



Visitation Policy for Public Healthcare Facilities







Ministry of Health and Wellness
MAURITIUS

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Approval Form

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VISITATION POLICY FOR PUBLIC HEALTHCARE FACILITIES			
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PEER REVIEW

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Visitation Policy for Public Healthcare Facilities of Mauritius

Introduction

Mauritius is a multicultural country with diverse traditions, culture, and customs. While it is imperative to ensure patient safety and privacy, it is equally important to accommodate visitors in a culturally sensitive manner.

A well-designed visitation policy plays a crucial role in maintaining a safe and healing environment within healthcare facilities. Controlling the traffic in and out of hospitals boosts security and reduces disruption in care.

Following endorsement by the Ministry of Health and Wellness (MOHW), the measures delineated in this policy should be implemented, monitored and enforced by healthcare workers and the administrative cadre.

Objective

It is hoped that this policy will reduce overcrowding in hospitals, will enhance the safety of patients and will reduce the risk that visitors contract contagious illnesses.

Disclaimer

This policy does not apply to healthcare facilities in the private sector – please consult the respective clinics for their visitation protocol. Moreover, this document is applicable to members of the general public who are coming to visit patients or who are accompanying patients, and who are themselves not seeking care, but it does not apply to visiting staff, employees of MOHW or to visitors who have received special permission from MOHW to enter hospital premises.

Methodology

1. August 2022: The National IPC Committee requested that MOHW clarifies its visitation policy which is currently unclear (see section 2.38 of the notes of meeting of 16 Aug 2022).
2. October 2022: The IPC Writing Committee (IWC) assigned the drafting of the visitation policy to the IPC team of Jawaharlal Nehru Hospital.
3. March 2023: The task of writing the policy was handed over to Dr. A. G. Jeetoo Hospital's IPC team.
4. May 2023: The first draft of the visitation policy was forwarded to all IPC teams for their views.
5. June 2023: A second draft was written by the National IPC Focal Point.
6. July 2023: The second draft was forwarded to all regional health directors, medical superintendents and regional nursing administrators for their comments, following which the final version was compiled.

Brief situational analysis

- Partly due to a lack of space and partly due to a large number of relatives coming to visit patients, overcrowding is common in some areas like the Emergency Department and the Outpatient Department.

- Given the lack of single rooms, loud conversations by relatives can disturb the quietness required in hospitals.
- The lack of family beds and chairs makes it difficult for the patients' relatives and friends to stay for lengthy periods of time in the hospital.
- The current visiting hours are inconvenient for some visitors e.g., they are often unable to meet patients' doctors at that time, they may be working during those hours, and / or they may not have parking spaces available.
- Visitors are seen not wearing the appropriate personal protective equipment when seeing isolated patients e.g., whenever patients are under contact precautions, they do not wear gowns – this is exacerbated by the fact that some doctors prefer to remove contagious patients from isolation in order to avoid explaining to relatives the dangers that may be associated with the spread of certain infections.
- Moreover, in more recent times, despite the mandate by the Quarantine Act to wear masks inside hospitals, compliance remains poor. This undermines the safety of both patients and the visitors.
- Several Obstetric and Gynecological OPDs have been observed to refuse entry to the male partners of pregnant women, thus impairing the physical and psychological support that such women may receive from their loved ones.
- Family members sometimes may cause emotional distress to patients.
- Healthcare workers have noticed that when visiting hours are over, some patients are found to be lethargic, thus raising suspicion that they have been drugged by their families or friends – given the difficulties to promptly access test results for illicit drugs in the public sector, confirmation of such diagnoses is often difficult.
- Confidence in public institutions is compromised whenever visitors are asked not to see their relatives and then later, they note that their loved one was not appropriately fed (often because of a lack of staff), diapers have not been changed for several hours or other services have not been rendered (e.g., expected visits by physiotherapists did not happen).
- Sometimes, visitors have been reported to be violent towards hospital staff. At other times, it is believed that they have stolen hospital items.
- Due to difficulties accessing toilets or the inability to locate bathrooms, some visitors have vomited or urinated in unusual areas.
- Every so often visitors are witnessed smoking on hospital premises.
- Conflicting rules apply to different departments and hospitals e.g., in some intensive care units (ICU), visitors are asked to wear overshoes (even though there is no data regarding their utility) while in other ICUs, they don't have to. Also, in some instances, when visitors were asked to wear crocs instead of overshoes, they allegedly protested because they felt crocs were a dirtier alternative (compared to overshoes).
- Vegetable vendors (e.g., of tomatoes and eggplants) and snack sellers (e.g., of popcorn, nuts, samosas and chili bites) are seen inside wards or office areas where they promote their merchandise.

