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Owner Sheila Harper
 Area Administrative - Provision of Care, Treatment & Sv
 Applicability HCA Florida Osceola Hospital
 Type Of Policy Document

NFD HCA Florida Osceola Hospital Visitation Policy

DEPARTMENT: Clinical	POLICY NAME: Visitation Policy
PAGES:	REPLACES POLICY DATED:
	DATE RETIRED:
APPROVAL DATE: Mar 2022	REFERENCE NUMBER:
SCOPE: All staff, healthcare providers, patients and families.	
PURPOSE: <ul style="list-style-type: none"> To provide guidelines for visitation of patients while recognizing the importance of visitation to our patients from the families, friends, or support persons. To embrace the philosophy that each patient has different support systems and that the patient should participate in decision making related to visitation, reducing anxiety, and allow the necessary rest to recover. To ensure that all visitors of patients enjoy equal visitation privileges consistent with patient preferences and subject to the hospital's justified clinical restrictions. 	
DEFINITIONS: Support person: Someone who provides emotional support, comfort and alleviates fear during the patient's hospital stay Justified Clinical Restrictions – Any clinically necessary or reasonable restriction or limitation imposed by the hospital on a patient's visitation rights which restriction is necessary to provide safe care to patient or other patients.	
POLICY: It is the policy of HCA Florida Osceola Hospital to provide the highest quality of patient care possible, keeping the importance of visitors in a patient's treatment in mind, and the importance of	

proper rest in the healing process. The facility follows the guidelines from Centers for Medicare and Medicaid and the Agency for Health Care Administration on patient visitation rights and prohibits discrimination based on age, race, color, national origin, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression. Visitors chosen by the patient must be able to enjoy "full and equal" visitation privileges consistent with the wishes of the patient. This right must be balanced with the rights of all patients particularly each patient's rights of confidentiality, privacy, and security.

All hospital staff and clinicians encourage families and other partners in care to be involved and supportive of the patient according to patient preference. They recognize and reinforce that families are integral to patient safety, comfort, medical and psychological well-being, and the healing process.

Cultural differences will be recognized and considered when making determinations.

The patient has the right to choose who may visit them during their stay, regardless of whether the visitor is a spouse, a domestic partner (including a same-sex domestic partner), another family member, a friend, guardian or essential caregiver. Patients are provided a clear explanation of the right to consent to receive visitors who he or she designates through the patient rights and responsibilities information provided at registration. The patient acknowledges their understanding of the hospital's visitation policy and is documented in the medical record on the Conditions of Admission form signed by the patient or patient's representative at registration. The patient / family member / support person is given the opportunity to read and ask questions about their patient visitation rights. Visitation information is also included in the Patient Guide.

The patient also has the right to withdraw or deny such consent to visitation of an individual at any time. The facility 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 hospital may not allow or limit the person from patient-directed visitation. After such notification to deny visitation, the patient would "opt-out" from appearing on the patient census and provide their code to persons whom they chose to have as visitors.

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.

1. Visitors are welcome during visiting hours according to patient preference with exceptions made during times of community infectious outbreak or extenuating circumstances. In these instances, caregivers will encourage virtual visitation via phone or video chat.
2. Families are encouraged to designate a family spokesperson to facilitate effective communication among extended family members and hospital staff.
3. **In situations where the patient can't speak for him or herself, is otherwise incapacitated and cannot identify who should be present, or when there is no obvious significant other, 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 will welcome whoever has arrived with the patient.**

4. Specialized units may have set visitation hours and may limit the number of visitors at a given time, i.e., Critical Care, Behavioral Health, Nursery, etc.
5. Patients, families, nurses, and other members of the health care team can ask to reevaluate or modify the presence and participation of families at the bedside at any one time. All such collaborative decisions will be documented in the patient record. **In situations where there are shared rooms (semi-private rooms, recovery areas), this negotiation will include the other patient, his or her family, and other partners in care.**
6. **Special visiting considerations are made on an individual basis, for those patients who are critically ill, end of life situations, childbirth, pediatric patients, and persons making major medical decisions regarding the patient;** such determinations may be made by the Administration, Administrator on Call, or the Unit Director. This may include, but is not limited to, a parent spending 24 hours with their child, a spouse or child staying with an elderly, confused patient, patient experiencing emotional distress or grieving the loss of a friend or family member how recently died, a patient needing cueing or encouragement to eat or drink from a family member or caregiver, or accommodations for a physically or emotionally challenged patient.
7. Visitor Identification
 1. All hospital visitors shall check/sign in at the desk in the main lobby or the Emergency Room after hours.
 2. Visitors will sign the sign in sheet and fill in all requested information on that sheet. Sign in sheet will be kept minimally for a rolling 12 months.
 3. For some specialized units, additional requests may be made, i.e., OB, Nursery, Behavioral Health.
 4. All visitors should have an ID badge which states the area they are visiting and date of the visitation.
 1. Visitors are asked to minimize noise and to remain in the patient's room or in the designated waiting room or public areas of the building. Any visitor found in areas where visitation is not permitted should be asked to leave the area. Visitors may be asked to step out of the patient's room in order to give the healthcare professionals caring for patients enough room to do their work.
 2. Waiting Rooms:
 - Waiting room areas are available to patients, family and visitors.
 - Volunteers and staff will check with the visitors in the Surgery/Critical Care waiting room at periodic intervals to keep visitors informed of the patient progress through surgery or to answer any questions regarding the patient condition.
 1. Clergy will be extended the courtesy of flexible visitation, providing it does not interfere with medical care/treatment. Pastoral Care staff shall have either a Pastoral Care badge or will be badged as a visitor. All clergy should check in at the nursing desk of the appropriate unit.
 2. If an outbreak of infection requires some restriction for public health, the staff must educate the patient and family to ensure safety to the patient and visitor.

