

## End of Life Visiting – Critical Care and COVID-19 Positive Wards

### Visitor Agreement

COVID-19 is currently present in the community and in the hospital. Social distancing measures and visiting restrictions are currently in place.

I am the next of kin / other nominated visitor \* for \_\_\_\_\_, who is currently a patient in critical care at Milton Keynes University Hospital and is predicted to pass away over the coming hours. I have been offered the opportunity to visit. I wish to take up this offer and I understand / agree to the following:

1. I have been informed of the risks and potential consequences of visiting my friend / relative in the hospital. Other ways in which I can see my friend / relative (for example, video) have been explained and offered to me.
2. I understand that a single visit to my friend / relative is being offered on account of his / her clinical status. This visit is intended to allow me to see my friend / relative in order to exchange final words. It is not intended / expected that I will be present at the time of death. I will be the sole visitor (I can be accompanied to the hospital site but not to the clinical area), and the visit itself is for a maximum of one hour. I will be escorted on the hospital site – from an agreed meeting point – by a member of staff.
3. I may well have been exposed to COVID-19 in recent weeks and I may therefore represent an additional infection risk to staff I meet. I will therefore be asked to wear some personal protective equipment (as a minimum, a surgical face mask) when arriving on the hospital site in order to reduce the risk to others.
4. I understand that the critical care/ COVID-19 positive environment will lead to a further risk of exposure for me to COVID-19. Personal protective equipment (PPE) will reduce that risk but not eliminate it. When visiting my friend / relative, I agree to wear appropriate PPE which is likely to include a gown / overalls, gloves and hood. I will put on this PPE, and subsequently remove it, following instructions from my escort.
5. If I wear a surgical face mask (rather than a hood) when in critical care/ a COVID-19 positive ward, I understand that the protection offered to me from COVID-19 is less and I accept this additional risk. A surgical face mask may be worn (rather than a hood) on account of my personal choice, or lack of availability of a hood.
6. If I do not / cannot wear a hood when visiting my friend / relative, I understand that I will need to self-isolate at home for 14 days following the visit (re-setting the clock to day zero if I am already self-isolating). This may have significant implications for me.
7. I understand that I must not take any recordings or photographs when in a hospital ward without the explicit agreement of the nurse in charge and my escort.

Please tick all boxes to indicate that you have read the test and that you agree to abide by these requirements.

[SIGNATURE]

[NAME]

[DATE OF VISIT]

\* Delete as appropriate