- Pharmaceutical representatives are observed regularly on hospital premises.

Literature review on the impact of liberal visiting hours

Since the 1800s, due to concerns about the spread of infections, restrictions in visiting hours were the norm in hospitals.¹⁰ In the late 20th century, open visiting became increasingly popular for inpatient wards. While liberalization of visiting policies begun in ICUs in the 1990s in some developed countries, to this day, such policies are highly variable, inconsistent and not evenly enforced within the same country and across continents.^{11-13, 16} This topic remains controversial among healthcare professionals, especially in the era of COVID-19, even though open hours can be implemented with minimal complaints and disruption.^{14, 15, 17}

The public sector of Mauritius maintains restricted visiting hours in its healthcare facilities. A review of the literature reveals that:

- 12 hours vs 1.5 hours per day of visiting time in adult ICUs did not lead to an increase in infection rate but did reduce anxiety and depression among family members.¹
- Nonetheless, a study in Saudi Arabia failed to show an improvement in family satisfaction with an open visitation policy.⁷
- Several meta-analyses reported a reduction in delirium without any effect on infections nor mortality rate with flexible visiting policies in ICUs; the impact on staff burnout is unclear.^{2, 4, 5, 28}
- Another review showed that restrictive visiting hours were associated with negative emotions among patients and their families and contributed to poor emotional support and insufficient spiritual care, especially for those requiring end-of-life care; however, surgical site infections may be reduced when the number of visitors diminish.³
- Yet, another study did not find a significant difference in post-operative complications during the implementation of liberal visiting policies.⁶
- A study in Iran revealed that increased visitation time in ICUs improved the heart rate and blood pressure of patients.⁸
- Unrestricted visiting hours in neonatal ICUs and other ICUs improved parental satisfaction without increasing infections.^{9, 21}
- Nevertheless, one study (with its data analyzed twice) demonstrated a drop in viral infections of neonates by restricting visitors in NICUs.^{22, 23}
- A liberal visiting policy is associated with a reduction in patient complaints and potentially heightened trust in the medical institution.^{18, 29}
- Open visiting hours can be associated with a shorter hospital stay and a reduction in hospital errors (through better communication).^{19, 20, 24, 27}

In spite of the popular belief among Mauritian healthcare professionals that visitors contribute to the spread of multi-drug resistant organisms, no scientific evidence exists to that effect – one study on this topic did not disaggregate its data appropriately and cannot be interpreted accurately.²⁶ Unsurprisingly, visitors may contract drug-resistant microbes from the hospital environment if proper infection prevention and control practices are not followed.²⁵

Pros and cons of open and flexible visiting hours

Advantages

- Family centered care is increasingly recognized as a valuable model for improving patient outcomes, facilitating communication, and increasing satisfaction with care.
- Support from families can help patients recover quicker, reduce their hospital stay and alleviate anxiety.
- Hospital visitors can boost morale, provide comfort and relief for patients.
- Family advocates can also provide detailed information about the patient and ensure smooth transitions between care teams and hospital units, potentially reducing medical errors.
- Visitors who are engaged in the care of sick loved ones are also better equipped to take over that care once the patient is discharged.
- The absence of visitors leads to a breakdown in communication – it is harder for doctors to update families, especially to break bad news.
- Forcing caregivers to leave dying patients alone demonstrates a lack of empathy and is probably unethical when scrutinized on humanitarian grounds.

