



Title: Visitation Policy

Original Approval Date: 08/97	Last reviewed/ revised: 02/2022
Approval by: Director of Patient Care Services, Director of Emergency Services, Director of Family Birth Center, Chief Nursing Officer, General Medicine Committee, Infection Prevention Director	

Summary:

Define patient’s rights to visitors and outline clinically necessary or reasonable restrictions to visitors. Visitation rights include the patient’s right to receive the visitors designated by the patient. Also included is the right to withdraw or deny such consent at any time.

Scope:

This policy applies to both Hospital inpatients and outpatients or clinic/ outpatient settings; it does not apply to the nursing home or assisted living center.

Purpose:

To ensure that all visitors of patients of Gunnison Valley Health (GVH) enjoy full and equal visitation privileges consistent with patient preferences and subject to the Hospital’s Justified Clinical Restrictions. Visitors to patients by family and friends have a direct relationship on the well-being and safety of patients and the rapidity of their convalescence.

Definitions:

1. **Justified Clinical Restrictions** - any clinically necessary or reasonable restriction or limitation imposed by GVH on a patient’s visitation rights which restriction or limitation is necessary to provide safe care to patient or other patients. A Justified Clinical Restriction may include, but need not be limited to one or more of the following:
 - a. A court order limiting or restraining contact;
 - b. Behavior presenting a direct risk or threat to the patient, Hospital staff, or others in the immediate environment;
 - c. Behavior disruptive of the functioning of the unit the patient is being treated;
 - d. Reasonable limitations on the number of visitors at any one time;
 - e. Patient’s risk of infection by the visitor;
 - f. Visitor’s risk of infection by the patient (see section 8 under *Policy*);
 - g. Extraordinary protections because of a pandemic or infectious disease outbreak (see section 9 under *Policy*);
 - h. Substance abuse treatment protocols requiring restricted visitation;
 - i. Patient’s need for privacy or rest;
 - j. Need for privacy or rest by another individual in the patient’s shared room;
 - k. Patient undergoing a clinical intervention or procedure and it is in the patient’s best interest to limit visitation during said procedure.
2. **Patient** - anyone admitted to the Hospital as an in-patient, observation patient or for an outpatient procedure; anyone seeking outpatient care(s) either in the hospital setting or a clinic setting.
3. **Support Person** - a family member, friend or other individual who is with the patient as support during the course of the patient’s care and may exercise the patient’s visitation rights on behalf of the patient if patient is unable to do so. Such individual may, but need not, be an individual legally responsible for making medical decisions on the patient’s behalf.

Policy:

1. There are no defined visiting hours; however, visitation may be restricted based on the criteria set forth in this policy.
2. Any visitor under the age of twelve (i.e. age 11 or younger) must be accompanied by an adult.
3. **Statement of Patient Visitation Rights.** Prior to care being provided, GVH shall inform each patient at the time he or she is informed of his or her other rights (or his or her Support Person, where appropriate) in writing of:
 - a. Patient’s visitation rights;

