CHRISTUS ST. VINCENT POLICY: PATIENT VISITATION AND CAREGIVER SUPPORT

I. KEYWORDS: VISITOR, CARE GIVER, SUPPORT PERSON, VISITING RESTRICTIONS, PANDEMIC

II. PURPOSE:

A. To ensure that all visitors of CHRISTUS St. Vincent (CSV) facilities enjoy equal visitation privileges consistent with the patient preferences and subject to the hospitals justified restrictions.

B. Minimizing the risk of community spread during an infectious disease outbreak (for example COVID-19) is key to maintaining a safe and healthy hospital environment. For this reason, visitors are prohibited from hospital premises. To provide for the direct care and support of patients who are vulnerable and require assistance, one caregiver is allowed to accompany patients as specified in this policy.

III. POLICY:

A. Visitation plays an important role in the care of patients receiving inpatient and outpatient care and services. Patients have the right to enjoy visitation privileges consistent with patient preferences and subject to the hospitals justified restrictions or limitations.

B. Caregiver patient support plays an important role in the care of patients receiving inpatient and outpatient care and services. We desire for patients to have the hospitals justified restrictions or limitations.

C. This policy applies to the CSV hospital, outpatient health centers, and clinics; its physicians, clinical associates, and all hospital personnel involved in the decision-making process with respect to patient visitation.
IV. DEFINITIONS:

A. **Justified Restrictions**: Any clinically necessary or reasonable restriction or limitation imposed by the hospital on a patient’s visitation rights where restriction or limitation is necessary to provide safe care to a patient or other patients.

B. **Patient**: Anyone admitted to the hospital as an inpatient or outpatient of the hospital or clinic.

C. **Support Person/Care Giver**: 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.

V. PROCEDURE:

A. **Visiting Hours**:

1. Believing that quiet and rest are essential for all patients, CSV supports general visitation during the day and evening hours, generally considered to be between the hours of 0800 and 2000 (8:00 AM to 8:00 PM).

2. Visitors and visiting hours may be restricted globally during the flu season or pandemic/epidemic designations by the state or federal governments to prevent the spread of infection in vulnerable patients. Please refer to section VII (D) of this policy for further clarification of visitor restrictions during influenza season.

   a) **Pandemic/epidemic (e.g. Covid-19)** CSV now has a justified restriction of visitation during the hours of 0900 and 1300 (9:00 AM to 1 PM).
b) For patient safety and security reasons, any visitor entering the facility after 2000 (8:00 PM) will be screened by security personnel.

3. Visiting hours may be shortened or extended by the nursing unit based on patient need, safety, or as clinically indicated (e.g. end of life, critical ill patients, or high risk of infectious illness).

4. Overnight visitation is allowed at the discretion of unit management. One adult visitor is permitted to remain overnight if the facility is able to accommodate their needs.

B. Restrictions by Service during Pandemic/Epidemic

1. Outpatient Testing: Only patient will be allowed to enter in most circumstances. If the patient requires assistance to move safely, has a behavioral or developmental condition, or needs help communication with registration or testing a caregiver may accompany the patient. Scheduling and the front desk will need to be informed of the need for assistance.
   
   a) If family or support person has traveled outside of the state within 14 days, only the patient will be allowed to enter.
      
      (1) Exceptions: Patient is a minor or there is an imminent risk to patient’s safety by not allowing the caregiver in as deemed necessary by screening team or the clinical department they are visiting.
      
      (2) Family or support person has traveled from a non-restricted travel state per New Mexico Department of Health.
      
      (3) Family or support person has a documented negative COVID test from within 72 hours before arriving to New Mexico.

2. Inpatient: One caregiver/support person will be allowed per day for improved communication with family, emotional support for patient, and assistance to the clinical staff; Caregiver should be patient’s decision-maker, a family member or close friend.
a) No family or support person that traveled out of state within 14 days will be allowed to enter the facility.

   (1) Exception: The one support may switch out a second person one time during the day with the approval of the clinical team.

3. Obstetric (Labor and Delivery) Patients: The spouse or caretaker for a labor and delivery patient is allowed to remain with the patient throughout the patient’s stay. Support person is still allowed if they traveled out of state in past 14 days.

4. Pediatric Patients: Both legal guardians of a minor can stay in the room throughout the day and night. Parents of pediatric patients may be present even with out of state travel within 14 days.

5. Emergency Department: One caregiver/support person will be allowed to accompany a patient into the Emergency Department. Both parents of minors are allowed. No family or support person that traveled out of state within 14 days will be allowed to enter the facility.

6. Surgery, Digestive Health, Cath Lab, Interventional Radiology: One caregiver/support person will be allowed per day for improved communication with family and emotional support for patient. No family or support person that traveled out of state within 14 days will be allowed to enter the facility.

