

Patient Population

	Original Date of Issue: January 1975 Cross reference: Security Policy #1 "Access Control"	✓ Neonate ✓ Pediatric ✓ Adolescent ✓ Adult ✓ Geriatric
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Policy

In caring for the health of our patients it is recognized that family/friends/significant others are integral to the recovery of the patient. This includes, but is not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member or a friend. Visitation provides the opportunity for the healthcare providers to collaborate with and to include families and significant others in the patient's plan of care. We support the physical and emotional needs of our patients and families as we strive to promote family centered care and to increase our patients' satisfaction. With this in mind, and in keeping patient safety a priority, the following visiting guidelines are set forth.

Visiting Guidelines

1. Visiting hours are 11am-9pm. Exceptions to these hours occur in some specialty service areas (Psychiatry, Maternal Child, Rehab, ICU's and Stepdown Units). Refer to the specialty service area or unit based manual for their visiting hours policy.
2. Only two visitors per patient's bedside are recommended, unless special needs have been identified.
3. Children (<18 years of age) may visit hospitalized patients if there is an expressed need on the part of the patient and the child. When possible, prior arrangements should be made with providers. Children require adult supervision (exclusive of the patient) at all times.
4. Visitors exhibiting symptoms of infection (e.g. coughing, runny nose, fever, chills, etc) can not visit.
5. Overnight bedside visiting is at the discretion of the nursing unit and is only allowed for patients in private rooms, in order to protect the privacy and comfort of all patients. The Clinical Nurse Manager, Assistant Administrator, and/or Security Department may need to be notified. Alternate overnight accommodations may be investigated by the Clinical Nurse Manager /designee (i.e dayroom/unit lounge).
6. Visitors may be asked to leave at the request of the provider, based upon:
 - a. patient care needs and the acuity of the unit
 - b. disruptive behavior on the part of the visitor(s)
7. Visitors requiring access before or after visiting hours must be authorized by the unit before they can enter the faculty. A visitor sticker is completed and issued by security at the point of entry: Stickers are color coded by building.
8. Security may be called for assistance with visitors who remain on the unit after hours without permission.

References

1. Sims, J, Miracle, V. A look at critical care visitation. *Dimensions Critical Care Nursing*. 2006; 25(4): 175-181.
2. White, S, Edwards, R. Visitation guidelines promote safe, satisfying environments. *Nursing Management*. 2006: 21-24.

STANDARD: Policy 702

SUBJECT: VISITING

3. Griffin, J. Facing challenges to family-centered care I: conflicts over visitation. *Pediatric Nursing*. 2003.