



**Hospital Services**

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11 July 2022

Dear [REDACTED]

**Re: OIA request – Visitor policy and related incidents**

Thank you for your Official Information Act request received 14 June seeking information from Waitematā District Health Board (DHB) about visitor policy and incident reports.

Before responding to your specific questions, it may be useful to provide some context about our services.

Waitematā is the largest and one of the most rapidly growing health districts in the country, serving a population of around 650,000 across the North Shore, Waitakere and Rodney areas. We are the largest employer in the district, employing more than 8,900 people across more than 80 locations.

In addition to providing care to our own resident population, we are the Northern Region provider of forensic mental health services and child rehabilitation services, plus the metro Auckland provider of child community dental services and community alcohol and drug services.

In response to your request, we are able to provide the following information:

- 1. I am requesting information under the Official Information Act 1982, as to what Waitākere Hospital's visitor policy was, on the 6th of June, 2022 in the Waitakere Hospital Emergency Department.**

Waitematā, Auckland, Northland and Counties Manukau share the attached regional policy, which has been in effect since December 2021 and was in place on 6 June 2022. Please refer:

**Attachment 1** - Kaitiaki and Visiting Policy – Life in red or orange.

Please note the 'Service Exceptions' section (pages 13-17) for Waitematā, including the exception for our emergency departments on page 16.

- 2. I am secondarily seeking information as to how many incidents (as classified by having incident reports produced) have occurred at the doors of Waitakere and North Shore hospitals, in direct or indirect relation to issues regarding the hospital visitor policy.**

There have been two incidents at front-of-house at either North Shore or Waitakere hospitals relating to the visitor policy since the first Alert Level 4 lockdown in March 2020. This information was collated using the following specific event types: i.e. visitor policy; security break; failure to follow policy.

I trust that this information is helpful.

Waitematā DHB supports the open disclosure of information to assist community understanding of how we are delivering publicly funded healthcare. This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released.

If you consider there are good reasons why this response should not be made publicly available, we will be happy to consider your views.

Yours sincerely



**Executive Director Hospital Services - Waitematā District  
Te Whatu Ora – Health New Zealand**



NORTHLAND DISTRICT HEALTH BOARD  
*Te Pouri Hāsona Ā Rohe O Te Tai Tokerau*



Waitematā  
District Health Board  
Best Care for Everyone

## Kaitiaki and Visiting Policy – *Life in red or orange*

### Purpose

The purpose of this policy is to communicate and guide the actions which need to be taken by all staff to prevent the transmission of COVID-19. It explains the circumstances in which current inpatients can receive visitors and be supported to safely return home or transfer to another service. It also describes the process for managing people who are attending outpatient appointments and community based care as well as people attending on approved DHB business. This policy supports the national evolution from elimination to a long term business as usual approach (BAU) to living as safely as possible with COVID-19. DHBs need to be responsive to local context, taking into account the vulnerability of our population and the safety of our workforce.

This policy is aligned with our DHB's Tikanga best practice, enacts Te Tiriti o Waitangi and seeks to reduce inequities. It safe guards the integrity of respect of tangata whenua (original people of New Zealand) while upholding our position to whakamana (being conscious of the dignity of others) the people who reside in their rohe (territorial boundaries).

Our obligations under Te Tiriti o Waitangi include a need to provide an environment in which Māori thrive and achieve equity and for that the involvement of their whānau is essential. The whakatauaki below talks of the importance of weaving together the best outcomes for our community, in the context of the needs of their whānau and hospital services. It is our hope that this policy will set the foundation for better and more inclusive pathway of oranga/health.

*“He raranga whaariki  
He raranga tangata”*

*The weaving together of the foundation mat  
Means the weaving together of people*

The Northern Region's DHBs values (appendix 1) reflect the important role family/whānau and visitors have in supporting patients' recovery. In addition to the social and emotional support they provide through visiting, some family/whānau want to participate more directly by providing physical care. The Northern Region's DHBs supports family/whānau direct participation in care and their involvement is valued as an important adjunct to patients' care and comfort.

The policy also reflects emerging international evidence gathered since the beginning of the COVID-19 global pandemic regarding the value of whānau, family and friends as essential Partners in care. This policy sets out how this approach can be enabled to facilitate manaakitanga through practice that is mana enhancing, respectful and ensures safe, quality patient centred care with comfort, dignity and privacy while preventing the risk of transmission of COVID-19.

For the purposes of this policy, Kaitiaki, which translates as guardian in Te Reo Māori is used to describe Partner in care.

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## Contents

Kaitiaki and Visiting Policy – <i>Life in red</i> .....	1
Purpose.....	1
Policy Summary .....	3
Scope .....	3
Definitions .....	4
Policy principles.....	5
Visiting COVID-19 suspected or confirmed patients .....	7
Escalation.....	8
Kaitiaki .....	8
Manaakitanga .....	8
Staff Responsibilities .....	10
Charge Nurse/Midwife, Managers and Shift Co-ordinators.....	10
Duty Nurse Managers/After-hours senior nurse.....	10
Security.....	11
Visitor Entrance Coordinator .....	11
Entrance Screeners.....	11
Carer education and family meetings.....	11
Outpatient clinics or procedures .....	12
Visitors supporting service delivery eg: couriers, medical suppliers.....	12
Service Exceptions .....	13
Procedure .....	18
Tikanga.....	20
References.....	21
Appendix 1 – Values .....	22

