Visitor Guidelines

Policy Number: 86100-PCS-153

PURPOSE:
Consistent with our Mission and Core Values, to provide guidelines on patient visitation that best meets the needs of patients in our care. In keeping with our vision statement, visitors are an integral part of patient care and support. High-quality, compassionate patient care is our first priority and will be the primary goals in establishing visitation guidelines. Providence Centralia Hospital is committed to partnering with patients and their loved ones to create a patient-centric experience.

APPLIES TO:
This policy applies to caregivers (all employees) and representatives of Providence Health & Services Southwest Washington Service Area (SWSA) Providence Centralia Hospital (PCH).

POLICY STATEMENT:
Providence Centralia Hospital provides full and equal visitation for all visitors designated by a patient or the support person, consistent with the patient's preferences, and subject to the limitations described in these guidelines.

OBSERVATION & SAFETY FACTORS:
(Refer to Procedure section)

PROCEDURE:
1. To ensure a healing environment and to protect our patients and caregivers:
   A. Visitors are asked to always be respectful of other patients, caregivers and the property of PCH.
   B. For the safety and well-being of everyone on campus, visitors must comply with all posted signs and warnings on the facility campus.
   C. A caregiver on the health care team may impose visiting restrictions when they are deemed essential for the health and well-being of a patient.
D. When patient care or safety is affected, visitors may be asked to leave a patient room at the discretion of the caregiver.

E. Visitors with symptoms of illness, such as cold, cough, fever, open wounds, or other illness/disease that poses a risk may not be permitted to enter any patient care area.

F. Visitors must follow infection control isolation protocols as outlined in PCH policies.

G. Visitors of patients in isolation care must comply with stated requirements, such as wearing gloves, gown and mask, when in a patient's room.

H. Visitors who are identified as "high risk," as defined in this policy may be asked to follow an appropriate visitation plan that outlines visitation requirements and/or restrictions up to and including no visitation or access to the facility.

I. Visitors who become loud, disruptive, or who are lingering in hallways or restricted areas may be required to leave the facility.

J. Visitors may not bring non-prescribed medications or alcohol into a patient room.

K. Visitors may not bring guns or weapons into the facility (except the exception of on-duty and off-duty law enforcement).

2. A family member or support person may stay overnight in a patient room if approved in advance by the attending nurse.

A. Out of respect for other patients, if a patient is in a semi-private room, visitors are encouraged to make other accommodation arrangements.

3. In the event of a pandemic event, such as widespread influenza, hospital visitation may be limited based on recommendations of the local county health department.

4. Defining family and significant others

A. When a patient is not able to designate who may visit, the care team may need to work with the patient's designated support person to determine visitation.

1. A surrogate decision maker appointed in compliance with Washington State law may exercise the patient's right to designate visitors.

2. Oral designation of a support person, regardless of the support person's legal status, is sufficient to establish the person who will designate visitation rights on the patient's behalf.

3. Written confirmation of a designation is not required by PCH.

5. When a patient has not designated visitors or a support person and becomes incapacitated, the attending nurse will consult with the charge nurse to identify appropriate visitors.

A. Decisions can be based on the patient's previous visitors and understood preferences and acceptable documentation, such as:

1. Advance directive information

2. Marital relationship/status

3. Existence of other legal relationship: parent-child, civil union, marriage, domestic partnership

4. Shared residence

5. Shared ownership of property or business

6. Acknowledgment of a committed relationship, such as an affidavit
6. After hours
   A. Visitors may visit during regular visitor hours.
   B. Permission from the attending nurse is required in order to stay beyond regular visitor hours.
   C. A visitor badge may be required for after hour's visitation. Refer to PCH procedures.

7. Inmates in care
   A. For patients in custody, no visitors and calls will be accepted for inmates in care.

8. Infants
   A. Infants may room-in with a hospitalized mother provided a second responsible adult also remains with the mother and infant.
   B. When needed, PCH can provide a bedside bassinet.
   C. Hospital caregivers are not responsible for the safety, security, care, feeding, or supply needs of the infant who is not under the care of our facility.

9. Minor children
   A. A legal parent or guardian is authorized to identify visitors on behalf of minor children who are patients.
   B. Minor children visiting a patient should be accompanied by an adult at all times.

AGE-RELATED CONSIDERATIONS:

Yes

CONTRIBUTING DEPARTMENT/COMMITTEE APPROVALS:

- WA Council (2017)

DEFINITIONS:

- **Support person**: An individual who is in a support role for a patient or who is legally responsible for making health care decisions on behalf of a patient.
  - This may include family members, friends or another individual who is there to support the patient.
  - The role of a support person is not limited to a relationship that is legally recognized in Washington.
  - The designation of a support person is not intended to supplant Washington law concerning the patient's legal representative.

- **High-risk visitor**: Includes but is not limited to:
  - A person on the hospital campus visiting patients or caregivers with a history of criminal violence or sexual abuse; or
  - Who is classified as a sexual offender or has a history of domestic violence; or
  - Who is making threats against the safety of a patient, caregiver or other representative; or
  - A person who actively interferes with a patient's medical care.

ATTACHMENTS:

N/A
**OWNER:**

Director, Inpatient Care and Nursing Support

**REFERENCES:**

- Per WAC [246-320-141](http://phs-wapch.policystat.com/policy/3668796/), this policy must be publicly posted on PCH internet site, any updates must be reported to the state and updated on the internet site within 30 days of update

**ADMINISTRATIVE APPROVAL:**

Chief Administrative Officer SWSA

All revision dates: 6/6/2017, 3/1/2014

**Attachments:** No Attachments

**Approval Signatures**

<table>
<thead>
<tr>
<th>Approver</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medrice Coluccio: Chief Administrative Officer, Southwest Washington [PA]</td>
<td>6/6/2017</td>
</tr>
<tr>
<td>Theresa Sullivan: SWSA PolicyStat Site Admin/Policy Coordinator</td>
<td>5/31/2017</td>
</tr>
</tbody>
</table>

**Applicability**

WA - Providence Centralia Hospital