

Visitation Standard Operating Procedure				
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Business Unit:	Lakeside Medical Center	Last Review Date:	5/26/2022	
Approval Group:	LMC ADM SOP	Document Owner(s):	Administration	

PURPOSE

Establish a visitation procedure that promotes safe, secure and a supportive healing environment for patients during their hospital stay. This SOP specifically differentiates between Essential Caregiver and Visitor.

Ensures that all visitors of patients in Lakeside Medical Center (LMC) enjoy equal visitation privileges consistent with patient preferences and subject to the Hospital's Justified Clinical Restrictions. The hospital administration will ensure staff adheres to the standard operating procedure.

DEFINITIONS

Justified Clinical Restrictions – means any clinically necessary or reasonable restriction or limitation imposed by the Hospital on a patient's visitation rights which restriction or limitation is necessary to provide safe care to 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 to 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) extraordinary protections because of a pandemic or infectious disease outbreak; (viii) substance abuse treatment protocols requiring restricted visitation; (ix) patient's need for privacy or rest; or (x) when 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.

Patient - means anyone who presents to the hospital for care and treatment.

Essential Caregiver – 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 and may exercise the patient's visitation rights on patient's behalf if he/she 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.

Visitors – Visitors are guests of the patient or essential caregiver. In some cases, a relative may be defined by the patient as a visitor. Visitors have restricted times during which they may see the patient. Visitors are encouraged to visit during the Hospital's visiting hours during the specified times identified by each unit.



SCOPE

All clinical areas.

SOP

- 1. Visiting Hours are 9:00AM 9:00PM daily
- 2. Visitors must check in with the security desk and follow the Identification of Visitors and Vendors Policy and Procedure.
- 3. All patients admitted to an inpatient unit may have ONE (1) adult visitor during visiting hours.
- 4. All ER patients will be allowed ONE (1) adult visitor.
- 5. All Surgical patients will be allowed ONE (1) adult visitor to accompany them on the day of their procedure.
- 6. All Labor and Delivery patients will be allowed ONE (1) adult visitor to remain with them for the duration of their admission.
- 7. All pediatric patients will be allowed ONE (1) adult caregiver to remain with them for the duration of their admission and ONE (1) adult visitor during visitor hours.
- 8. Boarder Babies are newborn infants that remain in the hospital after the mom is discharged. A baby ID bracelet is provided to the mother and one additional person at the mother's request. The baby bracelets are used as identification to visit babies in the nursery unit.
- 9. Overnight Stay There are circumstances in which the designated Essential Caregiver may spend the night with the patient if this contributes to the wellbeing of the patient and space is adequate. The designated Essential Caregiver must be able to safely stay alone and take care of their personal needs. It is strongly recommended that guests under the age of 18 do not spend the night. In extreme cases, the nursing supervisor will make an informed decision regarding minor guest(s). In such rare cases, the nursing supervisor will increase staff to ensure close monitoring of the underage guest(s).
- 10. In the rare occurrence that an underage visitor is allowed they shall be accompanied by an adult at all times and are subject to all visitation rules.
- 11. LMC will allow consensual physical contact between the patient and the visitor. In no instance will any Hospital staff prohibit or interfere with consensual physical contact.
- 12. Visitors are allowed to alternate unless on isolation precautions.
- 13. There is no visitation for patients on isolation unless deemed necessary by the exception criteria and approved by hospital administration.
- 14. All persons entering under an exception remain subject to appropriate infection control protocols established by the Infection Preventionist.
- 15. Infection Control Protocols for Visitation:
 - a. All visitors entering the facility will be required to wear a face mask at all times as deemed necessary during severe respiratory outbreaks, epidemics, or pandemics.



- b. All visitors entering the facility will be screened for symptoms and assessed with a no touch thermometer as deemed necessary during severe respiratory outbreaks, epidemics, or pandemics. If the temperature is greater than 100°F and/or symptomatic, the individual will not be permitted to enter the facility. LMC does not require visitors to submit proof of any vaccination or immunization.
- c. All visitors entering under an exception, for patients on Isolation, must wear proper personal protective equipment (PPE) for the designated Isolation type. Education will be provided by the patient's primary nurse on transmission and proper PPE use. The visitor will be required to sign a waiver and release of liability prior to entering the patient's room. Random monitoring completed by the Infection Preventionist.
- d. Visitors are not permitted to congregate in public areas, such as lobbies and cafeterias.

EXCEPTIONS

In-person visitation must be allowed in all of the following circumstances by the designated Essential Caregiver, unless the patient objects, regardless of time of day:

- 1. End-of-life situations
 - a. Four (4) healthy adult visitors may be in the patient's room at a time alternating as deemed necessary.
- 2. Patient who was living with family before being admitted and is struggling with the change in environment and lack of in-person family support.
- 3. The patient is making one or more major medical decisions.
- 4. A patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died.
- 5. A patient needs cueing or encouragement to eat or drink which was previously provide by a family member or caretaker.
- 6. A patient who used to talk and interact with others is seldom speaking.
- 7. Childbirth including labor and delivery.
- 8. Pediatric patients.

9. Other circumstances at the discretion of Administration.

RELATED DOCUMENTS	
Related Policy Document(s)	EOC093 Identification of Visitors and Vendors



Related Forms	Visitor Waiver & Release of Liability
Reference(s)	SB 988 "No Patient Left Alone Act" <u>Senate Bill 988 (2022) - The Florida</u> <u>Senate (flsenate.gov)</u>
	Florida Statutes 400.022 (b) <u>Chapter 400 Section 022 - 2021 Florida</u> <u>Statutes - The Florida Senate (flsenate.gov)</u>
	Florida Statutes 429.28 (d) <u>Chapter 429 Section 28 - 2018 Florida Statutes</u> <u>- The Florida Senate (flsenate.gov)</u>
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APPROVALS		
Reviewer approval	Jennifer Dorce-Medard;	
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Final approver	Janet Moreland;	
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This SOP is only intended to serve as a general guideline to assist staff in the delivery of patient care; it does not create standard(s) of care or standard(s) of practice. The final decision(s) as to patient management shall be based on the professional judgement of the health care providers(s) involved with the patient, taking into account the circumstances at that time. Any references are to sources, some parts of which were reviewed in connection with formulation of the SOP. The references are not adopted in whole or in part by the hospital(s) or clinic(s) / provider(s).

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