

# **COVID-19 Visiting Guidance For Healthcare Facilities 04/12/2020**

**HSE Antimicrobial Resistance and Infection Control (AMRIC) Team**

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# **What we will discuss today**

**COVID-19 Guidance on visits to Long Term Residential Care Facilities (LTRCFs)**

**V1.4 24.11.2020**

**For Implementation from 07.12.2020**

**Compassion and visiting**

**Updated Visiting Guidance discussion**

**Queries received**

**Chatbox**

# Measuring the risk that a visitor will introduce the virus?



- Yes- there is always a risk during this scale of pandemic that someone will introduce COVID-19 virus
- So why do we do it ?
- Because there is also a major risk of harm other than infection spread if people don't have visitors

# Compassion is a lot more than “end of life” which is of course important



Circumstances in which a resident is significantly distressed or disturbed and although unable to express the desire for a visit there is reason to believe that a visit from a significant person may relieve distress

When there is an exceptionally important life event for the resident (for example death of a spouse or birthday)

When the visitor may not have another opportunity to visit for many months or years or never (for example because they are leaving the country or are themselves approaching end of life)

Increased visiting is recommended by their doctor as a non-pharmacological therapeutic alternative to an increased dose of an existing agent or introduction of a new anxiolytic or sedative agent



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# Compassion is a lot more than “end of life” which is of course important

A resident expresses a strong sense of need to see someone whether for personal reasons, to make financial or other arrangements or to advocate on their behalf

A person nominated by the resident expresses concern that a prolonged absence is causing upset or harm to a resident

Other circumstances in which the judgement of the medical or nursing staff or social care worker caring for the resident is that a visit is important for the person’s health or sense of well-being

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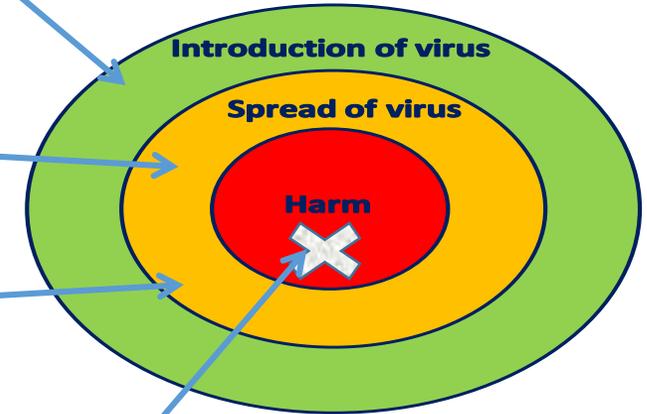
Other circumstances for the person’s health or sense of well-being

# Managing outbreaks have identified a number of themes

Introduction usually staff or by patients (usually people with un-recognised COVID-19)

COVID-19 spreads rapidly once introduced

Involves residents and staff



**However**

WHO July 9<sup>th</sup> (Scientific brief ) found no evidence of hospital transmission when contact and droplet precautions were appropriately used is very uncommon

# Key Points From The Guidance



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- **The challenge for service providers**
- **Communication**
- **Definitions – who is a visitor and who is not?**
  - essential service provider
  - important service provider
  - accompanying person



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## Visitors?

Visitors include people, typically family members or friends, who come to the facility for a social visit

It is important that visitors are clear that they must accept personal responsibility with respect to the risk that they may inadvertently be exposed to infection during the visit and that their safety depends in a large measure on their behaviour during the visit

Particularly in the context of an outbreak a signed acceptance of personal responsibility may be appropriate

**The term visitor does not include a parent, guardian or carer accompanying a child or a person with a disability for whom the presence of this accompanying person is essential to support care**



## Not visitors - Essential Service Providers (ESPs)

ESPs provide professional services including healthcare, legal, financial and regulatory Key examples include :

- Those who come from other sites to provide healthcare services such as medical, nursing, dental, physiotherapy, occupational therapy or podiatry services
- Legal services, chaplaincy services, advocacy services, or inspection of the hospital for monitoring or regulatory purposes

## Not visitors –Important Service Providers (ISPs)

ISPs provide services that are important to peoples sense of self and wellbeing but that are not strictly necessary

Examples of ISPs include those who provide personal care (for example hairdressers)

A facility should, where possible, have a list of important service providers with whom there is an established relationship and clarity around infection prevention and control requirements

# Window and outdoor visiting



- Note the restrictions is intended to apply to **in-door visiting**
- **“Window visiting” is essentially always OK from an IPC perspective**

where a person stands outside and speaks to a person at safe distance through an open window or by telephone is acceptable at any Framework Level and during outbreaks

- **Outdoor visiting (where possible) is essentially always OK from an IPC perspective**
- where safe distance can be maintained at all times it is appropriate for the patient, it is arranged in advance and there are suitable facilities and capacity to accommodate and support the visit

- If suspension of “window visiting” and outdoor visiting are considered, this should be in the context of a **documented risk assessment**



# Government framework that we apply for visiting



Framework Level	Visiting Policy*
Level 1	Open with protective measures
Level 2	Open with enhanced protective measures
Levels 3,4 and 5	Suspended other than in critical and compassionate circumstances*

\*Note this is intended to apply to indoor visiting. “Window visiting” where a person stands outside and speaks to a person at safe distance through an open window or by telephone is acceptable at any Framework Level

# Framework Level 1 – protective measures



- 2 visits with up to 2 people each visit (subject to capacity)
- Check for symptoms
- Check if they are a contact
- Check if they are currently required to restrict movement (travel related)
- Hand hygiene
- Distance
- Mask

# Framework Level 2 – protective measures



- 2 visits with one person for each visit (subject to capacity)
- Check for symptoms
- Check if they are a contact
- Check if they are currently required to restrict movement (travel related)
- Hand hygiene
- Distance
- Mask

# Framework Level 3,4 and 5 suspended



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But

- Critical and compassionate grounds includes up to 1 visit by one person per week at levels 3 and 4
- 1 visit by one person every two weeks at level 5
- And other compassionate reasons not just end of life
- At level 5 1 visit every week by 1 person may be appropriate in certain disability services based on risk assessment



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# Home for Christmas (or other religious or cultural celebration)



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- Guideline promotes facilitation at levels 1 and 2
- It does not look likely that level 1 or 2 will be in place for Christmas
- Level 3 and above does not recommend visits to private home
- (Constraint - consistency with the Five Level Framework)
- 1 person for 1 hour once per week under very controlled conditions week ending 18 December is not consistent with extended visit with multiple people in uncontrolled conditions week ending December 25th

# **This is not not the Grinch stealing Christmas but the virus will not take a break for Christmas**



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But a guideline is a guideline – facilitation of a planned visit to a private house at levels 3 or above may be appropriate if it is what the residents wants and the person in charge is satisfied that the risk to other residents is manageable

**This is a difficult balance the wishes of one or more residents to visit and the safety of everyone else**



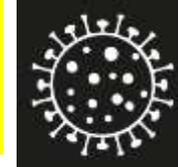
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## Scenarios:

Listen to the webinar recording on [www.hpsc.ie](http://www.hpsc.ie) to hear the further scenarios regarding visiting explained based on queries received





**Q. Mary requests to see a solicitor to sort out some legal arrangements.  
Can this be arranged under current level 3 restrictions?**

**A. Yes : Important service providers which include solicitors may attend  
in person to assist someone with legal arrangements with preplanning  
in line with Public Health measures**





**Q. Helen has requested a hair appointment for Christmas  
Can the hairdresser come to the residential facility ???**

**A. Hairdressers are important service providers and may visit in level 3 with public health measures in place to support IPC practice. During the early stages of an emerging outbreak situation visits by important service providers should be ceased until the outbreak has been brought under control and a local risk assessment completed**





**Q. Can we accept gifts and favourite home cooked food from family and friends for our residents??**

**A. No reason to justify prohibiting any of these items on infection prevention and control grounds**



# Queries on items brought in from home to residential care facilities



Rules we have heard about :

“All goods for residents must be ordered from a specific local corner shop only for delivery”

”No homemade produce can be accepted”

“Resident not permitted to bring in duvets/sheets/blankets etc that were bought new for that resident”

Let’s think about the risk assessment (and the person)

What is the risk we are worried about ?

How significant is that in proportion to the overall risk ?

What is the impact of the rules on the person ?



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# Queries on items brought in from home to residential care facilities



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Preventing people getting stuff from home is not justified on IPC grounds,

This measure could no be expected to have any material impact on lowering risk to residents or staff

**The vast majority of the risk relates to close face to face contact with a person who have COVID-19 - everything else is very small**

**Lets not make people unhappy over largely theoretical risks**



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## Practical guidance points on items brought in from home

Requesting family to leave items to be given to residents is reasonable

The items do not need to be disinfected

There is no real need to do anything with the items if they are clean and dry

If there is a level of concern the item could be left for a few hours or overnight before given to the resident or if the item is water proof could be wiped with a detergent wipe or solution.

Leaving items for 72 hours was promoted to allow virus to die off and we do recommend this for items of PPE worn in the care of people **with COVID-19 if there is no clinical waste stream available**

# Disability Service Queries for discussion



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Il there be any guidance issued from the HSE and documents updated in respect of clients returning home for Christmas and returning to Centres ?

Yes- these are being updated and will include consideration of the queries raised today



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# Webinar Recording and Slide set



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Webinar slide set and audio recording is available and may be accessed on [www.hpsc.ie](http://www.hpsc.ie) . The recording provides over one hour discussion on the key points from updated visiting guidance both and in-depth discussion on queries received regarding visiting guidance for residential care facilities

**Thank you**



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Thank you to Nursing Homes Ireland for sharing some of the positive experiences with residents, families and communities and thank you to everyone who made all positive connections happen



**Lavalley National School** has worked with the care team at the nursing homes to set up an intergenerational project involving the sharing of experiences between nursing home residents and local school children.



**Sonas Riverview, Co Mayo:** 150 people from the Ballina Community participated in a drive-by parade to celebrate residents. This was the focus for NHI's recent Caring Together Campaign



**Ferbane Care Centre, Co Offaly:** Margaret Murphy's very special day: her 100<sup>th</sup> birthday! Ensuring to stay compliant with social distancing measures, the team brought family and staff together for a very colourful and special celebration in the nursing home gardens



**Terenure Nursing Home, Co Dublin:** Every resident was the kind recipient of a flower after the community came together to express their solidarity with residents.

# Online resources and links - preparedness



[www.hpsc.ie](http://www.hpsc.ie) is the central hub for nationally approved infection control guidance relating to COVID19. It contains a wealth of infection control guidance and resources for caring for people in their own home. You should familiarise yourself with the relevant guidance.

All guidance has been approved by the COVID19 National Public Health Emergency Team (Expert Advisory Group) or the HSE Health Protection and Surveillance Centre.

### **The critical guidance for all staff delivering care in a person's home is:**

COVID-19 Infection Prevention and Control [Guidance](#) for Health and Social Care Workers who Visit Homes to Deliver Healthcare



Online training programmes are available on [www.hseland.ie](http://www.hseland.ie) This resource is accessible to any service public or private once they have registered online.

The key infection control resources on this site include videos to demonstrate:

- How to perform hand hygiene using soap and water
- How to perform hand hygiene using alcohol based rub
- Breaking the chain of infection – an online infection control course (with a knowledge test)
- How to put on and take off PPE in a community setting (with a knowledge test)
- How to put on and take off PPE in an acute hospital setting (with a knowledge test)



There are additional videos on HPSC relating to putting on and taking off the new overall type PPE and masks with loops. Also included are scenarios for managing patients in a GP clinic area that are useful for other settings

<https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/videoresources/>

Webinars: there are a number of education webinars on infection control and reducing the risk of transmission of COVID19 in health services.

<https://bit.ly/34YccbT>

There are additional videos on HPSC relating to putting on and taking off the new coverall type PPE and masks with loops. Also included are scenarios for managing patients in a GP clinic area that are useful for primary care settings

<https://www.hpsc.ie/az/respiratory/coronavirus/novelcoronavirus/videoresources/>





There is a considerable amount of online information for clients, families, the public. All of this information is available on the HSE website and the link is listed below.

There are many pieces of translated materials, videos in Irish sign language and specific materials for patients who have intellectual disability or who have dementia.

Please familiarise yourself with the range of materials accessible here:

<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/>

Some samples of online posters available for download – use this link

<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/>



Coronavirus  
**COVID-19**

**Visitors**

**PROTECT YOUR LOVED ONES**

Don't visit if you feel unwell with a cough, breathing difficulties, fever or shortness of breath.

			
<b>Wash</b> your hands well and often to avoid contamination	<b>Cover</b> your mouth and nose with a tissue or sleeve when coughing or sneezing and use used tissue	<b>Avoid</b> touching eyes, nose, or mouth with unwashed hands	<b>Clean</b> and disinfect frequently touched objects and surfaces

For more information visit [hse.ie/coronavirus](https://www.hse.ie/coronavirus)

**RESIST**



Cosain tú féin agus daoine eile ó thinneas

**Nigh do lámha**

- Tar éis casacht nó sraoth
- Nuair a bhíonn tú ag tabhairt aire do dhuine tinn
- Roinn agus tar éis bia a ullmhú
- Sula n-itheann tú
- Tar éis an leithreas
- Nuair atá do lámha salach
- Tar éis lámh a leagain ar ghearradh, spualc nó créacht oscailte
- Is féidir cuimilteoir alcóil lámhe a úsáid mura bhfuil cuma shalach ar na lámha

[www.hse.ie/handhygiene](https://www.hse.ie/handhygiene)

**RESIST**



**COVER YOUR COUGH AND SNEEZE**

STOP THE SPREAD OF GERMS THAT MAKE PEOPLE SICK

When you cough or sneeze cover your nose and mouth with a tissue

**OR** Cough or sneeze into your elbow, not your hands.

Throw away your tissue!

Clean your hands after coughing or sneezing.

**THANKS!**

**RESIST**