

Swansea Bay University Health Board

Visiting Times Policy

This policy has been screened for relevance to equality. No potential negative impact has been identified so a full equality impact assessment is not required.

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Approved by:	Nursing and Midwifery Group Management Board
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June 2025: Our visiting policy has been refreshed, with a stronger focus on the benefits that visiting can bring to patient care, particularly the opportunities that families, carers, and friends have to support patients.

Visiting hours were temporarily changed to during the pandemic, and we have used the time since to update our visiting policy as well as switching back to more flexible visiting hours.

- 8.1 - Strengthened section related to Protected Mealtimes.
- 8.2 - Added section related to Avoiding Deconditioning in Hospital.
- 8.3 - Added section on Virtual Visiting.
- 8.4 - Strengthened section on Special Considerations. In such circumstances where visitors are required to attend outside of visiting times or for longer periods of time an attendance plan will be agreed and clearly communicated to all staff.
- 8.7 - Added section relating to Spiritual/Religious Visiting.
- 8.8 - Updated guidance relating to Infection Control.

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1.0 Policy Statement

Our visiting policy is much more than just outlining our visiting times. It has looked at visiting in a holistic way, recognising it as an opportunity to support both the wellbeing and clinical needs of patients across our hospitals.

We know visiting patients has a huge benefit to patient's wellbeing, and visits from relatives, caregivers and friends are an important part of a patient's recovery. This is not only because visiting allows patients to reconnect with their loved ones, but there is a lot of practical support that visitors can offer. They can encourage patients to get dressed, get up and about and be as mobile as possible. This is key to avoiding 'deconditioning' where someone who is immobile in a hospital bed for too long loses physical strength, develops complications and in some cases, ultimately loses their independence. Visitors can also help patients with their hydration and nutrition needs, by helping and encouraging them to eat and drink, and this supports staff as well.

When considering visiting hours, it can be challenging to get the balance right for everyone. Access should be as open as possible, while at the same time ensuring there is enough time for staff to carry out clinical care, and for patients to rest.

Our policy has a range of options for you to support visiting, if you are a staff member, patient or visitor. We also have special considerations for children, carers and patients and those who are receiving Last days of Life care.

2.0 Scope

This policy applies to all areas set out within the policy.

3.0 Aims and Objectives

The Health Board welcomes visitors, and we recognise the important contribution that visiting makes to both physical and mental health well-being.

Throughout this policy we have tried to consider all eventualities and have outlined some examples of when visiting may not be possible. In some cases, it may be suspended or restricted for a period of time.

The policy is in line with the agreed All Wales Visiting Principles.

4.0 All Wales Visiting Principles

Acute Inpatient Areas

11:00-19:00 hours

Each patient can have up to **two visitors per visit** who are a family contact or someone important to the patient. The hospital and ward visiting times are advertised on the website and in ward areas.

- We would advise the duration of a single visit should be no longer than 2 hours.
- Visiting before 11am and after 7pm would be in special circumstances as agreed with the Ward Manager/Nurse in Charge.

It is recognised that these times may be difficult due to special circumstances i.e. single parents, those with other carer responsibilities. In such circumstances, please speak to a member of staff whereby an agreement can be made and included in the attendance plan.

Please remember to wash/sanitise hands on entering and leaving the ward/hospital to reduce the risk of infection.

Visitors should not consume food or beverages whilst within the ward environment.

Visitors must wear a face covering (unless medically exempt) if asked to do so by Health Board staff.

Visitors must not visit their relative/friend in hospital if: they are feeling unwell or have infectious symptoms that may be passed on to vulnerable people. For example, symptoms of a respiratory viral illness, gastroenteric symptoms including diarrhoea and or vomiting. Visitors are kindly requested to refrain from visiting until they have fully recovered and have had no symptoms for at least 48 hours.

Outpatients

We would continue to ask that you have only one person attend with you if needed.

Visiting Emergency Unit/Minor Injury Unit

We would continue to ask where possible to attend alone or to have one person with you if needed.