Document ID:	A1521459	CMH Revision No:	v0.1
Service :	Nursing Clinical	Last Review Date :	03/12/2021
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## Policy Summary

- All Kaitiaki must access health service facilities through the nominated screening App and designated access points and be screened and registered to enable contact tracing on site
- Patients can nominate two registered whānau as their Kaitiaki
- One Kaitiaki can visit at one time per day between the hours of 8am to 8pm
- Alternatively one Kaitiaki can visit after hours from 8pm to 8am if prearranged with Charge Nurse
- It is not recommended children under 15 visit the hospital. Arrangements to accommodate this must be made with the Charge Nurse Manager in advance
- All visitors must wear a level 2 procedure mask (surgical or medical mask) at all times unless they have an exemption while entering and moving about any DHB sites and services or services in the community or at home
- All visitors must adhere to physical distancing of one metre at all sites and services
- Patients with confirmed or suspected COVID -19 can have one Kaitiaki as prearranged in advance with the Charge Nurse/Midwife Manager and Infectious Diseases (ID) consultant (See the [Visiting COVID-19 suspected or confirmed patients](#) section)
- Exceptions to visiting are made based on compassionate grounds and assessed on a case by case basis This must be referred to the Charge Nurse Manager to discuss with the Clinical lead to be considered as an exception. Refer to [Service exceptions](#)
- If there is any disagreement between the patient/Kaitiaki regarding visiting numbers and hours staff should be escalated (see [Escalation](#) for more detail) to:
  - **In hours:** the Charge Nurse Manager Divisional Senior Nurse or Midwife (CND/ADON/Chief Midwife/Nursing Director. If remains unresolved should be escalated to the Chief Nurse or Chief Advisor Tumu Tikanga (or delegate) for Māori whānau.
  - **Out of hours:** to the Nurse in Charge, the Clinical Nurse Manager/Duty Nurse Manager who can discuss with the General Manager/Director on Call. If it remains unresolved the matter should be escalated to the Chief Nurse or Chief Advisor Tumu Tikanga (or delegate) for Māori whānau

## Scope

This policy applies to all visitors across the Northern region including outpatients, inpatients and those utilising community services. Given whānau and staff move across DHBs either as patients, contractors or employees, this policy has been agreed to by our regional partners and is aligned with our Counties Tikanga: “Haumara te taonga - Keeping our treasures safe”.

This policy includes principles, staff responsibilities, no-visitor exceptions, service exceptions and procedures.

A distinction between whānau/family/friends, other visitors and a designated Kaitiaki acknowledges the important role this person plays in safer patient care and facilitating manaakitanga alongside staff. Some patients are considered to be at higher risk of harm without specific whānau support when compared with others. Having a designated Kaitiaki should be prioritised for their safety and wellbeing.

All staff and contractors must be vaccinated against COVID-19. The DHBs accept and treat known and unknown COVID-19 positive patients for health care interventions for comfort and treatment as well as planned and emergency life sustaining care and support. It is not ethical to administer a process mandating vaccination certificates for patients or other visitors. A set of policy principles underpin foundational

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standards of practice to while minimising the transmission of COVID-19. They outline expectations to support consistent regional practice across the DHBs as outlined below.

## Definitions

Term	Definition/Description
Amber Care (CMH only) End of life care/ Manawanui/NDHB	A communication and planning tool that supports a systematic approach to managing the care of hospital patients who are facing an uncertain recovery and are at risk of dying despite treatment/end of life care pathway guiding individualised care for any patient who is dying in the acute hospital setting
Carer	Anyone including older children and adults who looks after a family member, partner or friend who needs help because of their illness, frailty, disability, mental challenges or an addiction and cannot cope without their support. The care provided is unpaid
Escalation	The process of seeking additional support from key staff depending on the situation to obtain information and assistance to respond to the individual needs of patients and whānau outside standard care and treatment processes
Kaitiaki	Anyone who provides essential care needs to a patient as part of their health experience. The term in its literal sense means guardian but in this context it is the Te Reo term describing Partner in care and inclusive of support person, key contact, carer, parent or other whānau with an essential support role. A trusted person designated by a patient to provide assistance, reassurance and advocacy
Manaakitanga	Practice that is mana enhancing, respectful and ensures safe, quality patient centred care with comfort, dignity and privacy which facilitates compassion
Non-DHB workers	A person attending any DHB site for the purposes of carrying out work or providing a service (e.g. contractors, company representatives etc.) and must be fully vaccinated against COVID-19. MoH vaccine certification should be requested by staff at point of entry (either the paper copy or the electronic phone record)
Patient	All inpatients, people attending an outpatient or community appointment for an assessment and people presenting at the emergency department (ED) for treatment
Partner in care	Kaitiaki
Rohe	Territorial boundaries
Staff	All people employed and paid by the DHB to complete a particular function/task
Tangata whenua	Original people of New Zealand
Visitor	An inclusive term describing any person who spends time at the DHB for the purpose of duty, friendship or business
Visitor screening	A process of checking all visitors on arrival to designated main hospital entrances for the purpose of checking for signs of COVID-19 through a series of questions
Visitor screening App	A digital application developed specifically to register visitors to the DHB and document their COVID-19 screening profile, arrival time, proposed departure time,

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Term	Definition/Description
	patient and ward or clinic they will be visiting and other key information for screening an clinical staff via DHB intranet on all registered PCs, lap tops, mobile phones and other devices
Whānau	Relationships that are intrinsically linked and connected through whānau, hapu and iwi. Whānau extends beyond the concept of the family unit, nuclear family or biological
Whakamana	Being conscious of the dignity of others

## Policy principles

1. All visitors including repeat visitors must access health service facilities through the nominated screening App and designated access points and be screened and registered to enable contact tracing prior to entering the site using questions based on current case definition. Patients that answer YES to any one of these questions will not be permitted to enter the premises except to facilitate manaakitanga or for other exceptional circumstances.

