



Administrative Corporate
Policy/Procedure

Title: **VISITATION OF PATIENTS**

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Interdisciplinary Review: **Administrative Council, Safety/Security, Clinical Coordination Committee, Disruptive Patient Committee**

POLICY:

Visiting guidelines are established to provide patients the opportunity to designate and receive visitors of their choice and to provide an environment that maintains the safety/security of patients, visitors, and the hospital, prevents the transmission of community acquired infections, and provides a restful healing environment.

PURPOSE: To define patient visitation guidelines throughout St. Elizabeth Healthcare.

GUIDELINES:

St. Elizabeth Healthcare promotes and supports a patient and family centered approach to care and recognizes the important of allowing family members and other individuals to be present with a patient for emotional support during the course of their stay. St. Elizabeth allows for the presence of a support individual of the patient's choice, unless the individual's presence infringes on others' rights, safety, or is medically or therapeutically contraindicated. The support individual may or may not be the patient's surrogate decision maker or legally authorized representative. St. Elizabeth does not restrict, limit, or otherwise deny visitation privileges on the basis of race, color, or national origin, religion, sex, gender identity, sexual orientation or disability.

THE FOLLOWING DEFINITIONS APPLY FOR IMPLEMENTATION OF THIS POLICY:

1. Family or Family Member: The terms "family" or "family member" are understood and interpreted to include any person(s) who plays a significant role in an individual's socio-emotional life. This may include a person(s) not legally related to the individual. Members of "family" may include spouses, domestic partners, and both different-sex and same-sex significant others. "Family" may include a minor patient's parents, regardless of the gender of either parent. Solely for purposes of visitation policy, the concept of parenthood is to be liberally construed without limitation as encompassing biological parents, legal parents, foster parents, same-sex parents, step-parents, those serving in loco-parentis, and other person operating in caretaker roles consistent with applicable law.
2. Visitor: A "visitor" is defined as a guest of the patient. Family members are considered to be visitors as well. Visitors are encouraged to visit during the hospital designated daily visitation hours of 8:00 AM to 9:00 PM. Due to the critical and/or specialized nature of certain units (i.e., intensive care units, recovery rooms, emergency departments, labor and delivery etc.), visiting may be more restrictive as outlined below.

GENERAL VISITATION GUIDELINES:

1. In general, family members and visitors are welcome from 8:00 AM to 9:00 PM daily, unless one or more of the following considerations are noted, or other special circumstances apply as described in this policy. The patient or the patient's designated representative in conjunction with the nurse and healthcare team may make visitation limitations. Family and visitors will not be denied access to

the patient without a legitimate reason, as determined by the hospital. Special considerations that determine the amount of time family and visitors spend with the patient include:

