

Title: Patient/Resident Visitors		CARE BRAVELY	
Department: Patient Experience Document Owner: Anita Pinkney Approver(s): Ernest Shock (VP CNO - LEVINDALE), Raymond Miller (PHYSICIAN)		Effective Date: 04/30/2020 Expiration Date: 04/30/2023 Reference #: 12234	
Site(s):			
<input type="checkbox"/> Sinai Hospital of Baltimore	<input type="checkbox"/> Practice Dynamics		
<input type="checkbox"/> Northwest Hospital Center	<input type="checkbox"/> Baltimore Child Abuse Center		
<input type="checkbox"/> Carroll Hospital Center	<input type="checkbox"/> BridgingLife		
<input checked="" type="checkbox"/> Levindale Hebrew Geriatric Center and Hospital	<input type="checkbox"/> William E. Kahlert Regional Cancer Center		
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Levindale Hebrew Geriatric Center and Hospital

DEPARTMENT: Administration	NO: ADMIN-103
SUBJECT: Patient/Resident Visitors	EFFECTIVE: 2/1982
APPROVED BY: VP Patient Care Services/CNO AVP Operations/Administrator AVP Chief of Security and Parking Medical Director	REVISED: 10/85, 10/94, 8/97, 8/99, 11/00, 11/01, 12/03, 3/04, 04/05, 3/08, 3/09, 12/09, 9/14, 10/14, 5/15, 5/20

POLICY: Patient/Resident visitors are welcomed to the facility during established visiting hours.

PURPOSE: To establish guidelines for visitors to the patient/resident care areas.
To maintain an environment conducive to the well-being of the patients/residents.

RESPONSIBILITY: Nurse Managers/Charge Nurses/Nursing Supervisors
Guest Relations
Receptionist
Administrative Leaders
Security Officers

PURPOSE:

It is recognized that visits to patients and residents by friends and loved ones are a desirable part of the patient/resident’s therapy, providing opportunities for interaction between the patient/resident, family and health care provider. In addition, families offer support and comfort, relieve anxiety, relieve feeling of isolation and assist with keeping the patient oriented. The patient/resident can also identify a contact person to act in the capacity as his/her support person.

Levindale Hebrew Geriatric Center and Hospital adopts the following definition of “**family**” for purposes of facility-wide visitation policy: “**Family**” means any person(s) who plays a significant role in an individual’s life. This may include a person(s) not legally related to the individual. Members of “**family**” include spouses, domestic partners, and both different-sex and same-sex significant others.

Solely for purposes of visitation policy, the concept of parenthood is to be liberally construed without limitation as encompassing legal parents, foster parents, same-sex parent, step-parents, and other persons operating in caretaker roles.

Visitation privileges will be allowed regardless of race, color, national origin, religion, sex, gender identity, sexual orientation or disability. Visitors therefore are to be cordially welcomed

GENERAL GUIDELINES:

1. The Nurse Manager, Charge Nurse or Nursing Supervisor is responsible for ensuring the guidelines for visitation are followed. Guest Relations intervene as needed. Should difficulties arise that are beyond their control, Security and the Administrator On-Call are responsible to correct the situation.
2. Visiting hours are as follows:
 - a. LTC – unrestricted
 - b. Specialty Hospital– 10:00 to 20:30 hours daily [10 a.m. – 8:30 p.m.]
 - c. Exceptions can be granted by the Nurse Manager or designee. Special accommodations may need to be made regarding the location of the visit.
 - d. Residents/patients receiving comfort care or hospice service may have visitors at any time. Administration and Security are notified in these cases.
 - e. The receptionist announces the ending of hours 15 minutes before and at the end of visiting hours.
 - f. Visitors are required to display their visitor badge provided at the front desk upon entry.
3. If a visitor arrives before the start of visiting hours, the receptionist notifies the unit, providing the reason why the visitor is early and obtains permission to allow the visitor on the unit. The visitor may be denied access until routine visiting hours.
4. All visitors are encouraged to check with the unit staff and patient/resident regarding his/her therapy schedule, activity schedule and rest times that might best support the care/services program and accommodate the resident's/patient's wishes.
5. Resident/patient visitation may be restricted if it is detrimental to his/her well-being as documented by the interdisciplinary team, at the request of the patient/resident or at the request of the attending physician based upon the patient's/resident's clinical status and need.
6. The facility reserves the right to restrict visitation rights for public health reasons in consultation with the Infection Control Practitioner and/or the Medical Director. [See Policy for Visitor Restriction during Outbreaks and Epidemics]
 - a. Persons with influenza-type symptoms or other diseases that are transmitted through contact or airborne are discouraged from visiting.
 - b. Although there is no age restriction for visitors, families are reminded that a hospital host many pathogens which may put young children and elderly at risk for acquiring infections.
 - c. Visitors will not be allowed while actively displaying signs and symptoms of illness. In extreme cases if visiting with an active illness such as coughing or sneezing, a mask will be required.

7. Pre-arranged visits by pets from home may be allowed in designated areas. Permission is granted by the Nurse Manager or designee/Administrative Leadership. Documentation of health and updated immunizations and temperament test is completed by a member of Therapeutic Recreation is required. If a visitor refuses testing of their animal, the unit manager of designee /senior leadership will have to grant permission for the patient or resident to visit with the animal outside of the facility with a leash.
8. The Nurse Manager or designee/Administrative Leadership is given discretionary authority in the visiting policy. They may ask visitors to leave the patient's/resident's room or unit at any time, based solely on the assessment of an individual incident; assessed needs of the patient/resident; to maintain privacy during administration of tests or treatments; or the needs of the unit at large.
9. Forensic patients/residents who are in custody of law enforcement or corrections staff are not allowed visitors, except where authorized by the responsible agency. (See Appendix A)
10. Expected Behaviors of Visitors
 - a. Sign in/out at the reception desk and wear a visitor badge throughout the entire visit.
 - b. No more than four people should visit a patient/resident at any time. Pre-arranged permission for more people can be requested.
 - c. Appropriate attire and shoes are required. Where posted, visitors shall wear protective coverings and perform hand hygiene when entering and leaving the patient's/resident's room.
 - d. Respectful behavior of the patient/resident and other patients/residents and staff is required. Any visitor acting in a disorderly fashion, creating a disturbance or violating any facility policy will not be allowed to remain in the facility. Administration and Security should be notified in these cases.
 - e. All of Lifebridge Health campuses and facilities are "SMOKE FREE". Smoking is NOT permitted on any Lifebridge Health property.
 - f. A Medical Emergency via the Rapid Response Team is called for visitors who become ill while in the facility. If needed, the visitor will be encouraged to seek medical attention.
 - g. Visitors may use the cafeteria or vending machines for food and beverages. Toilet facilities are available outside of the clinical units.
 - h. Visitors are not allowed to take pictures of videotape any staff member. [See Policy for Social Media]
11. Visitor Violations
 - a. Visitors requested to leave a unit must do so immediately. Should such visitors have any questions, they may ask to speak with Guest Relations or Administration/Nursing Supervisor.
 - b. Failure to leave the unit immediately and/or facility upon request triggers Security notification. The visitors will be considered trespassers and dealt with through appropriate police and legal channels.

EXCEPTIONS: See Policy for Visitor Restriction during Outbreaks and Epidemics and Appendix A

APPLIES TO:

- All unit staff
- All visitors

APPENDIX A

RESIDENT/SPECIAL PATIENT CARE UNITS - LEVINDALE

The following guidelines should be utilized in determining visitors to special patient care units. These are guidelines only and there may be circumstances where exceptions can and should be made in consultation with appropriate hospital staff.

1. LTC/Hospital Units

- a. Visitors may be restricted to the immediate family members. Those with signs and symptoms may be required to wear a mask.
- b. Visitors may be restricted to those 14 years of age or older.
- c. Unit may allow additional visitors under special circumstances on a case by case basis.

2. Brain Health Units

- a. The psychiatrist will write orders as deemed necessary for specific visitation.
- b. Visitors may be limited as per unit guidelines and as deemed necessary for the patient's well-being in accordance with their treatment plan.
- c. The Charge Nurse will be responsible for maintaining visitation policy.
- d. It may be necessary for staff to mask if patients are non-compliant with wearing the masks.
- e. Visitors may be restricted unless required for the well-being of the patient. If found to have symptoms, a medical face mask and other PPE that may be recommended.