



**United Lincolnshire  
Hospitals**  
NHS Trust



# Codesigning ULHT Visiting & Care Partners Policies

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## The tasks

We did not have a Visiting Policy – we had a ‘procedure’ which had been developed during the pandemic.

We were a pilot site for the development of a national Care Partners Policy so we also needed to review our current Carers Policy.

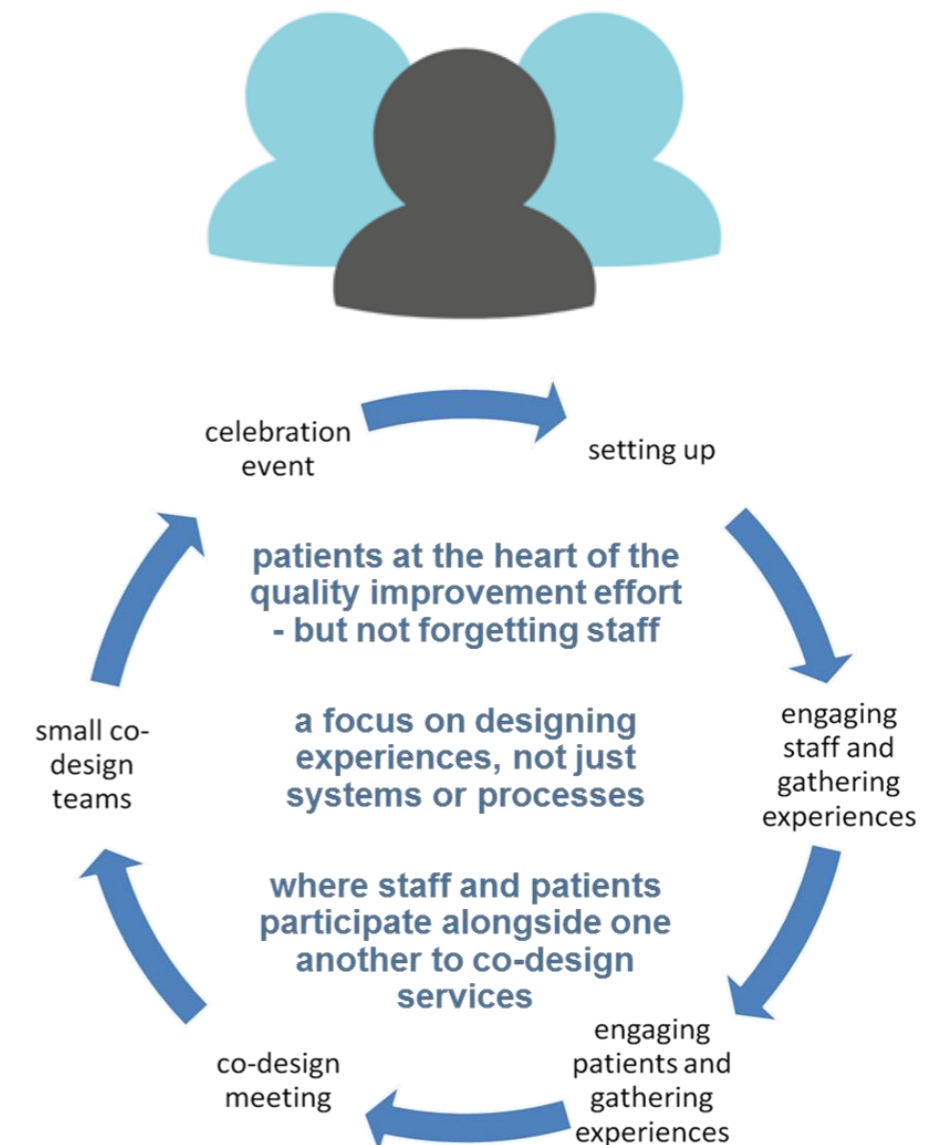


**We knew both of these were interlinked.**

## Codesign

- I could probably sit in a room and write these policies myself; I have experience and knowledge – but I am not the expert; the experts are our staff and our patients and their carers and families.
- We needed to develop this together, challenging the assumption that our patients, families and carers are passive recipients of care and recognises their contribution in the successful delivery of a service (Cahn, 2000).

## Experience-Based Co-Design



## Getting started - scoping

- Needed a **Visiting Policy** – had a procedure developed during the pandemic but no formal policy.
- Identified our key stakeholders



- Our **Carers Policy** was strong and had been heavily consulted on with key stakeholders but would need a revisit and redesign in light of Care Partners work.