- Clinical and emotional needs of the patient. Having family or visitor present must not put the patient at risk or bring the patient harm. Examples include exhaustion, overstimulation, or marked increase in agitation.
 - Family member's or visitor's inability to meet hospital infection control policies.
 - The need to maintain a sterile environment during bedside procedures.
 - A limitation as requested by the patient or the patient's designated representative.
 - Space limitations in the patient rooms.
 - Patient, family, visitor, or employee safety issues
 - Visitors or family members with prohibitive legal documentation, such as applicable restraining orders, will not be allowed to visit.
2. To help patients recover and to not overly tire patients, visits should be brief, quiet and pleasant. The patient or patient's designated representative, in conjunction with the nurse and healthcare team, may make additional limitations for family and visitors, especially in the intensive care units.
 3. Children must always be accompanied by an adult other than the patient. Visits by children younger than 14 years of age should be coordinated with the patient's nurse and the patient or the patient's designated representative. Children can only visit if they are able to comply with all isolation and/or infection control precautions.
 4. There may be unique and extenuating circumstances (i.e., imminent death, impending surgery, etc.) that require compassionate exceptions to these guidelines. The nurse and the health care team, using professional judgment and in collaboration with the patient or the patient's designated representative, will consider the unique family circumstances and patient needs when applying these guidelines. In these circumstances, to the greatest extent feasible, family will be allowed brief visits.
 5. In special situations, an adult family member may spend the night with the patient if the patient is in a single room, space is adequate, and the presence of the family member contributes to the wellbeing of the patient. The family member must be able to safely stay alone and take care of their own needs. Children may not remain overnight in a patient room. For pediatric patients, one parent is permitted to stay. Overnight guests should remain in the patient's room and inform the staff if they need to leave the room for any reason.
 6. Patients in police custody and/or correctional services custody (inmates) will not be permitted to have visitors unless approved by the agency having legal custody of the patient.
 7. Family and visitors are expected to abide by conduct supportive of the hospital environment. Family or visitor may be asked to leave the premises if they become disruptive or interfere with the general comfort and care of the patients, visitor or staff. Hospital security will be notified to handle disruptive issues as needed.
 8. Family or visitor may not consume alcohol or illegal drugs while on the hospital campus.
 9. Family or visitor may not smoke while on the St. Elizabeth campus.
 10. In the interest of patient and staff privacy, photography, video and/or audio recordings are not permitted in most areas except as provided for by St. Elizabeth Healthcare policies.
 11. In the event of an outbreak of infectious disease, i.e., seasonal influenza, it may be necessary for St. Elizabeth to restrict visitation or impose limited visitation based on other criteria (visitor age, etc.).
 12. Family and visitors should check with the staff before entering the unit.
 13. Family and visitors should always wash hands each time they enter and leave the patient room or unit.
 14. Family and visitors must follow all isolation and/or infection control precautions as instructed by nursing staff.
 15. Family and visitors are asked not to come to the hospital if they are feeling ill or have signs of, or have recently been exposed to, communicable illnesses or infections for the patient's protection. St. Elizabeth Healthcare personnel reserve the right to ask family and visitors to leave if they show signs of illness.
 16. To maintain the privacy of other patients, family and visitors should only enter the room of the patient that they are there to visit; family and visitors are requested to remain in the patient's room while visiting.

17. To maintain patient privacy and minimize disturbances to other patients and families, congregating outside in the hallways is prohibited.
18. To facilitate the rest and recovery of all patients, family members and visitors should be mindful and sensitive to the needs of other patients and families by keeping noise and disturbances to a minimum. Hallways should be kept clear.
19. Family and visitors must not interfere with normal hospital operations
20. Family and visitors should check with nursing prior to bringing in any food or beverages for the patient
21. Patient privacy and confidentiality must be considered and maintained.



CLINICALLY NECESSARY RESTRICTIONS

1. Visiting in the Family Birth Place:

The Family Birth Place embraces the role of support persons as an integral part of each patient's birthing experience.

- A. When possible the patient's support person(s) will be present for admission and orientation to the Family Birth Place and be included in the teaching, and discharge planning processes.
- B. The patient, her attending physician, and the nurse determine the number of visitors during the labor, delivery and recovery phases, but should not exceed five persons.
- C. One visitor at a time is allowed in the triage/assessment room.
- D. Attendance at a cesarean delivery is limited to one support person of the patient's choice. The attending physician and/or anesthesia will determine whether the presence of the support person is appropriate based on the patient's condition.
- E. Children must be 14 years or older to visit unless they are siblings of the infant. Children must be accompanied by a responsible adult other than the patient at all times.
- F. Parents should not bring children with signs of illness, infection, or exposure to a communicable disease onto the unit. Visitors may be visibly screened by nursing personnel when they arrive on the unit for infectious diseases (e.g., fever blisters, cough, rash etc.). Handwashing is strongly encouraged at all times.
- G. All visitors will wash their hands prior to handling infants.

2. Visiting in the Neonatal Intensive Care Unit

St. Elizabeth NICU recognizes the integral role that families play in the delivery of healthcare and is committed to providing a supportive family-centered care environment. The following visitation guidelines exist to create a balance between family-centered care and the need to limit potentially infectious exposure to vulnerable patients, promote a health restoring environment, and maintain patient privacy & safety for all.

