Frequently Asked Questions (FAQ) – NHH COVID-19 Visitor Policy
September 2020 Update

Q. 1 What areas of the hospital are open to visiting?
Essential visitors, including: visitors to a patient that is dying or very ill; a support for a delivering mother; a parent/guardian of a child or family caregiver deemed essential for an individual with specific needs continue to be permitted throughout the hospital.

Effective July 25th, in-person visiting was expanded to the following inpatient areas within the restrictions set out in the COVID-19 Visitor Policy:
- all inpatient units on the first floor (Palliative Care, Inpatient Rehabilitation, Restorative Care)
- the majority of the 2A/B Medical Surgical Unit on the second floor; and
- the Maternal/Child Care Unit.

Effective September 14th, visitors will also be permitted within the Emergency Department (ED).

Visits are not currently permitted to patients in a hospital ‘hot zone’ (i.e. to patients presumed or confirmed positive for COVID-19).

Q. 2 Are visits permitted to patients receiving care within the Emergency Department?
Effective Monday, September 14, one visitor (16 years of age or older) per patient per day, will be permitted for Emergency Department patients, within the restrictions set out in the COVID-19 Visitor Policy. There are no visiting ‘hours’ within the Emergency Department as there are on inpatient units.

Q. 3 Some hospitals have limited visiting to one designated visitor only. Is this NHH’s policy?
We require that one visitor at a time enter the hospital, as approved by the patient (at the discretion of the care team), and that this visitor comply with the expectations set out in the COVID-19 Visitor Policy. We recommend that patients select one designated caregiver/visitor per day, to limit the total number of individuals entering the hospital, but we appreciate that some may have a need to have several different visitors during the course of their stay. In special circumstances, i.e. situations involving a critically ill or dying patient, exceptions will be made on consultation with the care team.

Q. 4 Will I need to wear a mask if I visit a patient at NHH?
Yes. Universal masking continues throughout NHH. Those coming into the hospital who have a cloth mask in good, clean condition, are asked to bring it with them and plan to wear it throughout their stay. Those who do not have a cloth mask will be provided with a mask to use and take home with them.

Q. 5 What infection control measures have you put in place to reduce the risk of visitors entering the hospital?
Visitors who fail screening at the entrance to the hospital will not be permitted to visit. Visitors will be expected to wear a mask for the duration of their visit, wash their hands on entry (and repeatedly through their visit, as required) and visitors will be expected to restrict their movement when inside the hospital as much as possible, i.e. to the patient room.

Q. 6 I have a loved one receiving chemotherapy treatments. Can I join them now for their treatment?
NHH continues to restrict outpatient visitors to ‘essential only’. Unless your loved one has specific needs to support them during their appointment (for example, requires support getting in/out of the hospital for their appointment) general visiting to patients within our outpatient clinics is not permitted at this time.

Q. 7 What if the patient is unable to identify that they wish to have a visitor?
In situations where the patient is not able to communicate, their substitute decision maker can make this request to the care team.

Q. 8 Do I need to have a COVID-19 swab prior to visiting?
No. NHH does not require designated primary family caregivers/visitors to have a COVID-19 swab at this time, but active screening is in place prior to entry. This involves a temperature check and the successful completion of a series of questions regarding symptoms and potential exposure to COVID-19 positive cases. Those who fail the screening will not be permitted to visit and will be referred to the COVID-19 Assessment Clinic (or Emergency Department) for assessment.

Q. 9 What door should I come in/go out if I’m visiting an inpatient on the weekend?
Visitors to those admitted to an inpatient bed should enter/exit at the main front entrance, to minimize traffic into the Emergency Department/COVID-19 Assessment Centre and through the hospital. Visitors will be asked to sign in on arrival and sign out when they exit, and to provide their name and contact information to support any necessary contact tracing.

Q. 10 How is the hospital confirming that visitors are in fact designated and approved by the patient?
Eligible patients will identify their designated visitor and inform the care team (via the charge nurse). The charge nurse will coordinate communication of all designated visitors to the screening team at the main front entrance. Patients are encouraged to identify one designated caregiver/visitor per day, to limit the total number of individuals entering the hospital. We appreciate that some special circumstances may warrant the need for additional visitors during the course of a patient’s stay.

Q. 11 When will in-person visiting be available every day of the week?
From July 25th to September 13, we have limited inpatient visitors, as set out in the COVID-19 Visitor Policy, to Saturday and Sunday between the hours of 1300 to 1700 (1PM to 5PM) and on statutory holidays. Beginning on Monday, September 14, designated inpatient visitors will be able to enter between 1PM and 5PM, 7 days a week; visitors (one per day per patient) will also be permitted within the Emergency Department, 24/7.

Q. 12 Is the cafeteria open to the public?
In addition to serving staff and physicians, the Main Street Bistro will resume service to the public on weekdays beginning Monday, September 14th. The hours of operation are 8AM to 1:15 PM.

Q. 13 Can I bring food, such as a coffee or tea, in to my loved one?
NHH continues to discourage visitors from bringing food and drink into the hospital at this time to minimize the risk of infection. Food purchased within the hospital, or coffee/tea brought in to enjoy with a patient, should only be consumed in the patient room, following appropriate infection prevention procedures, and not in corridors or common areas.
Q. 13 I live in another province, and cannot visit in person at all. Will the Virtual Visiting service continue to be available?
Yes, the Virtual Visiting program introduced in April 2020 continues to be available. Virtual visits may be scheduled weekdays by contacting the hospital’s Virtual Visiting Team at 905-372-6811 ext. 3146 or by email to virtualconnections@nhh.ca. Note: to protect patient privacy, the patient’s full name should not be included in the email. For full details, please refer to our website at: https://nhh.ca/Patients/VisitingGuidelines

Q. 14 I have a question regarding your Visitor Policy. Who should this be directed to?
Any individual patient and/or visitor with questions or concerns regarding the COVID-19 Visitor Policy is encouraged to contact the manager of the patient care unit during business hours. In the event a visitor-related concern arises outside of business hours, when unit managers are not typically on site, the Clinical Operations Manager has been designated as the point person responsible for addressing questions regarding visiting, in consultation with NHH’s Patient Relations Manager or manager/senior manager on call.

Q. 15 Is this COVID-19 Visitor Policy subject to change?
Yes. Step Two of Phase Two of NHH’s COVID-19 Visitor Policy will begin September 14th and will continue for the foreseeable future, assuming no significant local increase of positive cases is documented. Local cases, as reported by the HKPRD Health Unit, continue to be closely monitored. In the event that confirmed positive cases in the community rise substantially, or an in-hospital outbreak should occur, the hospital will return to Phase One of its COVID-19 Visitor Policy, limiting once again to essential family caregivers/visitors only and the virtual connection option.

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