

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?

Heywood Rural Health maintained visitor restrictions in accordance with all CHO directions except on one occasion when there was a local positive case in the community early in the pandemic (July 2020). HRH spoke to the residents of our aged care facility and we sought their views on ceasing visitors prior to closing the facility to visitors for a number of weeks. The residents were in agreeance and we did as they asked as this is their home.

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

HRH received very minimal complaints, however we did receive at least one complaint relating to the visiting hours that were in place. The miss-understanding on changes to our visiting hours occurred as a resident's primary contact did not pass on information to the rest of the family network like we had asked.

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)?

No but at times the instructions could have been made clearer, particularly when there were multiple direction/order documents to interpret and follow.

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

Nil that I recall. HRH made exemptions for inpatients and residents who were in *end of life care* however these situations were permissible in the directions.

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

If needed, it would have been either the Nurse Unit Manager or Director of Clinical Services

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

HRH used a variety of methods including speaking with residents at resident meetings, communicating with resident family members by phone, sending SMS update messages of changes to visiting rules and also loading up a letter of current arrangements to the HRH website (advising resident primary contacts via SMS that an update had been loaded onto the website).

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

HRH spoke with staff at daily meetings on visitor rules and changes when they occurred. Discussion also focused on reasons for exemption e.g. palliative care.

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

The system worked reasonably well given the nature of a 1 in 100 year event, although perhaps a predictable event. There was certainly a lot of confusion created by the main stream press reporting news in articles that made orders/directions read in the press as though they applied state wide, when in fact the orders often only referred to metropolitan Melbourne. I did have to explain/point out the difference on multiple occasions to staff, residents and resident families.

Later on in the pandemic when the rules were spread over multiple direction/order documents maintaining compliance was more complex than it needed to be.

At times, public announcements were made at the daily press briefings on changes to rules/directions with the “paperwork” taken multiple days to catch up, e.g. direction documents were not loaded up into web portals in a timely manner and multiple department web pages were out of date making it difficult to determine accurate information.