7. Frost-19: Family members/caregivers will not be allowed to visit Covid-19 Positive patients in the hospital for their own safety. Video visits with family are available.

8. End of Life: For patients determined to be “approaching death”, they will be allowed two support persons and caregivers at the bedside with a total of 4 allowed in 24 hours. A family member that has traveled out of state may visit for 15 minutes and then will need to be escorted back out of the building.

   a) Approaching death is defined as:
In spite of curative care efforts, patient is approaching death within a short period.

(2) A rapid change in condition occurs anticipated to leading toward near term death.

(3) On comfort care (no curative care efforts are being made) and patient will proceed toward death.

(4) Impatient hospice patient (no curative care efforts are being made).

C. Safety and Behavioral Restrictions

1. During times of pandemic, all patients and support persons will be screened (e.g. COVID-19) before entering the facility.

2. During times of pandemic, (e.g. COVID-19) all persons must wear a mask when entering the building and at all times during the stay except when eating and drinking.

3. No outside Personal Protective gloves will be allowed into the facility.

4. All persons will be asked to wash their hands using sanitizer upon entry.

5. All persons must remain in the patient room or surgical services area unless going to the restroom or cafeteria.

6. During times of pandemic, all persons must sit six feet away from other patients and family members for social distancing in lobby areas.

7. During times of pandemic, leaving and returning to the hospital will be limited to two times per day.

D. Statement of Patient Visitation Rights:

1. CSV shall inform each patient at the time he or she is informed of his or her other rights (and/or his or her legal representative or support person, where appropriate) verbally or in writing of:
   a) Patient’s visitation rights
b) Patient’s right to receive the visitors whom he or she designates, including, but not limited to, a spouse, a domestic partner (including same sex domestic partner), another family member, or a friend.

c) Patient’s right to withdraw or deny such consent at any time.

d) Justified restrictions which may be imposed on a patient’s visitation rights.

VI. GENERAL VISITOR GUIDELINES PROCEDURE:

A. CSV will not restrict, deny, or limit the visitation privileges on the basis of race, color, religion, sex, ethnic origin, sexual orientation, gender identity or expression, marital status, disability, socioeconomic status, or physical appearance.

B. CSV recognizes the right of patients to receive or deny visitors. The patient may choose/designate a support person or choice.

1. Patients may notify the hospital of individuals who should be denied visitation rights; the hospital may record such information in the patient’s records for future reference.

2. In the event the patient is a minor, the legal parent or authority of the minor shall be given the opportunity to governing visiting the minor patient.

3. A patient may verbally designate a support person to exercise the patient’s visitation rights on his or her behalf.

   a) Upon such designation by a patient, the legal status of the relationship between the patient and the designated support person shall be irrelevant.

   b) This designation of an individual as the patient’s support person however does not extend to medical decision making.
4. The explicit designation of a representative takes precedence over any non-designated relationship and continues throughout the patient’s inpatient or outpatient visit, unless expressly withdrawn by the patient verbally or in writing.

5. 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.

C. 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 when two or more individuals claim to be the incapacitated patient’s support person capable of exercising the patients visitation rights:

1. 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)

2. Shared residence

3. Shared ownership of a property or business

4. Financial interdependence

5. Marital/relationship status;

6. 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)

7. Acknowledgement of a committed relationship (e.g., an affidavit)
8. Written documentation of the patient’s chosen individual(s) even if it is not a legally recognized advance directive.

D. Occasionally, due to emergency patient conditions, infectious disease outbreak, pandemic or security reasons, an entire unit may be closed to visitors or visiting times may be altered.

E. When the hospital is not restricting visitors due to pandemic, for the safety of the patients, visitors should be limited to two (2) individuals at a bedside at one time. Exceptions may be made on a case by case basis. During pandemic, restrictions are outlined above.

F. Visitors should maintain a quiet environment and avoid unnecessary noise in an effort to create a healing environment for our patients.

G. Due to patient’s special diets while hospitalized, visitors are discouraged from bringing food or drinks to patient(s).

H. All visitors will be asked to complete hand hygiene by either washing their hands or using antibacterial foam prior to entering a patient’s room and before leaving a patients room.

I. In an effort to promote patient safety, visitors may be asked to leave the room during tests, treatments, or when a clinician needs to assess a patient.

J. Children under age twelve (12) visiting all areas must be under direct supervision of an adult at all times.

K. CSV reserves the right to request any visitor leave CSV premises that is exhibiting aggressive behaviors or interfering with care of the patient to include but not limited to violent/combative outbursts or is verbally abusive to patient or associates.