**NOTE: If the person intending to visit answers YES to any screening questions, and the patient being visited is imminently deteriorating, this should be escalated to the Charge Nurse Manager to discuss with the clinical lead to be considered as an exception.**

**NOTE: There are other exceptions enabling additional visitors to be assessed on a case by case basis for a range of different reasons. This request or need must be escalated to the Charge Nurse Manager to discuss with the Clinical lead to be considered as an exception.**

2. All patients will be supported to nominate two registered whānau preferably from the same household who may visit as a Kaitiaki
3. One Kaitiaki can visit for one visit per day within the hours of 8am to 8pm or alternatively can visit between the hours of 8pm and 8am if prearranged with Charge Nurse

**NOTE: For patients on the AMBER care or /end of life add Northland pathway, the maximum number of visitors can be increased to three people at the bedside at a time**

4. Staff will use clinical judgment including an assessment of patient status, situation, consistency and clinical environment for all decisions
5. All visitors must wear a level 2 procedure mask (surgical or medical mask) unless they have an exemption (see MoH mask exemptions) at all times while entering and moving about any DHB sites and services or services in the community or at home. Level 2 procedure masks will be provided to visitors

**NOTE: Visitors symptomatic with an acute respiratory tract infection will NOT be permitted to enter the premises**

6. All visitors must adhere to physical distancing of one metre at all sites and services. If this is not practical, such as visiting shared patient rooms, a level 2 procedure mask must still be worn

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***If you are not reading this document directly from the [Document Directory](#) this may not be the most current version.***

7. Maintain respectful communication with whānau treating each person with dignity and respect
8. Work with Māori and Pacific health teams ensuring cultural aspects of care are respected/actioned
9. Kaitiaki with Service or Guide dogs are permitted if they can comply with *Dogs visiting in hospital policy* or other local guidelines
10. Acknowledge the importance of escalation to navigate different views and ensure appropriate advice and guidance is provided on cases of significance to Māoridom

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## Visiting COVID-19 suspected or confirmed patients

*Visiting patients who have been admitted with COVID-19 are only permitted on a case by case basis at the discretion of the Clinical Nurse/Midwife Manager and senior clinician after liaison and approval with Infectious diseases/Infection Prevention and Control (IP&C) and the COVID response manager and under the supervision of nursing staff. The reason for this is to ensure 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, Zoom, Skype etc*

- Undertake a risk assessment and advise the visitor of the risks before the visit takes place.
- Ensure a whānau spokesperson is identified for the patient so they can be updated on critical information and visiting level changes
- Ensure the visitor is met on entry to the ward / area and appropriate guidance is given to maintain safety and adhere to social distancing
- Inform the visitor that they will be considered a casual contact.  
Following the visit Auckland Regional Public Health Service (ARPHS) will follow up with the visitor relating to the management of casual contacts. Provide the relevant information to ARPHS Emergency Operations (ADHB) [arphsops@adhb.govt.nz](mailto:arphsops@adhb.govt.nz) particularly if there are any PPE breaches which would change the categorisation/risk profile of the visitor
- One Kaitiaki will be allowed on compassionate grounds provided they are supported in the donning, doffing, and correct use of appropriate PPE. To minimise risks to the Kaitiaki they will be shadowed at all times by a nurse to supervise and validate the appropriate use of PPE.
- The Kaitiaki needs to be screened prior to arrival in regards to if they have visited a location of interest, are asymptomatic and have not been in contact with any other COVID cases. We need to determine if the Kaitiaki is already being treated as a close contact or positive case themselves. If not we would need to inform ARPHS [arphsops@adhb.govt.nz](mailto:arphsops@adhb.govt.nz) as whānau will become a close contact.
- Community cases at Jet Park will need an exception to leave the facility – to be discussed with the COVID response manager.
- Provide the relevant information to ARPHS Emergency Operations (ADHB) [arphsops@adhb.govt.nz](mailto:arphsops@adhb.govt.nz) particularly if there are any PPE breaches

## Digital support to enable patient communication with Kaitiaki and other visitors

If the senior nurse is unable to accommodate a designated Kaitiaki or another visitor to physically meet with the patient for any reason, the following must be undertaken:

- a. Emphasise and explain the rationale for not being able to have visitors with the patient and whānau and consider future opportunities if possible
- b. Suggest a range of alternative methods for keeping in touch via phone, face time, internet based platforms and/or social media and where possible
- c. Support virtual visiting through free Wi-Fi to the patients personal devices or supply a DHB tablet or other device for use by the patient and assist them to use it
- d. Work with other supports and teams within the DHB where specific cultural or other advocacy and support is required to assist with whānau connection
- e. Ensure Tikanga best practice and strategies to enact Te Tiriti o Waitangi
- f. Work with the patient and Kaitiaki to identify a key contact/visitor for daily updates who can then share with the broader whānau
- g. Encourage visitors to spend the time they would be visiting on preparing for the patient's return home.