- a. Visiting may be limited or restricted during pandemics or other community outbreaks.
 - b. Visitors should communicate with the nursing staff to receive instructions regarding the prevention of infection while visiting.
 - c. Visitors who have signs of infectious disease (fever/chills, sore throat, cough, vomiting, or diarrhea) in the previous 48 hours are prohibited from visiting.
 - d. **Visitors are expected to conform to posted infection control precautions as well as any necessary screening, personal protective equipment and other infection control recommendations as instructed by the care team.**
 - e. **Visitors will not be required to show proof of vaccination or immunization and may interact with patients if patient allows.**
3. Visiting Patient on Isolation Precautions:
- a. **In the case of isolation patients, the nurse assigned to the patient is required to educate visitors to isolation protocols including the use of personal protective equipment (PPE) for the safety of the patient, visitor, staff, and remaining hospital population. Education is also provided on the door to explain the appropriate PPE required for entry. Education will be documented in the electronic medical record.**
 - b. **Visitors are asked to wash their hands before entering and leaving the patient room. Hand sanitizer is provided at the door of each room.**
4. With respect to the presence of children:
- **Children are not restricted by age, however the facility recommends that children under the age of 12 are not permitted in the patient care areas unless there are extenuating circumstances.**
 - **Children under the age of 12 shall not be left unattended at any time within the hospital and must be under the direct supervision of a responsible adult to assure a safe environment for the child and patient. Children under the age of 12 will not be allowed in isolation rooms.**
1. It is the responsibility of all staff members to be aware of visitors in their areas and report suspicious or unauthorized visitors to their supervisor or security immediately.
 2. Visitors are not allowed in procedural areas, with the exception of Obstetrics.
 3. A justified clinical restriction may include, but not limited to one or more of the following: Visitors may be asked to leave under the following circumstances:
 - At the patient's request, the patient becoming agitated during visitation and any circumstance that would not be in the best interest of the patient;
 - There may be infection control issues;
 - Hospital is aware that there is an existing court order restricting contact;
 - Visitors engage in disruptive, threatening, or violent behavior of any kind
 - Visitation may interfere with the care of other patients or need for privacy;

- There is suspicion that illicit drugs or paraphernalia is being provided to the patient, or
 - Extraordinary protections because of pandemic or infectious disease outbreak;
 - **The patient is undergoing care interventions. However, while there may be valid reasons for limiting visitation during a care intervention, we to try to accommodate the needs of any patient who requests that at least one visitor be allowed to remain in the room to provide support and comfort at such times.**
1. Food and Drink may not be given to patients without permission of the nursing staff. Visitors are asked not to bring flowers into the Critical Care Areas.
 2. Baker Act Patients:

In compliance with Florida Mental Health Act, behavioral health patients have a right to communicate or to receive visitors.

- a. A patient's right to use the telephone or to receive visitors may be restricted by the healthcare team due to extenuating circumstances or possible disruption of the patient's treatment.
 - b. All behavioral health visitors must be screened by Security before seeing the patient. No personal belongings will be allowed in the hospital and must be stored or taken back to their vehicle before access is granted.
 - c. Formal written notice of the restriction(s) and the reasons for the restriction will be provided to the patient, the patient's attorney, the patient's guardian, advocate or representative. Such restrictions and reason will be documented in the patient's medical record.
 - d. Documentation of restrictions will be done on form #BA 3049. The original completed form must remain as a permanent part of the patient's record and copy given to the patient, their attorney, guardian, advocate or representative. (See Attachment C)
1. After Hour Visitors
 - a. Family arriving to the hospital after 8:00 PM and before 7:00 AM will need to enter through the Emergency Department entrance and sign in with the Security. The Security will ask each visitor to present identification and will record the visitor's name, verification of identification and patient he/she is visiting.
 2. Disruptive behavior and unsafe practices by visitors, will be addressed directly and promptly. If the need is warranted, hospital staff may terminate visitation privileges of any visitor. Staff will notify Security and complete an occurrence report.
 3. The hospital leadership has the right to modify the visitor policy in compliance with state and federal mandates and as needed for the safety of patients and staff. All changes to the visitor policy will be communicated and displayed for patients and visitors both on site and on the facility website for review.

REFERENCES:

The Joint Commission Comprehensive Accreditation Manual for Hospitals – RI.01.01.01

Centers for Medicare and Medicaid §482.13 (h) (1-4)
F.S. 408.8235 – No Patient Left Alone Act
The Florida Mental Health Act; Baker Act
CDC Guidelines for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings

ATTACHMENTS:

Attachment A – Visitor Guidelines
Attachment B – Letter to Visitor with Patient Privacy Code
Attachment C – Restriction of Communication or Visitors – Baker Act Patient

All Revision Dates

6/2/2022

Attachments

[Attachment A.pdf](#)

[Attachment B.pdf](#)

[Attachment C.pdf](#)

[Senate Bill 988 In person visitation Summary.pdf](#)

Approval Signatures

Step Description	Approver	Date
ACNO	Joseph Everette: ACNO	6/2/2022
Policy Committee Approval	Lavina Davis: VP Quality/ Patient Safety	5/9/2022
Policy Owner	Sheila Harper: Director Quality/ Site Admin	5/9/2022