Purpose: A. To define a consistent approach to visitation for the patient, overnight visitor and family that balances with the clinical and technical demands of the department.

Definitions: A. Children: Individuals under 18 years of age.

B. Spokesperson: An individual who has the responsibility to communicate information to all other family members and/or the patient care team, as appropriate.

1. Primary Spokesperson: The individual that receives telephone updates on the patient’s condition and all other inquiries.

2. Alternate Spokesperson: The individual who is notified if a patient’s condition deteriorates when the primary spokesperson is not available.

C. Overnight Visitor: A person 18 years and older who has been identified by the patient to stay overnight in the patient’s room to provide comfort and/or care as deemed appropriate.

D. Visitor: An individual who is here for the purpose of visiting a patient for a short (less than a couple of hours) period of time.

Policy: A. Upon admission, the patient and family will receive information regarding the visitation policy. (Information will be found in the Admission packet, visitor guidebook and on the Froedtert website.)

1. The RN will initiate conversation with the patient/family/significant other educating them regarding the option for overnight visitation. The decision to have an overnight visitor will rest with the patient/family/significant other.

2. There are flexible visitation hours for patient visitors. Nursing staff will be notified by the Family Center of visitors arriving between 2000 and 0600. Visitors arriving between 2000 and 0600 must be approved by the patient and nurse.

B. Visitation may be restricted at the discretion of the multidisciplinary team to facilitate patient care.

C. Generally, there is no limitation to the number of visitors; however, visitors should keep in mind the need for the patient to have adequate rest periods.

D. Staff will not be expected to provide medical and/or nursing care (blood glucose checks, blood pressure checks, etc.) for visitors.

E. Visitors who need medical assistance will be escorted to the Emergency Department.

F. Children must be supervised by a responsible adult, not the patient. All visitors under the age of 18 will leave by 2100. Exceptions will be determined by nursing and Security. Questions of age will be handled by Security. Any disruptive behavior exhibited by a child such as, but not limited to: loudness, shouting, horseplay, running, swearing or anything that disrupts patient care or safety will result in a verbal warning to the responsible adult by nursing staff. If the child's disruptive behavior continues, Security will be notified and the responsible adult will be asked to leave with the child.

G. For pet visitation, see CPM.0069ic-Pet Visitation, Therapeutic. The patient’s licensed service animal is allowed to stay overnight.

H. Overnight Visitors

   Overnight visitors will:
   1. Maintain patient privacy. Visitors may be asked to leave the patient’s room during a test, procedure and/or treatment, or when a physician or nurse sees the patient.
   2. Not be allowed to operate hospital equipment without prior approval of the RN.
   3. Refrain from sleeping in the patient's bed to enhance visitor/patient safety.
   4. Take responsibility for their personal items. The hospital is not responsible for items that become lost or misplaced during the visit.
   5. Not visit patients if they have a known illness.
   6. Use public restrooms.
7. Understand that no shower facilities are available.
8. Provide for their own dietary needs.
9. Check with the nursing staff before giving food or drink to the patient.
10. Wear shirts and shoes. Visitors may not wear hospital gowns and/or hospital clothing/scrubs.
11. Keep the noise level to a minimum.
12. Avoid disruptive behavior including, but not limited to, appearing under the influence, using profanity or violence. Possessing weapons will not be tolerated. Nursing staff will notify Security at the first sign of disruptive behavior. If there is a disruption, verbal or physical, the parties involved will be escorted out of the facility and allowed to return the next day.
13. Use Visitor Lounges as appropriate, which are available on each floor. Large visitor groups may be asked to relocate to other areas, as needed.
14. Not smoke in patient rooms or anywhere in the hospital.
15. Provide their own personal care items, including medications. (See SP3.013-Patient and Staff Owned Equipment)
16. Be able to care for themselves.
17. Notify staff if leaving the unit.

I. Overnight visitors are limited to one designated person.
1. Arrangement for a visitor to stay overnight must be made with the patient’s RN prior to 1900.
2. The arrangements and the name of the overnight visitor must be communicated to the staff caring for the patient, the Administrative Representative and Security.
3. Overnight visitors must be properly identified by Security/Nursing.
4. The Administrative Representative will notify Environmental Services of the location of all overnight visitors.
5. If available, a recliner or cot will be provided.

J. Identification of Visitors by Security
1. Visitors entering the hospital between 0600 and 2000 will not require an identification badge.
2. Visitors arriving to the hospital between 2000 and 0600 must either stop in the Family Center or be met by a Security Officer at the entrance by using the intercom for a visitor identification badge.
3. Security/Nursing will identify every visitor on the patient care units after 2000 and supply those visitors with a visitor identification badge.
4. Security will supply overnight visitors with an identification badge with the unit they will be on, the room number they will be staying in and the date.
5. Visitors must wear the visitor identification badge at all times.
6. Visitors will drop off badges at the nurse’s station, the Family Center or the drop boxes located at the Pavilion entrance and the East Clinic entrance when leaving.

K. Security or Family Center will notify the patient care unit of the expected overnight visitor’s arrival.

L. Visitor Restrictions
It is necessary, at times, for a patient to have visitor restrictions. Visitor restrictions may be warranted based on situations such as the following:
1. Patient and/or significant other request.
2. Legal reasons; i.e., prisoner. (See SP4.003-Prisoner Patients-Individuals Under Guard)
3. Health and/or safety of the patient.
4. Patient assigned an “alias” for safety reasons. (See SP4.002-Patient Alias Policy)

M. Certain units such as Bone Marrow Transplant, Spinal Cord Injury Center, the Birth Center and Palliative Care have further restrictions or modifications based on the treatment needs of the patient population in that unit. These will be explained to the patient and family upon admission to those units.

N. Isolation
Adults and children may visit patients in isolation as long as they comply with isolation procedures.

O. Visitors will be educated about isolation procedures prior to entering a patient’s room on the initial visit.

P. Visits to patients in respiratory isolation are limited to thirty minutes for the patient’s and visitor’s protection.
Q. Overnight visitors must follow isolation procedures designated for the patient. Airborne and Airborne/Contact isolation patients will not be allowed to have visitors overnight.
R. Parents/guardians are responsible for ensuring children comply with the isolation guidelines.
S. Visitors failing to follow the isolation guidelines will be asked to leave. Security will be called to provide assistance, if necessary.
T. Visitors that have symptoms of or are currently suffering from a communicable disease should be educated about the negative impact they will have on the patient’s health and recovery.

Procedure:
A. Visitor Restrictions is a field in the Miscellaneous Patient Information category in Affinity. Based on the visitor status, the RN enters “yes” in the “Visitor Restriction” field to communicate that there is a restriction. “No” is entered if there are no restrictions.
B. Except in the case of prisoner or alias patients, a sign, visible before entry into the room, is placed on the patient’s door indicating there is to be a restriction.
C. The Communicator, upon direction from the RN, will enter the appropriate Privacy Code in the Edit Demographics category in Affinity:

Privacy Codes
Code Description Displays in Inquiry
ALI Alias-Contact Security No
DVP Distinguished Visitor Program Yes
INF Infection Control Alert Yes
PRI Prisoner Alert No
PUB No Publicity - Contact Yes
Public Relations
RES Visitor Restrictions No
SEC Security Alert YES

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