Service Provider Response Form

Name of Service: Recovery Hub @ North-West Leeds **Date:** 15/09/21

Name of Service Provider: Leeds City Council

Healthwatch Leeds Recommendation	Service Provider Response (including any actions you will take)	Who is responsible	When will this be implemented by
1. Communicate a reminder to all relatives the message that all residents can nominate an 'essential care giver' and clearly explain what this is. We know that this term can be confusing for both relatives and staff. Because of this, we've created this simple wording to try and help clarify the role. Feel free to use it in your communications with families and staff. *"**ALL** residents (or their families/POA if they don't have mental capacity to make that decision) can now choose one person to be included in their five named visitors as an 'essential care giver'. This key visitor should be someone who they feel is "key" to their wellbeing (physical or emotional), and who helps them feel "happier and well".* *The key visitor will be able to visit them more often, flexibly and for longer periods, as well as being able to continue visiting even when there*	Essential care givers are recognised within our visiting policy and processes for ensuring they follow the same testing regime as employees is followed. We recognise that respondents did not have awareness of this and will ensure that this is re-discussed with family members weekly when the Assistant Community Engagement Worker contacts them. Registered to a webinar "Essential Care Givers: supporting their role in care homes". This will support us and customers better understanding the role going forward.	Senior Management/ Management Team/ staff/admin/ACEW ACEW Manager to feedback to the team on next staff meeting	 20/09/2021 21/09/21

is an outbreak, or the resident is in isolation (e.g. following discharge from hospital). *In the government guidance, they call this key visitor an 'essential care giver' but this doesn't mean that they have to provide any type of personal or practical care (although this may be agreed in discussion with the care home).* *Because more frequent and flexible visiting carries more risk, the key visitor will need to agree to have the same testing as care home staff (one PCR test and two lateral flow tests a week) and follow the same infection control procedures as them."*			
2. Make sure that residents' needs and wishes are routinely and consistently taken into consideration when drawing up individual risk assessments or visiting care plans. Where residents don't have mental capacity to be involved in these decisions, make sure families are involved in these discussions.	We continue to allow visits to take place in designated visiting area, pod, garden, window and only in exceptional circumstances in customer's room. Customer's needs and wishes are always taken into consideration. Person centred goals are completed within 72 hours from admission, these will cover personal information, MCA, mobility, continence, nutrition, health and wellbeing as well as other goals identified on assessment.	Senior Management & Management Team Management Team/Nursing team/Therapy Team/Staff/ ACEW	Already in place and always reviewed in line with latest Government guidance Already in place and continued to be reviewed regularly

3. Ensure that copies of residents' individualised risk assessments/visiting plans are routinely shared with relatives.	Visiting policy is shared with customers, families, and friends on admission and every time there is an update. In response to a complaint is now in place that ACEW is contacting families weekly to provide them an update and give them the opportunity of asking questions.	Management Team, ACEW ACEW	In place/Ongoing In place from 30/8/21
4. Consider ways of enabling residents to have longer visits. Some questions to consider: ➢ Is your policy based on individual risk assessments for the residents, that take into account individual needs? individual assessments are needed to consider the impact of a 30-60-minute visit for each resident, including whether such timed visits are appropriate for them and meet their wellbeing needs. ➢ If not being done already, have you considered enabling visits to take place in residents' own rooms? This would allow the visits to be as long as appropriate for each resident, to better meet their wellbeing needs. It would also create a more natural, relaxing environment for the visit which will be more beneficial for the resident.	Visiting protocol and risk assessment attached to the email. Visits are always assessed if appropriate for each customer and adjustments are made where needed giving consideration to duration, time and location. Consideration is always given if more appropriate to visit in a different area or own room if possible and safe to do so.	Senior Management & Management Team Management Team	Already in place and always reviewed in line with latest Government guidance In place

➢ Are you allowing visitors to take tests at home and bring proof of negativity on their visit (as permitted now in the Government guidance)? This would reduce your admin burden for 'processing' visitors on arrival.	Visitors can complete the test at home and bring the proof or come a bit earlier to complete one on site. Staff will provide support if needed.	Management Team/Admin	In place
5. Ensure that all visiting options (including the right for each resident to have an 'essential care giver') and arrangements are communicated clearly to residents and their families on admission.	Customers are informed prior to their admission by hospital staff who make sure they are made aware of our visiting policy and the need of 14 days isolation from admission. Visiting policy is shared with customers, families, and friends on admission and every time there is an update.	Hospital staff Admin/ACEW/ Management team	Already in place Already in place