

	POLICIES & PROCEDURES Number: 55-70 Title: Visitor Restrictions During Outbreaks
Authorization: [X] SHR Regional Infection Prevention and Control Executive Committee	Source: Infection Prevention & Control Date Initiated: May 17, 2010 Date Approved: September 14, 2010 Date Revised: Date Reaffirmed: Scope: SHR Agencies & Affiliates

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Introduction

An outbreak is the occurrence of more cases, or clustering of cases, of a particular infection or infectious disease than is normally expected; the occurrence of an unusual organism; or the occurrence of unusual antibiotic resistance patterns. Definitions of cases and outbreak vary with each disease/infection; see specific diseases for details (i.e. scabies outbreak, influenza outbreak, etc). These specific policies also refer to visitors; however, this policy is intended to be a general policy for visitors during outbreaks that may include but is not limited to Influenza, Norovirus, Antibiotic Resistant Organisms, Chicken Pox, Scabies or novel infections such as SARS or H1N1. Visitors who are ill and enter a health care facility may transmit infection to patients, health care workers or other visitors. Visitors who are well that visit ill patients (patients who have a communicable disease) may also transmit illness to these same groups, in addition to the public. Visitors who are in groups at high risk to develop severe disease as a result of exposure to micro-organisms (such as young children and pregnant women) may be at risk when visiting an ill patient.

Policy

1. Visitors are to be informed of the outbreak and take necessary precautions to limit its spread.

Purpose

1. To protect the patients, visitors, hospital staff and the public by preventing and controlling the spread of infectious diseases throughout the facility and/or into the community.
2. To provide guiding principles that enable staff to advise visitors on how to safely visit their loved ones during an outbreak.

Procedure

1. Signage
 - Signage is available from Infection Prevention and Control.
2. Instructions that apply to all visitors
 - Visiting of critically ill patients for compassionate reasons is permitted.
 - Non-essential visitors should be restricted from affected areas during an outbreak.
 - The judgment as to whether a visit is essential is to be made primarily by the visitor with consultation with staff.
 - Visitors are limited to a maximum of 2 per patient at the bedside at any time. It is preferred that only 2 pre-identified visitors be designated per patient.
 - All visitors must use hand hygiene upon entering the facility and unit as well as before and after visiting the patient. Staff members are to educate visitors on proper hand hygiene practices if visitors are unaware.
 - Staff should also provide instructions on how to don and remove the PPE required for the visit.
 - All visitors should visit only close family members or those patients for whom the visit is necessary for their well being or care.
 - Visitors should limit their movement (restricted to patient's room, not public areas such as cafeteria or lounges) within the building and directly leave the facility after they have finished visiting.

References:

1. Public Health Agency of Canada, *Appendix B: Visitors/Accommodation, Interim Guidance: Infection Prevention and Control Measures for Prehospital Care – H1N1* from <http://www.phac-aspc.gc/alert on 04/03/2010>.
2. Alberta Health Services, *Directive Pandemic (H1N1), Visitor Restrictions*, 2009.
3. Acute Care Operations section of SHR, *Proposed Visitor Restrictions during Pandemic* November 01, 2009.
4. Healthcare Infection Control Practices Advisory Committee (HICPAC). *Draft Guidelines for prevention and control of norovirus*, 2010.

Appendix A – Visitors Algorithm

Visiting of critically ill patients for compassionate reasons is permitted.
Non-essential visitors should be restricted from affected areas during an outbreak.