Disadvantages

- If there are too many people in hospitals, it disrupts the flow of providing treatment, especially in urgent scenarios.
- When it is difficult to keep track of visitors, patient confidentiality can be compromised. It can also be awkward to maintain patient privacy in the presence of family members.
- Malicious visitors may tamper with patients' medications or treatment.
- Certain infections may spread via visitors.
- Visitors can tire patients out, especially by depriving them of sleep.

Policy

General guidelines

- Overnight stays are not allowed except in pediatric wards.
- In addition to constraints described in this document, visitors may be further restricted for reasons, including but not limited to:
 - Situations in which visitation could jeopardize the health and well-being of the patient, care partner, visitor or staff,
 - Minimizing the risk of infection,
 - Achieving patient goals of care, and

- By court order, or if the patient is in the care and custody of law enforcement.
- Patients and the visitors of their choosing have the responsibility to follow hospital policy and are expected to:
 - Show respect and consideration of the hospital's staff and property as well as other patients and their property,
 - Respect the need for noise control and the number of visitors, and
 - Acknowledge that the Charge Nurse or his / her designee has the authority to remove visitors that impact the health and safety of the patient or unit.
- Visitors, family or friends will not be allowed to observe or accompany patients in a restricted surgical or procedure area and they cannot go into the radiology room or pharmacy department.
- Visitors may not block corridors, lifts, fire exits or entrances.
- Patients have the right to refuse visitors.
- Visitors with the following symptoms should refrain from visiting:
 - Fever,
 - Cough,
 - Runny nose,
 - Diarrhea,
 - Vomiting,
 - Sore throat, and / or
 - Shortness of breath.
- Visitors with respiratory symptoms should wear a mask when entering hospital premises – they are expected to bring their own masks.
- Visitors who are immunosuppressed should avoid coming to the hospital.
- Violence is strictly prohibited inside hospital premises.
- Theft of hospital items is not allowed.
- Vendors are not permitted inside hospitals (unless they are delivering essential supplies).
- All visitors are expected to follow the prevailing law with respect to infection prevention and control e.g., to wear masks during the COVID-19 pandemic as per the Quarantine Act.
- Visitors should bring their own alcohol sanitizer and practice hand hygiene before and after seeing their loved ones.
- Weapons including knives cannot be brought inside hospitals.

- Animals including pets are not allowed inside hospitals.
- Smoking is prohibited on hospital premises.
- Littering is not accepted – use the garbage bins provided.
- Loud conversations are not acceptable on hospital premises.
- Language interpreters are allowed inside wards at any time for a short duration to help with communication.
- If a visitor does not follow the instructions of the Charge Nurse or Ward Manager, the hospital reserves the right to call security to escort the visitor outside the premises.
- When giving food to patients, visitors should follow instructions with regards to food restrictions as described by the nurses and doctors.
- While visitors are typically not allowed during ward rounds and ward cleaning, doctors can ask visitors to come inside wards at any time for 15 minutes or less.
- Pharmaceutical representatives are not allowed on hospital premises during working hours.
- Under special circumstances, specialists may allow caregivers to stay for longer periods of time at the patient's bedside if this will provide significant benefit to his / her clinical care.
- Visitors will need to abide by the directives of security guards posted at the hospital for the proper functioning of the visiting policy.
- It is recommended to visitors not to disturb patients for 12 hours after surgery.
- Photographs are not authorized by visitors anywhere on hospital premises or in dispensaries unless permission is first granted by the administration.
- Visitors who do not comply with this policy or exhibit other behavior that endangers the health or safety of patients or staff will be asked to leave and may have future visitation revoked.

Adult inpatient ward

- At most 2 visitors at a time per patient are allowed during visiting hours.
- Patients with severe disabilities can have one custodian to help them from 6am till 8pm – such needs have to be documented by the treating specialist in the patient's folder.

Pediatric inpatient ward

- At most 2 visitors at a time per patient are allowed during visiting hours.
- Mothers can stay overnight with their child (< 16 years old).

Outpatient departments and dispensaries

- At most 2 visitors per patient are allowed.
- Children of any age are allowed if there is no other way to care for them.

- Fathers are allowed to accompany future mothers in Obstetrics and Gynecology outpatient departments.

Adult ICUs / Coronary Care Units (CCU)

- 1 visitor at a time per patient is allowed during visiting hours.
- Flowers and plants are prohibited.
- Visitors are allowed to come to the bedside of the patient (as long as there is sufficient space around the patient's bed), but they cannot touch any equipment.
- There is no need to wear overshoes or crocs.
- Visitors should avoid carrying bags, umbrellas and other items when going inside.
- Food / drink cannot be brought inside.
- Mobile phones must be switched off before entering adult ICUs / CCUs.

Neonatal ICU (NICU)

- Only the mother or father can visit the patient during visiting hours for a maximum of 30 minutes.
- Scrubbing of hands with a brush, soap and water for 1 minute is mandatory prior to entering the NICU for all visitors.
- Flowers and plants are prohibited.
- The mother or father can touch the baby only after wearing a disposable gown – gloves are not necessary.
- Visitors should wear crocs before entering the NICU – while there is currently no scientific evidence that crocs reduce hospital-acquired infections, local consultants and specialists suggest that they help keep the NICUs' floor clean. On the other hand, overshoes may be associated with an increased risk of infection as per some studies and should not be worn.
- Visitors should not carry bags, umbrellas and other items when going inside.
- Food / drink cannot be brought inside.
- Mobile phones are not allowed inside NICUs.
- A register needs to be signed during visiting hours to certify that they were authorized to see their babies.
- When babies are admitted for the first time in the NICU, fathers are allowed to see and have first contact with their baby for at most 5 minutes (at any time of day or night).
- Visitors who have fever or respiratory symptoms including sore throat cannot visit babies.
- During national epidemics of respiratory viruses, wearing of masks is compulsory.

Nursery

- Mothers who have been discharged are allowed to breastfeed their babies in the breastfeeding corner during feeding hours.

Emergency department

- At most 2 visitors are allowed to accompany each patient – additional visitors should stay in the waiting areas.

Surgery for Caesarian section

- The father can be allowed inside the Operating Theater if approved by the Gynecologist to witness the birth of the child – adequate precautions have to be taken as described by the staff of the Operation Theater.

Hemodialysis unit

- No visitors are allowed – they should stay in the designated waiting area.

Laboratory

- No visitors are allowed unless permission is granted by the laboratory staff.
- If a patient is donating blood, 1 adult visitor may accompany him / her.

Isolation rooms

- Ask the Charge Nurse for information and permission prior to entering the room.
- 1 visitor per patient is allowed during visiting hours for most infections – for high consequence infectious diseases, no visitors will be allowed (barring exceptional circumstances whereby the visitor will be asked to sign in, sign out and be monitored via temperature checks and may be required to quarantine).
- Visitors must wear the same personal protective equipment as any other staff before entering the room – nursing staff should provide adequate guidance.
- Children are not permitted in patient rooms where isolation precautions are in place.

Palliative care

- Patients at the end of their life, in hospice or under palliative care are allowed 1 visitor at their bedside from 6am till 8pm.
- The doctor should write in the patient's notes that a caregiver is allowed at the patient's bedside.

Children and adolescents

- Children (under 12 years old) are not allowed inside ICUs and CCUs. Adolescents (13-18 years) may be allowed if permission is granted by the Charge Nurse.
- Whenever possible, children should avoid coming to the hospital altogether.

- If permission is given by their parents and the Charge Nurse, children and adolescents may visit non-ICU wards during visiting hours.
- Children and adolescents must be accompanied by an adult and must be directly supervised at all times. The patient cannot be considered the designee supervising the child.
- Children must not run or play in the hospital hallways or rooms.

