

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?

No – we have always followed the DHHS recommendations and stayed within the scope outlined in the Pandemic orders.

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

Yes, we have endured a significant number of complaints about the restrictions, sometimes escalating to verbal abuse of our Screening staff. Screeners were directed to escalate any complaints to a member of our Executive team or the Nursing Coordinator to deal with. All complaints were managed on an individual basis by the Director of Clinical Services. If the complainant was assessed as falling under the 'permitted visitors' guidelines, they would be allowed entry. If not, the complainant was asked to leave. Community members also utilised social media platforms to voice their concerns.

Due to the large number of complaints and in an attempt to ease the stress on our Screeners, we put in place a process of advising all patients of the current visitor restrictions. We asked them to contact our Executive team to discuss any individual circumstances that may allow visitation under the Pandemic Orders 'Permitted Visitors' guidelines. If the visitation was approved, the details were added to our Visitor Exemptions list so that Screeners were able to look up approvals.

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)?

Yes – most definitely. We had trouble with the following:

- *Visitor restrictions stated in press conferences often contradicted the communication sent out to hospitals leading to confusion and anger from patients and visitors.*
- *Communication received was often open to individual interpretation due to the language used – sometimes it was quite unclear.*
- *In the most recent change, we received 2 very different communications that completely contradicted each other; Health Services CEO Bulletin 22/4/22 and the Guidance – visitors to hospital 23/4/22. This was very confusing and provided significantly conflicting directives.*

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

We have approved 1,891 exemptions since 8/10/2020. Whilst we did not record the exact number of requests received, I would estimate that we had at least 3 times the amount of requests. Probably something in the vicinity of 5,500 requests.

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

Normally requests were assessed by our Director of Clinical Services, however if she was not available they were also assessed by CEO, Director of Administrative Services or our Nursing Coordinator after hours.

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

- *Letters were delivered to all current patients each time there was a change to restrictions (including our Emergency Department patients).*
- *SMS's were sent out to all expected patients detailing restrictions and who to contact for exemptions.*
- *Our Website was updated each time there was a change and social media posts were created to notify the community of changes.*
- *Posters and visual aids were posted all over the hospital, particularly at each entrance to advise current 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?

Communication was emailed to all staff (work and personal email addresses) regarding the exemption process including any changes as they occurred. This communication was also printed out and posted on Screening desks and Reception areas for those staff that had not had a chance to see their emails.

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

I think our exemptions process worked well, despite the increased volume of work created for our DCS.

What could have been improved was the communication received from DHHS as it was often unclear or open to interpretation, or it was contradictory to other information that had been released to the wider community.