Critical Care

12:30-15:00 hours & 16:30-19:00 hours

Visiting requests outside of these hours are to be pre-arranged with the nurse in charge.

Maternity

At Singleton Hospital, we are committed to providing a warm, supportive, and family-friendly environment for all women and birthing people. These updated visiting guidelines are designed to ensure comfort, safety, and privacy for everyone in our care.

Antenatal Care – Clinics and Day Assessment Unit

We warmly welcome one birthing partner to accompany women and birthing people to all clinic, scan, and obstetric appointments.

Please note: Children are not permitted in scan rooms. If children attend, they must remain in the waiting area with the birth partner.

Antenatal Assessment Unit/Triage (Ward 19)

One birthing partner is welcome to accompany and support during assessments in this area.

Antenatal Ward (Ward 19)

One birthing partner is welcome between 10am and 10pm.

General visiting (including siblings) is welcome between:

- 2pm to 4pm
- 6pm to 8pm

To maintain a calm and restful environment, we kindly ask that no more than two visitors per bed are present at any time.

Please note: Only siblings of the baby are permitted; other children will not be allowed to visit.

Induction of Labour (Ward 19)

One birthing partner is welcome to stay and support throughout the induction process (24 hours). Please note that only chairs will be available for seating or rest due to limited space. You are encouraged to bring your own refreshments, and there will be access to the canteen and coffee shop during certain hours throughout the day.

We kindly ask that birthing partners do not rotate or swap during this time.

Occasionally, birthing partners may be asked to step out temporarily, for example during consultant rounds or emergencies, to respect the privacy and care of others.

Labour Ward/Bay Birth Unit

Two birthing partners are welcome to provide continuous support throughout labour (24 hours). You are encouraged to bring your own refreshments, and there will be access to the canteen and coffee shop during certain hours throughout the day.

We ask that birthing partners remain consistent and do not swap during this time for the safety of your partner and other women receiving care from our teams.

Caesarean Birth (Planned or Unplanned)

One birthing partner is welcome to accompany the woman or the birthing person into theatre.

Following birth, partners may stay for up to two hours or until transfer to the postnatal ward, where visiting hours will then apply.

Postnatal Ward (Ward 20)

One birthing partner is welcome between 10am and 10pm.

Visiting (including siblings) is welcomed between:

- 2pm to 4pm
- 6pm to 8pm

A maximum of two visitors per bed is permitted at any time.

Only siblings of the baby are permitted; other children will not be allowed to visit.

If additional support is needed outside of these hours, please speak with your community midwife or the ward manager. We are here to support your individual needs.

Neath Port Talbot Birth Centre

Two birthing partners are welcome to support throughout labour (24 hours). You are encouraged to bring your own refreshments, and there will be access to the canteen and coffee shop during certain hours throughout the day.

Siblings may visit after the birth if parents wish, and we understand that a family member may accompany them.

To ensure a safe, calm and peaceful environment, no more than two visitors at a time are permitted.

Infection Control Guidance

To keep everyone safe:

- Please use hand sanitiser or wash your hands before entering any area.
- If you are feeling unwell or have symptoms of flu, we kindly ask that you stay home to protect others.

We thank you for your understanding and co-operation. Our goal is to make your experience as safe, comfortable, and positive as possible. If you have any questions or special circumstances, please do not hesitate to speak with a member of our team.

Children and Young People

Neonates

Parents are encouraged to be with their baby for as long as they want with no restriction's day or night. Two named adults in addition to the parents can attend the unit. However, only two adults can be present at the cot side at one given time, one of which must be the parent of the baby.

Siblings are welcome between 12.00hrs-19.00hrs. Each sibling must be accompanied by an adult. At the cot side, we will permit up to two adults and two children. Only the baby's own siblings can attend.

Siblings to the unit who are unwell will not be permitted to visit. This may include any cold like symptoms, diarrhoea and vomiting and any rash.

We may ask visitors to leave in an emergency situation or if the environment becomes too stressful.

