

Reference Number: <i>UHB 310</i> Version Number: 2	Date of Next Review: <i>January 2029</i> Previous Trust/LHB Reference Number: <i>N/A</i>
Visitors at Hafan y Coed Guidance	
Introduction and Aim	
<p>Hafan y Coed Adult Mental Health Unit has been designed to accommodate the needs of patients, staff and visitors.</p> <p>This document aims to provide guidance in the management and support of those using the visiting areas in Hafan y Coed.</p>	
Objectives	
<ul style="list-style-type: none"> • To ensure the appropriate use of visiting rooms. • To ensure the appropriate use of other areas of the ward where visits may take place. • To ensure the provision of appropriate support to visitors. • To ensure the safe management of visitors under the age of 18. 	
Scope	
<p>This procedure applies to all our staff working at Hafan y Coed including those with honorary contracts.</p>	
Equality Impact Assessment	An Equality Impact Assessment has not been completed.
Health Impact Assessment	A Health Impact Assessment (HIA) has not been completed.
Documents to read alongside this Procedure	Care of adults with capacity and their carer's, relatives, visitors who are violent or abusive procedure <i>CCTV Policy</i> <i>Patient Confidentiality Policy</i>
Approved by	MHCB Controlled Document Oversight Group
Accountable Executive or Clinical Board Director	Mental Health Clinical Board
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Document Title: Visitors at Hafan y Coed Guidance	2 of 7	Approval Date: 26/01/2026
Reference Number: UHB 310		Next Review Date: 26/01/2029
Version Number: 2		Date of Publication: March 2026
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Disclaimer

If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the [Governance Directorate](#).

Summary of reviews/amendments

Version Number	Date of Review Approved	Date Published	Summary of Amendments
1	7/4/2016	21/6/2016	New document
2	January 2026	March 2026	Updated document

Document Title: Visitors at Hafan y Coed Guidance	3 of 7	Approval Date: 26/01/2026
Reference Number: UHB 310		Next Review Date: 26/01/2029
Version Number: 2		Date of Publication: March 2026
Approved By: MHCB Controlled Document Oversight Group		

1. General Principles

- 1.1 The Mental Health Clinical Board acknowledges the vital role that family members and friends play in a patient's recovery. As such, visits are generally encouraged to help maintain meaningful connections with life outside the hospital and to support a collaborative approach in planning for the patient's discharge and reintegration into the community.
- 1.2 It is also recognised that there may be times when a patient chooses not to receive visitors or declines to share information with family members or friends. Staff within Hafan Y Coed will respect and support the patient's wishes, in line with their rights to privacy and autonomy.
- 1.3 Hafan y Coed and Llandough Hospital has ample space to accommodate visitors. Where risk assessment and legal restrictions allow, patients and their visitors will be encouraged to use these spaces rather than visiting on the actual ward areas.

2. Physical Environment

- 2.1 Each ward within Hafan y Coed is equipped with a designated visiting room, situated between the main ward area and the entrance lobby. These rooms are furnished with comfortable seating and tables to provide a welcoming environment for visits. Information boards are available to support communication and engagement. For safety and security purposes, all visiting rooms are monitored by CCTV.
- 2.2 Other areas of the ward may also be used for visiting if agreed by ward management, these include: the lounge areas, the dining area (when not in use for dining) and other side rooms. Visits from family and friends should not take place in rooms off the bedroom corridors. The only area with CCTV coverage is the designated visiting room.
- 2.3 Meeting rooms/ward round rooms are available on each ward for use of staff, visitors and patients to discuss care and treatment.

3. Visiting times

Document Title: Visitors at Hafan y Coed Guidance	4 of 7	Approval Date: 26/01/2026
Reference Number: UHB 310		Next Review Date: 26/01/2029
Version Number: 2		Date of Publication: March 2026
Approved By: MHCBC Controlled Document Oversight Group		

- 3.1 While individual ward teams may tailor visiting times to suit their specific needs, these should align with the UHB's standard visiting hours wherever possible. Visiting arrangements must not interfere with therapeutic activities or compromise the therapeutic environment of the ward.
- 3.2 Most wards operate visiting times of 2-4pm and 5.30-7.30pm or 6-8pm which is managed by the ward booking system. Visiting outside these times is usually upon a special request which needs to be agreed by ward management or the nurse in charge.
- 3.3 Visits during the nurse handover period and mealtimes are normally discouraged as these are protected times.
- 3.4 Where family members and friends are invited for appointments with the clinical team (eg "ward rounds") it is accepted that they may want to spend time visiting the patient and this will be facilitated where possible.
- 3.5 On rare occasions, a young person aged 16-17 may be admitted to Cedar ward until a more appropriate placement can be arranged. In such circumstances, a flexible approach to visiting by parents or legal guardians will be adopted. If parents or guardians need to bring younger siblings during visits, please inform ward staff in advance so that arrangements can be made to ensure the visitors' room is available.