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## Escalation

1. Staff can escalate any changes to a patients designated Kaitiaki through escalation to the Charge Nurse Manager to discuss with the clinical lead and note any changes
2. If unsure discuss with the clinical team and escalate to the Divisional Senior Nurse or Midwife (CND/ADON/Chief Midwife/Nursing Director) in hours or Duty Nurse Manager/Senior Nurse out of hours
3. If there is any disagreement between the patient/Kaitiaki regarding visiting numbers and hours staff should be escalated to:
  - a. **In hours:** the Charge Nurse Manager Divisional Senior Nurse or Midwife (CND/ADON/Chief Midwife/Nursing Director). If remains unresolved should be escalated to the Chief Nurse or Chief Advisor Tumu Tikanga (or delegate) for Māori whānau.
  - b. **Out of hours:** to the Nurse in Charge, the Duty Manager who can discuss with the General Manager/Director on Call. If remains unresolved should be escalated to the Chief Nurse or Chief Advisor Tumu Tikanga (or delegate) for Māori whānau
4. Escalation for security and entrance screeners is via the Visitor Entrance Coordinator. Any aggressive behaviour must be escalated to security staff at entrance screening points and/or additional security staff
5. The Chief Advisor Tikanga or delegated authority makes the final call when considering compassionate circumstances for a Māori patient, Kaitiaki and whānau. This may be in consultation with the Chief Nurse for a clinical perspective.

## Kaitiaki

Is considered a trusted person designated by a patient to provide assistance, reassurance, advocacy and other support as needed during their health care stay/experience. They are usually a family member, partner, carer or other whānau who facilitate a range of tasks contributing to an enhanced health care experience.

Kaitiaki may:

- Bring in food for patients when visiting. Food brought in for patients should be aligned with the DHB's National Healthy Food and Drink Policy
- Bring other belongings to patients when visiting including clothing, footwear, hearing aids, glasses, dentures, breast milk, digital devices such as mobile phones and charges and other items as needed
- Facilitate specific cultural or religious traditions or rituals for patients as long as there is no impact on other patients related to loud singing, praying or other activities

## Manaakitanga

Key functions undertaken by a Kaitiaki support patient safety but also play an important role in facilitating manaakitanga. The examples listed below provide an illustration of key tasks commonly undertaken by a designated Kaitiaki.

**NOTE: Manaakitanga; mana enhancing, mutual respect, and is our obligation to ensure safe, quality and patient centred care, with the comfort, dignity and privacy of the inpatient paramount.**

**NOTE: The list of examples below is not exhaustive but a guide only. Staff discretion must be applied.**

Document ID:	A1521459	CMH Revision No:	v0.1
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### Examples of Kaitiaki supporting manaakitanga

Category	Example of an action supporting manaakitanga
Tikanga	<ul style="list-style-type: none"> <li>Whanaungatanga (meaningful connections), whakawhanaungatanga (establishment and maintenance of relationships) and assistance in decision making and wairua (spiritual wellbeing)</li> </ul>
Emotional and social support	<ul style="list-style-type: none"> <li>Spending time with someone who's condition has worsened and/or they have suffered a sudden and severe trauma/injury and are extremely anxious</li> <li>Potentially about to receive a diagnosis that will be distressing and they will require reassurance and support</li> <li>Spending time with someone experiencing a long inpatient stay</li> <li>Spending time with whānau who have travelled long distances domestically or internationally to visit them and they haven't seen them for a long time</li> <li>To support someone considered to be at the end of their life and will die soon</li> </ul>
Physical assistance and support	<ul style="list-style-type: none"> <li>Meal preparation and feeding and/or bringing in food/drink for personal dietary needs</li> <li>Mobility support</li> <li>Hygiene assistance</li> <li>Support related to any physical disability</li> <li>Support related to injury or illness</li> <li>Assistance with dressing and grooming</li> </ul>
Behaviour and support with mood such as agitation	<ul style="list-style-type: none"> <li>Assisting with strategies that de-escalate agitation, confusion and aggression related to cognition, comprehension, mental state, emotional needs and the impact of illness or treatment</li> </ul>

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Category	Example of an action supporting manaakitanga
Cultural support	<ul style="list-style-type: none"> <li>Delivering specific food and meals</li> <li>Prayer and other religious practice/rituals</li> <li>Advocacy for other culturally specific preferences</li> </ul>
Communication and education support	<ul style="list-style-type: none"> <li>Cognition and memory support</li> <li>Language support (excluding interpreter services)</li> <li>Support around education/information for discharge/transfer</li> </ul>
Significant life events to be shared	<ul style="list-style-type: none"> <li>Giving birth</li> <li>Assisting someone who is dying or at the end of their life</li> <li>AMBER Care (CMH only) or End of life care/Manawanui pathway</li> <li>Supporting a sick child or a child undergoing surgery/treatment</li> </ul>
Delivery of personal items	<ul style="list-style-type: none"> <li>The delivery of personal items to the patient such as clothes, digital devices like phones/charges/laptops/tablets, mobility aids, glasses, dentures and anything else</li> </ul>
Way finding	<ul style="list-style-type: none"> <li>Accompanying a patient to assist them reach their destination/attend a health appointment and to support them while they wait and during the appointment</li> </ul>