Paediatrics

Parents are encouraged to remain resident with their child throughout the day and 1 parent is accommodated to remain resident overnight.

Open visiting for siblings and other family members is permitted between the hours of 13:00-19:00 hours (under 16-year-olds will not be permitted to visit without an adult present)

We ask that numbers are limited to 4 people around the bed space.

Visitors to the unit who are unwell will not be permitted to visit. This may include any cold like symptoms, diarrhoea and vomiting and any rash.

We may ask visitors to leave in an emergency situation or if the environment becomes too stressful.

Mental Health & Learning Disabilities (MHL D)

The services provided by the MHL D Service Group are unique and varied and span across various hospital sites. Learning Disability services and Forensic

Services are delivered beyond the geographical footprint of Swansea Bay University Health Board and within individual stand-alone units.

While the prevalence of COVID19 has reduced, there is still a need to keep patients and staff safe from infection. The Service Group recognises the critical balance between reducing the risk of infection spread and the important role that contact with family/carers and friends plays in a person's mental health recovery.

As such the MHL D Service Group has developed its own Visiting Policy which can be located via the link below.

[CID4642\(a\) \(Part A\) Visiting Policy for all Inpatient Areas \(New - September 2023\).pdf](#)

5.0 Exemptions

This policy applies to all areas.

6.0 Roles and responsibilities

The Ward Manager or designated deputy is required to ensure that the policy related to their specific service area is implemented and that relatives and patients are informed of the visiting time arrangements. Wherever possible this discussion should be had with the patient and their carer during the admission process.

The Swansea Bay UHB internet website will be used to inform visitors of visiting times. The website is a quick way to update the public.
<https://sbuhb.nhs.wales/hospitals/visiting-updates/>

7.0 Governance and Policy Compliance

The implementation of this policy is the responsibility of the Service Groups and feedback should be made through local line management structures. This policy will be revised formally at the agreed review date.

Changes to visiting times should only be made if absolutely necessary. Any changes to visiting times should be agreed in line with the Service Group governance structure and approved at Nursing & Midwifery Group.

The communications department will not amend the Health Board visiting internet page unless the correct process has been followed.

8.0 Visiting Times

Visiting times should be displayed at the entrance to the clinical area.

The visiting schedule offers flexibility for relatives and patients. It is of importance to explain clearly that visiting is open between the set hours and that

there is no obligation to stay for the full duration of the visiting time. However, person-centred health care recognises the important role caregivers and families/friends play in the lives of patients and staff should discuss with family/friends and caregivers the role they would like to play in helping to provide care to their relative while in the hospital. Some may see hospitalisation as a respite of sorts from their daily responsibilities, while others want to retain an active role.

Staff should inform both patients and their relatives that where possible healthcare staff will work around the visiting time to optimise flexibility. However, when this is not possible and patients require care, treatment or examination during visiting time, which may interrupt their visiting, visitors should be advised of this beforehand where possible.

Visitors should be informed that during visiting times, they may be asked to leave the room or ward if staff need to attend to the patient.

Staff should also inform visitors that in order to maintain patient confidentiality visitors will be asked to leave during medical ward rounds. There may also be times where patients are required to leave the ward to go for tests or scans. Staff should advise visitors that where possible they will be given notice of this, however there may be occasion when visitors attend, and patients are not on the ward.

Information about canteens/cafeterias should be made available for visitors to minimise any inconvenience if they have to wait a while before being able to return to the ward.

8.1 Protected Mealtimes

Staff should enforce the protected mealtime scheme. During this time routine non-urgent activity is paused so that staff can supervise meals and give assistance to those patients who need help to eat and drink.

NB: It is recognised that many patients will eat more with encouragement from a family member or friend and a dedicated person to support them. Where possible this could form part of the individual attendance plan and should be encouraged.

