

Visiting in adult and older people's care homes

Meaningful connection with others is essential to everyone's health and wellbeing and forms part of our human rights. It adds value and meaning to life and supports identity and personhood. When people do not experience valued and meaningful connections, the consequences for their emotional, mental and physical wellbeing can be profound. People experiencing care in care homes have the right to see, spend time with, and where appropriate be supported with day-to-day care by people who are important to them. They have the right to go out if they wish and to take part in their community, and should not be discouraged from doing so. This is supported by the [Health and Social Care Standards](#). The Scottish Government has also introduced [Anne's Law](#), part of the Care Reform (Scotland) Act 2025, as a further means of strengthening these rights. Currently, consultation is ongoing regarding the associated Regulations and Code of Practice.

What must be in place in all care home services in normal circumstances?

In normal circumstances, there should be no restrictions on visits in or out of the care home. Homes should not operate booking systems and should not normally impose any limitations on the number of visitors or the frequency, timing or duration of visits. If visits are required to be restricted due to individual circumstances at any time, this should be robustly risk-assessed and the needs and wishes of the person experiencing care taken into account. Children and [pets](#) should be welcome to visit.

Regular visitors should be enabled to access the home easily and without unnecessary delays, and arrangements for this should be made in consultation with people experiencing care and their family carers. This should include regular visitors being provided with the door codes to access the home freely.

Everyone will have their individual needs and preferences regarding connection with others, and this should be included in [personal planning](#) so that everyone is supported to connect in the ways that are right for them.

Family carers should be included as partners in care and should be able to be directly involved in supporting their loved one with day-to-day care if this is what they both want. This includes, for instance, support at mealtimes or with personal care activities. Again, this should be included in personal planning.

What happens in exceptional circumstances?

In exceptional circumstances, there may be restrictions to visiting. Any restriction must be robustly risk assessed and must be for the minimum possible period. Restrictions should be the least invasive and least intrusive as possible, and normal visiting must resume as soon as possible.

In the event of an outbreak of an infectious disease, temporary restrictions on visiting may be required. These are overseen by the local [Health Protection Team](#) in dialogue with the care home manager, and will be kept under frequent review.

People experiencing care still have the right to have in-person visits from nominated relatives/friends, as stipulated in the [Health and Social Care Standards](#) (see section below on named visiting). People visiting the home may be requested to follow additional infection prevention and control precautions.

The local Health Protection Team may advise closing the home to new resident admissions for a limited time. This does not mean the home should be closed to visitors.

Services should ensure all relevant people, including people who live in the home and their families and friends, are fully aware of an outbreak situation when it develops, the nature of and reasons for any restrictions, and the anticipated end date. It is important that people are communicated with in the ways that suit them. Although useful, it is not sufficient to put a notice on the door or on social media, as not everyone may see this.

What is meant by named visiting?

If any visiting restrictions are advised by the local Health Protection Team during an outbreak, people should still be supported to stay connected to those who are important to them. In this situation, **named visiting** may be required. This means people can identify up to three nominated individuals, of whom one can visit each day and can also support with care when this is what people want. Flexibility must be applied to take account of circumstances. For instance, a visitor may need another person there to support them. Named people may also require to be changed if circumstances indicate this, such as one named person being unavailable, or to ensure people see those important to them. The care home staff should be able to facilitate such changes at short notice when needed.

Named visiting is the default position if restrictions are needed during an outbreak and must be supported by the care home. It is important all services recognise and respect the importance to people's wellbeing of seeing those important to them.

Very occasionally, additional visiting restrictions may be advised by the local Health Protection Team. This is very rare and must be for the minimum possible time. Due to the potential impact on people's wellbeing, these additional restrictions should, wherever possible, be reviewed daily.

Essential visiting must always be supported regardless of any exceptional circumstances. This refers to visits which take place around the end of life, or to alleviate or avoid stress and distress. These types of visits are most usually in addition to named visiting and should never be restricted. They should not be restricted by number of visitors, frequency, or duration.

Additional information can be found [here](#).