Patients under the custody of law enforcement officers

- Visitors can only be allowed after permission is granted by the law enforcement officer.

Clergies

- Clergy / religious priest visitation for end-of-life care is allowed for a short duration at any time provided the family / patient requests it.

Sick visitors

- In case visitors inadvertently fall sick, the closest hospital staff should provide assistance and if necessary, should organize transport to the Casualty Department for further medical evaluation.
- Visitors who feel sick are advised not to come to visit their relatives – they can seek help in the Casualty Department if they wish to.

During periods of outbreaks of upper respiratory tract infections

- If MOHW declares a nationwide outbreak of an upper respiratory tract infection:
 - Visitors should avoid coming to the hospital if possible.
 - All visitors should get their temperatures checked before entering the hospital – if elevated, they may be prohibited from seeing patients.
 - All visitors will be expected to wear a mask covering their mouth and nose (except for children ≤ 5 years old).
 - There can be no more than one visitor per patient at any one time.
 - Visitors will not be allowed to crowd any area of the hospital.
- The above restrictions will apply till the end of the epidemic.

MOHW reserves the right to make any changes to this document at any point in time.

Visiting hours

Hospital	Morning		Afternoon	
	MON-SAT	SUN/PH	MON-SAT	SUN/PH
Dr. A. G. Jeetoo Hospital	6:30-7:00	6:30-7:00	15:30-17:00	12:00-14:30
Brown Sequard Mental Health Care Centre	NA	NA	14:00-15:30	12:00-14:30

Subramania Bharati Eye Hospital	NA	NA	15:00-16:30	12:00-14:30
Sir Seewoosagar Ramgoolam National Hospital	6:30-7:00	6:30-7:00	15:30-17:00	12:00-14:30
Long Mountain Hospital	NA	NA	15:30-17:00	12:00-14:30
Skin Diseases Infirmary	NA	NA	15:30-17:00	12:00-14:30
Poudre d'Or Hospital	NA	NA	15:30-17:00	12:00-14:30
Cardiac Centre	NA	NA	15:30-17:00	12:00-14:30
Dr. Bruno Cheong Hospital	6:30-7:00	6:30-7:00	15:30-17:00	12:00-14:30
Jawaharlal Nehru Hospital	6:30-7:00	6:30-7:00	15:30-17:00	12:00-14:30
New Souillac Hospital	NA	NA	15:30-17:00	12:00-14:30
Mahebourg Hospital	NA	NA	15:30-17:00	12:00-14:30
Victoria Hospital / Princess Margareth Orthopedic Centre	6:30-7:00	6:30-7:00	15:30-17:00	12:00-14:30
New Cancer Center	NA	NA	15:30-17:00	12:00-14:30
New ENT Hospital*	NA	NA	NA	NA
Dr. Yves Cantin Community Hospital	NA	NA	15:30-17:00	12:00-14:30
Queen Elizabeth Hospital	6:30-7:00	6:30-7:00	14:00-15:30	12:00-14:30
Mont Lubin Hospital	NA	NA	NA	NA

Table 1: NA – Not Available. PH – Public Holiday. * - to be reviewed with the staff of the New ENT Hospital since this hospital is transitioning from being a COVID Treatment Center.

Lunch time

Visitors are allowed in regional hospitals from 12pm to 1pm after getting permission from the Charge Nurse and only to help the patient feed himself / herself if such help is needed.

NICUs of the regional hospitals

Fathers and mothers can visit babies for up to 30 minutes on Mondays to Saturdays from 4:45pm to 5:15pm and for up to 30 minutes on Sundays or public holidays from 2:15pm to 2:45pm.

Nurseries of the regional hospitals

Visiting hours and breastfeeding time are from 10am to 11am and 2pm till 3pm.

Mont Lubin Hospital

Visitors are currently not allowed as this is the designated COVID Treatment Center of Rodrigues – relatives can contact the administration of the hospital to seek further details on their loved ones.

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