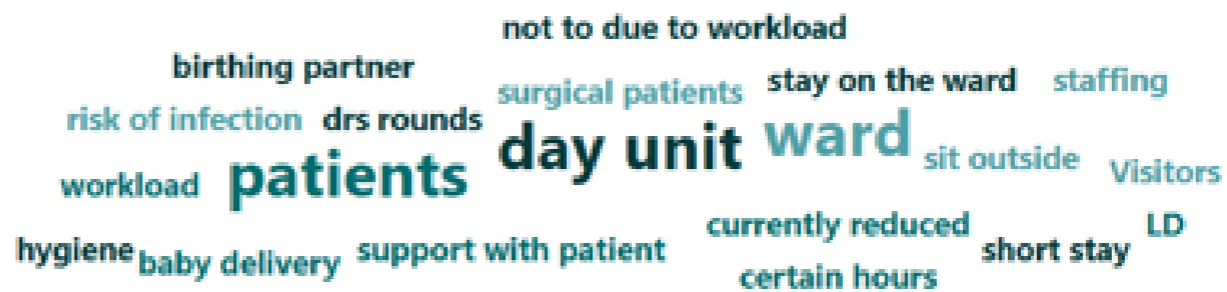
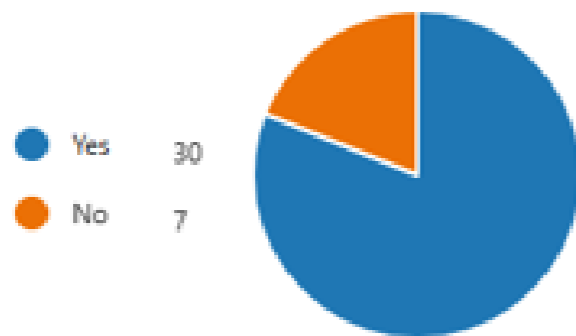
# Understanding the here and now – Audit & review

- 51 wards across 3 hospital sites.
- Explored:
  - Public information
  - Local arrangements
  - Staff understanding & discretion
  - Staff experience
  - Patient and visitor experience
  - Scoping for the future.

11 different schedules:

- Split times eg:
  - 12:00 – 16:00
  - 18:00 – 20:00
  - 12:30 – 16:00
  - 18:30 – 20:30.
- 12:30 – 20:00
- 13:00 – 20:00
- 13:00 – 19:00
- 13:00 – 19:00 except for mealtimes
- 14:00 – 20:00
- 14:00 – 21:00
- 14:00 – 21:00 except for mealtimes
- 08:00 – 16:30
- 10:30 – 18:30

7 wards stated they would not welcome visitors outside of visiting times other than in exceptional circumstances with the main reasons being ability to meet ward workload, provide care, doctors rounds.



## How did staff feel about removing visiting restrictions?

I see better communication and information & our patients 'look better' too, staff more mindful about shaving a gentleman or washing a lady's hair.

Pre booking system worked really well, would have like that to continue as it helps with workload. Overwhelming when everyone arrives at 2pm and hard to cope with that amount at one time. Noise levels increase which affects those patients trying to sleep

My team were apprehensive at the beginning but happy as so much better for patients. Falls decreased with our Dementia patients

Reduced phone calls!

Positive as support to patients - friendly faces and reassurance for the patient.

My staff have found it difficult - more people about and sometimes does not allow for obs/care to take place in a dignified way.

Some anxiety from international staff communicating updates face to face - on the phone the person can't see if you look confused or don't know and they will come and get one of us - but on the whole have welcomed visitors back.

Daunting at first, nice for relatives and visitors

No issues and we have less PALs etc now

## Our patients told us:

66 patients or visitors were interviewed.

40% of the patients said they had a carer at home and of these 80% said their carer was allowed to visit outside of usual visiting hours. Public awareness of the Carers Badge is extremely poor with only 2 respondents confirming they had heard of it.

“No one mentioned about the iPad to FaceTime dad. He has gone downhill since being in hospital and not seeing us for a week due to COVID really upset him but a FaceTime call would have cheered him up”

“Website - would be helpful if visiting hours on there. Arrived 5 minutes early and not allowed in despite travelling.”

“Broken visiting times when visitors want to stay longer. What for visitors to do at weekends? Cafe facilities? Put on general website if facilities not open.”

