

Windmoor Healthcare of Clearwater

Policy and Procedure

VISITATION / VISITATION RIGHTS	Policy #: RI.115
	Original Policy Date: 05/1981
	Last Revision Date: 02/2022
	Last Review Date: 02/2022
	Policy Approval: Medical Executive Committee 09/2019

POLICY STATEMENT

It is the policy of Windmoor Healthcare to provide an opportunity for all patients to have visitation with family, friends and significant others.

SCOPE

All employees of Windmoor Healthcare, visitors and patient's

PROCEDURE

1.0 Informing Patients:

- 1.1 All patients shall be informed, before care is furnished to the patient whenever possible, of their visitation rights, and any clinically necessary or reasonable restriction or limitation that Windmoor Healthcare may place on such rights, and the reason for such restriction or limitation.

2.0 Patient Visitation Rights:

- 2.1 All patients shall have the right, subject to their consent, to receive visitors whom they designate. The patient shall have the right to withdraw or deny such consent at any time.
- 2.2 Patient visitation rights shall not be restricted, limited, or otherwise denied on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.

3.0 Restrictions on Patient Visitation:

- 3.1 The facility may impose clinically appropriate limitations on patient visitation when visitation would interfere with the care or health of the patient. Visitation may be conducted through electronic means such as a zoom call.

4.0 Support Person(s)/Emergency Contact:

- 4.1 All patients shall be given an opportunity to identify a support person/emergency contact, who may be a family member, friend, or other individual who supports the patient during his or her hospital stay, and may exercise the patient's visitation rights in the event the patient is incapacitated or otherwise unable to do so. A support person/emergency contact person may be identified by the patient verbally or in writing.
- 4.2 The identity of a support person/emergency contact person selected by a patient shall be recorded in the patient's medical record.

5.0 Designated hours on specific days will be set apart from each program schedule for the purpose of visitation.

- 5.1 Visitors will be required to check in with the front desk 15 minutes prior to the start of visitation.

- 6.0 It is recognized that special circumstances dictate the need for flexibility and adjustment to regularly scheduled times.
- 7.0 To ensure the safety and/or confidentiality of patients and all staff. All visitors are required to wear an ID badge and sign a confidentiality statement in the front lobby before entering the hospital itself. In addition, the visitor will sign in and out when leaving the facility, as well as giving back their visitor badge.
- 8.0 The switchboard will request the patient's privacy code from each visitor requesting to visit with a patient and that program will verify that the patient wishes to visit.
- 9.0 Nobody under the age of 16 is allowed to visit with the patients. Special arrangements for children under 16 can be made in advance by communicating with Social Services and Nursing Administration. Any children will require adult supervision during the visitation.
- 10.0 Patients may only receive 2 visitors at a time.
- 11.0 Each program's visiting hours are posted on the unit, in Admissions and in the lobby.
- 12.0 Special visiting hours may be arranged with Social Services and Nursing Administration for family members that cannot meet with the patient during established visitation hours.
- 13.0 Patients have the right to visit or contact clergy, attorneys, law enforcement or Command, outside of designated visitation times.
- 14.0 Visitors may be asked to leave during visitation for security reasons.
- 15.0 Shoes, shirts and appropriate clothing will be worn at all times. Clothing should not have references to drugs, alcohol or be sexually inappropriate. If visitors are not wearing appropriate clothing, they will be asked to leave.
- 16.0 Any allowable items that are brought in for the patients during visitation will be required to be left with the receptionist so that the standard inventory process can be followed. No items are permitted to be given directly to the patient.
- 17.0 Windmoor Healthcare is unable to accept responsibility for visitor's valuables. Visitors will not be permitted in the designated visitation area carrying purses or packages. Lockers are provided for visitor's belongings.
- 18.0 The following items are not permitted to be brought into the visitation area;
- 18.1 Any glass or breakable item.
 - 18.2 Any sharp items.
 - 18.3 Any ingestible substance such as vitamins, alcohol, medication, drugs
 - 18.4 No food or beverages
 - 18.5 No purses
 - 18.6 No cell phones, cameras or tape recorders
 - 18.7 No weapons of any kind; knives, guns, box cutters, etc.

19.0 No weapons; i.e., knives, guns, etc. will be permitted within the hospital. Visitors will be asked to lock these items in their vehicle.

20.0 Visitors with fever, acute respiratory illness, vomiting, or diarrhea are requested **NOT** to visit patients.

21.0 Intoxicated or otherwise impaired visitors will **NOT** be permitted in the designated visitation area or on hospital grounds.

22.0 No excessive displays of affection will be allowed during visitation time. Failure to adhere to the rules for visitation will result in immediate termination of the visitation.

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ADDENDUM TO VISITATION RIGHTS POLICY

Policy #:	RI.115A
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Last Revision Date:	n/a
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Policy Approval:	Medical Executive Committee
Supersedes:	n/a

ADDENDUM TO RI.115 VISITATION RIGHTS

I. Purpose

To ensure that all special visitation provisions in Florida for all F.S. 395 facilities are observed and complied with.

II. Definitions

None

III. Policy

It is the policy of Windmoor Healthcare to ensure the rights of all patients receiving care and services.

Infection Control Policy covers infection control and education policies for visitors; screening, personal protective equipment, and other infection control protocols for visitors.

This policy ensures permissible length of visits and numbers of visitors, which must meet or exceed the standards in ss. 400.022(1)(b).

Our organization ensures designation of a person responsible for ensuring that staff adhere to the policies and procedures.

Safety-related policies and procedures may not be more stringent than those established for the provider's staff and may not require visitors to submit proof of any vaccination or immunization.

The policies and procedures allow consensual physical contact between a resident, client, or patient and the visitor where safe and clinically appropriate.

Within 24 hours after establishing the policies and procedures required under this section, providers must make such policies and procedures easily accessible from the homepage of their websites

IV. Procedure

With a physician order and where applicable, the above and following will always be observed:

Essential caregiver: A resident, client, or patient may designate a visitor who is a family member, friend, guardian, or other individual as an essential caregiver. The provider must allow in-person visitation by the essential caregiver for at least 2 hours daily in addition to any other visitation authorized by the provider. This section does not require an essential caregiver to provide necessary care to a resident, client, or patient of a provider, and providers may not require an essential caregiver to provide such care.

- The Intake Specialist shall inform the patient/support person/legal representative of the patient's visitation right.
- The patient/support person/legal representative shall acknowledge understanding of the visitation by signing the Patient's Acknowledgement form.
- In the event the patient is unable to sign the acknowledgement and there is not legal representative/support person present, the Intake Specialist shall notify the admitting nurse.
- Once the patient is determined to be in an improved state or the legal representative/support person is available, the unit nurse shall explain the patient visitation right and obtain a signature as evidence of understanding.
- The Intake Specialist shall document the identity of a Support Person/legal representative selected by a patient shall be recorded on the intake assessment form.
- The policies and procedures may require a visitor to agree in writing to follow the provider's policies and procedures. A provider may suspend in-person visitation of a specific visitor if the visitor violates the provider's policies and procedures.

These standards apply by law in the following circumstances in Hospitals:

1. End-of-life situations.

2. A resident, client, or patient who was living with family before being admitted to the provider's care is struggling with the change in environment and lack of in-person family support.
3. The resident, client, or patient is making one or more major medical decisions.
4. A resident, client, or patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died.
5. A resident, client, or patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver.
6. A resident, client, or patient who used to talk and interact with others is seldom speaking.
7. For hospitals, childbirth, including labor and delivery.
8. Pediatric patients.

V. Documentation

Patient's Acknowledgement form

VI. References

408.823, F.S