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Owner John Barattini
Area Safety & Security
Applicability HCA Florida
Ocala Hospital
Type Of Policy
Document

Patient Visitation Guidelines

SCOPE:

Hospital-wide

PURPOSE:

To provide guidelines in an effort to establish a work environment as free from the threat and injury of violence as is reasonably possible for employees, physicians, patients, volunteers, contractors, visitors and customers who should be treated with courtesy and respect at all times.

POLICY:

To provide guidelines regarding the presence and participation of families and other partnership in care. The facility promotes and supports a patient and family-centered approach to care.

Definition:

Family: The hospital uses a broad definition of "family" as defined by each patient. This concept is recognized by the American Academy of Family Physicians, which defines "family" as "a group of individuals with a continuing legal, genetic, and / or emotional relationship;" (American Academy of Family Physicians, 2009).

PROCEDURE:

1. The professional nursing and medical staff recognize the right of patients to have comfort and encouragement from the visitation of family, friends, and/or other persons whom the patient chooses and will support that right.
2. Visitation will not be denied based on the visitor's race, color, national origin, sex, gender

identity, sexual orientation, or disability. However, the patient has the right to decline any visitor at any time and his/her request will be honored.

- In accordance with state law, no health care facility in Florida may require a vaccine as a condition to visitation and must allow for consensual physical contact between patients and their loved ones.
 - SB 988 states that all hospitals, hospices, and long-term care facilities visitation policies and procedures must allow for in-person visitation in all the following circumstances, unless the resident, client, or patient objects:
 - End-of-life situations.
 - A resident, client, or patient who was living with family before being admitted to the provider's care is struggling with the change in environment and lack of in-person family support.
 - The resident, client, or patient is making one or more major medical decisions.
 - A resident, client, or patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died.
 - A resident, client, or patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver.
 - A resident, client, or patient who used to talk and interact with others is seldom speaking.
 - For hospitals, childbirth, including labor and delivery.
 - Pediatric patients.
3. Unless there are clinically appropriate restrictions present, security reasons, or situations where visitation may negatively impact a patient's health and safety (operating room suites, clinical crisis such as a need to rescue a patient, etc.), every attempt will be made to accommodate the patient's preferences for visitation and visitors will not be unnecessarily denied the ability to visit.
 4. For patient and community health and safety, visitation may be denied or situationally terminated if the visitor(s) refuses to comply with infection control requirements or security policies considered paramount for the patient's health and safety or to prevent the spread of communicable disease in the hospital and/or community.
 - a. Isolation policies and practices must be followed when visiting patients in isolation.
 - b. Security policies intended to assist in the protection of vulnerable patient populations must be followed.
 - c. Visitation may be denied if prohibited by law enforcement staff.
 5. When a patient wishes a support person to remain through the night in the patient's room, every attempt will be made to accommodate the patient's request providing safety and/or security considerations are not in conflict with the request.
 - a. Support persons staying overnight with a patient are required, and must agree, to stay in the patient's room after 8 pm, for security purposes.

- b. Exceptions may be made based on the clinical needs of the patient.
 - c. Only one person may sleep overnight in a patient room at a time. Overnight guests must be at least 18 years of age, present a valid government issued identification.
 - d. When the patient is in a semi-private room, the request for an overnight support person must take into consideration the effect on the patient's roommate and the Hospital's ability to make any alternate arrangements prior to permitting the overnight stay.
6. It is always preferred that visitors make arrangements prior to 8pm. Family members should inform the unit staff of the request and should check in with security on arrival.
 7. For each individual facility the following is required:

HCA Florida Ocala Hospital:

Pick up the phone outside of the Main Lobby and request assistance from Security from 8:00PM until 12:00 Midnight. All visitors entering the facility after midnight must enter through the Emergency Department. Security will notify the House Supervisor or Charge Nurse of the Unit. The Security Officer will ask each visitor to present identification and will record the visitor's name, verification of identity and patient he/she is visiting. Family members returning or called back to the facility after visiting hours due to a change in a patient's condition will enter through the Emergency Room. The House Supervisor or Charge Nurse will notify security of the family notification. Security will escort the family to the floor or unit upon their arrival at the Emergency Department.

HCA Florida West Marion Hospital:

All visitors entering the facility after 8:00PM will enter through the Emergency Department, pick up the designated phone and call security who will assist you. The Security Officer will ask each visitor to present identification and will record the visitor's name, verification of identity and patient he/she is visiting. Security notify the House Supervisor or Charge Nurse of the Unit.

Guidelines:

The following guidelines are intended to be flexible in order to respond to the diverse and individual needs and preferences of each patient and unanticipated and unique circumstances, as well as to assure the safety of patients, families, and staff.

