



**HALIFAX**  
HEALTH

Policy Title: <b>Visitation Policy</b>		
Department: <b>Administrative</b>		TJC Chapter(s): <b>Rights and Responsibilities of the Individual</b>
Title of Policy Owner: <b>Chief Operating Officer</b>		Approved by: Administration & Legal Departments
Effective Date: 10/1/2020	Reviewed Date: 9/2021, 7/2023	Revised Date: 6/2022, 10/2023

**I. PURPOSE:**

Consistent with our mission and Cornerstone values, Halifax Health promotes and supports a patient-centered care model that includes the presence and participation of family and/or other Essential Caregiver(s) as designated by the patient. This policy serves to define and set expectations regarding hospital visitation that promote healing and a therapeutic environment, meeting the physical, emotional and spiritual needs of the patients we serve.

**II. SCOPE:**

This policy applies to all patient care areas/departments within any entity or facility owned by Halifax Health

**III. DEFINITIONS:**

Essential Caregiver: a visitor who is a family member, friend, guardian, or other individual designated by a patient that is allowed in-person visitation at least two (2) hours daily in addition to any other visitation authorized by the provider.

Surrogate: means any capacitated adult expressly designated by a principal to make health care decisions and to receive health information. The principal may stipulate whether the authority of the surrogate to make health care decisions or to receive health information is exercisable immediately without the necessity for a determination of incapacity or only upon the principal's incapacity as provided in Florida Statute 765.204. F.S.§765.101(21).

**IV. POLICY:**

**Patient Rights Surrounding Visitation:**

Patients have the right to consent to receive visitors he/she has designated, either orally or in writing, including but not limited to, a spouse, a domestic partner (including same-sex domestic partner), another family member or a friend. Similarly, patients also have the right to withdraw or deny his/her consent to receive specific visitors, or to impose visitation limitations for some visitors. Notice of these rights, including any clinical restriction or limitation on visitation will be provided upon admission.

When an individual is incapacitated or otherwise unable to communicate his/her wishes regarding visitation and an advanced directive is accessible designating another individual as their Surrogate, the required notice of patient's visitation rights should be supplied to the Surrogate. The Surrogate would then be allowed to exercise the patient's visitation rights on the patient's behalf.

### **General Visitation Policies:**

General visiting hours are 8:00 a.m. to 8:00 p.m. (except for HBS). Absent special circumstances, or other circumstances addressed elsewhere in this policy, visitors may stay for any duration of time during general visiting hours. Notwithstanding the foregoing, a patient's designated Essential Caregiver will be allowed visitation for at least two (2) hours in addition to general visiting hours, or the visiting hours applicable to the unit where the patient is located. Due to the critical or sensitive nature of some units (critical care, emergency department, behavioral health services, etc.) visiting hours may be more restrictive. See department specific sections of this policy.

The number of visitors allowed per patient will be limited to two visitors at a time, subject to any restrictions as discussed below.

In-person visitation is allowed in all of the following circumstances, unless the patient objects: 1) end-of-life situations, 2) patient who was living with family prior to admission is struggling with the change in environment and lack of in-person family support, 3) patient is making one or more major medical decisions, 4) patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died, 5) patient needs cueing or encouragement to eat or drink which was previously provided a family member or caregiver, 6) patient who used to talk and interact with others is seldom speaking, 7) childbirth, including labor and delivery, and 8) pediatric patients.

Children should always be accompanied by an adult. Visitors with fever or other signs/symptoms of infectious processes will not be permitted to visit. In special circumstances, an adult visitor/Essential Caregiver may be allowed to stay overnight with a patient if the patient is in a single room and the stay would contribute to the wellbeing of the patient. Visitor/Essential Caregiver must be able to safely stay alone and take care of their own needs. Children are not permitted to stay overnight. The Chief Operating Officer is designated as the individual responsible for ensuring that staff adhere to this Visitation Policy, and any related policies and procedures.

### **Visitor Restrictions and/or Limitations:**

Except for the circumstances enumerated above when visitation is allowed and for visitation by a Essential Caregiver for an additional two (2) hours daily, restrictions or limitations on visitation may be necessary when visitation would interfere with the care of the patient and/or the care of other patients. In these situations, the clinical healthcare team will use their best clinical judgment to determine when visitation is, and is not, appropriate. Best clinical judgment takes into account all aspects of patient health and safety, including the benefits of visitation as well as potential negative impacts that visitors may have.

