



**Chief Executive Officer of the Medical Center**

**MEDICAL CENTER POLICY NO. 0050**

- A. SUBJECT: Patient Visitation
- B. EFFECTIVE DATE: August 1, 2014 (R)
- C. POLICY:

The University of Virginia Medical Center recognizes the importance to our patients of visits from family, friends and others (“Visitors”). Visitors may be present to provide emotional support during the course of stay, unless the healthcare team determines the presence of Visitors infringes upon the **patient’s rights and/or safety**, or the rights and/or safety of others, or is medically or therapeutically contraindicated.

1. Patients may withdraw or deny a person’s visitation privileges at any time. A surrogate decision maker may restrict visitation only if the patient has specifically authorized him/her to restrict visitation in a written advanced directive.<sup>1</sup>
2. Healthcare providers shall inform patients and surrogate decision makers, on a case by case basis, of any clinical restriction or limitations that may be imposed on visitation. Circumstances which may create a need for restrictions may include:
  - infection control issues;
  - visitation interferes with, or violates, a patient’s wishes for privacy;
  - visitation interferes with the care of a patient needing rest;
  - visitation interferes with the care of other patients;
  - the Medical Center is, or becomes, aware of an existing court order restricting contact, or of other legal status that may affect visitation;
  - visitors who engage in disruptive, threatening, or violent behavior of any kind
3. Medical Center employees and all individuals providing healthcare services at the Medical Center shall be responsible for communicating the visitation guidelines to patients and Visitors and for helping to maintain a safe environment.
4. The Medical Center does not restrict, limit or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.
5. This policy applies to both inpatient and outpatient settings, and is intended to reflect

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<sup>1</sup> Code of Virginia Sections 54.1-2984 and 54.1-2986.1

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the balance required to maintain a safe, healing and supportive environment, while facilitating a positive, individualized visitation experience that allows each patient/surrogate decision maker to determine which Visitors are important to a patient's care.

D. DEFINITIONS:

1. Care Partner – An adult identified by the patient or surrogate decision maker as an active part of the healthcare team and wears special identification.
2. Family- Adult Visitors identified by the individual patient or surrogate decision maker who play a significant role in the patient's life, and may include a spouse, domestic partner, parent or other family member, friend, or any other person identified as the patient's support person.

E. PROCEDURE:

1. General Procedures

- a. Information regarding patient visitation shall be provided to patients in the Patient Handbook and the University of Virginia Friends and Family guide.
- b. Upon admission, patients or their surrogate decision makers may identify one or two Care Partners to be active part(s) of the healthcare team.
- c. Family, Care Partners, and other visitors are expected to treat patients, Visitors, and staff with respect. Violent, threatening, and/or disruptive behaviors will not be tolerated. Medical Center Security (PIC 1647) is available at any time to assist in such circumstance.
- d. If there is concern about a patient's care or condition, particularly if that concern is immediate or emergent, the patient's Family, Care Partners, or other Visitors should alert a patient care provider.
- e. Restrictions on visitations, whether initiated by the patient/surrogate decision maker or health care providers, and the concerns on which they are based, are coordinated and documented by the Bed Center (phone number 243-9931).
- f. The number of Visitors per patient is dependent upon the patient's request, the patient's medical, emotional, and psychological needs, available space, and the needs of other patients in the same room or area. At least one adult Care Partner or Family member may be at the patient's bedside 24 hours a day, 7 days a week.
- g. Healthcare providers must have access to the patient's bedside and to medical equipment, and the presence of visitors may not impede such access under any circumstances.
- h. When Visitors gather in large groups, healthcare providers should direct them to common areas such as the visitor lounges, main lobby space, or a cafeteria.

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- j. In semi-private rooms or areas, care shall be taken to ensure that meeting the needs of one patient for visitation does not unreasonably impact the comfort or privacy of another patient in the room or area.
    - k. To ensure patient confidentiality, Families, Care Partners and other Visitors may be asked to vacate a room or an area.
    - l. Visitors should not use healthcare providers' personal cell phones, computers or other personal electronic devices.
  2. Visitor Passes (Inpatient and Same Day Surgery at University Hospital)
    - a. Each family member or Visitor shall obtain a "Family and Visitor" pass from the University Hospital lobby information desk as required by Medical Center Policy No. 0004 "Medical Center Identification".
    - b. After 9:00 PM, Visitor access is permitted at the Emergency Department entrance. Visitors after 9:00 pm shall receive an "After-Hours Family and Visitor" pass.
    - c. Family, Care Partners, and other Visitors may not enter the room of a patient for whom they do not have a Visitor's pass.
  3. Visitation by Children
    - a. Children under 18 must be supervised by an adult, 18 years of age or older at all times. This adult must be someone other than the patient.
    - b. Infants and young children may not visit patients on isolation because isolation garb is not designed to fit them; the Infection Control Nurse (Pic 1243) must be contacted in situations where, due to extenuating circumstances, it is desirable or necessary that an infant or young child visit a patient on isolation.
    - c. Children are generally not permitted to spend the night unless there are extenuating circumstances collaboratively determined by the healthcare team and patient/Family/Care Partner.
    - d. When a nursing mother is a patient, the infant or young child may stay in the room with the mother to receive nutrition, provided that another adult Visitor is also present.
  4. Visiting Clergy
    - a. Visiting clergy and pastoral visitors shall be approved by the Medical Center Chaplaincy Services Office. Such Visitors must arrange their visits at the convenience of the patient.
    - b. Clergy and pastoral Visitors may visit patients from their respective congregations only.
    - c. Approved clergy and pastoral Visitors shall be issued a University of Virginia Health System photo identification badge by the ID Office in accordance with Medical Center Policy No. 0004 "Medical Center Identification", and shall be required to wear the badge at all times while in the Medical Center.

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- d. On-call Medical Center Chaplain shall assist in resolving any questions or concerns related to clergy visitation.

#### 5. Infection Control

- a. Visitors who have recently been exposed to a contagious illness should not visit patients in the hospital.
- b. Visitors should be free of signs or symptoms of communicable disease, and should not visit patients in the hospital if they have any of the following:
  - Signs and symptoms of the flu or flu like illness
  - Fever >100 degrees within the last 24 hours
  - Runny nose
  - Cough
  - Sore throat
  - Upper respiratory infection
  - Nausea/vomiting/diarrhea
- c. All Visitors must perform hand hygiene upon entering and exiting a patient room.
- d. Visitors to patient care units with especially vulnerable patient populations may be screened before being permitted to spend time with patients.
- e. During community outbreaks of communicable disease (such as influenza), notices will be posted in the hospital lobby and elevator lobbies to inform the public that they present a special risk to patients during these times and request that if they are symptomatic, visits be postponed.
- f. Visitors must follow isolation precautions as outlined in infection control policies.
- g. Healthcare providers will explain appropriate isolation measures to Visitors. Visitors need to be made aware of issues related to visiting patients on isolation precautions and should be given the information sheet "Tips for Visiting a Patient on Isolation"

SIGNATURE:

DATE:

Medical Center Policy No. 0050 (R)

Approved June 1987

Revised March 1989, March 1992, March 1996, March 1999, June 2002, August 2003,

September 2005, June 2006, March 2008, June 2011, December 2012, July 2014

Approved by **Chief Nursing Officer**

Approved by Medical Center Administration