negotiation has been attempted. A warning of the withdrawal of any visiting should be made if non-compliance continues with the potential for security being asked to remove visitors from the Trust.

Are there any other steps we can put in place to support relatives at this difficult time?

Please consider making a clear plan to provide regular updates on the patient's condition via phone for relatives who are unable to attend the ward. Families should be asked to set up their own cascade system so that only 1 call from the ward is required and the possibility of set times for these calls could be agreed in advance. Relatives may appreciate talking to patients via speaker phone and if the patient has their own mobile device consider whatsapp or Skype if this facility is available.

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