Circumstances considered reasonably related to the care of the patient and/or the care of other patients that may be considered as the basis for imposing restrictions or limitations on visitations may include, but are not limited to, when:

- There may be infection control issues, especially during infectious disease outbreaks or pandemic;
- Visitation may interfere with the care of patients;
- The hospital is aware that there is an existing court order restricting contact;
- Visitors engage in disruptive, threatening, or violent behavior of any kind;
- The patient or patient's roommate(s) need rest or privacy;
- The patient is undergoing care interventions (when possible every effort will be made to accommodate patient's request to have one Essential Caregiver present to provide comfort and support); or
- The patient, or their Surrogate, in conjunction with the healthcare team, makes visitation limitation for other reasons.

If a patient is on isolation precautions, the visitor must comply with the applicable isolation precautions. Hospital staff will provide the necessary education to the visitor regarding the isolation precautions.

### **Visitor Entry Process:**

Visitors will be required to check in at the entry points of each facility and receive a visitor ID badge/pass prior to proceeding to a patient care area. All visitor passes are valid for one calendar day. For further information on the visitor entry process see Safety and Security policy "Visitor Identification and Management". For allowances and processes surrounding service animals accompanying visitors, see policy "Certified Pet Therapy & Service Animals."

### **Visitor Responsibilities:**

Visitors should:

- Maintain the privacy of all patients.
- Minimize disturbances to patients by not congregating outside in the hallways.
- Abide by conduct supportive of the hospital environment.
- Not interfere with normal hospital operations.
- Refrain from smoking anywhere on hospital campuses.
- Not be in possession of any weapons or illegal substances while visiting.
- Not utilize cell phones to videotape or take photos (see policy titled "Privacy: Photographic, Radiographic, Other Image, Audio and Video Recording).

Visitors may be asked to leave if they become disruptive or interfere with the general comfort and care of the patients. In-person visitation of a specific visitor may be suspended if the visitor violates this Visitor Policy or any related policies and procedures.

Visitors cannot be compelled to provide proof of vaccination or immunization status as a condition of entry.

During any declared public health emergency, epidemic, pandemic, or period of high transmission of any infectious disease, such as COVID-19, visitors may be required to comply with appropriate screening measures (including temperature checks, health questionnaires, and similar measures) prior to being granted to the hospital. If appropriate, the visitor will be provided with appropriate personal protective equipment, including a surgical mask, and will be provided with appropriate education regarding infection control precautions.

### **Department / Unit Specific Visitation Policies:**

#### **Labor & Delivery and Mother/Baby:**

- During labor and delivery up to maximum of 3 visitors (including the Essential Caregiver) are allowed.
- Only one Essential Caregiver will be allowed in the Operating Room during a C-section.
- Siblings of the newborn will be allowed to visit during normal visiting hours but must be accompanied by an adult.

#### **Neonatal ICU / Nursery:**

- Before entering the Neonatal ICU, unit clerk will notify the nurse of the parent's/visitor's arrival.
- Parents/visitors must wash their hands for 2 minutes prior to entering the patient care area. Any jewelry, watches, etc. should be removed and arms should be bare below the elbow.
- Parents may visit their baby day or night. Parents are encouraged to visit often, especially at feeding times. There may be exceptions in certain situations when parents may be asked wait outside the Neonatal ICU or relocate to another area within the unit during critical situations with other babies.
- Only two visitors will be allowed at the baby's bedside at one time. One of the visitors must have a Hollister band in place.
- Siblings may visit if current with their immunizations and if cold/flu symptom free. Siblings must be under constant supervision by the family.

- Individuals with open sores should check with a nurse or physician prior to entering the Neonatal ICU area.
- Patients/visitors entering Neonatal ICU/Nursery with a known history of MDRO should be evaluated further to determine if colonized or active infection is present. The nurse should contact Infection Prevention & Control for guidance.

