

STATES OF JERSEY



COVID-19 HOSPITAL PATIENTS VISITOR ACCESS

Lodged au Greffe on 17th January 2022
by Deputy M. Tadier of St. Brelade

STATES GREFFE

PROPOSITION

THE STATES are asked to decide whether they are of opinion –

“to agree that people who do not have Covid-19 should be allowed to visit people in hospital and to request, as a matter of urgency, the Minister for Health and Social Services to instigate a robust system to keep people who do have Covid-19 from visiting people in hospital”.

DEPUTY M. TADIER OF ST. BRELADE

REPORT

I hope I can take it as read that we all want to keep COVID out of our general hospital. Whilst it is unavoidable that some patients will need to be admitted *with or because of* COVID, we should be making sure that neither staff nor visitors are bringing COVID into the hospital.

However, I would also hope that most Members agree that a *blanket ban* on visits is not the most efficient or reasonable way to achieve our joint goal. There is a huge downside to the current policy, and it is having a devastating effect on the mental welfare of many patients and their families.

Since the 'blanket ban' has been put on patients being able to receive visitors at the hospital, I have received emails, phone calls and messages from distraught relatives. This was to be expected. I am not sure how things got to this point.

Case 1

'Sadly, since my email my [parent] has been diagnosed with cancer [...] and secondary cancer [...]. I am still battling day by day to be able to have a family member with [them] and have asked for exceptional circumstances. Yesterday [my parent] used the iPad and I saw my [parent] break down in tears and we can't be next to [him/her] to comfort [him/her].'

Case 2

Another person told me, 'My parent is in a very fragile state and has been in hospital for more than 4 weeks. I am now unable to visit. My other parent is also unable to visit. They have been married for over 60 years. I believe that the lack of family contact at this critical time can only be having a detrimental effect on my parent's chances of recovery.'

The person went on to tell me that *when there was a system of two named visitors per patient in place, there was a requirement to do Lateral Flow Tests before visits, but this was never checked.*

All I know, is that neither this person nor her visiting parent brought COVID into the hospital. They only visited after completing a lateral flow test each day which came back negative. Yet, they are all being penalised despite not posing a risk and taking all possible steps to avoid this risk.

There are two key things to remember:

- 1) At any given time, the vast majority of people in Jersey **do not** have COVID.
- 2) Most people in Jersey have done everything the government has asked them to do in relation to COVID and minimizing its spread. They have had 1..., 2..., 3... vaccines against COVID. There is now a mandatory requirement for people to wear masks in public places, and there has been such at the hospital for a long time, even when mask wearing was not generally required elsewhere. We have had PCR testing available to people and Lateral Flow Test, widely and freely available. It is possible to know now, with a high degree of certainty, whether someone has COVID and to know that within minutes. The problem we have, for whatever reason, is that a robust procedure has not been in place at the general hospital to keep COVID out. This is not the fault of visitors or staff, I would suggest.

There are a further two points to which I think should be considered uncontroversial principles and axiomatic statements:

- 1) A person who does not have COVID **does not** present a risk (of spreading COVID) to staff or patients when visiting the hospital
- 2) People with COVID **are** a risk to patients and/or staff.

It should follow that there is no legitimate reason to keep a person out of hospital who does not have COVID. And that the only people who *do* have COVID should be prevented from visiting.

It is important to state that this is not about pitting staff and patient safety against patient and visitor welfare, mental health, and human rights. Indeed, the staff should **never** have been put in the position where they have been left vulnerable to visitors coming in and *potentially* contributing to the spread of the illness on the wards.

I have recent experience of the pressure that staff at the hospital are under. I also know that they strive to give excellent service, but this is difficult when, I understand, there are staff shortages, resource, and time issues.

I am, therefore, asking the Minister for Health and Social Services, and the Council of Ministers, to introduce a robust system of checks for visitors coming into the hospital and to reinstate visits for named visitors, who have been tested and who are known to have a recent lateral flow test which has come back *negative*. The Minister should give consideration as to the best way to do this, however, the people I have spoken to, who have relatives in hospital, have said they would be very happy to take a lateral flow test before each visit in the presence of a member of government staff who could oversee the test and verify the result before granting access to the hospital.

This is just one method which seems to me to be both workable and proportionate, as a short-term security measure, but the Minister may have other ideas, which still allow visits to take place, safely.

Financial and manpower implications

It is expected that any additional resourcing implications would be met from within existing health and COVID related budgets.