## Staff Responsibilities

### Charge Nurse/Midwife, Managers and Shift Co-ordinators

- Ensure the fair and consistent application of this policy including the appropriate use of discretion when it is indicated
- Speak to your patients; inform them of the visitor restrictions in place and help them find alternative means of keeping in touch via phone, social media or other digital platforms such as Zoom
- Facilitate manaakitanga when making decisions about visiting given the clinical judgement: patient status, situation, consistency and clinical environment as all these aspects need to be taken into account. If unsure discuss with the Divisional Senior Nurse or Midwife (CND/ADON/Chief Midwife/Nursing Director) in hours or Clinical Nurse Manager/Duty Nurse Manager out of hours.
- Inform the MDT of the decision and document in the health record
- Ensure Visiting List is contemporaneous and alerts security of prearranged afterhours visits (8pm–8am)
- Identify Kaitiaki needing education to support discharge planning and processes
- Authorise parking discounts and meals for Kaitiaki when appropriate

### Duty Nurse Managers/After-hours senior nurse

- Provide after-hours support to ward staff as required to facilitate manaakitanga in decision making given the clinical judgment: patient status, situation, consistency and clinical environment as all these aspects need to be taken into account

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## Security

- Check that people attending entrances have a valid reason
- Provide security support to the Visitor Entrance Coordinator to manage Kaitiaki and other visitors
- Manage queuing ensuring social distancing of one metre and manage gathering crowds

## Visitor Entrance Coordinator

- Manage the briefing and induction process for screeners for each shift
- Enforce the policy and manage exceptions
- Liaise with wards and Duty Managers and Security to manage exceptions and changes in policy
- Ensure rapid processing of Kaitiaki for the quickly deteriorating patient/dying patient
- Identify and manage any emerging risks
- Allocate screeners to areas according to meet any changing needs
- Review the shift with screeners for identification of improvement

## Entrance Screeners

- Ask all visitors and patients the screening questions as written on the Screening Form/App
- Visitor screeners can allow any person up to the ward if they:
  - answer NO to all the questions AND
  - they are within the appropriate visitor times AND
  - the screening App shows only ONE Partner in care at the bedside AND
  - visiting is allowed for this patient
- Visitors that answer YES to any screening questions are not routinely allowed entry. Staff must provide visitors who not able to see the patient for any reason with relevant information (website or other) and suggest they return home, contact Health line 0800 358 5453 or their GP for further information and options
- Register Kaitiaki contact details to enable contact tracing
- Kaitiaki are welcome to visit between 8am and 8pm
- A maximum of one Kaitiaki at a time is permitted
- Generally it is not recommended children under 15, visit the hospital, however in certain circumstances a young person can be a significant support person in their whānau/family and this may include to the patient. Arrangements to accommodate this must be made with the Charge Nurse Manager. Other exceptions include people under 15 years of age visiting under compassionate circumstances as negotiated and agreed with the Charge Nurse Manager
- Kaitiaki must have answered NO to all screening questions and have pre-arranged their visit with the Charge Nurse/Midwife Manager
- Virtual means of contact should still be encouraged/facilitated

## Carer education and family meetings

The provision of education and the facilitation of family meetings is to involve the designated Kaitiaki to ensure safe and timely patient discharge and when virtual teaching is not suitable. The Kaitiaki is the person who will be most involved in supporting the patient at home. While children under 15 are not usually considered suitable, there may be some circumstances where a person under 15 is a significant support person for older or other whānau and they will need to be assisted to fulfil this role by working with the Charge Nurse Manager.

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The must have answered NO to all screening questions.

Examples of key tasks are:

- Using equipment safely, hoists, syringes, mobility equipment
- Other activities that support the partner in care with the management of a disability or condition out of hospital
- Medication support
- Dressings and/or learning intravenous administration
- Collecting patients from the discharge lounge

**NOTE: The Kaitiaki is the person who will be most involved in supporting the patient at home. There may be circumstances where children under 15 are routinely allowed because they are a significant support person for the patient.**

- Whānau attending for education, family meetings or to support discharge planning are not considered visitors.
- Virtual means of contact should still be encouraged and supported for involving more than one whānau at a time

## Outpatient clinics or procedures

- Outpatients will be allowed through if they show their appointment letter AND answer NO to all the screening questions
- Outpatients who are elderly, or frail, requiring emotional support, or communication assistance (not interpreter services) may have one Kaitiaki attend with them if the facility supports physical distancing of one metre and they have answered NO to all screening questions
- ANY person who answers YES to a question will require a call through to the clinic/outpatient area for clarification prior to sending through
- A phone call is not required if all screening questions are answered as NO
- Children under 15 are discouraged but will be enabled to accompany the patient if the they are a significant support person for their whānau
- Paediatric outpatients may also have a Kaitiaki

## Visitors supporting service delivery eg: couriers, medical suppliers

All business visitors to sites must be screened and those who answer YES to any screening questions will not be permitted entry. Any deliveries or goods impacted by this decision must still be delivered to their destination without delay (contact Orderly Service using the relevant App/process).

