

**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](mailto: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?  
No
2. Has your organisation received any complaints about visitor restrictions? If so, what were the outcomes of these?  
We have had quite a number of complaints, particularly from carers, about not being allowed to accompany patients into the ED waiting area, surgical admissions area or the Specialist Clinics. Each complaint has been investigated and responded to individually and where required, staff have been informed of required changes to practice, ie; enabling specific carers to attend with a patient.  
Nil formal complaints about visiting restrictions.
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)?  
Not misinterpreted, however language often confusing and open for misinterpretation.
4. How many applications for visiting exemptions has your organisation received and how many been approved?  
Unknown  
This occurred only a handful of times. We did not maintain a separate record of these instances, as there was no requirement to; rather a note was made in the patient medical record for instances of inpatient visitor exemptions, along with a documentation in the inpatient visitor log.
5. What staff member of your organisation has assessed applications for exemptions?  
They were dealt with on a case by case basis and decisions were made in consultation with the ward/ area to be visited.
6. What steps were taken to inform all visitors and their relatives of visiting rules and capacity to apply for an exemption?  
Surgical patients were advised by Pre-Admissions staff that there were limits on visitors and exemption processes both on the phone and via patient letters.  
Concierge at the front door undertook face to face conversations with each visitor and contacted the NUM of ED, Surgical Admissions and Recovery or Ward 8 to discuss any possible exemptions.  
Both the hospital website and social media channels held information on visitor restrictions. A large poster was also installed at the patient entrances that detailed the COVID screening process which included hand hygiene, face masks and visitor restrictions.
7. What steps were taken to advise staff of the availability of the exemption process when dealing with the public and visitors to patients?  
All staff received a weekly memo that communicated key changes related to COVID-19 processes and management, which included relevant exemption information.  
  
All staff were invited to attend briefings where this information was relayed. If staff were unable to attend a video of the session was made available to view.

Relevant Managers were briefed on visitor restrictions and exemptions at a fortnightly COVID Operations Meeting.

Concierge and Ward Staff received separate briefings on visitor restrictions and the exceptions.

An entry protocol document detailing exemption process was distributed to Concierge Staff and stored in a folder on the Concierge desk.

A COVID matrix was developed and circulated to all staff and was accessible on a dedicated COVID page of the intranet and via Google Docs. This outlined current visitor restrictions and the exemptions.

The DH guidance on visitor restrictions was also uploaded and made accessible on the intranet and via Google Docs.

A COVID email address was set up and staff informed to use it for questions and clarification.

8. What was your overall impression of the system, and could it have been improved?  
Public expectations were that they could still visit and it was very difficult to enforce restrictions within health care setting. This was further exacerbated when restrictions within the general community were eased but still remained in the hospital setting. Frontline concierge staff have borne the brunt of trying to enforce the orders and we have seen a significant increase in code grey instances directly related to this.