

ALLEN PARISH HOSPITAL	Policy Number	
Department: Hospital Wide	Effective Date	02/25/2013
Title: Patient Visitation Rights	Page	1 of 6
Approved By:	Revised Date	

# **DEFINITION:**

The process for providing access and visitation for patients at Allen Parish Hospital (APH).

- Support Person a family member, friend or other individual allowed to be present with the patient for emotional support. This person can make decisions <u>ONLY</u> regarding patient visitation <u>if</u> the patient cannot make them for him/herself and there is no Patient Representative.
- Patient Representative a person who is <u>legally</u> responsible for making clinical and visitation decisions on the patient's behalf when he or she cannot make them for themselves.

POLICY:

APH encourages a philosophy of open and flexible visitation that welcomes and encourages the

involvement of family and significant others in patient care.

**OBJECTIVE:** 

To provide access and visitation to patients at APH.

PERSON RESPONSIBLE:

Hospital staff, Visitors

RELATED POLICIES:

Informed Consents

Patient Rights and Code of Ethical Behavior

### PROCEDURE:

	STEPS	KEY POINTS
1.	Upon admission, the patient, Patient Representative, and/or the patient's Support Person will be given the Statement on Patient Visitation Rights.	<ol> <li>The statement on Patient Visitation Rights is included in the ALL patient registration packets.</li> <li>A. In Outpatient areas (ER, X-Ray, Lab, and registration areas). Visitation Rights information are posted</li> </ol>
2.	<ul> <li>The Statement on Patient Visitation Rights will inform the patient (and/or Support Person) of:</li> <li>A. The patient's visitation rights, including any clinical restrictions or limitations on such rights.</li> </ul>	

# STEPS KEY POINTS

#### 2. Continued

- B. The patient's right to receive the visitors whom the patient designates, including a spouse, a domestic partner (including a same-sex domestic partner), another family member or friend.
- C. The patient's right to decline visitors or withdraw his or her direction about any visitor at any time.
- 3. APH can apply reasonable clinical restrictions and other limitations on patient visitation. Reasonable restrictions may be based upon, but are not limited solely to, any of the following:
  - A. A court order limiting or restraining contact.
  - B. A visitor's behavior presenting a direct risk or threat to the patient, hospital staff, or others in the immediate environment.
  - C. Visitor behavior that is disruptive to the functioning of the patient care unit involved.
  - D. The patient's risk of infection by the visitor.
  - E. The visitor's risk of infection by the patient.
  - F. A patient's need for privacy or rest.
  - G. The need for privacy or rest by another patient in the patient's shared room;
  - H. Any special restriction rules that apply to special patient care units (mental health/behavioral health, drug and alcohol, etc.)
  - I. When visitation would otherwise interfere with the care of the patient and/or the care of other patients.

#### **STEPS**

# **KEY POINTS**

- 4. A patient's rights concerning visitors can also be exercised by the patient's Support Person. A Support Person has the authority to exercise all of the patient's rights concerning visitors.
  - A. The patient can designate the Support Person, if any, by an oral or written direction (which includes a direction written in advance). If the patient cannot verbalize or write his or her directions, the patient can also designate the Support Person by gestures such as pointing and blinking.
  - B. If the patient has not provided any direction concerning a Support Person and the patient is incapacitated, APH personnel may attempt to reasonably identify a person who may serve (with that person's consent) as a Support Person for the patient.
  - C. If the patient in incapacitated or otherwise unable to communicate his/her wishes and an individual provides an advanced directive designating an individual as the patient's Support Person (it is not necessary for the document to use this exact term), APH will accept this designation and provide the individual notice of the patient's rights, and allow the individual to exercise the patient's visitation rights on the patient's behalf.
  - D. If the patient is incapacitated or otherwise unable to communicate his or her wishes, there is no advance directive designating a Patient Representative on file and no one has presented an advance directive designating himself or herself as the Patient's Representative, but an individual asserts that he or she, as the patient's spouse, domestic partner (including a same-sex domestic partner), parent or other family member, friend, or otherwise, is the patient's Support Person, APH will accept this assertion, without demanding supporting documentation, and provide notice of the patient's visitation rights, and allow the individual to exercise the patient's visitation rights on the patient's behalf.

#### **STEPS**

#### 4. Continued

- E. If two or more individuals claim to be the Patient Representative, and the patient does not have the capacity to resolve this dispute, each individual will be asked to provide documentation supporting his/her claim to be the patient's support person. In attempting to resolve this dispute the Administrative Supervisor and/or attending physician will be notified to review the materials (such as described above) that provide relevant information, as well as take any other actions that could help to resolve the dispute.
- F. If the patient has a Patient Representative who is different from the Support Person, the Patient Representative must also be provided information on the patient's visitation rights, in addition to the Support Person, if applicable.
- G. In the event that a patient has both a Patient Representative and a Support Person who are not the same individual, and they disagree on who should be allowed to visit the patient, APH will defer to the decisions of the Patient's Representative. As the individual responsible for making decisions on the patient's behalf, the Patient Representative has the authority to exercise a patient's right to designate and deny visitors just as the patient would if he or she were capable of doing so.
- H. Any designation by the patient or determination by staff at APH of a Support Person is to be recorded in the patient's medical record.

# **KEY POINTS**

E. If the hospital has reasonable cause to believe that the individual is falsely calming to be the patient's spouse, domestic partner, parent or other family member, documentation should be requested to support his or her claim to be the Patient Representative.

H. Document in Clinical Care Flowchart of Electronic Medical Record (EMR).

# **STEPS**

**KEY POINTS** 

- 5. If the patient is incapacitated and there is no Support Person, APH will take reasonable efforts to determine who can visit the patient. That includes a review of oral and written information provided by individuals who wish to visit the patient.
- 6. A Support Person has the authority to implement the patient's visitation rights, but a Support Person does not have the authority to be consent decision-maker concerning any proposed treatment or care for a patient who lacks decision-making capacity (i.e., incapacitated), unless they are the legal next of kin or the Patient Representative. A "Patient Representative" for an incapacitated patient has the authority to provide the consent for clinical decision-making. (See Policy Consents.) A Patient Representative can also be the patient's Support Person. In that situation, the individual has the authority to exercise both the patient's visitation rights and rights concerning consent to medical treatment.
- 7. Inappropriate behavior or refusal to follow the policies and rules at APH can compromise patient health and safety, and may result in visitors being asked to leave the premises. If the visitor(s) do not comply with APH rules, Administration will be contacted. Hospital security can also be asked to provide assistance.
- 8. Any complaints regarding visitation (from the patient or an individual who is or wants to visit the patient) will be made pursuant to the APH's grievance procedure.
- 9. The APH 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 and will not permit any Support Person to do so.

# STATEMENT OF PATIENT VISITATION RIGHTS

Allen Parish Hospital strongly encourages and welcomes visitation and involvement of family and or significant others in the patient's care. APH has adopted this Statement on Patient Visitation Rights:

- 1. Patients may receive visitors of their choosing, including, but not limited to, a spouse, a domestic partner (including a same-sex domestic partner), another family member, or a friend.
- 2. Patient may refuse to consent to a person visiting them, or may withdraw consent to see a visitor at any time.
- 3. APH will ensure that all visitors enjoy full and equal visitation privileges consistent with patient preferences. Without limiting the previous sentence, the Hospital will not restrict, limit, or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability, nor will it permit anyone else to do so.
- 4. Patients may designate a "Support Person" to exercise their visitation rights on their behalf. Patients may designate a Support Person in any manner, including orally, in writing, or through non-verbal communications (such as pointing).
- 5. APH can apply reasonable clinical restrictions and other limitations on patient visitation. Reasonable restrictions may be based upon, but are not limited solely to, any of the following:
  - A. a court order limiting or restraining contact;
  - B. a visitor's behavior presenting a direct risk or threat to the patient, hospital staff, or others in the immediate environment;
  - C. visitor behavior that is disruptive to the functioning of the patient care unit involved;
  - D. the patient's risk of infection by the visitor;
  - E. the visitor's risk of infection by the patient;
  - F. a patient's need for privacy or rest;
  - G. the need for privacy or rest by another patient in the patient's shared room;
  - H. any special restriction rules that apply to special patient care units (mental health/behavioral health, drug and alcohol, etc.); and
  - I. when visitation would otherwise interfere with the care of the patient and/or the care of other patients.

#### REFERENCES:

Federal Register/Vol. 75, No. 223/Friday, November 19, 2010/Rules and Regulations, Page 70844.

Horty Springer E. Mattern Law Firm. Patient Visitation Rights policy and outline.