#### Maternal Fever

- Hospitalized postpartum women who develop fevers related to obstetric conditions may enter the nursery and care for their newborns if:
  - a. The fever is not due to a communicable disease that is likely to be transmitted to the infant (Such as postpartum hemorrhage related fever, drug fever, etc.). This determination has to be made by the attending physician(s) treating patient and the infection control department.
  - b. If it is determined safe for the mother to visit the baby, the mother practices a thorough 3-minute scrub with Hibiclens solution.
- Postpartum mothers infected with non-obstetric related communicable disease (such as C. diff, multi-drug resistant organisms MDRO) should be treated according to the precautions and isolation techniques required by the communicable disease. Contact with the baby will be restricted if there is a risk that the infant will be infected (example: active Herpes lesions on the mother).
- Women with abscesses or infected or drained wounds should have appropriate cover dressings that cover and contain drainage adequately and should be limited to their room where appropriate isolation precautions need to be followed.
- Mother may sometimes be placed in isolation based on the suspected or confirmed disease or Multidrug resistant organisms (MDRO). The mother may also be restricted to the room they are placed in the postpartum period and not allowed to visit the baby in the nursery in certain circumstances. Regarding management of the mother, please refer to Precautions: Transmission-Based Specific Disease Precautions/Isolation in the Infection Prevention & Control Manual.

#### Halifax Health Behavioral Services:

- Visiting hours:
  - Monday – Friday: 6:00 p.m. to 8:00 p.m.
  - Saturday, Sunday and holidays: 2:00 p.m. to 4:00 p.m. and 6:00 p.m. to 8:00 p.m.
  - 4 East: as above with additional hour from 11:00 a.m. to 12:00 p.m. Monday – Friday
- All visitors to Behavioral Services will read and sign a confidentiality statement.
- All visitors must secure all personal items prior to entering. Cell phones, computers, briefcase or purses are not permitted on the inpatient unit. Visitors may utilize lockers provided for storage of these items.
- The dayroom and therapy room on the unit(s) may be used for visitation.
- Unit staff on 2600 and 2700 (no less than 2 staff) will supervise all visitation and report to the RN the results of visit related to patient/visitor interaction.
- Patients may have members of the clergy or their own private attorney visit any time during 9:00 a.m. and 8:00 p.m. following the same guidelines as outlined in this policy. Anything outside of this policy requires a physician order.
- Former patients are allowed to visit current patients, unless the attending physician thinks such visitation would be detrimental to the current patient's condition.
- Visitation outside of regular visiting hours must have permission from the attending provider, psychiatric counselor and/or the charge nurse/nurse manager.
- Visitors who bring items in for patients must leave those items at the reception desk. Staff will inventory items and if allowed/appropriate will disperse to the patient.

- A patient on 24-hour room restriction may visit with family in designated areas.
- Parents/guardians may visit the Day Treatment Program at any time. Parent/guardian must check in at the office upon arrival and obtain a visitor's ID badge. If the parent/guardian wishes to visit a specific activity they must obtain approval from the staff person in charge of that activity.

#### Radiology:

In radiology procedure areas, (inpatient and ROPU) visitors/Essential Caregivers will be limited to one person per patient.

#### Emergency Services:

Emergency services staff reserve the right to further limit the number of visitors allowed based on patient acuity or other extenuating circumstances, provided however, consistent with applicable law, a patient will be entitled to visitation by a designated Essential Caregiver for at least two (2) hours daily.

#### Hospice Inpatient Care Units:

- There are no restrictions on visitation hours
- There are no restrictions on ages permitted to visit
- There are no restrictions on the number of visitors during the daytime hours as long as other patients aren't disturbed. However, the facility staff may limit visitors based on individual patient needs.

#### Dialysis:

- Intensive Care Units: Due to patient confidentiality, aseptic technique, infection control processes, complications that can arise during treatment, physical space available, lines and hoses on the floor (that could cause a fall), etc. visitation is strongly discouraged during the dialysis treatment session. However, in the critical care unit **ONE** visitor/Essential Caregiver may remain at the bedside during the treatment. The family member will be asked to step out of room during initiation and termination of dialysis treatment or if patient becomes unstable.
- Dialysis lab: Due to patient confidentiality (HIPPA), aseptic technique, infection control processes, complications that can arise during treatment, physical space available, lines and hoses on the floor (that could cause a fall), etc. visitation is not allowed during the dialysis treatment session. Visitors may wait in the 2nd floor Cardiac Care waiting room.

#### **V. KEYWORDS:**

Visitation, visitors, visiting hours, Essential Caregiver, overnight visitors

#### **VI. REFERENCES:**

The Joint Commission Comprehensive Accreditation Manual for Hospitals, Rights and Responsibilities of the Individual.

Centers for Medicare & Medicaid Services Condition of Participation for Hospitals, 482.13 Patient's Rights.