- A. Patients in ICU may have limited visitors, including family members only. The respective unit set these hours.
- B. Certain departments may have "quiet hours" which may limit visiting. Staff will inform visitors if their department has specific quiet hours.
- C. At the beginning of an ambulatory care experience, in patient stay, or emergency room visit, patients are asked to define their "family" and other "partners in care" and how they will be involved in care and decision-making. Also, identify whether a patient has a designated representative, such as a power of attorney for health care or a health care proxy. Clarify patient references regarding who may be present during rounds, change of shift bedside report, exams, and procedures, and who may have access to written or electronic clinical

- information.
- a. Document these preferences in paper or electronic charting, and communicate consistently and comprehensively to all who are involved in the patient's care.
 - b. Patients may modify their preferences during their hospital experience.
- D. In situations where the patient cannot speak for him or herself, is otherwise incapacitated and cannot identify who should be present, or when there is no obvious significant other, such as a spouse or life partner, or parent or adult child, hospital staff make the most appropriate decisions possible under the circumstances. Taking a broad definition of family and other "partners in care" into account, staff welcome whoever has arrived with the patient. Decisions about the presence of family or other "partners in care" made under emergency situations may need to be revoked.
- E. Nurses and others on the health team provide guidance to patients, families and other partners in care in a variety of ways over time about:
- a. How to partner to ensure safety and quality of care
 - b. How to be involved in care, care planning, and decision-making, and how to support the patient during the hospital stay and during the transition to home and community care.
 - c. How to honor privacy and be respectful of other patients and families in close proximity
- F. Patients, families, nurses, and other members of the health care team can ask to reevaluate or modify the presence and participation of families. All such collaborative decisions will be documented in the patient record.
- G. The number of people welcomed at the bedside at any one time will be determined in collaboration with the patient and family. In situations where there are shared rooms (companion centers or recovery areas), this negotiation will include the other patient, his or her family, and other partners in care.
- In respect to the presence of children:**
- a. Children supervised by an adult are welcomed. Children are not restricted by age. Although younger children may be developmentally unable to remain with the patient for lengthy periods of time, contact with these children can be of significant importance to the patient.
 - b. Children under the age of 13 are discouraged from visiting patients in semi-private rooms
 - c. Children are expected to remain with the adult who is supervising them, not the patient.
 - d. Children's behavior is monitored by the responsible adult and the nurse to ensure a safe and restful environment for the patient(s) and a positive and developmentally appropriate experience for children.
- H. Families are encouraged to designate a family spokesperson to facilitate effective communication among extended family members and hospital staff.
- I. Disruptive behavior and unsafe practices are not acceptable. These situations while usually

rare, will be addressed directly and promptly and may result in the individual(s) removal from the facility by security personnel.

- J. All partners in care and any guest of a patient must be free of communicable diseases and must respect the hospitals' infection control policies.
- K. If an outbreak of infection requires some restrictions for public health, the staff must collaborate with the patient and family to ensure that selected family members are still welcomed to assure safety and offer emotional support to the patient.
- L. Clergy will be extended the courtesy of flexible visitation providing it does not interfere with medical care/treatment. All clergy are required to check in at the nursing desk of the appropriate unit.
- M. All staff should be aware of visitors in their areas and report suspicious or unauthorized visitors to their supervisor or security immediately.
- N. Contractors and vendors are to check-in through the eDHP process. Refer to DHP policy.
- O. Facility will maintain a visitor log for minimally a rolling 12 months. The log will include the date/time of entry, visitor name, visiting unit or visiting room number.
- P. Family members or visitors may not consume alcohol, illegal drugs or smoke while on hospital grounds.
- Q. Family members or visitors may not take photos or video/record any type incident while on hospital grounds.
- R. Law Enforcement and Corrections Officers detailed to a patient in custody receiving medical care will inform staff if the patient can communicate by phone and receive visitors. The patient will be given confidential status until discharged from the facility.
- S. Ocala Health facilities are weapon free. No weapons are allowed on hospital grounds. The exception being Law Enforcement Officers and Correction Officers in performance of their law enforcement duties.

EMERGENCY DEPARTMENT

Ocala Hospital, West Marion Hospital, Summerfield Free Standing Emergency Room, Maricamp Free Standing Emergency Room and Trailwinds Free Standing Emergency Room supports a patient and family centered approach to care. As part of planning your care, we will ask you to tell us which people you would like with you while you are in the treatment area of the Emergency Department. For reasons of patient safety and privacy, we allow no more than 2 people to be with you. If more than 2 people are here, they may take turns spending time with you. Please be aware of the guidelines listed below while in the Emergency Department.

- No picture taking is allowed of the facility or workforce without facility authorization.
- Please remain in the patient room or the waiting room.
- Please keep the patient room door/curtain closed while visiting
- Please silence your cell phone.
- Please keep your voice low.

There are times when people should not visit you while you are here. If a visitor has been recently exposed to an infection or illness, such as the flu, he or she should not visit you in the treatment area.

If at any time you decide that you do not want people to visit or you no longer wish to visit with a certain person, please let your nurse know. Please speak with staff if you have any questions or concerns.

REFERENCES:

The Joint Commission. 2016. RI.01.01.01 EP2

HCA CSG.QS.003 Vetting Dependent Healthcare Professionals and Other Non-Employees

Centers for Medicare and Medicaid (CMS). 482.13: Conditions of participation: Patient rights. Retrieved from <https://www.gpo.gov/fdsys/pkg/CFR-2010-title42-vol5/pdf/CFR-2010-title42-vol5-sec482-13.pdf>

S. 408.8235 – No Patient Left Alone Act

All Revision Dates

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Approval Signatures

Step Description	Approver	Date
Department Director	KRISTI VOWINKEL: Dir Facilities Mgmt	Pending
Policy Owner	John Barattini	8/16/2022