
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 family/whānau, carers and support person/people 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 family/whānau, carers and support person/people, 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 e.g. interpreters for patients with no or limited English. Please refer to separate advice on essential services.

This Policy references the Health and Safety at Work Act 2015 by providing a framework to support the mitigation of any risk to staff while visitors who meet the criteria visit all work place facilities.

This Policy references the COVID-19 Infection Prevention and Control - Interim Guidance for DHB Acute Care Hospitals.

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. Charge Nurse/Midwife Managers (or a senior clinician/manager as designated) can assess requests on a case by case basis. For example, exceptions will be considered on compassionate grounds for end of life or therapeutic 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

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- 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 – May include but not limited to Emergency Departments (ED), Intensive Care Units/High Dependency Units (ICU/HDU), Aged Care wards, Mental Health In-patient units, Maternity wards, Delivery Suite and Neonatal Intensive Care Unit (NICU), Special Care Baby Unit (SCBU), Coronary Care Unit (CCU) Oncology (including chemotherapy areas), Renal Outpatient and Inpatient areas, Immunology, or other Outpatient areas redesignated or identified by the DHB for the purpose of providing care to patients who have high vulnerability from potential exposure to COVID-19.

Guiding Principles

There is an expectation that:

- All staff will maintain respectful communication with family/whānau, carers and support person/people, treating each person with dignity and respect
 - That staff will be treated with respect and that abuse and aggression toward staff will not be tolerated
 - All staff will partner with family/whānau, carers and support person/people regarding this policy
 - All staff will work with Māori and Pacific health teams/leaders to ensure cultural supports and aspects of care are considered and actioned
 - Whānau liaison increases as the response level increases
 - Alternative means of communication between patients and whānau/ families are encouraged and enabled.
 - DHBs will minimise the number of access points into their facilities and ensure visibility of the expectations on visitors within the facility.
 - 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 and community.
 - Progression through the visitor policy levels should take into consideration factors such as hospital alert level, community incidence, workforce levels or other significant incidents such as security threat which require restricted management of visitor access to the facilities or a change in visitor alert level.
 - This policy provides the framework for visitor policies to be implemented at DHBs in accordance with their established and agreed incident management team framework and union or health and safety representative engagement forums.
 - Changes to this policy will occur as the environment and science identifies change needed. Any substantial change in direction will follow the usual national engagement process with sign off process via Health System Readiness and Responses Clinical Oversight Group.
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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

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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 clinical care and surgery where 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 and community incidence of COVID-19 or workforce levels e.g. Vaccination/ testing/ staffing MIQFs

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 whānau 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.

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 to mitigate the risk of Covid-19 spread by visitors to hospital facilities. The COVID-19 Hospital & Clinic Patient Visiting Policy is one of the ways that DHBs are mitigating the risk of COVID-19 to patients, staff and the wider community.

Visitors with symptoms

Visitors with acute respiratory symptoms (e.g. cough, sore throat, flu like symptoms) or abdominal pain and diarrhoea, or those who have been at a local area of interest or with a household contact to current COVID cases must not attend.

Signage should be in place at all entrances to reflect this. If a visitor appears unwell, i.e. presenting with flu-like symptoms and is not requiring urgent clinical care, staff should redirect to their GP or a community-based testing centre to get tested for COVID-19 and be required to self-isolate at home whilst awaiting the test result.).

While visiting any DHB facility, visitors will observe the policy requirements detail and made visible. These are to include (but limited to):

- Respectful of staff at all times and directions given
- Maintain the appropriate and effective wearing of masks in all public and patient areas
- Maintain physical distancing of 2m
- Minimise their movement within the facility to that of visiting the patient

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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 Charge Nurse/Midwife Manager or a senior clinician/manager designated within the DHB who is managing the patient. The reason for this is to ensure Personal Protection Equipment (PPE) 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, facetime Zoom, Skype etc.

Family/whānau, carers and support person/people 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 practices, including wearing masks, 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 and explanation of the policy.

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, the geographic area they are coming from, and whether they have visited any areas of interested or reside with any recently diagnosed Covid-19 whānau. If they are using the government's COVID-19 Tracer App, please encourage that Bluetooth tracing is turned on.

High – Risk Areas

If existing visiting policies within high-risk areas 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, wear a mask and limit movement within the facility to the area of the patient they are visiting.</p> <p><i>For maternity services:</i> where there is no suspicion of COVID-19 contact or symptoms for either the patient or visitors, two people (one partner and 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 encourage 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 Charge Nurse/Midwife Manager or senior clinician/manager on shift.</p> <p>Children under 12 years old must not visit except by prior arrangement with the Charge Nurse/Midwife Manager or senior clinician/manager on shift. If approved they must be visiting an adult from the same bubble.</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, visitors interpreting for elderly whānau/family members with no/limited English or someone to assist with mobility is allowed in addition to that person's permitted visitor/s.</p> <p>Consideration to be given to those attending appointments for poor or pending prognosis e.g. Cancer. 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</p>

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		whose appointment it is, are permitted if there are no alternatives to childcare available.
COVID-19 Hospital Initial Impact YELLOW ALERT	As per Green Alert	As per Green Alert
COVID-19 Hospital Moderate Impact ORANGE ALERT	Visitors to the high-risk areas identified and any ward with COVID-19 positive patients	<p>No visitors to be granted access unless approved by the Charge Nurse/ Midwife Manager or senior clinician/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 contact or symptoms 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 contact or symptoms for either the patient or visitors, one visitor (one partner or 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 first 2 hours 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 Charge Nurse/Midwife Manager or senior clinician/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 contact or symptoms 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 Charge Nurse/ Midwife Manager or senior clinician/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> One 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>

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		Women's Clinics: 1 support person may attend sensitive appointments or scans.
		Child health services including inpatients, outpatients and NICU: 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.
		Neonatal Intensive Care Unit and any special care units: Visitor numbers will be restricted to one at a time and must be a parent or legal guardian.