Document ID:	A1521459	CMH Revision No:	v0.1
Service :	Nursing Clinical	Last Review Date :	03/12/2021
Document Owner:	Patient Experience Lead	Next Review Date:	03/12/2022
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<i>If you are not reading this document directly from the <a href="#">Document Directory</a> this may not be the most current version.</i>			

## Service Exceptions

Area	Auckland	CM Health	Northland	Waitematā
<b>Critical Care</b>	Two nominated Kaitiaki. One visitor per day. Compassion exemption for patients with COVID-19 when the patient is at the end of life (Expected to die within the next 12 hours). In this situation a small number of visitors is allowed but no one < 14 years of age. Must be close family/next of kin who can visit for a short time (up to 4 hours)	One named Kaitiaki on a case-by-case basis and with prior approval of Charge Nurse/Midwife Manager None - when they have a COVID patient	TBD	One named Kaitiaki on a case by case basis and with prior approval of Charge nurse/Midwife Manager None – when they have a COVID patient
<b>Neonatal Care</b>	Parents or caregivers only. Only one parent/caregiver can at a time, except during a handover period where two parents may be present for no more than two hours. No tamariki, including brothers and sisters under 14 years are allowed to visit except for compassionate exceptions	Mother and father or Kaitiaki for the duration of the admission. No more than two nominated persons in total		Mother plus one One Kaitiaki nominated for one visit per day

<b>Document ID:</b>	A1521459	<b>CMH Revision No:</b>	v0.1
<b>Service :</b>	Nursing Clinical	<b>Last Review Date :</b>	03/12/2021
<b>Document Owner:</b>	Patient Experience Lead	<b>Next Review Date:</b>	03/12/2022
<b>Approved by:</b>	Chief Nurse and Director of Patient/Whanau Experience	<b>Date First Issued:</b>	03/12/2021
<b><i>If you are not reading this document directly from the <a href="#">Document Directory</a>, this may not be the most current version.</i></b>			

Area	Auckland	CM Health	Northland	Waitematā
<b>Paediatric Wards</b>	Parents or caregivers only. Only one parent/ caregiver can at a time, except during a handover period where two parents may be present for no more than two hours. No tamariki, including brothers and sisters under 14 years are allowed to visit except for compassionate exceptions	Mother and father or Kaitiaki for the duration of the admission. No more than two nominated persons in total. No siblings unless under exceptional circumstances and approved by senior team		Two parents or two primary care givers may be present throughout the stay
<b>Maternity</b>	<p><b>Birthing or Assessment on WAU:</b> One person can attend for assessment and during early induction in support of the woman and up to two birth partners throughout labour and birth until transfer to the postnatal ward</p> <p><b>Antenatal clinic visits:</b> One support person may attend</p> <p><b>Post-natal Ward:</b> Two nominated visitors and one at a time (The nominated visitors should be the same as the birth support people).</p>	<p><b>Labor and Birthing</b> Woman presenting for labour and birthing at Middlemore hospital or a primary birthing unit are able to have up to three visitors to facilitate manaakitanga for labor, still birth, extreme distress. Ideally it's the same people to minimise risk</p> <p><b>Postnatal Hospital/ Unit Care</b> Women admitted for postnatal care at Middlemore Hospital or at a primary birthing unit will be able to have one Partner in Care with them during the hours of 8am-8pm</p>		<p><b>Labour and birthing</b> During labour: Mother plus one support person</p> <p><b>Post natal stay:</b> Two nominated Kaitiaki, one at a time but can be both on the same day</p>

<b>Document ID:</b>	A1521459	<b>CMH Revision No:</b>	v0.1
<b>Service :</b>	Nursing Clinical	<b>Last Review Date :</b>	03/12/2021
<b>Document Owner:</b>	Patient Experience Lead	<b>Next Review Date:</b>	03/12/2022
<b>Approved by:</b>	Chief Nurse and Director of Patient/Whanau Experience	<b>Date First Issued:</b>	03/12/2021
<i>If you are not reading this document directly from the <a href="#">Document Directory</a> this may not be the most current version.</i>			

Area	Auckland	CM Health	Northland	Waitematā
<b>Maternity</b>	<p>Able to visit from 7am to 8pm. All visitors must stay in the room (or bed space in shared rooms) allocated to the person they are visiting. A support person can stay overnight by negotiation with the Midwife in charge and if a single room can be allocated. Overnight support people will sign an agreement outlining the expectations of their stay. If an overnight stay is not possible the support person may stay from 7am to 8pm. Request for discretionary consideration for changes to the above on compassionate grounds should be discussed with the midwife in charge. Children to stay home but please discuss with the midwife in charge if children need to attend for short visits or on compassionate grounds to enable partners to be in attendance during the day.</p>			

<b>Document ID:</b>	A1521459	<b>CMH Revision No:</b>	v0.1
<b>Service :</b>	Nursing Clinical	<b>Last Review Date :</b>	03/12/2021
<b>Document Owner:</b>	Patient Experience Lead	<b>Next Review Date:</b>	03/12/2022
<b>Approved by:</b>	Chief Nurse and Director of Patient/Whanau Experience	<b>Date First Issued:</b>	03/12/2021
<i>If you are not reading this document directly from the <a href="#">Document Directory</a> this may not be the most current version.</i>			

Area	Auckland	CM Health	Northland	Waitematā
<b>Emergency Department</b>	One Kaitiaki in the department One Kaitiaki in the Clinical decision unit	Each patient will be allowed one support person but they must remain in the room and comply with PPE requirements and assist with care. Any further family support required must be discussed and approved by the Charge Nurse and/or Senior Doctor	One Kaitiaki nominated for one visit per day	No visitors outside of compassionate grounds
<b>Mental Health</b>	Follow standard guideline but visiting will be determined by the whaiora's current clinical presentation and will be agreed on a case by case basis. Face to face visiting will be substituted by video calls where possible, Use of visiting rooms and planned in advance	Specific procedure. Must contact reception/service in advance for availability of visiting	Separate policies	<b>Mental health inpatient unit, medical assessment and diagnostic unit, Haematology day stay, surgical day stay, medical day stay, dialysis units, Ward 12 – no visitors outside compassionate grounds due to the inability to physically distance</b>
<b>All other areas</b>	<b>Outpatients</b> One support person	<b>Renal - one key support person for patients who are high needs or have concerns around their outpatient dialysis i.e. will not attend if the key support person is not allowed to stay with them. This is a decision made by the CNM at each unit.</b> <b>Outpatients</b> One support person	<b>Haematology – no visiting</b>	<b>Outpatients</b> One support person

<b>Document ID:</b>	A1521459	<b>CMH Revision No:</b>	v0.1
<b>Service :</b>	Nursing Clinical	<b>Last Review Date :</b>	03/12/2021
<b>Document Owner:</b>	Patient Experience Lead	<b>Next Review Date:</b>	03/12/2022
<b>Approved by:</b>	Chief Nurse and Director of Patient/Whanau Experience	<b>Date First Issued:</b>	03/12/2021
<b><i>If you are not reading this document directly from the <a href="#">Document Directory</a> this may not be the most current version.</i></b>			



Area	Auckland	CM Health	Northland	Waitematā
		Franklin Memorial Hospital (FMH) Contact ward in advance for availability of visiting		

<b>Document ID:</b>	A1521459	<b>CMH Revision No:</b>	v0.1
<b>Service :</b>	Nursing Clinical	<b>Last Review Date :</b>	03/12/2021
<b>Document Owner:</b>	Patient Experience Lead	<b>Next Review Date:</b>	03/12/2022
<b>Approved by:</b>	Chief Nurse and Director of Patient/Whanau Experience	<b>Date First Issued:</b>	03/12/2021
<i>If you are not reading this document directly from the <a href="#">Document Directory</a> this may not be the most current version.</i>			

## Procedure

Person	Nature of visit	Action
Outpatients with appointments	GP referred Radiology patients for chest X-Ray	<ul style="list-style-type: none"> <li>Screen</li> <li>If they answer YES to any screening questions, contact the department for their advice and extension number</li> <li>If answer NO to all questions provide a mask, a dated Visitor sticker and send through</li> </ul>
	Patients attending Infusion Centre or Haematology day ward	<ul style="list-style-type: none"> <li>No support people unless approved by the Charge Nurse Manager due to small space in the unit. Approval may be given if a Kaitiaki is required to assist the patient with communication or to assist with self-cares</li> <li>If answer NO to all screening questions &amp; the temperature is normal provide a mask, a dated Visitor sticker</li> <li>If not on the outpatient list please call the ward coordinator to confirm clinic attendance</li> <li>If YES to any screening questions and/or have a raised temperature please contact the ward coordinator for further clinical advice required</li> </ul>
	Other patients attending appointments (have an appointment letter or text message)	<ul style="list-style-type: none"> <li>Screen</li> <li>If answer YES to any screening questions, decline and advise the department</li> <li>If answer NO to all questions provide a mask, a dated visitor sticker and send through</li> </ul>
	Patients who have been phoned and asked to attend appointment	<ul style="list-style-type: none"> <li>Screen</li> <li>Contact department to check appointment and advise result of screen</li> <li>If appointment confirmed and answer NO to all questions provide a mask, a dated Visitor sticker and send through</li> </ul>
	Patient attends with support people	<ul style="list-style-type: none"> <li>If patients are accompanied by a Kaitiaki because they need assistance (eg: elderly/frail person with a carer needing emotional support, assistance with communication/language but not interpreting) and the ONE Kaitiaki also passes the screening, provide both with a mask, a dated Visitor sticker and send through</li> </ul>
	Patient attends with children under 15	<ul style="list-style-type: none"> <li>Generally it is not recommended children under 15, visit the hospital or clinics and they should be discouraged where possible. Exceptions for those under 15 years of age will be made under compassionate circumstances as negotiated and agreed with the Charge Nurse Manager</li> <li>Where children under 15 are identified as a significant support person for the patient the same process to confirm agreement is made with the Charge Nurse Manager</li> </ul>

Document ID:	A1521459	CMH Revision No:	v0.1
Service :	Nursing Clinical	Last Review Date :	03/12/2021
Document Owner:	Patient Experience Lead	Next Review Date:	03/12/2022
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<b><i>If you are not reading this document directly from the <a href="#">Document Directory</a> this may not be the most current version.</i></b>			

Person	Nature of visit	Action
Visitors including repeat visitors	Visiting patients	<ul style="list-style-type: none"> <li>• Screen (even if repeat visitor)</li> <li>• If answer NO to screening questions and they are on the Visiting List provide a mask, a dated sticker and send through</li> <li>• If YES to any screening questions decline entry and provide Health line details.</li> <li>• Generally it is not recommended children under 15 visit the hospital or clinics and they should be discouraged where possible. Where children under 15 are identified as a significant support person for the patient, agreement must be made with the Charge Nurse Manager to enable them to attend with the patient</li> </ul>
Visitor	Visitor wants to drop off essential and/or personal items to patients	<ul style="list-style-type: none"> <li>• Not permitted to be dropped off. Must be undertaken by a registered Kaitiaki as part of their designated visit</li> </ul>
Visitor	Attending for carer education, or transport of discharged patient, or family meeting	<ul style="list-style-type: none"> <li>• Screen</li> <li>• If NO to all screening questions provide with a mask, a dated sticker and send through</li> <li>• If YES to any screening questions decline entry and contact the Charge Nurse Manager immediately given the potential impact on discharge</li> </ul>
Visitor	On business or delivery of medical supplies	<ul style="list-style-type: none"> <li>• Screen If NO to all screening questions provide with a mask, a dated sticker and send through.</li> <li>• If YES to any screening do not permit through but organise immediate delivery of the supplies (contact Orderly Service).</li> </ul>
Visitor in quarantine	Manaakitanga	<p><i>Exemption approval</i></p> <ol style="list-style-type: none"> <li>1. The patient must be in a single room and assessed by the clinical team as suitable for a visit which breaks quarantine ie: there are time constraints</li> <li>2. The visit must be approved by the clinical team</li> <li>3. The visit must then be approved by the MBIE exemption team and the visit coordinated by the CM Health COVID Manager. The CM Health COVID Manager will liaise with the appropriate staff.</li> </ol>