8.2 Avoiding Deconditioning in Hospital

SBUHB recognises the critical importance of maintaining the physical and emotional well-being of our patients during their hospital stay. Deconditioning, a state of physical decline resulting from prolonged bed rest and inactivity, poses significant risks to patient health and can be responsible for increased risk of falls, pressure ulcers and infections.

We encourage visitors to actively engage in meaningful visits that may include taking patients off the ward when safe and appropriate, as well as mobilising patients when their condition permits. By involving visitors in the care and

mobility of our patients, we aim to reduce the potential for deconditioning, enhance the patient experience, and contribute to better health outcomes. Staff should provide guidance to visitors on safe and suitable activities, ensuring a collaborative approach to patient care and recovery.

8.3 Virtual visiting

If relatives/carers are unable to visit, Ward Managers should facilitate virtual visiting using hospital iPads, so patients are able to see and speak to their families via video calling.

Use of mobile phones should be in line with the Health Boards Telephone & Mobile Device Policy. There is free public Wi-Fi available in all premises of the Health Board.

8.4 Special Considerations

It is recognised that there are occasions when the number of visitors may exceed two per bed.

Providing a high standard of care for people in the last year of their life, and the people who are important to them, is a core value of Swansea Bay University Health Board. For patients who are receiving palliative care to make them as comfortable as possible in their last days, visitors may wish to remain for longer periods of time, including overnight, enabling them to support and spend time with their loved ones.

It is also recognised that when a person with cognitive impairment is admitted to hospital, they can often feel more confused and anxious because they are in an unfamiliar environment. Visitors may wish to spend longer periods of time with their loved one to provide emotional and physical support.

In such circumstances an attendance plan will be agreed and clearly communicated with all staff.

8.5 Staff Availability During Visiting Times

It is important that staff are available to speak with relatives during visiting times. If the shift hand over occurs during visiting time staff are expected to be available to have a discussion within a reasonable timeframe.

8.6 Infant, Children and Young People Visiting

Visiting of infants, children and young people is at the discretion of the Nurse in Charge with agreement from the patient. All children must remain under direct supervision from family members at all times. It is recognised that children might be in the position of being a young carer for a relative. In these circumstances they may visit unsupervised and stay for the length of normal visiting.

8.7 Spiritual/Religious Visiting

SBUHB strives to create a welcoming and inclusive environment that respects patients' spiritual and religious beliefs and supports their emotional and spiritual well-being during their time in hospital. Visiting arrangements for spiritual and religious leaders outside of the normal visiting times should be discussed with the Ward Manager and where possible accommodated. They should also be able to provide access to on-call chaplains or spiritual care providers employed by SBUHB who can offer emotional support, counselling, and guidance in accordance with the patient's beliefs. Multi-faith rooms are available for visiting where appropriate with family/carers and agreement of staff.

8.8 Infection Control

Infection control in hospitals is very important. To help stop the spread of infection all patients, visitors and staff entering or leaving the ward must clean their hands before and after visiting. Alcohol hand rub dispensers (ABHR) will be available at the entrance to the ward and near to the hand wash basin. Hand washing facilities available in the patient care environment can be used by visitors. Visitors should be advised to sit on the chairs provided and refrain from sitting on beds. Visitors should be advised not to eat or drink whilst visiting within the clinical areas.

Visitors should be advised to contact the person in charge before visiting if they are unsure of the infectious status of the person they are visiting within the hospital setting. They should be informed of appropriate infection control precautions, including the correct use of Personal Protective Equipment (PPE) and hand hygiene to be carried out when visiting.

Where visitors choose to use or are required to wear PPE during their visit, they should be shown how to correctly Don and Doff the PPE. They should also be advised not to leave the immediate patient care area whilst wearing PPE. They must be advised how and where to safely dispose of PPE in the clinical waste bin and the importance of washing their hands after removing PPE.

9.0 Equality Impact Assessment

This policy has been screened for relevance to equality. No potential negative impact has been identified so a full equality impact assessment is not required. The completed screening tool is appended to this document.

10.0 Getting Help

If assistance is required in interpreting the policy, please raise queries via local line management structures.

