Purpose: To create reasonable, enforceable guidelines that provide all patients with the opportunity to rest and recover in comfortable, quiet, private surroundings while enabling family and friends to participate in the healing process; to enhance the cohesiveness of the family unit and the patients’ support systems; and to provide access control that protects the rights of our patients, visitors, and employees to ensure a safe, secure, and orderly environment.

Policy: St. Peter’s Health staff shall enforce the visitation guidelines when appropriate, to protect patients’ privacy and increase their comfort.

Related Documents:

- Security Management Plan Policy # 635-0001
- Neonatal Intensive Care Unit Visitor Policy 120-0062
- Therapy Companion Support and Assistive Animals #120-0078
- Service Animals / Pet Visitation #120-0049

Guidelines:

1. Visitation Hours:
   a. Visiting hours are 0530-2100 - 7 days a week. Patient Access will page overhead without beep at 2100 every night announcing, “Visiting hours are now over, please have a safe and restful night.”
   b. Unit staff will dim unit lights at this time as another indication it is time for quiet and rest.
   c. Visitors entering SPH after the main entrance is closed must use the ER entrance.

2. Restrictions:
   a. Visitation can be restricted for health and safety reasons for example: staffing levels, patient acuity, visitor volume or disruption.
      i. At patient request, or legal guardian if patient is under age 18 years of age or becomes incapacitated.
b. Any visitation restrictions will be documented in the medical record. Restrictions will be posted on the door to the patient's room or, in the case of a hospital-wide restriction, at the main entrances.

c. Failure to follow the hospital's restrictions or to cooperate with hospital staff may result in removal from hospital property.

3. Exceptions:
   a. Exceptions to the visitation policy can be made by physicians and nurses caring for patients as long as there is clear communication and agreement with the exceptions being made.
   b. Physician orders alone, without communication with nursing staff, will not be considered an exception.

4. Granted Exceptions:
   a. Exceptions to visiting hours may be granted at the nursing staff’s discretion.
   b. Visitors granted an exception to visit a patient during non-visiting hours, are required to wear a designated visitor exception band (blue band with a white section on it).
   c. Bands will be on the units for nurses to use.
   d. The patients’ room number will be written on the band with no patient identifiers.
   
   e. Messaging to all team members including physicians should be clear.
      i. If anyone asks for an exception, answer = “please ask and work with your nurse.”
      ii. Do not answer “yes”, as there could be many other issues that you are unaware of going on.

5. Guidelines and Information for the Public:
   a. St. Peter’s has developed visitor guidelines to protect the patients, visitors, and staff. Failure to cooperate with these guidelines or hospital staff requests may result in your removal from hospital property. In accordance with CMS Final Hospital Conditions of Participation. Policies must set forth any clinically necessary reasonable restrictions or limitations to visitation and the reasons for the clinical restriction or limitation with a burden on the hospital to establish that the restriction is necessary for safe care, including but not limited to:
      i. Denial of visitation only if health and safety of the patient are affected.
      ii. Restriction to sensitive areas -- OB (infant security issues), ED, BHU, etc.
      iii. Health concern restrictions such as preventing ill visitors with symptoms of fever, cough or cold; or infection control issues, pandemic flu or other infections disease outbreaks
      iv. Visitation may interfere with the care of patients; consider patient in isolation
      v. It is impossible to delineate or anticipate every clinical reason that could warrant restrictions or limitations
      vi. Hospital reserves right to determine any other situation that is necessary to limit visitation
      vii. Hospital is aware that there is an existing court order limiting or restricting contact
      viii. Visitors engage in disruptive, threatening or violent behavior of any kind
      ix. Behavior presenting a direct risk or threat to other patients or staff
      x. The patient is undergoing care interventions
      xi. Patient needs rest or privacy, especially during procedures, tests, treatments, emergencies
      xii. Substance abuse treatment protocols requiring restrictive visitation in the plan of care
      xiii. May establish minimum age requirement for child visitors
      xiv. Consider prison guarded patients
      xv. Consider pastoral care or clergy visits
      XVI.

   b. "No Visitor" doorknob hanger indicated patient has requested no visitation. Each patient has the right to designate visitors who shall receive the same visitation privileges as the patient’s
immediate family members, regardless of whether the visitors are legally related to the patient, spouse or domestic partner:

i. Definition of family must be broad: Family means any person who plays a significant role in an individual's life, which may include a person not legally related to the patient.

