

# Facts for Families: Covid-19 hospital factsheet

As a family you might be worried about what will happen if your loved one gets the coronavirus and needs to go to hospital.

It is important to know the Human Rights Act is the main law in the UK that protects human rights. This means staff in the NHS (including public bodies) must always respect and protect human rights, including during the coronavirus period and when making decisions about restrictions and actions about the coronavirus.

If your loved one is in hospital they will probably be too poorly to make any decisions for themselves. As they get better this may change (see overleaf for how to support someone to make decisions).

NICE (National Institute for Clinical Excellence) have said in their guide that shared decision making is key. This means that they should tell you about the treatment options so that you can be part of making an informed decision.

You may have taken part in Best Interest decision meetings before for your loved one, this happens when someone can't make their own decisions. This should still happen but it will be over the phone or video call.

There is a document called the **clinical frailty score**, some families have been worried that this would mean their loved ones would not be treated because of their disability. NICE have said this will not be used for people under 65, people with a learning disability or those with a long term disability like cerebral palsy.

## Can I be with my loved one in hospital?

Each hospital will make its own decision about this and it may change as more people have to go to hospital. It is important that you do everything you can to protect yourself and your loved ones from getting the coronavirus, this may mean not being at the hospital.



## What can I do if my loved one goes into hospital?

Please note, if your loved one lives in supported living or residential care this should be done by their team but it is worth asking if they have done it.

- Fill in the **Covid-19 hospital passport**. You can find it here <https://www.dimensions-uk.org/wp-content/uploads/covid-hospital-passport.pdf> If you have a laminator laminate it, if not put it in a clear plastic bag and seal it or wrap it in cling film.
- You can find the **tips for filling in the Covid-19 hospital passport** here: <https://www.dimensions-uk.org/wp-content/uploads/COVID19-hospital-passport-tips.pdf>
- Complete the **Covid-19 pre-admission notes**. This can be found here: <https://www.dimensions-uk.org/wp-content/uploads/Covid-19-pre-admission-notes.pdf> This includes notes of how the person is from when they start to feel unwell, which ambulance staff will need to know as well as an up to date list of tablets and medicines. Again can this be laminated or wrapped.
- Have a small bag packed ready to go, you won't have time to pack one in an emergency, the Covid-19 hospital passport and pre-admission notes should be in there.
- Ask the staff on the ward when is the best time to phone to see how your loved one is, they will be able to tell you the time when the ward is not too busy.

## What if my loved one becomes seriously unwell?

The medical team will discuss the plan for your loved one's care. If your loved one is unable to make a decision a Best Interests Decision will be made in consultation between the medical team, you as their family and any others who know the person well such as their support team.

If your loved one is very unwell it could be at this time the doctors want to talk to you about DNAR which means do not attempt resuscitation (could also be called DNR – do not resuscitate or DNACPR - do not attempt cardio pulmonary resuscitation). This is a very hard thing to hear, it is important that this decision is made for the right reasons and it must be made in line with the Mental Capacity Act 2005 using the Best Interest decision making tool. It should not be the doctor's decision alone they must consult with you as family and any others who know the person well like their support team. At this time quality of life and the ability to maintain quality of life will be discussed. Sometimes people think that those with a learning disability and autism never have a good quality of life, we need to make sure that this attitude doesn't influence any decision that is made.

If a decision is reached to not attempt resuscitation, a DNAR form will be completed. This enables the healthcare team to make quick decisions.

When a person recovers it is important to talk about taking away the DNAR. Learning disability and autism are not reasons to have a DNAR form in place for otherwise healthy people. You can ask for the DNAR to be removed from the records after a health crisis has passed.

We recognise that making a decision about whether or not to resuscitate a loved one is extremely stressful. Dimensions colleagues will do their best to support families who are faced with this issue.

As your loved one gets better they may be able to be involved in making decisions. Paradigm have written a useful guide about supported decision making you can find it here: <https://www.dimensions-uk.org/wp-content/uploads/Supported-Decision-Making-Final-Online-Version-2-002.pdf>

When your loved one is discharged from hospital it is important to continue following government guidelines and plans developed by your loved one's support team to continue to minimise risk for everyone.

If you would like to talk to one of our family consultants we have a families help line which is available Monday – Friday 10am – 2pm  
0300 303 9161.

This line is for family members of people supported by the Dimensions Group, including Discovery, Outreach 3 Way and Waymarks.

## There for you