Document ID:	A1521459	CMH Revision No:	v0.1
Service :	Nursing Clinical	Last Review Date :	03/12/2021
Document Owner:	Patient Experience Lead	Next Review Date:	03/12/2022
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*If you are not reading this document directly from the [Document Directory](#) this may not be the most current version.*

## Tikanga

This policy and procedure reinforces the presence of Tikanga Best practice as Aotearoa New Zealand moves from elimination to a long term business as usual approach (BAU) to living with COVID-19. A summary of actions was developed and approved by mana whenua and Chief Māori Adviser Tikanga ADHB/WDHB and supported by the Chief Māori Advisor Tikanga Counties Manukau Health. The purpose of the summary of actions is to assist safe-guard the integrity of respect of tangata whenua (original people of New Zealand) while upholding our position to whakamana (being considerate of the dignity of others) the people who reside in their rohe (territorial boundaries) is outlined in the summary below offering practical strategies to meet the requirements of Te Tiriti o Waitangi articles within the COVID-19 response.

<b>Document ID:</b>	A1521459	<b>CMH Revision No:</b>	v0.1
<b>Service :</b>	Nursing Clinical	<b>Last Review Date :</b>	03/12/2021
<b>Document Owner:</b>	Patient Experience Lead	<b>Next Review Date:</b>	03/12/2022
<b>Approved by:</b>	Chief Nurse and Director of Patient/Whanau Experience	<b>Date First Issued:</b>	03/12/2021
<b><i>If you are not reading this document directly from the <a href="#">Document Directory</a> this may not be the most current version.</i></b>			

## Tikanga actions summary

<b>Article 1: Kāwanatanga</b> (Governance – the principle of government)	<b>Article 2: Tino Rangatiratanga</b> (Absolute sovereignty –principle of self-management)	<b>Article 3: Oritetanga</b> (The principle of Equality)	<b>Article 4: Te Ritenga</b> (The principle of cooperation or redress)
<ul style="list-style-type: none"> <li>Māori will have oversight and ownership of decision making processes necessary to achieve Māori health equity</li> <li>Active partnerships built on trust and mutual respect with iwi and Māori communities will ensure that Māori knowledge informs and drives the work that we do for Māori health gain</li> </ul>	<ul style="list-style-type: none"> <li>Māori leadership across the services we provide and fund is essential for a system that gives expression to tino rangatiratanga An important component of this is supporting Māori to own and operate health services that are underpinned by their tikanga and world views, and give whānau choice to access the very best care that is aligned to their values, needs and aspirations</li> </ul>	<ul style="list-style-type: none"> <li>Prioritisation of considering manaakitanga circumstances’ for Māori patients and their whānau, including clarity around the pathway for COVID-19 positive patients</li> </ul>	<ul style="list-style-type: none"> <li>We will actively protect and honour the beliefs and values of Māori patients, staff and communities. Moving our workforce towards Māori cultural safety is one aspect of this work, while another is supporting Māori staff members, and whānau who access our services, to feel safe to express and share their culture within our organisation</li> <li>Visitors and allow whānau to support them. Build rapport from a kaupapa Māori perspective.</li> </ul>
<ul style="list-style-type: none"> <li>Chief Advisor Tikanga or delegated authority makes final calls on cases of significance to Māoridom when considering manaakitanga (inclusive of cases involving mana whenua and whānau of significance)</li> </ul>	<ul style="list-style-type: none"> <li>Prioritise the inclusion of Kaiatawhai from the earliest possible point in the support available to whānau</li> <li>Comms to explain the policy in a way that Māori understand and enables whānau to make the decision on who visits with enough information so they are in control of the decision on who visits</li> </ul>	<ul style="list-style-type: none"> <li>We are committed to ending unjust and unfair Māori health inequities by resourcing actions that achieve tangible health outcomes for whānau Māori. We will be bold and support Māori knowledge to inform and embed an equity-driven workforce and culture at all levels of our organisation</li> </ul>	<ul style="list-style-type: none"> <li>Unfettered access of Māori patients to their whānau through the provisions of digital solutions available for duration of their stay including phones, free wifi, laptops/tablets</li> </ul>

## References

CM Health Documents		Other related documents	
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Document ID:	A1521459	CMH Revision No:	v0.1
Service :	Nursing Clinical	Last Review Date :	03/12/2021
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<p style="text-align: center;"><b><i>If you are not reading this document directly from the <a href="#">Document Directory</a> this may not be the most current version.</i></b></p>			



## Appendix 1 – Values

Document ID:	A1521459	CMH Revision No:	v0.1
Service :	Nursing Clinical	Last Review Date :	03/12/2021
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