



# Patient Visitors and Leave

## Mental health inpatient settings

This guidance has been developed to assist mental health services in responding appropriately and proportionately to the current stage of the COVID pandemic. They are aimed at assisting in balancing the need to protect patients, staff and the community from COVID infection whilst providing therapeutic, least restrictive recovery-oriented care to patients and respecting their rights under the Mental Health Act 2014.

### Current state of the pandemic

Evidence currently indicates low levels of community transmission of COVID-19 thanks to the current measures being taken.

### Community and Government measures being taken to reduce COVID spread

On 7 March 2020, the Chief Health Officer (CHO) formally escalated the Infectious Disease Emergency Management Plan to targeted action phase. On 15 March 2020, the CHO formally escalated the State Hazard Plan Human Biosecurity to a Level 3 Incident and a State of Emergency was declared.

[Public Health Directions \(external link\)](#) have been issued to prevent the spread of COVID-19, including:

- [Visits to aged care facilities \(external link\)](#)
- [Self-isolation following positive test or diagnosis \(external link\)](#): there are very strict rules that must be followed.
- [Self-isolation or quarantine \(external link\)](#)
- [Restricted activities and prohibited venues \(external link\)](#)
- [Gatherings – indoor and outdoor \(external link\)](#) restrictions are to limit both indoor and outdoor gatherings to two persons only. Health care facilities are exempt.
- [Travel within WA \(external link\)](#).

### Directions under the Public Health Act 2016

Directions made under the *Public Health Act 2016* (Public Health Directions) must be complied with and the penalty is a fine. People must obey the public health directions even if they are not consistent with other legislation (for example, the *Mental Health Act 2014*) but this does not negate or over-ride the whole of the other Act. **The *Mental Health Act 2014* still applies.**

[Recommendations on hygiene \(external link\)](#) have been made by the Government to prevent the spread of COVID19:

- Social distancing
- Hand hygiene

## **Public Health Directions and Guidance issued in relation to visits to inpatient settings and leave**

There are no current blanket requirements by the Commonwealth or State Government to stop all leave, ground access or visits at mental health hospitals.

The following directions and guidance have been issued:

### **Visits to aged care facilities**

A Public Health [Direction has been issued in relation to residential aged care facilities \(external link\)](#).

Visitors and staff must not enter the facility if they have not had a flu vaccine or if they have a number of risk factors for COVID-19.

In addition, it is directed that visits must be limited to a short duration and to a maximum of two immediate social supports (family members, close friends), professional service or advocacy at one time, per day.

### **WA Hospital visiting hours**

- [New guidelines on visiting public hospitals \(external link\)](#) were introduced by the WA Government from 23 March 2020 to limit the flow of people through hospitals to better protect patients and staff.
- Children under 16 will not be able to visit patients.
- Hospital visiting hours will be limited to two hours a day – one in the morning and one in the evening.
- All adult patients, including those in maternity wards, will be restricted to two visitors per day; the same two visitors may visit morning and evening.
- Visitors to paediatric patients must be the same family members each day.
- No visitors will be allowed to see confirmed COVID-19 coronavirus adult inpatients or COVID-19 coronavirus inpatients under investigation.

## **Guidance on visits to and leave from mental health inpatient settings**

- Blanket policies to lockdown mental health facilities are not currently required or proportional
- The MHA 2014 remains functional and patient rights within the MHA 2014 apply:
  - Consider the principle of least restrictive practice;
  - Access to psychosocial therapy;
  - Discharge planning, community transitioning;
  - Right to communication; and
  - Right to visitors.

## Visits

- All mental health facilities should seek to follow the state guidelines regarding hospital visiting, noting that it may need to be operationalised differently on different sites to ensure social distancing.
- Mental health services should ensure accessibility and availability of opportunities for audiovisual visits where face to face is not possible.
- Mental Health Advocates are not considered visitors for the purposes of the government hospital visiting guidelines and have a statutory right to access mental health units under the MHA 2014.

## Leave

- All patients should be managed in the least restrictive way possible.
- All patients should be supported and encouraged to understand and follow the government rules about self-isolation if applicable and gatherings and advice about social distancing, reducing non-essential travel and hand hygiene.
- Certain cohorts, such as individuals who may have cognitive impairment, will require extra support during this period to assist them to understand and manage broader state emergency directions.
- Wherever possible leave and visiting arrangements should facilitate the involvement of family, carers and service providers in treatment, support and discharge planning.

## Voluntary patients

- Have a right to access leave.
- If any open wards are temporarily locked for COVID-19 related reasons, there needs to be clear processes to allow patients to move in and out of the “open” ward environment without undue impediment.
- If voluntary patients repeatedly do not follow advice about social distancing and gatherings despite support, education and encouragement then their status as voluntary inpatients and management will need to be reviewed.

## Involuntary patients

- The therapeutic needs and any associated restrictions for **involuntary patients** should be considered on **a case by case basis**, including leave, ground access, visitors, etc- any potential restrictions should be discussed and negotiated with the patient and family as usual, and should meet the criteria set out in the MHA 2014 and be proportionate to the current situation.
- Where restrictions are in place for an individual under the MHA 2014, work with the individual and family to find alternative strategies to reduce frustration and distress, as usual

## Review of this guidance

Should WA move into a more restrictive phase, or less restrictive phase, this will change the current practice. Thus, this situation and this advice may be subject to rapid review and change.

## More information

For the latest clinical guidelines and clinician alerts, please refer to the Department of Health Website ([https://ww2.health.wa.gov.au/Articles/A\\_E/Coronavirus/COVID-19-clinical-alerts](https://ww2.health.wa.gov.au/Articles/A_E/Coronavirus/COVID-19-clinical-alerts))

For general information, including information for patients and carers, please:

- Refer to the HealthyWA website ([https://healthywa.wa.gov.au/Articles/A\\_E/Coronavirus](https://healthywa.wa.gov.au/Articles/A_E/Coronavirus))
- Phone 13 COVID (132 68 43).

## Acknowledgements

This information was developed in consultation with all Health Service Providers, the Office of the Chief Psychiatrist and the Mental Health Advocacy Service.

**Last updated 16 April 2020**

**This document can be made available in alternative formats on request for a person with disability.**

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