4. Visiting Wards

- 4.1 The clinical teams recognise that visiting a mental health unit can cause anxiety for family and friends as such every effort will be made by ward staff to be welcoming and supportive. There are ward leaflets available to explain how the wards operate.
- 4.2 It is also recognised that visits may be stressful for individual patients. Staff will endeavour to offer support to patients during and after visits as required. In some areas, visits to the ward will be supervised, which will be explained upon booking and attending the relevant ward.
- 4.3 Due to issues around space and managing risk, no more than two visitors will be able to visit a patient at the same time. However, some areas may be able to offer some flexibility around this but arrangements would need to be made in advance.

Document Title: Visitors at Hafan y Coed Guidance	5 of 7	Approval Date: 26/01/2026
Reference Number: UHB 310		Next Review Date: 26/01/2029
Version Number: 2		Date of Publication: March 2026
Approved By: MHCBC Controlled Document Oversight Group		

- 4.4 On arrival to the ward, visitors will be met by a locked door and a doorbell. A staff member will answer the door (in some areas two members of staff), the staff member will ask politely and in a welcoming manner: the visitor's name, who they are here to see, if the visit has been booked and explain that they will ask the patient if they want to be seen.
- 4.5 If the patient does not want a visit at this time, the staff member will go to the visitor outside the door, introduce themselves and politely explain the patient's wishes.
- 4.6 It is important to note that although a patient may not give consent to information sharing with the visitor, this visitor should still be offered support and any information they can give can be used to inform the patients care and treatment.
- 4.7 Outside ward visiting times or at times when the patient may be unable to accept visitors (due to practical reasons or due to any heightened mental distress) the member of nursing staff will attend the visitor face to face at the door and explain that the visit cannot go ahead at this time and suggest an alternative plan. It may be appropriate to allow a visit to go ahead for example if this is felt beneficial to the patient or if the visitor was unaware of visiting times or unaware of there being a booking system.
- 4.8 If the patient is able to receive visitors, the staff member will attend the visitor at the door and invite them into the ward lobby. It is imperative that the staff member draws the visitor's attention to the restricted and prohibited items list on display and offer them a locker in lobby area in which to store any belongings. Prohibited items should be kept in the lobby lockers for the duration of the visit. The staff member will show empathy throughout this procedure and explain the rationale for this, i.e to maintain the safety of all on the ward.
- 4.9 Any property brought in for the patient will need to be checked by staff and added to the patient's property list.

5. Using the Visiting Room

- 5.1 Visits that occur outside normal visiting times (either by appointment or as described in para 4.6 above) should take place in the visiting room. This is to ensure the minimum disturbance to the day to day running of the main ward area, these should be booked in the ward diary and/or visitors booking file.

Document Title: Visitors at Hafan y Coed Guidance	6 of 7	Approval Date: 26/01/2026
Reference Number: UHB 310		Next Review Date: 26/01/2029
Version Number: 2		Date of Publication: March 2026
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- 5.2 The preferred area for all visits on the ward is the ward visiting room, however there may be occasions that a room on the ward is used if there are more than one visit booked in.
- 5.3 Any children (under the age of 18) will not be permitted access any of the ward's others than Cedar ward's visiting room. Visits by children should be by appointment only and must take place in a designated area off the ward. Please note, this will require the patient to have the appropriate S17 leave. All visits by children will need to be supervised unless the visit is taking place off the ward and the patient has unescorted leave.
- 5.4 Activity in visiting rooms is monitored and recorded via CCTV in addition where there is concern that a patient may pose a risk to, or be at risk from, a visitor; one or more staff members may be required to supervise the visit. As mentioned in 4.2 some areas do supervise all visits.
- 5.5 Any concern regarding the behaviour or risk posed by individual visitors may require implementation of the Care of adults with capacity and their carer's, relatives, visitors who are violent or abusive procedure.

6. Visiting in other areas of the ward

- 6.1 Where a ward may accommodate two visits at the same time, it is accepted that visits may occur in other areas of the ward, which will be a designated area on each ward.
- 6.2 Staff will be mindful that visits in other areas of the ward might disrupt or disturb other patients in the ward environment. Visitors will be encouraged to respect the needs of other patients. These visits will be on rare occasions and will have to be supervised if taking place on the ward.
- 6.3 Individual risk assessment and associated management plans will inform staff as to any supervision needs of patients whilst being visited. This will include the management of patients who may be at risk of receiving illicit drugs or other prohibited items from visitors. Ideally when there are concerns of this nature, the visit should take place in the visiting room.

7. Concluding visiting time

Document Title: Visitors at Hafan y Coed Guidance	7 of 7	Approval Date: 26/01/2026
Reference Number: UHB 310		Next Review Date: 26/01/2029
Version Number: 2		Date of Publication: March 2026
Approved By: MHCB Controlled Document Oversight Group		

7.1 Visitors will be given a 5-10-minute warning before the end of visiting time. This will allow families and friends to say their goodbyes and also give an opportunity for visitors to ask any questions they may have of staff. This will also allow for staff to wipe down the area in preparation for the next visit.

7.2 Visitors will be shown out of the ward politely by a member of staff and offered the opportunity to discuss any concerns regarding the patient (within the boundaries of confidentiality as described in para 4.6 above).

8. Training

8.1 All members of staff at Hafan y Coed will be able to follow this guidance following induction.

9. Review

9.1 This procedure will be reviewed on a three-yearly basis.