“This ward is furthest point from main reception to sort out free parking, so haven't bothered on may occasions as too much hassle.”

“Shop opening times - please put right on website. Not easy for patient when no visitors to get things for him - staff are kind and help out”



## Our codesign had two objectives for us:

1. Agree our definition of a carer / care partner so we are all clear.



2. Agree our ULHT Visiting principles & policy.



## Our codesign schedule

1. Share the issues, audit & review findings for discussion at staff and patient workshops with:

- Ward Sisters & Matrons
- Patient Panel
- Patient Experience Group
- Nursing, Midwifery & AHP Advisory Forum.

2. Develop proposal drafts based upon those discussions.

3. Return to above forums for further discussion of proposals.

4. Agree proposals.



# Our Care Partners workshop discussion points

## Carers principles – lets consider the following.....

1. **The definition:** A carer is someone who cares, unpaid, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support.



2. **And** we need to remember **Young Carers** and Carers who work....



3. **The terminology:** if we view our carers as expert partners lets call them Care Partners.

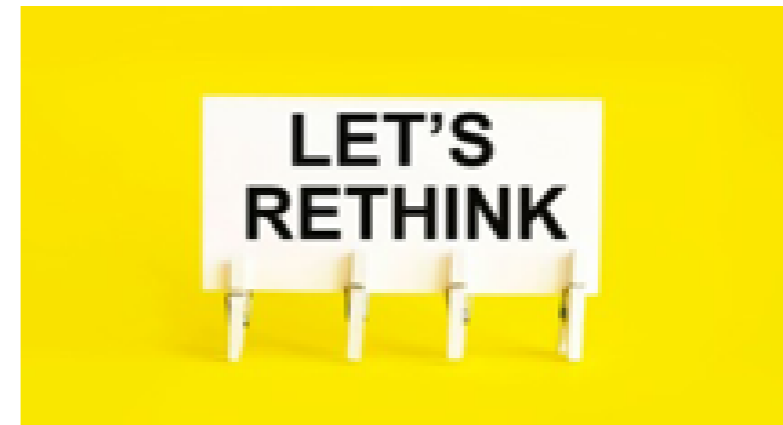


4. **The difference:** that Care Partners are not 'traditional' visitors.

# Our Visiting Policy workshop discussion points

## Visiting principles – lets consider the following.....

1. That Care Partners are not considered the same as visitors?
2. What about no time restrictions for Care Partners but set visiting hours otherwise?
3. What would those hours be?
4. Care Partner Badges to be managed at ward level and maximum 3 per patient (considering many may share the role)



## Our codesigned agreements

### Agreed definitions

Visitor	Care Partner
A family member, a friend or neighbour attending the hospital to pay a visit to a patient and will be welcomed to do so during the stated <b>core visiting times</b> .	Someone who cares, unpaid, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support and will be welcomed to be with the patient so <b>at any time</b> .

### Agreed Visiting times

Visiting Hours			
Adult Wards	Paediatrics and NNU	Maternity	ICU
14:00 – 20:00	14:00 – 20:00	14:00 – 20:00	Individual arrangements
Care Partners			
Care partners anytime	Parents or guardians anytime	Labour ward partners anytime Ante & Post-natal partners 09:00 – 21:00	Individual arrangements

# Our codesigned agreements

Created a Visiting Charter

## Visiting Charter



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### What you can expect from us

We will ensure that the safety and care of our patients is our priority

We will wear our Trust photo identification badges visibly at all times

We will ensure that masks and hand gel are accessible to you

We believe Mealtimes Matter and we will try to avoid care delivery at mealtimes so that patients can eat their meal in a quiet and relaxed atmosphere with minimal interruption.

We will make you feel welcome

We will welcome any feedback you have about your hospital visit

We may ask you to leave the bedside for a short time whilst we deliver care or to protect confidentiality

Visitors are welcome to assist the person they are visiting at mealtimes, with their agreement. Please speak to the nurse in charge before assisting confidentiality

### What we expect from our visitors

Be polite and courteous to staff, other patients and visitors

Respect our visiting times and precautions

Observe confidentiality: you may see or hear things of a private nature; you must not film or photograph other patients, visitors or staff

Be responsible for the safety and security of your belongings

Remember that rest is important for you and the person you are visiting

On arrival check with staff if it is ok to visit, the person you are visiting may be occupied in some way

Have consideration for staff doing their job and for patients who need rest and privacy

Be responsible for and in control of your children if they are visiting. Please see our guidance

Be respectful to other patients and keep noise levels to a minimum; please put your mobile phone on silent

### Infection prevention and control

- We ask you not to visit if you or any members of your household, have symptoms suggestive of COVID-19 or are unwell with other infections, for example Norovirus. If you do, you put the wellbeing of your loved one at risk and also threaten the health of other patients and our staff.
- If you are visiting a patient with an infection or a care area with infectious patients you will be made aware of any infection risks and offered appropriate personal protective equipment.