A. General Guidelines:

- i. All visitors must be free from any symptoms of illness including: nausea, vomiting, diarrhea, runny nose, cough, sore throat, fever, rash, cold sores, and conjunctivitis (reddened eyes).
- ii. All visitors will sign in and out at the front desk of the NICU.
- iii. Adult visitors will be required to show photo identification and a copy will be made to maintain on file in the NICU.



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- iv. All visitors will be instructed to wash their hands and use hand antiseptic upon entering the unit each time. Hand washing or the use of hand gel is also expected when exiting the patient room.
- v. Only 4 visitors (including mother and significant other/support person) at a time are permitted in an infant's room or at a bedside.
- vi. Visitors will stay at the bedside of the infant being visited and not explore other rooms/areas of the NICU.
- vii. Visitors will use the designated restroom in the NICU or other public restrooms throughout the hospital.
- viii. Only water in a covered container is permitted in the patient's room. All other drink and food will be stored and consumed in the NICU family lounge.
- ix. All forms of tobacco are prohibited for use within the NICU and on St. Elizabeth Healthcare property.
- x. Live plants, flowers, and latex balloons are not permitted in the patient's room.

B. Mother & Significant Other/Support Person Guidelines:

- i. The mother and one additional designee (significant other/support person) are welcome and encouraged to visit their infant at any time and as often as possible.
- ii. The mother and significant other/support person will initially be identified in the NICU using the hospital identification bands distributed in LDRP. Within the first 24 hours after the infant's admission to the NICU, the mother and significant other/support person will provide photo identification and a copy will be made to maintain on file in the NICU.
 - a. If the mother or significant other/support person misplaces the hospital identification band during the infant's hospitalization, a new identification band WILL NOT be distributed. Photo identification will then become the means for access into the NICU.

- iii. The mother and significant other/support person will review and sign a copy of the NICU Visitation Guidelines & Partners in Care Agreement within the first 24 hours after the infant's admission to the NICU. The completed paperwork will be placed in the infant's chart and a copy given to the mother. This paperwork can be found in MEDEX.



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- iv. The mother may designate 6 adults, in addition to herself and significant other/support person, that may visit the infant. A list of these designees will be placed in the "Friends & Family Binder" at the front desk. These 6 designees will remain the same throughout the infant's hospitalization and will be required to show photo identification upon entry to the NICU each time.
- v. The mother and significant other/support person are permitted to visit their infant at any time. An "after- hours" visitor badge must be obtained from the Security Department if visiting between the hours of 9 PM – 5 AM. No other visitors may stay overnight in the infant's room.
 - a. Safe sleep practices will be followed by mother and significant other/support person when resting in infant's room.

C. Sibling Guidelines:

- i. Siblings of the infant who are at least 2 years of age are permitted to visit in the NICU.
- ii. A "NICU Sibling Visitor Health Screening Form" will be completed for each visiting sibling. This form can be found in MEDEX.
- iii. If the information on the "NICU Sibling Visitor Health Screening Form" meets the visitation guidelines of the NICU, the sibling will receive a "Sibling Visitor Sticker". This sticker will be placed on the sibling's clothing in plain view and is valid for the date of issue only.
 - a. As a general recommendation, 30 minutes is an appropriate amount of time for sibling visitation. Age, attention span of the sibling, and the condition of the infant are factors to take into consideration when determining length of stay.
- iv. If the information on the "NICU Sibling Visitor Health Screening Form" does not meet the visitation guidelines of the NICU, the sibling will not be permitted to visit in the NICU. The sibling may go to the NICU family lounge, ONLY if adult supervision can be arranged. Hospital staff is not available to supervise siblings.

- v. Sibling visitation is not available during the Flu/RSV season and may be suspended at any time by the NICU Medical Director or Nursing Managers for infection control reasons.
- vi. Siblings will not be permitted to stay overnight.

