PURPOSE The intent of this policy is to create a safe, private environment for all patients, visitors, and employees.

DEFINITIONS: Justified Clinical Restrictions

Justified Clinical Restrictions means any clinically necessary or reasonable restriction or limitation imposed by the hospital on a patient's visitation rights when restriction or limitation is necessary to provide safe care to the patient or other patients. A Justified Clinical Restriction may include, but need not be limited to one or more of the following: (i) a court order limiting or restraining contact; (ii) behavior presenting a direct risk or threat to the patient, Hospital staff, or others in the immediate environment; (iii) behavior disruptive of the functioning of the patient care unit; (iv) reasonable limitations on the number of visitors at any one time; (v) patient's risk of infection by the visitor; (vi) visitor's risk of infection by the patient; (vii) substance abuse treatment protocols requiring restricted visitation; (ix) patient's need for privacy or rest; (x) need for privacy or rest by another individual in the patient's shared room; or (xi) when the patient is undergoing a clinical intervention or procedure and the treating health care professional believes it is in the patient's best interest to limit visitation during the clinical intervention or procedure.

Support Person

Support Person means a family member, friend or other individual who is at the Hospital to support the patient during the course of the patient's stay at the Hospital and may exercise the patient's visitation rights on patient's behalf 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: Statement of Patient Visitation Rights

Prior to care being provided, the Patient Access Representatives upon admission shall inform each patient (or his or her Support Person, where appropriate) at the time he or she is informed of his or her other rights in writing of: (i) patient's visitation rights; (ii) patient's right to receive the visitors whom he or she designates, including, but not limited to, a spouse, a domestic partner (including a same sex domestic partner), another family member, or a friend; (iii) patient's right to withdraw or deny such consent at any time; and (iv) Justified Clinical Restrictions which may be imposed on a patient's visitation rights. 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.

Selection of Visitors

The Hospital shall accept from a patient verbal confirmation of individuals who should be admitted as visitors of the patient and individuals who should be denied visitation rights. The Hospital may record such information in the patient's records for future reference. In the event the patient is a minor, the legal parent of the minor shall be given the opportunity to verbally designate the individuals permitted to visit the minor patient.

Selection of a Support Person

A patient may verbally designate a Support Person to exercise, on the patient's behalf, the patient's visitation rights 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. This designation of an individual as the patient's Support Person however does not extend to medical decision making. In the event the patient is unable to exercise his or her patient visitation rights, the Hospital 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.

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, the Hospital 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: (i) 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); (ii) shared residence; (iii) shared ownership of a property or business; (iv) financial interdependence; (v) marital/relationship status; (vi) existence of a legal relationship (may be a legal relationship recognized in another jurisdiction, even if not recognized in the Hospital's jurisdiction, including: parent-child, civil union, marriage, or domestic partnership); (vii) acknowledgement of a committed relationship (e.g., an affidavit); or (viii) written documentation of the patient's chosen individual(s) even if it is not a legally recognized advance directive.

Justified Clinical Restrictions on Patient's Visitation Rights

The Hospital 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.

General Visitation Guidelines

- At Midland Memorial Hospital, general visiting hours are from 6 a.m. 9 p.m. daily. Visitation may be restricted if there is a reasonable Justified Clinical Restriction (see definition above).
- Visitor Check-in will be required for all visitors. Visitors will obtain a badge that is valid for one day. Badges should be worn at all times while in the building.
- Visitors are encouraged to wash hands or use alcohol foam as they enter/leave a patient's room.
- Children under the age of 16 will only be allowed to visit from 4 p.m. 6 p.m. Children will not be included in the 2-person maximum. Any visitation of children outside the designated times will require a Special Request.
- Latex balloons may not be brought into the hospital, to minimize latex exposure for patients and staff who may be at risk for latex allergies.
- Visitors will be asked to leave the premises if they become disruptive or interfere with the general comfort and care of patients, visitors, or staff.
- Due to fire safety concerns and to prevent congestion and excessive noise, visitors will not be allowed to congregate in hallways.
- The main lobby will be open for waiting and switching of visitors. Lobbies on floors 4-9 will not be open for waiting.
- Large gatherings of people outside of the building will also be discouraged.
- Visitors should be encouraged to go home and get proper food and rest which will enhance their ability to listen and understand the significant information they will be given.
- Religious counselors will be permitted to visitor patient. These persons will not count against the visitation limit. See <u>In-Person Visitation by Religious</u> <u>Counselors During a Public Health Emergency or Disaster</u> for more information.

Visitation Limits

- Patients on our Critical Care Unit (ICU/CCU), Mother-Baby, and Medical-Surgical (Med-Surg) units will be allowed 2 persons at any time during the visiting hours.
 - One patient visitor may remain overnight. All other visitors must exit the building at 8pm.
- Patients in the Emergency Department will be allowed 2 visitors for the duration of their stay in the ED. If the patient is admitted, they would fall under the inpatient visitation guidance of the unit they will be admitted to.
- Outpatient services will be allowed 2 visitors. With the exception of Endoscopy and Outpatient Testing Center, due to limited space in their waiting areas, where 1 visitor will be allowed.
- Mothers on the Labor and Delivery unit will be allowed 1 visitor and 1 additional coach/partner for no more than 2 persons at one time during the birthing process. Doulas would be considered a coach and would count towards the 2-person maximum.

Printed documents may not represent the current approved version

- Identified support person who has been given support band will be allowed to enter the building outside visitation hours.
- Pediatric patients will be allowed 2 parents or guardians for no more than 2 persons at one time. 2 parents/guardians may stay with the patient at all times, including overnight.
- NICU limited visitation will follow the most current guidelines as determined by the unit.
- POCU/PACU will allow visitation for two consenting adults when the patient is a child age 17 and under.
- Changing of visitors will be done only in the main lobby. Switching will not be allowed on the units.

*Any Special Requests to change visitor guidelines or limits will be approved at the discretion of the Charge Nurse or Nurse Manager of the unit. Special Requests may be revoked at any time and without notice based on current hospital conditions.

Points of Entry

The only points of entry to the hospital for patients and support persons will be the Emergency Department entrance and Main Entrance. The Main hospital entrance will be open from 5am to 8pm, Monday – Friday, for all outpatient services. Visitation will begin at 6am. The ED entrance will remain open 24/7 and will be used for visitation from 8pm to 9pm. No support persons or patients will be allowed to enter the building through badged employee entrances.

The Craddick Medical Office Building entrance will be open for patients and visitors utilizing services in this building but will not be able to enter the hospital through this entrance and will need to proceed to the main or ED entrance.

Helpful Phone Numbers

MCHD PD: Dial "0" for Operator Patient Advocate: 221-2273 Social Work: 221-4536 Chaplain: 221-1566 Interpreters: 221-5298 or 432-236-8508