PURPOSE: To set policy and procedure on patient’s visitation rights and provide guidance on staff management of patient’s visitors. To facilitate expeditiously and non-discriminatory resolution of disputes on whether an individual is the patient’s support person, given the critical role of the support person in exercising patient’s visitation rights.

POLICY: The facility shall practice a holistic approach to care in accommodating patient’s diverse needs and preferences while promoting quality care and safety. Patients’ visitors are provided equal visitation privileges regardless of race, color, gender, national origin, disability, age, and sexual orientation. Patients have the right to receive visitors that they designate, including, but not limited to; a spouse, domestic partner, including a same sex domestic partner, family member or friend. They may also refuse visitors; and such preferences and decisions shall be documented in the medical record. However, the facility also has the right to impose limitations on patient’s visitation rights to ensure safe care. These limitations include, but are not limited to:

a. Infection Control Issues (e.g., patient’s risk of infection by visitor; visitor’s risk of infection by patient) and protection due to pandemic or infectious disease outbreak.
b. Visitation that may interfere with care of other patients.
c. Court order limiting or restricting contact.
d. Visitors engaging in disruptive, threatening, or violent behavior of any kind.
e. Patient or patient roommate(s) need for privacy or rest.
f. Inpatient substance abuse treatment program protocols limiting visitation.
g. Clinical intervention or procedure and care, provider may limit visitors in patient’s best interest.
h. Reasonable limitations on number of visitors at any one time.
Definitions:

**Family Member**: Individuals(s) playing significant role in a patient’s socio-emotional life.

**Support Person**: Family/friend/others who support patient during the hospital stay. Support person may visit the patient and exercise patient’s visitation rights on patient’s behalf with respect to other visitors if patient is unable to do so. Such person may, or may not be legally responsible to make decisions on patient’s behalf. Support person is accepted without demand of supporting documents and allowed to exercise the patient’s visitation rights on behalf of patient.

**Visitor**: Guest of the patient; and family members are considered visitors.

**PROCEDURE:**

Patients’ and/or support person (as appropriate) will be informed of their visitation rights, including any clinical restrictions or limitations, when informed of their rights (Appendix A). Patient Admission Packet will include written information on patient rights, including right to receive visitors as designated; including, but not limited to a spouse, domestic partner, including same sex domestic partner, family or friend; and their right to withdraw or deny such consent at any time. All visitors’ must have appropriate color coded passes.

**RESPONSIBLE STAFF:**

**DUTIES PERFORMED:**

- **Admitting Staff/Information Desk**
  - Inform visitors of optimal visiting times
  - Review patient restriction if applicable
  - Issue laminated visitor passes

- **Hospital Police**
  - Direct visitor/family to appropriate unit
  - Review visitor pass for location of patient
  - Respond to staff’s request for intervention and/or removal of disruptive visitors.
  - Periodic rounds per shift, and ask all unauthorized visitors to leave patient units

- **Nursing Staff**
  - Request visitor not to visit if exhibiting signs of illness.
  - Make contact with visitor prior to entering patient’s room.
  - Educate visitor on:
    - Hand washing before entering/after exiting patient’s room
    - Infection control and/or isolation precautions; use of personal protective equipment (PPE)
    - Fire safety, evacuation and disaster Guidelines
    - HIPAA Privacy Act; maintain patient privacy/confidentiality
    - Hospital’s protocol on prohibition of taking photographs (use of camera or cell phone) while on unit or other area of hospital
  - Escalate issue to Nursing Supervisor or Administrator on Duty of any concerns/issues in granting permission.
### EXEMPTIONS TO VISITATION POLICY

1. **Patient /Support Person Withdrawal of Visitation Consent:**
   - **Unit Staff/Guest Relations**
     - a. Assist patient/support person to complete Request for Additional Privacy Protection Form.
     - b. Forward completed/signed Request for Additional Privacy Protection Form to Admitting/Information Desk staff & Hospital Police.

2. **Administration Imposed Visitation Restrictions**
   - **Nursing Supervisor/AOD**
     - a. Place visitation restriction on patient, after need identified, such as, patient’s risk of infection, assessed and documented; explain reason for restriction to patient/support person and document in patient’s medical record.
     - b. Sign/complete Request for Additional Privacy Protection Form.
     - c. Send original Request for Additional Privacy Protection Form to Admitting staff and/or Information Desk staff, Hospital Police, & Guest Relations.

3. **Administration for Children Services (ACS) Initiated Visitor Restrictions**
   - **Child Protection Coordinator/Designee Social Work Department**
     - a. Inform patient’s physician, Nursing Supervisor, AOD and Hospital Police.
     - b. Explain reason for restriction to patient/support person and document in medical record.
     - c. Sign/complete Request for Additional Privacy Protection Form.
     - d. Send original Request for Additional Privacy Protection Forms to Admitting/ Information Desk Staff, Hospital Police, & Guest Relations.

4. **General Processing of completed Request for Additional Privacy Protection Form:**
   - **Guest Relations/ Administrator on Duty**
     - a. Distribute copies of completed Request for Additional Privacy Protection Form to Unit, Admitting/Information Desk, and Hospital Police.
     - b. File original Request for Additional Privacy Protection Form in separate binder.
     - c. Ask for picture identification from any person requesting to visit, and ensure approval to visit is on Request for Additional Privacy Protection Form. All approved visitors must present picture identification, prior to receiving a pass.
     - d. Limit to a maximum of five specific visitors on approved list in Request for Additional Privacy Protection Form. Approved visitors must present picture identification prior to receiving a pass.
     - e. Document action in Request for Additional Privacy Protection Form and file for six months, or when a change is requested by a patient/support person.
Special Circumstances Visitation: Pediatrics, Labor & Delivery, Emergency Department, Antepartum, Psychiatry, Ambulatory Surgery and Out-patient Clinics:

**Labor & Delivery:** Two persons, including children age 8 and above are allowed in labor room. Support persons allowed 24 hour visit, and may be any person designated by patient. Staff will document attendance of support persons during labor in patient's medical record. Support persons are not allowed to visit other patients. Visiting is limited for preclamptic/eclamptic patients until stabilization. When children are in labor room, an adult must be available to supervise. Frequent exchanges of visitors are discouraged.

**Sibling/Child Visitation:** Healthy sibling/child visitation will be made available to both postpartum and antepartum patients, with exception of patients in isolation. Healthy sibling/child/children age two and older with no known infections, or recent exposure to communicable diseases may visit in patient's room. Visiting is limited to two children per family. If patient wishes visitation to Neonatal Intensive Care (NICU), NICU staff will issue a pass. The Interdisciplinary Team will encourage patient to allow sibling to touch the new baby after hand washing. Document visit in medical record and include the washing of hands by sibling/child. Nursing Staff will inform patients of availability of sibling/child visitation; and distribute sibling/child visitation letter. Staff will ensure justification of any denial of a pass; and all visiting sibling/child are accompanied and supervised by a responsible adult, who assumes full responsibility for them. Hospital Police will assure proper documented PASS is available, and upon exiting, same children are exiting.

**Pediatric Unit:** Only one parent can stay overnight. Number of visitors is four, including parents/significant other. Staff will review patient restriction if applicable, and inform ADN/AOD of special request (children below age 2 may visit based on clinical discretion of the ADN/ AOD).

**Hospital Police:** Respond to staff’s request for assistance and/or removal of disruptive visitors; Review visitor’s pass for location of patient.

**Psychiatric Services:** – Psychiatric Emergency Room (CPEP) and Inpatient Psychiatry admissions are not twenty four (24) visitations. Visitation is restricted to specific hours and number of visitors.

- **CPEP**
  - 12noon – 2pm, 6:00pm – 7:00pm (7 days a week)

- **Inpatient Psychiatry**
  - 2:30pm – 3:30pm, 7:00pm – 8:00pm (weekdays)
  - 2:30pm – 4:30pm, 7:00pm –8:00pm (weekends & holidays)

**Forensic Patients:** Permission to visit is obtained by the visitors in the arresting precinct.

**Emergency Department:** Visitors to the Emergency Department are welcomed for short visits. However, it is in the best interest of the patient to limit visitors to two persons at the bedside. All visitations are at the discretion of the nurse in charge and the physician caring for the patient. As a safety precaution, visitors may be asked to wait in the waiting room during certain exams, diagnostic tests, active treatments or clinical rounds. The medical provider or nurse may suspend visitation if it is deemed necessary to assure appropriate care or patient confidentiality.

**Out-Patient Clinics:** Visitors will be allowed to accompany clinic patients who wish to have a support person present during their examination by a physician.
Ambulatory Surgery/Post Anesthesia Care Unit (PACU): 1-2 visitors per patient will be allowed to accompany patients during the pre-operative preparation and/or post-operative recovery.

Pediatric patients: both parents will be allowed visitation privileges.

This policy will be reviewed annually and revised as needed.

REFERENCES:

- The Joint Commission Hospital Accreditation Standards (2012)
- CMS Interpretive Guidelines, 42 CFR Section 482.13(h) (2012)

RELATED POLICIES / PROCEDURES:

- Access Control
- Child Abuse and Neglect Identification
- Domestic Violence/ Elder Abuse
- Patient’s Rights
- Patient/Prisoner Visitation

ATTACHMENTS:

- Appendix A,B,C,D,E

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