
All District Health Boards

Type: **National Policy**

Name: **COVID-19 Hospital & Clinic Patient Visiting Policy**

Purpose

The purpose of this policy is to provide direction on access by members of the public who are visiting patients, or providing support to patients, on all DHB hospital campuses during the COVID-19 pandemic response.

This policy serves to protect patients / whānau, staff, and the public through limiting visitors to all patients in our hospitals.

Scope

This policy refers to all DHB facilities where patients are cared for.

This policy is active for as long as an Epidemic Notice under the Epidemic Preparedness Act 2006 remains in force.

This policy does not cover visitors to DHB hospital campuses who are on site to provide essential services. Please refer to separate advice on essential services.

Includes:

- Public visiting patients within inpatient units
- Public accompanying people to community clinics
- Public accompanying people to any outpatient or ambulatory area/clinic
- Public accompanying people presenting at the Emergency Department
- Public accompanying people requiring maternity services
- Non-essential visitors.

Excludes:

Exclusions will be limited. Clinical Nurse Managers (and/or designated role) can assess requests on a case by case basis. For example, exceptions will be considered on compassionate grounds for end of life care.

- This policy excludes patients.
- This policy excludes on duty staff, volunteers and contracted workers performing or providing essential services.

Definitions

- Visitor – Member of the public not receiving assessment, diagnostics or treatment
- Patient – Member of the public receiving / seeking treatment, this includes mental health service users
- Non-essential visitors – e.g. company representatives, external people attending meetings, people not visiting family / whānau, off-duty staff.
- Whānau spokesperson – the single point of contact for the whānau.
- High risk area – Includes Emergency Departments (ED), Intensive Care Units/High Dependency Units (ICU/HDU), Aged Care wards, Maternity wards, Delivery Suite and Neonatal Intensive Care Unit (NICU), Special Care Baby Unit (SCBU), Oncology (including chemotherapy areas), Renal Outpatient and Inpatient areas, Immunology, or other Outpatient areas that have at risk patients.

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Guiding Principles

There is an expectation that:

- All staff will maintain respectful communication with families / whānau, treating each person with dignity and respect
- All staff will partner with families / whānau regarding this policy
- All staff will work with Māori and Pacific health teams to ensure cultural aspects of care are actioned
- Whānau liaison increases as the response level increases
- Alternative means of communication between patients and whanau/ families are encouraged and enabled.
- DHBs will minimise the number of access points into their facilities.
- DHBs will ensure the visitor policy is not taken in isolation - it is part of a much wider risk assessment associated with the risk of COVID-19 transmission in the organisation
- Progression through the visitor policy levels should take into consideration factors such as hospital alert level, community incidence or workforce levels; to determine if a change in visitor alert level is supported.

Policy content and guidelines

It is important to note that the Government's COVID-19 Alert Levels and the National Hospital Response Framework Alert Levels serve different purposes.

The COVID-19 Alert Levels are determined by the Government and specify the public health and social measures to break the transmission of COVID-19 across New Zealand. These measures are informed by scientific knowledge about COVID-19 and information about the effectiveness of control measures.

Regardless of the country's Alert Level, DHBs operate services aligned with the National Hospital Response Framework which enables them to swiftly deliver as much clinical care and surgery as possible and respond swiftly and appropriately to COVID-19.

It is appropriate that DHBs continue to operate services as per the National Hospital Response Framework. This should enable DHBs to continue to deliver as much clinical care and surgery as possible, whilst preparing for the next level of readiness. This visitor policy should align with your DHB's status against the National Hospital Response Framework. However, DHBs will ensure the visitor policy is not taken in isolation - it is part of a much wider risk assessment associated with the risk of COVID-19 transmission in the organisation.

Visitors, including those accompanying patients should be limited to those residing in the patient's household (immediate bubble). However, DHBs will need to be pragmatic and make exceptions for those patients and whanau who either live alone and have limited access to alternative support networks, or where a child is whangai to a different household or in shared custody arrangements. DHBs will set visiting hours and these may differ from DHB to DHB to reflect the community and hospital needs.

