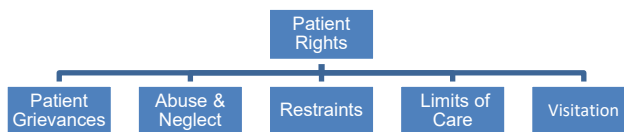


TITLE		POLICY	
Patient Visitation Plan		HP-4PR	
MANUAL	EFFECTIVE DATE	REVISE DATE	
Hospital Plans	10/2017	4/2018	
DEPARTMENT	REFERENCE		
Clinical Services	Reference Standards: Department of Health and Human Services, Centers for Medicare and Medicaid Services, Hospital Conditions of Participation: Federal Regulations. 42 CFR Part 482.13 to 482.13(g), CFR §485.635 (f)		

Regulation Definition: A hospital must protect and promote each patient's rights. Standard: Patient visitation rights. Visitation plays an important role in the care of hospital patients. Each patient (or support person, where appropriate) has the right to consent or 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, and his or her right to withdraw or deny such consent at any time.



I. Overview

II. Carnegie Tri-County Municipal Hospital shall provide an environment that facilitates patient and family interaction. This plan was developed to outline hospital visitation guidelines and visitor expectations. In the development of this plan, consideration was given to the inherent safety and security risks associated with hospital visitors balanced against our desire to promote a supportive environment for patients to receive care. The hospital and their health care professionals may exercise their best clinical judgment when determining when visitation is, and is not appropriate (best clinical judgment takes into account all aspects of patient health and safety, including the risks and benefits of visitation on a patient’s care as well as potential negative impacts that visitors may have on other patients in the hospital).

It is the intent of Carnegie Tri-County Municipal Hospital that all visitors enjoy full and equal visitation privileges consistent with patient preferences. Visitors will not be restricted, limited or otherwise denied visitation privileges based on race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.

III. Policy

- A. The Hospital shall allow open visitation hours visiting hours seven (7) days a week.
- B. Visitor needs are accommodated whenever possible to enhance the patient experience and needs.
- C. Adults shall accompany children under twelve years of age when visiting the patient care areas at all times. Visitation by children may be restricted based upon the patient's condition and circumstances as deemed appropriate by the physician or House Supervisor.
- D. Visitation may be restricted or terminated for:
 - a) non-compliance with established policies;
 - b) patient's medical condition;
 - c) emergency situations;
 - d) infection control issues;
 - e) visitation may interfere with the care of other patients;
 - f) the hospital is aware of an existing court order restricting contact;
 - g) visitors engage in disruptive, threatening, or violent behavior of any kind;
 - h) the patient or patient's roommate needs rest or privacy
 - i) the patient is undergoing care interventions (while there are valid reasons for limiting visitation during a care intervention, the hospital will 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)
- E. The hospital shall not restrict, limit, or otherwise deny visitation privileges based on race, color, national origin, religion, sex, gender identity, sexual orientation or disability.
- F. The hospital must ensure that all visitors enjoy full and equal visitation privileges consistent with patient preference.

IV. Plan Components

A. Notice of Visitation Rights

- 1) The Admissions Clerk shall inform each patient (or support person, where appropriate) of his or her visitation rights. This notice shall include the following:
 - a) Clinical restrictions or limitations on such rights at the time of admission;
 - b) The hospital staff will inform the patient and/or family or significant others of any revisions or restrictions to visitation within a reasonable time frame;
 - c) Visitation is subject to the consent of the patient;
 - d) Visitation rights include the right to receive the visitors whom he or she designates, including but not limited to, a spouse, a domestic partner, another family member, a friend, or a "support person;"
 - e) The patient's right to withdraw or deny any consent for visitation at any time.

- 2) The patient's rights will be provided and explained in a language or manner that the patient (or the patient's representative) can understand. This provision includes individuals who need assistive devices or translation services. The hospital shall have alternative means, such as written materials, signs, or interpreters available, when necessary, to communicate patients' rights.
- 3) The required notice of the patient's visitation rights must be provided, whenever possible, before the hospital provides or stops care. The notice to the patient, or to the patient's support person, where appropriate, must be in writing. If the patient also has a representative who is different from the support person, the representative must also be provided information on patient's visitation rights in addition to the support person.

B. "Support Person" defined

- 1) A patient's support person does not necessarily have to be the same person as the patient's representative who is legally responsible for making medical decisions on the patient's behalf. A support person could be a family member, friend or other individual who supports the patient during the course of the hospital stay.
- 2) The support person not only may visit the patient, but he or she may also exercise a patient's visitation rights on behalf of the patient with respect to other visitors when the patient is unable to do so. Hospital must accept patient's designation orally or in writing, of an individual as the patient's support person.

C. Special Considerations

1) The incapacitated patient

- a) When a patient is incapacitated or otherwise unable to communicate his or her wishes and an individual provides an advance directive designating an individual as the patient's support person, the hospital must accept this designation, provide the required notice on patient's visitation rights, and must allow the individual to exercise the patient's visitation rights on behalf of the patient.
- b) In the absence of an advance directive of a designated representative in file for an incapacitated patient, an individual who asserts that he or she, as the patient's spouse, domestic partner, parent, family member, friend, or otherwise, is the patient's support person, the hospital must accept this assertion without demanding supporting documentation and must provide required notice of the patient's visitation rights. The hospital must allow the person to exercise visitation rights on behalf of the patient. However, if more than one individual claims to be the patient's support person, the hospital should ask each individual

for documentation supporting his or her claim to be the patient's support person.

- c) If the patient has both a representative and a support person who are not the same individual, and they disagree on who should be allowed to visit the patient, the hospital must defer to the decisions of the patient's representative and he or she will have the right to designate or deny any visitors just as the patient would if he or she were capable of doing so.

d)

D. Denials or limitation of visitation

- 1) A refusal by the hospital of an individual's request to be treated as the patient's support person with respect to visitation rights must be documented in the patient's medical record, along with the specific basis for the refusal.
- 2) The notice must also inform the patient (or the patient's support person, where appropriate) of the patient's right to consent to receive visitors he or she has designated, and withdraw or deny his or her consent to receive specific visitors either orally or in writing. The medical record must have the documentation that the required notice was provided to the patient or, if appropriate, the patient's support person.
- 3) It is permissible for the patient (or the patient's support person, where appropriate) to limit the visiting privileges of his/her visitors, including providing for more limited visiting privileges for some visitors than those for others. However, it is not permissible for the hospital, on its own, to differentiate among visitors without any clinically necessary or reasonable basis.
- 4) The house supervisor and the treating physician have the discretion to modify the visitation policy based on the individual patient care needs. The reason for alteration on the policy must be recorded in the medical record.

V. Orientation, Education and Training

A. General orientation

- 1) All employees and members of the medical staff, including allied health personnel, will receive training on the provision of patient rights including, but not limited to, the contents of this plan at general orientation or during the credentialing process.
- 2) Hospital shall educate all staff members who play a role in facilitating or controlling visitors on hospital visitation policy and procedure to be culturally competent in delivering superior patient care to all range of patients served by the hospital.
- 3) Personnel files will contain evidence of training and verification of competency

B. Continuing education

- 1) All employees and medical staff, including allied health personnel, will receive annual training on the provision of patient rights including, but not limited to, the contents of this plan.
- 2) Personnel files will contain evidence of ongoing training and verification of competency.

VI. Oversight

Ultimate responsibility for optimum care for all patients who are treated in this hospital rests with the Governing Body. The specific responsibility for the Plan for Patients Visitation is delegated to the Hospital Administration, which acknowledges its responsibility for same in accordance with the hospital by-laws approved by the governing body.