APPENDIX 1

Addressograph

Attendance plan

Date of agreement ___/___/___

Individual attendance plan for
known as)

(name patient is

An individual attendance plan is an agreement for family member/s or friends to support someone with their physical or psychological well being.

Reason for the plan

- Carer
- Help with mealtimes
- Palliative pathway in place
- Preparation for discharge
- Social interactions
- Sensory Loss
- Dementia
- Other -please outline

Named Individual/s and relationship to patient

Contact details _____

Named individuals	Frequency of attendance agreed	Additional comments

Additional comments

APPENDIX 2

Equality Impact Assessments (EqIA) Screening Tool to decide if an EqIA is needed

1. What is your Service Area and Directorate?

Name of initiative:

Service area:

Directorate:

2. What initiative are you screening for relevance to equality?

- New Service
- Service Review
- Service change
- Strategy
- Policy
- Project
- Care pathway
- Financial decision/
Efficiency saving

Other

Please write in:

3. Please give a brief description of the initiative including the aims, objectives, who will be affected and what you are trying to achieve

The visiting times policy aims to provide a more flexible approach to visiting in our inpatient wards in SBU Health Board.

4. What does the initiative mainly relate to?

Direct frontline service delivery e.g. face to face contact with service users

The policy supports a supportive approach to visiting for relatives, friends and carers of Patients in SBU Health Board.

Indirect front line service delivery e.g. support service provided at a distance

Please explain why

Indirect back room service delivery e.g. support service with no patient contact

Please explain why

5. Would this initiative be delivered in partnership with other public sector partner organisations or contractors?

Yes No

6. What is the potential impact on the following groups of people including patients or the wider community?

Group	High Negative	Medium Negative	Low negative	Neutral	Positive	Unknown
Different racial groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.						
Different age groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.						
Children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Group	High Negative	Medium Negative	Low negative	Neutral	Positive	Unknown
	<i>The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.</i>					
Men, women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<i>The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.</i>					
People with disabilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<i>The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.</i>					
Different religions or beliefs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<i>The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.</i>					
Different sexual orientations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<i>The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.</i>					
Gender reassignment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<i>The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.</i>					
Welsh language speakers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<i>The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.</i>					
Pregnant women/women who have recently given birth to children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<i>The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.</i>					
Marital or civil partnership status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<i>The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.</i>					
Carers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<i>The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.</i>					

Group	High Negative	Medium Negative	Low negative	Neutral	Positive	Unknown
Different socio-economic groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>The policy will apply equally to all groups irrespective of race, age, gender, disability, religion, sexual orientation or language of choice.</i>						

7. What is the potential impact on staff?

Staff Group	High Negative	Medium Negative	Low negative	Neutral	Positive	Unknown
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>A more flexible approach to visiting will enable family and carers to support the delivery of care where appropriate thus allowing staff to focus on care delivery to those patients with the most complex of needs.</i>						

8. What is the potential impact on the Human Rights of individuals and in particular to the principles of:

Principle	High Negative	Medium Negative	Low negative	Neutral	Positive	Unknown
Dignity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>Please describe what existing evidence you have for your assessment</i>						
Respect	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>Please describe what existing evidence you have for your assessment</i>						
Fairness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>Please describe what existing evidence you have for your assessment</i>						
Independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>Please describe what existing evidence you have for your assessment</i>						

9. How visible is this initiative to the general public?

- High visibility to general public
- Medium visibility to general public
- Low visibility to general public

10. Does this proposal identify potential negative impacts?

Yes No Unable to decide

If yes

Please explain why. Have you fully mitigated these in your plans? If there are residual issues, you will need to proceed to a full EgIA

If no

Not necessary

If unable to decide

Please explain why and indicate what steps you are going to take to be able to reach a conclusion either way.

11. Decision

Full EgIA required Full EgIA not required

12. Sign off

Assessment team

- a
- b
- c
- d

Lead for the initiative:

Signature:

Date: