



To: Residential and Nursing Services Phone: 01772 537065

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Your ref:

Our ref: SK/amp

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## Dear Provider

We are writing to provide you with further local advice concerning the lateral flow tests following the Government announcement of the rollout of Lateral Flow Testing for care home visitors and the publication of <u>Visiting care homes during COVID-19 - GOV.UK</u> (www.gov.uk) on 2/12/2020.

We would urge you to read the full guidance however we would like to draw your attention to key issues to enable safe visiting and minimise the risk of ongoing transmission.

This guidance does not impact on the previous LRF visiting policy and guidance advising that safe visiting is supported by the LRF, with or without a Lateral Flow Test being performed. A Lateral Flow Test is one of a range of tools that may be helpful to inform an individualised person-centred risk assessment.

- Our local guidance is to have at least two negative tests, within 5 or less than 5 days interval between them, and the most recent test being on the day of visit.
- If a visitor has a negative test, is wearing appropriate PPE, and following other
  infection control measures then it may be possible for visitors to have physical
  contact with their loved one, such as providing personal care, holding hands
  and a hug, although contact should be limited to reduce the risk of
  transmission which will generally be increased by very close contact.
- If the PPE is inadequate or fails due to poor compliance, supervision, training, support of the visitor there is a risk of transmission and serious complications.
- Visitors should be supported to ensure that the appropriate PPE is always worn and used correctly, and they follow good hand hygiene. They should follow the <u>guidance on how to work safely in domiciliary care in England[footnote 1]</u> to identify the PPE required for their visiting situation (e.g. disposable gloves / apron / type IIR mask). Care homes are being provided with PPE to meet these requirement.
- Visitors should be reminded and provided facilities to wash their hands for 20 seconds or use hand sanitiser on entering and leaving the home, and to catch coughs and sneezes in tissues and clean their hands after disposal of the tissues.
- Visitors should have no contact with other residents and minimal contact with care home staff (less than 15 minutes/2 metres). Where needed, conversations with staff can be arranged over the phone following an in-person visit.
- All visitors should be asked if they have symptoms of acute respiratory infection e.g. cough, difficulty in breathing, and/or high temperature, before entering. No one who is currently experiencing, or first experienced, coronavirus symptoms in the last 10 days, should be allowed to enter the premises, nor anyone who is a household



- contact of a case or who has been advised to self-isolate by NHS Test and Trace, or who is in a relevant quarantine period following return from travel.
- Visitor numbers should be limited to a maximum of 2 constant visitors wherever possible. This, for example, means the same family member visiting each time to limit the number of different individuals coming into contact.
- Care home managers have discretion to set up their own testing areas and ensure there is enough space to allow visitors to maintain social distancing before, during and after the test, including a waiting area and a one-way system.
- Care home managers should communicate to visitors the purpose of testing that it
  does not completely remove the risk of infection in relation to visiting. It is important
  that care homes are clear to visitors about the expectations placed upon visitors
  participating in tested visiting (i.e., in respect of PPE use, social distancing, hand
  hygiene, any physical contact, actions in the event of a positive test).
- These expectations include the requirement for a visitor who tests positive to immediately self-isolate and complete a confirmatory PCR test which they should be accessing via national booking system online. If the confirmatory PCR comes back positive, their household must also self-isolate and contacts may also need to self-isolate in line with current government guidance. Care homes should obtain consent from visitors prior to participating in testing.
- In the event of an outbreak in a care home, the home should immediately stop visiting (except in exceptional circumstances such as end of life) to protect vulnerable residents, staff and visitors. There may be local policy and outbreak management arrangements, which will be important to follow. These restrictions should continue until the outbreak is confirmed as over. During the recovery phase (days 14 28) of the outbreak the home should do a risk assessment to assess their ability to manage safe visiting using visiting pods and/or PPE. At that point visiting may resume with the usual infection prevention and control measures and any enhancements required due to any risks identified following the recent outbreak.

Yours sincerely

DASS + DPH from Bpl, BwD & LCC