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| **PROCEDURE:****Visitors to Nelson Tasman Hospice SPCU during**  **COVID Protective Framework – Red Setting** |

**BACKGROUND**

The New Zealand Government has introduced Protective Framework (traffic light system) in the aim to reduce COVID-19 transmission during a world-wide pandemic. The Nelson Tasman region is now in Protective Framework – Red Setting.

**PURPOSE**

To allow inpatients to be supported by members of their family/whānau within the Specialist Palliative Care Unit (SPCU). To minimise the risk of spread of COVID – 19 to staff, patients/ whānau at Nelson Tasman Hospice (NTH).

**SCOPE**

This procedure applies to all patients admitted to the SPCU and their visitors.

**PROCEDURE**

Patients being admitted to SPCU and their family/whānau will be made aware of, and sign, a written declaration agreeing to comply with the current visiting policy prior to admission.

1. The visiting procedure for the Hospice inpatient unit will be as follows: please note that this procedure will be reviewed as needed.
   1. A maximum of two visitors per patient may visit at any one time and visitors can alternate.
   2. All visitors will be required to sign in, including a declaration that they screen covid negative and are complying with Protective Framework Orange.
   3. A maximum of one visitor can stay overnight. Compassionate consideration will be given for imminently dying patients.
   4. Physical distancing will apply. Visitors will be restricted from moving around the unit or gathering in shared areas, including the grounds and foyer.

**ASSOCIATED DOCUMENTS**

* Written declaration agreeing to comply with the NTH current visiting procedure.

**REFERENCES**

* NZ Ministry of Health website
* New Zealand Unite Against COVID-19 website
* Hospice New Zealand website

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**Declaration For: Adherence to Nelson Tasman Hospice Specialist Palliative Care Unit Visiting Procedure during Covid-19**

I,

Hereby declare that I:

1. Understand the conditions of Nelson Tasman Hospice’s current Visitor’s Procedure. Yes
2. Agree to comply with Nelson Tasman Hospice Visitor’s Procedure. Yes
3. Understand that failure to comply with this procedure will result in being asked to leave Nelson Tasman Hospice premises. Yes

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Staff Member Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_