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Risk assessment

DHBs cannot eliminate the risk of introduction and spread of COVID-19 in hospital without removing and restricting all people from the hospital. This is not practical nor is it in the public interest. DHBs have introduced several controls which enable decisions of risk-based trade-offs to maintain patient, worker and visitor safety. The COVID-19 Hospital & Clinic Patient Visiting Policy is one of the ways that DHBs are mitigating the risk of COVID-19 to staff and patients and the wider community.

Visitors with symptoms

Visitors with acute respiratory symptoms (e.g. cough, sore throat) fever or abdominal pain and diarrhoea must not visit. Signage should be in place at all entrances to reflect this. If a visitor appears unwell, i.e. presenting with flu-like symptoms, staff should kindly ask them to leave the hospital grounds and advise them to ring Healthline or a General Practitioner (GP) for advice.

Patients admitted with COVID-19

Where there is a suspected case of COVID-19, there will be no visitors until the diagnosis is confirmed. If there is a high index of suspicion and tests are negative, the no visiting policy will still apply until a diagnosis is made.

Visiting patients who have been admitted with COVID-19 is only permitted at the discretion of the Clinical Nurse Manager or a designated role within the DHB who is managing the patient and under the supervision of nursing staff. The reason for this is to ensure Personal Protection Equipment processes are adhered to, and to minimise any risk of avoidable transmission. Other methods of communicating with a patient with COVID-19 should be facilitated as appropriate, such as video conference, Zoom, Skype etc.

Patients / whānau must designate a whānau spokesperson who will be the point of contact for the whānau regarding the visiting policy and any changes to it. This is in case response levels rise and further restrictions need to be applied.

A poster must be placed on the wall at entry points to instruct visitors to maintain good hygiene, including washing hands on entry and exit. The poster should also explain the level of restriction at the time.

Before any visitor is allowed to enter an area where there are COVID-19 positive patients, they must be met by an appropriate staff member who will ensure personal hygiene requirements are met, and Personal Protection Equipment is appropriately worn.

Visitors in self-isolation

Anyone that is under self-isolation (due to close contact with a confirmed case or due to recent overseas travel) will not be permitted to visit.

Visitors register

All visitors need to scan in or sign in on arrival and provide their contact details. If they are using the government's COVID-19 Tracer App, please ask that Bluetooth tracing is turned on.

Specialty units

If existing visiting policies within specialty units is more rigorous than stated in this policy, they should be followed.

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COVID-19 Hospital Readiness GREEN ALERT	Visitors to the high-risk areas identified and any ward with COVID-19 positive patients	<p>Visitors with known COVID-19 contact or symptoms will not be granted access and will be directed to Community Based Assessment Centre (CBAC) or to contact Healthline or GP.</p> <p>Visitors with no suspicion of COVID-19 will be able to enter. A maximum of one visitor at a time will be allowed, for one visit per day. All visitors must wear a medical mask and All visitors are expected to practice safe physical distancing.</p> <p><i>For maternity services:</i> where there is no suspicion of COVID-19 for either the patient or visitors, one person (one partner or one birthing partner) can accompany patients into the birthing suite.</p>
	Visitors to all other areas	<p>A maximum of two visitors may visit. If it is two visitors, they must be from the patient's household (immediate bubble otherwise they must visit separately).</p> <p>All visitors to scan in or sign in and provide contact details. If you're using the government's COVID-19 Tracer App, please ask that Bluetooth tracing is turned on.</p> <p>All visitors to wear a medical mask and practice good hand hygiene.</p> <p>Visitors who are unwell should not enter hospital facilities.</p> <p>All visitors to practice safe social distancing and should remain two metres away from others as far as is practicable. Should this not be practical due to multi-bed rooms, the number of visitors in each multi bed room should be limited at each time to maintain distancing.</p> <p>Visitors with known COVID-19 contact or symptoms will not be granted access and will be directed to Community Based Assessment Centre (CBAC) or to contact Healthline or GP.</p> <p>Visitors with no suspicion of COVID-19 will be able to enter. A maximum of two visitors at any one time may visit a patient at the hospital or clinic.</p> <p>Usual visiting hours are adhered to, unless by prior arrangement with the ward.</p> <p>Children under 16 must not visit except by prior arrangement.</p> <p>For children, parents/caregivers can visit at any time, and both parents/caregivers can visit at the same time.</p>
	People with disabilities	<p>Under any Alert Levels where visitor restrictions are in place, an exception will be made for people with disabilities who are in hospital or must attend an outpatient appointment where they need a support person to ensure equitable access to health services. For example, a sign language interpreter, support person for someone with a learning disability, or someone to assist with mobility is allowed in addition to that person's permitted visitor/s. All visitors must comply with wearing of medical masks and observe social distancing.</p>
	Outpatients	<p>Only one person to accompany a patient coming in for an outpatient appointment or ambulatory care.</p> <p>Children who attend an outpatient appointment with the parent or sibling whose appointment it is, are permitted if there are no alternatives to childcare available.</p>
COVID-19 Hospital Initial Impact YELLOW ALERT	As per Green Alert	As per Green Alert
COVID-19	Visitors to the	No visitors to be granted access unless approved by the Clinical Nurse