1. Security should be notified any time a visitor’s behavior poses a safety risk to the patient or associates.
2. In the event that a visitor refuses to leave CSV when requested, law enforcement will be notified.

VII. CLINICAL RESTRICTIONS PROCEDURE:

A. A justified restriction may include, but need not be limited to one or more of the following:

1. A court order limiting or restraining contact;

2. Behavior presenting a direct risk or threat to the patient, hospital associates, or others in the immediate environment;

3. Reasonable limitations on the number of visitors at any one time;

4. Patient’s risk of infection by the visitor;

5. Visitor’s risk of infection by the patient;

6. Extraordinary protections because of an infectious disease outbreak;

7. Suicide precautions necessitating restricted visitation h) Patient’s need for privacy or rest;

8. Need for privacy or rest by another individual in the patient’s shared room;

9. When a 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;

10. Licensed healthcare workers may exercise their best clinical judgment when determining when visitation is, and is not appropriate; or

11. Best clinical judgment takes in account all aspects of patient health and safety, including the benefits of visitation on a patient’s care as well as potential negative impacts that visitors may have on patients in the hospital.
B. To reduce the spread of communicable diseases and infection, children under the age of twelve (12) will be discouraged from visiting the following areas: pediatrics, intensive care unit/critical care, emergency department, and oncology.

1. Siblings (of any age) of a newborn are welcome to visit their family in the patient’s room, as long as they are not experiencing cold or flu-like symptoms.

C. Individuals with flu like symptoms including but not limited to: fever, cough, chills, sore throat, runny or stuffy nose, muscle or body aches, headaches, fatigue (tiredness), vomiting, or diarrhea will be restricted from visiting patients regardless of time of year.

D. Flu season restrictions will be implemented from December 1st through March 31st, unless otherwise specified by the Infection Prevention department or Chief Medical Officer. Flu restrictions include but are not limited to the following:

1. Children under the age of twelve (12) will be restricted from visiting any area of the hospital during flu season.
   a) In the event of extenuating circumstances, family members and/or the patient should inform the unit leadership (nurse supervisor or nurse manager) of their request for a child’s visitation.
   b) Exceptions may be made for siblings of newborns.

2. Individuals in poor health or who are immunocompromised will be advised to avoid visiting the hospital during flu season as this may increase their risk of catching influenza or worsening their condition.

E. No visitors will be allowed to patients in the custody of law enforcement for the safety of the patient and our associates.

F. No visitors will be allowed to enter surgery suites unless accompanied by authorized personnel to prevention the possibility of contamination.
VIII. GRIEVANCES / COMPLAINTS PROCEDURE:

A. If any patient, support person, or patient representative believes that his or her patient visitation rights have been violated, they may file a complaint using the hospital's internal grievance policy.

IX. PATIENT LACKING CAPACITY PROCEDURE:

A. When a patient has been determined to lack capacity or otherwise unable to communicate his or her wishes, and has both a durable power of attorney/healthcare agent and a support person who are not the same individual, and they disagree on who should be allowed to visit the patient, associates will make an ethics consult to determine visitation rights.

X. RESPONSIBILITIES:

A. Directors/Managers shall be responsible for:
   1. Ensuring that associates receive education on the hospital visitation policy during general orientation and periodically thereafter.
   2. Providing support for associates enforcing this policy.

B. Director of Service Excellence is responsible for:
   1. Organizing and executing visitor restrictions and screening procedures as directed by the Chief Operating Officer.
   2. Maintaining the policy.

C. Director of Security is responsible for:
   1. Providing security personnel to respond to any situations in which visitor’s behavior is disrupting care.

D. All associates shall be responsible for:
1. Monitoring the ongoing compliance of this policy.

XI. REFERENCES/REGULATIONS/REQUIREMENTS:

A. Conditions of Participation 482.13(h):

1. Patient visitation rights: A hospital must have written policies and procedures regarding the visitation rights of patients, including those setting forth any clinically necessary or reasonable restriction or limitation that the hospital may need in place on such rights and the reasons for the clinical restriction or limitation.
   a) Inform each patient (or support person, where appropriate) of his or her visitation rights, including any clinical restriction or limitation on such rights, when he or she is informed of his or her other rights under this section.
   b) Inform each patient (or support person, where appropriate) of the right, subject to his or her consent, 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, and his or her right to withdraw or deny such consent at any time.

B. Joint Commission, Rights and Responsibilities RI.01.01.01

XII. CONCURRENCE

A. Director of Security
B. Executive Director of Quality
C. VP Mission and Spirituality
D. Chief Nurse Executive
E. Chief Medical Officer
F. Chief Operating Officer

Approved by:

Hope Wade, Chief Operating Officer
Date: 12/02/2020