- Use hand gel when entering and leaving ward areas and wear a hospital provided mask at all times in clinical areas.
- Please help keep our hospital clean and inform staff of any cleaning concerns.
- We ask for only 2 people at the bedside at a time please though if there are particular circumstances the nurse in charge may be able to make an exception.

**Aggression, violence and discrimination will not be tolerated**

**We will protect our staff**

**Thank you for your consideration and support**

OUTSTANDING CARE *personally* DELIVERED

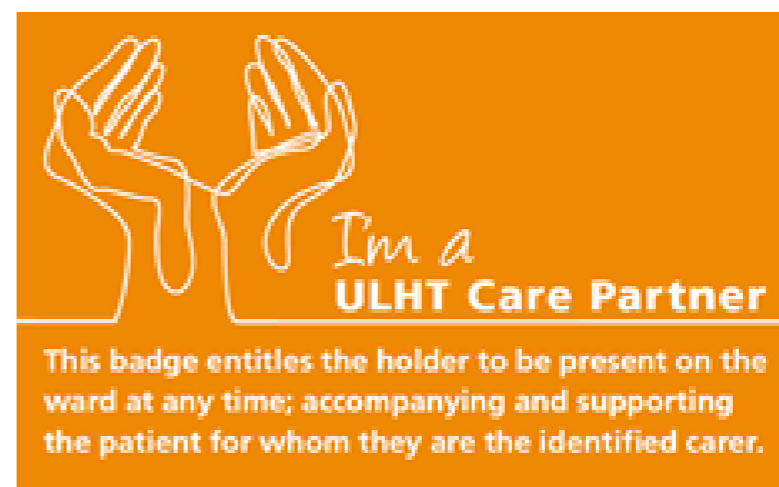
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## Our codesigned agreements

Rebranded and re-energised our Carers Badges & process.

### 5.7. ULHT Care Partners Badge

5.7.1. When a Care Partner is identified or comes forward ward staff are able to provide them with a ULHT Care Partners Badge available to them for the duration of their stay.



- 5.7.2. A ULHT Care Partners badge enables Care Partners to be clearly seen on the ward as an expert partner and enable them 'free' access (unless clinically inappropriate) during the day and not be restricted by the set visiting times.
- 5.7.3. Care Partners will be required to read and sign a Care Partner Agreement (Appendix 1) this is designed to keep both the patient and Care Partner safe.
- 5.7.4. A maximum of 3 badges can be used per patient in the event that there is more than one identified Care Partner.
- 5.7.5. The badge will highlight to staff the need to keep the Care Partner informed and involved in decisions and discussions about care and welcome their presence at ward rounds and during care and treatment if appropriate and with the consent of the patient.
- 5.7.6. The wards all have a Care Partners Pack with information and further sources of support and guidance and can refer to Carers First for assessment and community support.
- 5.7.7. When the cared for person is due to be discharged the Care Partner will be asked to return their badge and be offered a short survey about their experience; this will enable evaluation and further developments within the Trusts work in caring for Care Partners.



# Our codesigned policies



## Visiting Policy

Version:	V1.0
New or Replacement:	New
Policy Number:	
Division & Specialty	Corporate Nursing
Document author(s):	Jennie Negus. Head of Patient Experience
Contributor(s):	None
Executive Sponsor (If Required)	Karen Dunderdale, Director of Nursing
Title of person responsible for review of document (e.g. Deputy Chief Nurse or Trust Lead (If Required))	Head of Patient Experience
Approved By:	Patient Experience Group
Date Approved:	05 April 2023

## Care Partners Policy

Version:	3.0
Document Ref.:	
Document author(s):	Jennie Negus. Head of Patient Experience
Contributor(s):	Care Partners Steering Group Patient Experience Group Carers First Organisation (Lincs Carers Provider) Patient Panel
Approved by:	Patient Experience Committee
Date approved:	
Review date:	

Document scope:	<b>Trust-wide</b>
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Approved and published



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