

POLICY AND PROCEDURE

TITLE: Acute Care Visitation & Restrictions: Phase 1	POLICY NUMBER: CHS-LS-RSK-020	PAGE # 1 of 6
RESPONSIBLE DEPARTMENT: Risk Management	POLICY LEVEL: Catholic Health Acute Care Ministries	EFFECTIVE DATE: 6/19/20
PREPARED BY: Matthew Batt, Esq. Director, Risk Management & Senior Associate Legal Counsel	APPROVED BY: VPMA's 6/17/20 Hans Cassagnol, MD 6/19/20	MSMH: 1/16/17

This document is not intended to create, nor is it to be construed to constitute a contract between CHS and any of its Associates for either employment or the provision of any benefit. This policy supersedes any policy previous to this policy for any CHS organizations and any descriptions of such policies in any handbook of such organization. Personnel failing to comply with this policy may be subject to disciplinary action up to and including termination.

PURPOSE:

The purpose of this policy is to provide guidelines for visitor access and restrictions in consideration of Catholic Health's values of Reverence, Compassion, Innovation, Community, Integrity and Excellence as well as Catholic Health's commitment to quality care in a safe environment. Catholic Health recognizes the important role that visitors play in promoting the health and well-being of our patients. However, we must continue to protect our associates, medical staff, patients and the community while the threat of COVID-19 remains. Routine (pre-COVID) visitation remains suspended until the transmission of COVID-19 is no longer a threat.

APPLIES TO:

All Associates and Medical Staff, visitors, students, vendors and contractors in Catholic Health acute care facilities with the exception of the St. Joseph's COVID-19 Treatment Center (formerly Sisters of Charity Hospital, St. Joseph's Campus).

POLICY:

Catholic Health has identified the following guidelines regarding visitor access and restrictions that must be applied to all individuals entering our facilities in an effort to provide a safe environment for our medical staff, associates and patients.

PROCEDURE:
A. Inpatient Hospital Visitation
1. Limited Visitation Hours

Visiting hours will be limited from 2:00 pm to 6:00 pm seven (7) days a week. *Rare exceptions for afterhours visitation may be permitted but must be first discussed with the unit charge nurse and approved by the Director of Nursing or VP of Patient Care Services.* The site medical director may also be contacted if a situation necessitates additional communication.

2. Approved Visitors

Patients are permitted to have one (1) visitor at a time and are encouraged to have no more than two (2) visitors per day.

Visitors must be over the age of 18. Visitors age 60 years or older are discouraged due to increased risk of COVID-19 infection. *Exceptions may apply as noted in this policy.*

Can be family members, caregivers, legal representatives or other persons permitted by the patient.

Visitors will not be discriminated against on the basis of age, race, color, national origin, religion, sex, gender identity, sexual orientation or disability.

Patients will be advised that he/she may withdraw or deny visitation at any time.

Name and contact information for visitors, the date(s) of their visits, and the name of the patient(s) visited will be maintained in an electronic format by each facility. Facilities may utilize a paper log if real-time electronic entry is not possible but must ensure that paper logs are uploaded into electronic format.

General visitation information will be provided to visitors which includes the potential risks and benefits of the visitor's presence as well as limitations while in the hospital.

3. Visitors Not Permitted

Patients with an active diagnosis of COVID-19 or under investigation ("PUI") for COVID-19 are not permitted visitors. In the event that a patient is determined to be COVID positive or PUI, virtual visitation accommodations may be provided.

Individuals that have been diagnosed with COVID-19 that have not fulfilled CDC criteria for removal from isolation (must be free of symptoms for at least 3 days AND afebrile for 3 or more days without fever reducing medicines AND at least 10 days have passed from date of diagnosis). This is without exception.

Individuals that have been in contact with someone who is actively infected with COVID-19 or had contact with a person who is actively under investigation (PUI) within 14 days. This is without exception.

Individuals reporting symptoms or medical history that raises suspicion of possible COVID-19 during screening. This may include but is not limited to individuals experiencing shortness of breath, fever, cough or other potential COVID-19 symptoms. This is without exception.

Individuals that are frail or at-risk (i.e. immune compromised or serious chronic illness) due to the increased risk of COVID-19 infection.

