

PARLIAMENT OF VICTORIA

Pandemic Declaration Accountability
and Oversight Committee



Restrictions on hospital visitation under Pandemic Orders

Questionnaire

Purpose of questionnaire

The Pandemic Declaration Accountability and Oversight Committee, as part of its functions issued under the *Public Health and Wellbeing Act 2008*, is conducting a review of the Pandemic (Visitors to Hospitals and Care Facilities) Orders (Nos. 1 to 5) and the Pandemic (Public Safety) Order.

The Committee has issued this questionnaire to all Victorian hospitals to understand how the Orders has been implemented and to identify any issues hospitals have experienced related to the Orders.

The Committee notes that as of 11.59 pm 22 April 2022, restrictions on hospital visitation (except for the requirement to wear masks) were revoked. However, the Committee still wishes to understand the experience your organisation has had with the Orders, including the implementation of previous orders. In particular, challenges faced in enforcing the Orders and managing exemption requests.

Please note, this information may be used and published by the Committee as part its reporting.

Response

Please provide a response to the questionnaire by **9 May 2022**.

The completed questionnaire should be sent to: pdaoc@parliament.vic.gov.au.

Questions

1. Has your organisation implemented visitor restrictions that are in excess of the restrictions detailed in the orders? If so, when did this occur and in what circumstances?

Central Gippsland Health has followed Department of Health directives via the regular bulletins and associated guidance documents.

2. Has your organisation received any complaints about visitor restrictions? If so, what were the outcomes of these?

Feedback from our community has been varied. The majority has been positive in that it has been understanding of the need to keep patients, visitors and staff safe. It has been challenging for all involved.

On occasion, visitors have challenged our visitor restrictions and screening processes. At times, this has taken the form of a tense conversation with our Hospital Coordinator. At times, an Executive Director has been required to support the conversation.

We have had particular issues in relation to visitors/support people for labouring women. At times, the patient and/or family members have challenged our decisions and referred to Department of Health websites where the information has been slightly different to that of the orders. This has led to some challenging conversations.

3. Have there been instances where your organisation has misinterpreted the restrictions under the orders (e.g., when orders have changed or through confusing language in the content of the orders)?

We have not misinterpreted the orders, but in the early days of the pandemic when there were frequent changes, it did present challenges in terms of communicating this to our staff and community, and adjusting associated signage and messaging. As with all Health Services, we have had to become very agile and responsive to change.

4. How many applications for visiting exemptions has your organisation received and how many have been approved?

Throughout the pandemic and to date, visitor exemptions remain. This has been fairly consistent throughout. Unfortunately, it is difficult to provide an exact number but an estimate may be 2 to 3 per day.

5. What staff member of your organisation has assessed applications for exemptions?

CGH updates its Visitor Procedure each time new orders are issued. The line of communication for exemptions is via the Hospital Coordinator and if required, to an Executive Director - typically the Director of Nursing.

6. What steps were taken to inform all visitors and their relatives of visiting rules and capacity to apply for an exemption?

Visitor information was (and still is) communicated via our website, Facebook page, local newspaper and signage across all our sites.

7. What steps were taken to advise staff of the availability of the exemption process when dealing with the public and visitors to patients?

Frequent communications have been issued to our staff. At the commencement of the pandemic, CGH implemented a daily COVID DOS (Daily Operating System) meeting with relevant management and the Infection Control team. This has been the platform to process/implement all changes received from the Department of Health and other sources.

Initially, this was a daily occurrence (including weekends), but as the pandemic has settled somewhat, meetings have decreased to three times a week.

Meetings have also been held with all Managers within the organisation, particularly when planning for surge periods. From these meetings, an all staff communication is routinely issued from the CEO communicating key changes. This has been consolidated via the leadership teams working with their staff to ensure implementation.

8. What was your overall impression of the system, and could it have been improved?

The pandemic response has been challenging and has had to evolve as the pandemic evolved. In the main, the response has been very effective.

The key comment for improvement relates to mixed messaging, at times, which made it challenging to respond to community and staff.

Another comment relates to the length of time for updated visitor restriction directives. It has been useful throughout this period to regularly link with our regional partners and aim for a consistent approach. This has been a wonderful outcome of the pandemic.