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Hospital Moderate Impact ORANGE ALERT	high-risk areas identified and any ward with COVID-19 positive patients	<p>Manager or senior manager on shift. A maximum of one visitor or legal guardian that has been screened will be granted access if approved.</p> <p>All visitors to wear a medical mask and practice good hand hygiene.</p> <p>All visitors to wear PPE as required.</p> <p>Visitors with known COVID-19 contact or symptoms will not be granted access and will be directed to CBAC or to contact Health line or GP.</p> <p>Visitors with no suspicion of COVID-19 will be able to enter. A maximum of one visitor at a time will be allowed, for one visit per day.</p> <p><i>For maternity services:</i> where there is no suspicion of COVID-19 for either the patient or visitors, up to two visitors (one partner and one birthing partner) can accompany patients into the birthing suite.</p> <ul style="list-style-type: none"> • Following birth, one (1) nominated support person at a time may visit and only once daily and stay as long as the woman wants • No overnight stays except during labour and early post-partum • Operating theatre attendance is on a case-by-case basis at the discretion of the senior medical team • Mothers and one support person to accompany any baby in Special care units.
	Visitors to all other areas	<p>No visitors to be granted access unless approved by the Clinical Nurse Manager or senior manager on shift. A maximum of one visitor or legal guardian that has been screened will be granted access if approved</p> <p>Visitors with known COVID-19 contact or symptoms will not be granted access and will be directed to CBAC or to contact Health line or GP.</p> <p>Visitors with no suspicion of COVID-19 will be able to enter. A maximum of one visitor at any one time may visit a patient at the hospital or clinic.</p> <p>Formal visiting hours are adhered to, unless by prior arrangement with the ward.</p> <p>No non-essential visitors.</p>
COVID-19 Hospital Severe Impact RED ALERT	All areas	<p>No visitors to be granted access unless approved by the Clinical Nurse Manager or senior manager on shift. A maximum of one visitor or legal guardian that has been screened will be granted access if approved.</p> <p><i>Birthing Suite:</i> 1 support person can be with the labouring mother during birth and can stay postnatally until discharge - as long as they fulfil safety criteria.</p> <p>They need to stay in their bubble, in the room, as much as possible and wear a medical mask in public spaces/if there is a staff member in attendance.</p> <p><i>Women's Clinics:</i> 1 support person may attend sensitive appointments or scans.</p> <p><i>Child health services including inpatients, outpatients and NICU:</i> A maximum of one visitor or legal guardian that has been screened will be allowed to visit/accompany and cannot be swapped with another parent/guardian.</p> <p><i>Neonatal Intensive Care Unit and any special care units:</i> Visitor numbers will be restricted to one at a time and must be a parent or legal guardian.</p>