- b. Patient's right to receive the visitors whom he or she designates;
 - c. Patient's right to withdraw or deny such consent at any time;
 - d. Justified Clinical Restrictions which may be imposed on a patient's visitation rights.
 - e. All visitors designated by the patient (or Support Person where appropriate) shall enjoy visitation privileges that are no more restrictive than those that immediate family members would enjoy.
4. **Selection of Visitors.** GVH shall accept verbal confirmation from a patient of individuals who should be admitted as visitors of the patient and individuals who should be denied visitation rights. GVH may record such information in the patient's records for future reference.
- a. In the event the patient is a minor, the parent or legal guardian of the minor shall be given the opportunity to verbally designate the individuals permitted to visit the minor patient.
5. **Selection of a Support Person.** A patient may verbally designate a Support Person to exercise the patient's visitation rights on his or her behalf, should the patient be unable to do so. Upon such designation by a patient, the legal status of the relationship between the patient and the designated Support Person shall be irrelevant.
- a. The designation of an individual as the patient's Support Person however does not extend to medical decision making.
 - b. In the event the patient is unable to exercise his or her patient visitation rights, GVH shall recognize the Support Person's verbal directive as to who should be admitted as visitors of the patient and individuals who should be denied visitation rights with respect to such patient.
6. **Incapacitated Patients.** In the event a patient is unable to select visitors due to incapacitation and such patient has not designated a Support Person to exercise the patient's visitation rights, GVH may consider the following non-exhaustive forms of proof to establish the appropriateness of a visitor or to designate a Support Person for the incapacitated patient when two or more individuals claim to be the incapacitated patient's Support Person capable of exercising the patient's visitation rights:
- a. An advance directive naming the individual as a Support Person, approved visitor, or designated decision maker (regardless of the State in which the directive is established);
 - b. Shared residence;
 - c. Shared ownership of a property or business;
 - d. Financial interdependence;
 - e. Marital/relationship status;
 - f. Existence of a legal relationship (may be a legal relationship recognized in another jurisdiction, even if not recognized in the Health System's jurisdiction, including: parent-child, civil union, marriage, or domestic partnership);
 - g. Acknowledgement of a committed relationship (e.g., an affidavit);
 - h. Written documentation of the patient's chosen individual(s) even if it is not a legally recognized advance directive.
7. **Justified Clinical Restrictions on Patient's Visitation Rights.** GVH may impose Justified Clinical Restrictions on a patient's visitation rights. When restricting visitation rights, GVH shall explain to the patient (or Support Person as applicable) the reasons for the restrictions or limitations on the patient's visitation rights and how GVH's visitation policies are aimed at protecting the health and safety of all patients.

GVH shall not restrict, limit or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation or disability.

8. **Grievance.** If any patient of GVH believes that his or her patient visitation rights have been violated, they may file a complaint using the GVH grievance system.

9. **Patients on Isolation.**

- a. If a patient is on isolation precautions (Contact, Droplet, or Airborne):
 - i. Visitors shall be informed of infection prevention and control practices and the importance of following these practices.

- ii. Visitors should be confined to the isolation room for the duration of their visit (i.e.- no coming out of the room for nutrition items, etc.)
 - iii. When a patient is on Contact Isolation: visitors are not required to use gown and gloves unless they will be in direct contact with the patient.
 - iv. Visitors will wash their hands with hospital-approved antimicrobial soap for patients with diarrheal illness.
 - v. Visitors are required to leave GVH after visiting and should avoid contact with other patients.
10. **Extraordinary Protections.** In the event of a pandemic or infectious disease outbreak, this portion of the policy will be updated as guidelines change and the risks to the patients and staff evolve.
- a. **AS OF 02/04/2022: ALL VISITORS ARE REQUIRED TO BE SCREENED PRIOR TO ENTRY AND BE IN A FACE COVERING (preferably a hospital-grade mask).**

Specialty Departments/ Specialty Allowances vs. Restrictions:

1. Department Differences:
 - a. PCU: limited to three (3) visitors at one time.
 - b. ED: limited to one (1) visitor at a time.
 - c. OR: limited to one (1) visitor at a time.
 - d. Family Birth Center:
 - i. Visitors to the OB department shall be screened according to their health status, to the patient’s desires, and nursing discretion according to the care needs of the patient.
 - ii. All visitors in the OB department will wear visitor badges.
 - iii. Toddlers may visit, but must be controlled at all times.
 - iv. All visitors that are interacting with the mom and newborn should wash their hands thoroughly.
 - v. No visitor is permitted in the OB area if they are currently ill (cold or flu symptoms, etc) or have recently been exposed to contagious diseases.
 - vi. Visitors are encouraged to check at the nurse’s station prior to entering the patient’s room.
2. **Pediatrics:** There are no visiting hours enforced for the parents, legal guardian(s) or designee of pediatric patients. The discretion of the attending provider and nursing staff must be used.
3. **End-of-Life:** A physician overseeing end-of-life care may choose to make exceptions to the rules of this policy, if it is deemed appropriate for the well-being of the patient.
4. The discretion of the attending provider and nursing staff must be used to assure the well-being of the patient. This discretion must be handled with courtesy towards the visitors and patients. Common sense shall be utilized in granting visiting privileges outside of stated policy.