Any visitor who is otherwise exhibiting signs and symptoms of an illness or has an illness that could be transferred to our patients, is not permitted to visit.

4. Approved Visitor Requirements

All Visitors must submit to a health screening including a temporal (forehead) scan to check their body temperature. Visitors with temperatures elevated above 100 degrees Fahrenheit will not be permitted to enter any acute facility.

Visitors who clear screening must wear the screening sticker given to them at point of entry screening.

Visitors must wear a facial mask for the duration of their time at the hospital. Visitors are permitted to wear their own personal mask inside the hospital or a mask can be provided by the hospital.

Visitors must wear a mask provided to them over their nose and mouth at all times. Visitors that do not comply with proper mask use will be educated. If the visitor fails to comply after education, the visitor will be asked to leave the facility.

Patients must wear a mask (if possible) whenever a visitor is in the room.

Visitors must practice meticulous hand hygiene at all times.

Visitors must practice social distancing, at least 6 feet from others, including the patient they are visiting.

Visitors must adhere to any protocols specific to the unit where the patient they are visiting is located, including the possible need for wearing additional personal protective equipment (PPE)

Visitors must remain within patient room for the duration of their visit. Approved visitors are not permitted in any public waiting areas of the hospital, including the cafeteria, and must utilize the restrooms on the ground floor of the hospital. *If a request to visit the chapel is received, the unit should notify Security so that the visitor can be escorted.*

Visitors will be directed by hospital staff to leave the room during aerosol-generating procedures or any other procedure where their presence may impede the ability to safely render care to the patient.

Visitors are not permitted to bring in food or beverages for patients

5. Enforcement

Any individual refusing to submit to screening upon entry at a facility will not be permitted visitation. This is without exception.

Any visitor who does not comply with the requirements listed in Section 4 will be required to leave the premises and may be denied future visitation privileges.

Facilities are encouraged to use an overhead page 15 minutes prior to end of the approved visiting hours as well as an additional page at the end of visiting hours. Any visitor who does not exit the facility after these notifications have been broadcast will be escorted from the facility by Security and may be denied future visitation privileges.

If a previously approved visitor is witnessed by unit staff to exhibit potential COVID-19 symptoms, they may be requested to leave the facility.

6. Exceptions

In extenuating circumstances involving end-of-life or serious change in a patient's status, visitation privileges may be granted to more than one family member outside of regular visiting hours. This must be first discussed with the unit charge nurse and approved by the Director of Nursing or VP of Patient Care Services. The site medical director may also be contacted if a situation necessitates additional communication. If such circumstances arise after hours, visitation exceptions may be approved by the Nursing Supervisor on duty.

Patients for whom a support person has been determined to be essential to the care of the patient (medically necessary) including any patient that requires special needs, which can include those with a disability, developmentally disabled individuals with a variety of personal, educational and vocational tasks, etc., and those patients with cognitive impairments including dementia. Patients meeting the criteria within this exception may be accompanied by one (1) visitor after normal visiting hours who may remain in the patient's room – to be determined by the clinical care team and pursuant to the general conditions listed within this policy.

Visitors for whom a support person has been determined to be essential for their safe transportation and visitation of the hospitalized patient. This should be limited to one adult support person per visitor.

In extenuating circumstances as described above, visitation may also be offered to individuals under the age of 18 years, provided they are under the supervision of an approved adult visitor.

7. Semi-Private Room Visitation

Any visitation requested in a semi-private room will only be permitted if the curtains separating patients remain drawn.

Separate chairs must be used for each patient in a semi-private setting to avoid shared usage of a chair by multiple visitors.

B. Maternal/Child Patients

1. Requirements

On labor and delivery units, a mother may have one visitor at a time during a maternity stay. No other visitors will be allowed; this includes children under the age of 18.

During labor, the mother is permitted to have one support person present in addition to a doula if requested.

In our NICUs, the baby's mother and one support person (not subject to change) will be allowed to visit. No other visitors will be allowed; this includes children under 18.

Current mother/baby exceptions are also subject to change and additional restriction, should it become necessary to further protect the safety of our new mothers and children.

All inpatient requirements for approved visitors apply.