*** *Exceptions to the NICU visitation policy require manager or designee approval.*



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3. Visiting in the Emergency Department:

Due to the acute needs of Emergency Department patients and environmental limitations, visitation is limited to two visitors per patient in the treatment area. Additionally, during triage a designated support person may accompany the patient upon their request. A designated support person may also escort the patient to the treatment area. After the patient's initial assessment, a second visitor is welcomed to visit the patient in the treatment area.

4. Visiting in the Adult Intensive Care Units:

- A. The Intensive Care Units of EDG – FLO and FTT support visitation – in accordance with guidelines set by St. Elizabeth policy and procedure re: infection control restriction and security badging after hours.
- B. Due to the acute needs of the Intensive Care environment, visitors should be limited to 2 at a time. There are exceptions, in particular with end of life issues. Consult with the unit manager or designee (Team Leader)
- C. Children under the age of 14 are not permitted to visit for the safety and the wellbeing of the child. Under certain circumstances, there may be exceptions to allow children to visit. – (consult the Unit manager / Team Leader)
 - 1. in these instances, visitation should be limited to 10-15 min
 - 2. For safety reasons, children should not visit a patient in isolation precautions. *In the event of extenuating circumstances, consult with Infection Control.*
 - 3. Children who are sick – fever – cough – rash – runny nose should not visit.
 - 4. the child/children must be under the direct supervision of an responsible adult at all times
 - 5. children should not be left unattended in the waiting area

LIMITATIONS:

- 1. Visiting privileges may be limited at any time based on the patient's condition or request.
- 2. Prisoner patients-in-custody are not authorized visitors unless specifically approved by the attending police (or jail) authority.
- 3. In the event of a disaster/epidemic, or at the direction of the local or state health department, visiting privileges may be rescinded for the protection of patients, visitors and staff.
- 4. Special rules shall govern the visitors of isolation patients (refer to Infection Control plan available on the intranet).
- 5. For the protection of patients, the following restrictions are in effect at all St. Elizabeth Healthcare facilities:

- a. When family members and visitors have symptoms of cold, cough, flu, runny nose, sore throat, cold sores, vomiting, diarrhea, fever, rash or skin infection;
- b. When the patient is undergoing therapy or interventions that would interfere with the plan of care;
- c. When a visitor exhibits disruptive behavior that presents a direct threat to staff or other patients;
- d. When a patient or roommate needs privacy or is receiving care;
- e. When there is a court order limiting or restraining contact;



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- f. When substance abuse treatment protocols require restricted visitation in the plan of care.
- g. When the environment limits the physical space available to comfortably accommodate visitors.

Visiting by Children:

- Children under 14 years of age should not routinely visit.
- For safety reasons, visitation by children is prohibited when a patient is in isolation precautions. In the event of extenuating circumstances, consult with Infection Control.
- Children are not permitted to stay overnight.
- Children must be in the accompaniment of an adult caregiver at all times. Children may not be left in the care of a patient under any circumstances.

AFTER-HOURS VISITATION:

As a measure to ensure the safest possible environment for patients and others in the hospital, all visitors who are in the hospital between 9pm and 5am will wear a personalized photo badge. The visitor will obtain photo badge by going to the security office. Each hospital location will have a SINGLE entry point with all other entry points locked at 9pm.

1. The visitor will supply identification to a member of the Security team.
2. The information will be entered into a visitor database.
3. A photo badge will be generated and issued to the visitor.
4. Badges are void after 24 hours.
5. Visitors must go directly to the Security Department to obtain an after-hours badge.
6. Facility entry points after 9pm:
 - Covington – Emergency entrance
 - Grant – Emergency entrance
 - Ft. Thomas – Emergency entrance
 - Florence - Emergency entrance
 - Edgewood - Emergency or Night Entrance

Please Note: St. Elizabeth Healthcare reserves the right to limit visitation in any situation it deems necessary.