

From: **Department of Health and Social Care** <DoNotReply@dhsc.gov.uk>

Subject: Your recent correspondence

To: Mayhew, Diane <dianemayhew8@googlemail.com>

Our ref: DE-1363182

Dear Ms Mayhew,

Thank you for your correspondence of 14 June to Sajid Javid asking the Government to make care home visits a legal right. I have been asked to reply and I apologise for the delay in doing so.

I understand your concerns and have addressed each of your points below. I hope this information will be helpful.

1. Pass legislation (Gloria's law) that gives every care home resident the legal right to nominate an Essential Care Giver / Visitor that can visit in ALL circumstances, regardless of outbreaks, tier restrictions, lockdowns or variants.

The care home visiting guidance enables all residents to have visits from essential care givers – loved ones who are able to provide personal support and companionship – in all circumstances, regardless of outbreaks.

The Department of Health and Social Care (DHSC) does not currently plan to legislate to enable visiting. There are over 15,000 care homes across England, and each is different in terms of how it can safely facilitate visiting due to size, layout and the individuality of its residents.

DHSC regularly reviews care home visiting data to ensure that care providers are facilitating visiting according to guidance.

Throughout the pandemic DHSC has balanced the need to keep care home residents safe from infection, whilst extending visiting opportunities.

The Care Quality Commission (CQC) has provided mechanisms for people to feedback on visiting concerns, and responds to all complaints made, as long as the name of the service is provided.

The CQC continues to seek assurances from care home providers about how they are supporting visiting to happen, and it verifies this information when it goes out and inspects. It has a mandatory question on each of our care home inspections which looks at how visiting is being supported to happen in a safe way.

Where the CQC receives information from the public or through whistleblowing that concerns us or indicates a [closed culture](#), it acts on it, for example by carrying out a risk-based inspection. Where the CQC has concerns, **it can and will** take swift regulatory action. This could include publicly giving a provider actions that they must take to improve, restricting a service's operation, including by issuing requirement notices and warning notices and in cases of significant concern, placing conditions on a provider's registration.

DHSC has been clear in its guidance that blanket bans on visiting are not acceptable. DHSC works closely with the CQC to reinforce the message that care homes need to enable rather than restrict visiting.

2. Produce official care home visiting guidance that brings those living in care settings in line with the rest of society who are no longer subject to ANY Covid restrictions.

The success of the vaccine roll-out in controlling infection levels in care homes has meant that residents can now undertake more visits out and receive more visitors in the care home. Visits out could include all of the things that are available to the broader population, subject to an individual risk assessment.

Individuals living in care homes are typically more vulnerable to severe illness as a result of COVID-19. Whilst vaccination is proving very effective at reducing the risk of severe illness and hospitalisation, DHSC is still seeing some cases of the virus, and severe illness as a result, among care home residents who have been vaccinated. For this reason, DHSC's guidance advises that some infection prevention and control measures remain in place, such as enhanced cleaning and the wearing of PPE during visits.

3. Mandate the Government visiting guidance to care homes and introduce clear penalties for those that refuse to implement them.

The Government does not have plans to legislate to enable visiting. Where there are limits on visiting in individual care homes, this could be because of available space, the layout of rooms or because the home has had an outbreak. If a resident or their family think the care home is not following visiting guidance appropriately then they should raise it with the home in the first instance. They can also contact the CQC, who will investigate complaints. DHSC has been clear in our guidance that blanket bans on visiting are not acceptable.

Yours sincerely,

Aymee Smith
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Department of Health and Social Care