

Coronavirus (covid-19) Information for Visitors

12th March 2020

Following Public Health England Guidance on 10th March 2020 ALL patients presenting to hospital with acute respiratory failure are now treated as possible coronavirus cases and all of these patients will be tested to see if they are carrying the virus.

At present, this means that there is large number of patients within hospital and especially within critical care that have been tested as routine for Covid- 19.

Due to this, we are following the latest guidance from Public Health England last updated 6th March 2020 regarding advice for visiting within critical care.

For Patients with Suspected/ Confirmed Covid-19

This revised guidance outlines infection prevention and control advice for inpatient management for healthcare providers caring for possible and confirmed cases of COVID-19 in secondary care

<https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/wuhan-novel-coronavirus-wn-cov-infection-prevention-and-control-guidance#visitors>

In this document, regarding visitors, it advises the following for suspected cases of Covid-19:

- Visitors should be restricted to essential visitors only, such as parents or carers of a paediatric patient or an affected patient's main carer. We will ask 1 visitor at any time. This includes patients on end of life care
- Visiting should also be restricted to those assessed as able to wear PPE
- Visitors should be permitted only after completion of a local risk assessment which includes safeguarding criteria as well as the infection risks.
- Visitors should be advised not to go to any other departments or locations within the hospital or healthcare facility after visiting.

The risk assessment must assess the risk of onward infection from the visitor to healthcare staff, or from the patient to the visitors. The risk assessment should include whether it would be feasible for the visitor to learn the correct usage of PPE (donning and doffing under supervision) and should determine whether a visitor, even if asymptomatic, may themselves be a potential infection risk when entering or exiting the unit. It must be clear, documented and reviewed. **If correct use of PPE cannot be established then the visitor must not proceed in visiting.**

Continued over

Visitor information

Continued - Coronavirus (covid-19) Information for Visitors

Below is the guidance suggested by PHE for staff PPE guidance which would also be needed for visitors.

Patient type	Guidance For Staff
For symptomatic, unconfirmed in-patients meeting the COVID-19 case definition	PPE is fluid resistant surgical mask, gloves, apron and eye protection if risk of splashing into the eyes.
For confirmed cases of COVID-19	Full PPE ensemble: FFP3 respirator, disposable eye protection, preferably visor, long sleeved disposable gown and gloves.
For possible and confirmed cases of COVID-19 requiring an aerosol generating procedure	Full PPE ensemble : FFP3 respirator, disposable eye protection, preferably visor, long sleeved disposable gown and gloves.

It is not possible to fit test visitors with an FFP3 mask and we should advise that relatives will not be allowed to visit suspected cases if an aerosol generating procedure is being carried out.

5.4 Aerosol generating procedures (AGP)

The agreed list of AGP is:

- intubation, extubation and related procedures such as manual ventilation and open suctioning
- tracheotomy/tracheostomy procedures (insertion/open suctioning/removal)
- bronchoscopy
- surgery and post-mortem procedures involving high-speed devices
- some dental procedures (such as high-speed drilling)
- non-invasive ventilation (NIV) such as Bi-level Positive Airway Pressure (BiPAP) and Continuous Positive Airway Pressure ventilation (CPAP)
- High-Frequency Oscillating Ventilation (HFOV)
- High Flow Nasal Oxygen (HFNO), also called High Flow Nasal Cannula
- induction of sputum

Covid-19 Confirmed Cases

As per PHE guidance, only essential visitors, for example a main carer will be allowed to visit. This does not include partners, or children. This means a carer essential to the well-being of the patient. This also includes patients on end of life care

For Non- suspected/ Negative Covid-19 Patients

At present there is no PHE guidance on visiting other patients. Due to potential increase in suspected cases, it would seem sensible to ask visiting to be kept to a minimum number of 1 relative per patient at any time and for all relatives to adhere with strict hand hygiene and aprons. All relatives will be asked to maintain a distance of 2 metres away from other patients. This will need to be revisited if further guidance

Visitor waiting room

It is the responsibility of the nurse in charge for each shift to check the cleanliness of all the waiting rooms and relatives room within critical care and to ensure availability of hand gel within these areas.