C. Where COVID-19 Visitation Restrictions Remain in Place

1. Areas/Units

a. Emergency Departments

One visitor may be permitted to stay with the patient for a period of time based on the clinical team's judgment. Normal screening criteria would apply if visitor permitted to stay for a period of time. If patient is admitted as an inpatient, staff can notify visitor if they have left and explain that inpatient visitation available during designated visiting hours.

During clinical assessment, if the patient becomes a person under investigation (PUI) or COVID-19 testing is being considered, the visitor's name and contact number will be taken. The visitor will then be instructed to leave the facility and wait in their vehicle with all future communications with that visitor becoming telephonic.

At time of discharge from ED, visitor may stay with patient or staff may encourage waiting in vehicle if appropriate.

b. Surgery Areas – Outpatient/Ambulatory Procedures/Testing

Patients may not be accompanied by another individual at pre-surgical testing (PST). Instructions for drop off or pick up should be posted to make clear that only patients are permitted in PST areas. Arrangements can be made in advance for surgery patients with special needs or requiring assistance/support. Exceptions can be made for a support person to be present if no alternative arrangements can be made to otherwise accommodate. Please refer to the policy "*Guidelines for the provision of care to the Tier 1, Tier 2 and Tier 3 procedure patient during the COVID Pandemic*", CSC0400, for additional information regarding visitation guidance regarding surgery patients.

c. Post-Partum Recovery

Visitation restrictions remain in place at this time. Please refer to other Maternal/Child-related information outlined in *Section B* within this policy.

d. Hospital Clinics

Visitors are currently not permitted in clinics located on any hospital campus.

e. Rehab & Other Specialized Units

Visitation restrictions remain in place in these areas.

D. Additional Considerations

Patient representatives, such as Health Care Agents or Surrogates, do not have the power to dictate or deny visitation to a patient unless (1) there is clear evidence that they are communicating the wishes of the patient or (2) they have been appointed by a court as guardian of the personal needs of the patient.

The hospital has the ultimate authority to limit or withdraw visitation privileges if their presence infringes on the rights of others, compromises the safety of patients or associates, or is medically or therapeutically contraindicated. Clinical judgment will be used to determine when visitation would interfere with the care of the patients. Reasonable restrictions may include, but are not limited to:

- a. Patient is undergoing care interventions
- b. Presence of infection control issues
- c. Visitation may interfere with the care of other patients
- d. Existence of court orders restricting contact
- e. Disruptive, threatening, or violent behavior of any kind
- f. Patient need for privacy or rest
- g. Need for limitation on the number of visitors during a specific period of time
- h. Need for minimum age requirements for child visitors

E. Vendors

Vendors must meet the requirements related to their level of access as outlined in the "Vendor Access Policy", CHS-MM-013.

F. Contractors

All contractors are required to undergo screening upon entry to any hospital, must wear facial mask at all times and must display identification.

G. Outside Regulatory Agencies

Any outside regulatory agency in our facility on official business will be required to undergo screening upon entry to any hospital, wear appropriate PPE and will be required to display a name badge at all times.

H. Clinical Students

Students are required to undergo screening upon entry to any hospital, must wear facial mask at all times and/or additional PPE as required, and are required to wear official school or hospital provided identification badges.

POLICY AND PROCEDURE

TITLE: Acute Care Visitation & Restrictions: Phase 1

POLICY #: CHS-LS-RSK-020

Page 6 of 6

ORIGINATION DATE: 6/20

REPLACES (if applicable): Replaces KMH: 021-V4, ED-T4, 047-21; MHB: Emergency Department Visitor Policy; SOC: OB 181

	Date/ Initials	Date/ Initials	Date/ Initials	Date/ Initials	Date/ Initials	Date/ Initials	Date/ Initials	Date/ Initials
REVIEWED:	5/16 MB							
REVISED:	1/17 DB	10/19 MB	6/20 MB, DB	6/17/20 MB				
CSC/OPC APPROVALS:	10/30/19 OPC							
REFERENCES:	FEDERAL LAW: CMS 42 CFR Parts 482 and 485 JCAHO STANDARD: R1.01.01.01 NYS DOH Informational Message dated June 17, 2020							