ii. Cannot deny visitation on the basis of race, color, national origin, sex, sexual orientation, gender identity or disability

iii. Patients have the right to withdraw visitation consent at any time

iv. Patients have the right to decide who may and may not visit them

v. If a unit is restricted, the patient picks the visitors -- not the hospital

vi. NOTE: Visitors may ask at the nursing station to leave a note or to receive information on when visitation will resume.

c. "Isolation Precaution" Signs are posted on patient room door indicating isolation precautions. You must check with the patient’s nurse prior to entering the patient’s room in order to receive specific instructions about isolation precaution procedures. Isolation Precautions are as follows:

i. Red = Contact

ii. Green = Droplet

iii. Blue = Airborne

d. A visitor may not enter areas posted with an “Authorized Staff Only” sign. Visitors are asked not to visit patients if they have a cold, cough or other communicable illness. It is important to restrict exposure in order to prevent the spread of infectious diseases among patients, staff, volunteers and other visitors.

i. NOTE: When the patient requests your visitation, the hospital will make masks and other personal protective equipment available, with instruction on its use.

e. Visitors are to visit only with the child they have come to visit. They may not go to the bedside of other children who are patients.

f. Visiting children less than 12 years of age must be accompanied by an adult at all times.

g. All visitors are required to wear shirts and shoes, and to conduct themselves in a quiet and considerate manner.

h. Visitors may not consume alcohol products on hospital property.

i. Visitors may not smoke in hospital facilities or on properties of the hospital. Please see “Tobacco Free Campus Policy” #130-0009 for more information.

6. OB Specific Rules: In addition to all general visitation rules, the following rules apply to the OB unit:

a. The Neonatal Intensive Care Unit and the Special Care Nursery are secured areas. No admittance is allowed unless under the supervision of the OB staff. (Refer to Policy 120-0062 Neonatal Intensive Care Unit Visitor Policy.)

b. Visitors are asked to remember that new mothers are usually excited, but tired; brief visits are generally recommended.

c. Visitors are asked to remember that a breastfeeding new mom will need privacy when it is time to nurse the baby.

d. Siblings under 12 are welcome to visit their mother and the new baby under the continuous supervision of an adult. Siblings should not be left in the care of the new mom.

e. Any visitation restrictions will be documented in the medical record.

f. One support person over the age of 18 or the father of the baby may stay overnight with the new mom and baby throughout their hospital stay.

i. NOTE: The purpose of overnight visitation is to allow the family to adjust to its newest member in the hospital setting. For this reason, those families who are planning overnight visitation should plan to keep the baby in their room through the night.

7. ER Specific Rules: In addition to all general visitation rules, the following rules apply to the ER unit:

a. Visitors will stop at the ER registration desk and ask to visit a patient at which time registration calls the nurses’ station to ask permission to send the visitor back.
b. Visitors will not be allowed under circumstances that will interfere with patient care or health and safety reasons.
c. All of the CMS visitation rights above apply.
d. Any visitation restrictions will be documented in the medical record.
e. ER patients will be allowed 2 visitors only.

8. BHU Specific Rules: In addition to all general visitation rules, the following rules apply to the BHU unit:
   a. Visitors will stop at any entrance registration desk and ask to visit a patient at which time registration staff will ask the visitor's name, will then call the nurses' station to ask permission to send the visitor to the floor, BHU staff will tell registration yes or no.
   b. All of the CMS visitation rights above apply.
   c. Any visitation restrictions will be documented in the medical record.

9. Prison-guarded Patients: All guarded prisoner-patients are denied visitors except terminal cases and those cases with special consideration, as approved by the custodian authority.

10. Enforcement: Visitors who do not follow this visitation policy may be removed from the hospital property. Hospital Security is available to assist in noncompliant, disruptive behavior.
Visitation.docx
Policy Number: 120-0059
Original Location: /St. Peter's Health/Environment of Care/Policy_Procedure_Guideline
Created on: 10/30/2018
Published on: 06/01/2022
Last Review on: 04/25/2022
Next Review on: 04/25/2024
Effective on: 10/30/2018
Creator: Hahn, Juliet
System Administrator
Committee / Policy Team: Leadership / Committee Chairs
Owner/SME: Belford, Leslie
Director
Manager: Coburn, Nathan
Chief Financial Officer
Author(s): Belford, Leslie
Director
Koehler, Kari
Senior Nursing Director
Approver(s): Hahn, Juliet
System Administrator
Publisher: Hahn, Juliet
System Administrator
Description: No changes