

GREENVILLE HEALTH SYSTEM POLICY AND PROCEDURES	
Manual of Policy Directives	
POLICY NAME: Visitation Policy	POLICY NUMBER: S-050-40
EFFECTIVE DATE: April 11, 2017	REVISION DATE: April 11, 2017

SCOPE: Mark "X" as applicable

	Adult Hospitals		Adult		Clinical Licensed
	Children's Hospital		Pediatric		Clinical Unlicensed
	MIPH		Inpatient		Non-Clinical
	UMG/PIH		Outpatient		Nursing Only
X	System-Wide				
	X	GHS Greenville Memorial Hospital			
	X	GHS Greer Memorial Hospital			
	X	GHS Hillcrest Memorial Hospital			
	X	GHS Laurens County Memorial Hospital			
	X	GHS North Greenville Long Term Acute Care Hospital			
	X	GHS Oconee Memorial Hospital			
	X	GHS Patewood Memorial Hospital			
	X	Provider based facilities associated with GHS hospitals			

POLICY STATEMENT: Greenville Health System (GHS) will not restrict, limit or otherwise deny visitation privileges on the basis of race, color, national origin, religion, age, sex, physical, mental or other disability, medical condition, sexual orientation, gender identity, gender expression, pregnancy, ancestry, marital status, citizenship, status as a veteran, or other non-medically relevant factors. GHS values the rights of patients to instruct the hospital as to welcome visitors, and to protect patients from unwelcome visitors.

- DEFINITIONS:**
- A. Family or Family Member: The terms "family" or "family member" in all policies at the Greenville Health System are understood and interpreted to include any person(s) who plays a significant role in an individual's socio-emotional life. This may include a person(s) not legally related to the individual. Members of "family" may include spouses, domestic partners, and both different-sex and same-sex significant others. "Family" may include a minor patient's parents, regardless of the gender of either parent. Solely for purposes of this visitation policy, the concept of parenthood is to be liberally construed without limitation as encompassing biological parents, legal parents, foster parents, same-sex parents, step-parents, those serving in loco parentis, and other persons operating in caretaker roles, consistent with applicable law.
 - B. Visitor: A "visitor" is defined as a guest of the patient. Family members are considered to be visitors. Visitors are encouraged to visit during the hospital visitation hours.
 - C. Visiting Hours: General visiting times are 9:00 a.m. to 9:00 p.m. unless one or more of the following considerations are noted, or other special circumstances apply as described in this

THIS POLICY HAS BEEN REISSUED SINCE JULY 2004.

policy. The patient or the patient's designated representative, in conjunction with the patient's nurse and healthcare team, may make visitation limitations. Family and visitors will not be denied access to the patient without a legitimate reason, as determined by hospital personnel. Special considerations that determine the amount of time that family and visitors spend with the patient include:

- a. Clinical and emotional needs of the patient. Having family or other visitors present should not put the patient at risk for harm (such as exhaustion, overstimulation, or marked increase in agitation).
- b. Family member's or visitor's inability to meet the hospital's infection control requirements.
- c. The need to maintain a sterile environment during a bedside procedure.
- d. Limitations as requested by the patient or the patient's designated representative.
- e. Space limitations in patient rooms. In the intensive care areas, the preferred number of family members or visitors is no more than two at a time.
- f. Patient, family, visitor or employee safety issues.
- g. Family members and visitors are asked to respect shift changes.
- h. Family members and visitors with prohibitive legal documentation, such as restraining orders, will not be allowed to visit.

PROCEDURE:

- I. The patient's nurse should inform the patient of the right to choose who may visit during hospitalization, subject to clinical restrictions or limitations, and the right to deny or withdraw choices of visitors at any time. The patient, in conjunction with the patient's nurse and healthcare team, makes visitation limitations. If visitation is denied to family members and visitors, they should be informed of the reasons.
 - a. In the event the patient is not able to designate who can visit, visitation will be determined by the patient's legally authorized representative.
- II. Clinicians caring for patients may need to restrict the number and frequency of visitors when visitation would interfere with the care of the patient and/or the care of other patients. The reasons for any restrictions should be clearly communicated to the patient and/or the patient's legally authorized representative.
- III. Clinicians may ask visitors to leave the room during the performance of a procedure. However, GHS will, if the clinical situation allows, and at the request of the patient, allow one visitor to remain in the room during a procedure in order to provide comfort and support to the patient.
- IV. Family and visitors are expected to be supportive of the hospital environment. Family or visitors may be asked to leave the room, unit and/or facility if they become disruptive or interfere with the general comfort and care of the patients, visitors or staff. Hospital security may be notified to handle disruptive issues as needed. Family and visitors may not consume alcohol, use illegal drugs or tobacco products while on hospital property.
- V. Unique and extenuating circumstances (i.e., imminent death, impending surgery, etc.) require compassionate exceptions. The patient's nurse and health care team, using professional judgment and in collaboration with the patient or the patient's legally authorized representative, will consider the unique family circumstances and patient needs. In these circumstances, to the greatest extent feasible, liberal visitation may be allowed.
- VI. Children Visitors
 - a. Children ages 14 and younger should always be accompanied and supervised by a responsible adult other than the patient. Visits by children should be coordinated

THIS INDIVIDUALLY ISSUED AND DISTRIBUTED POLICY DOES NOT CREATE A CONTRACT OF EMPLOYMENT BETWEEN GHS AND THE EMPLOYEE. EMPLOYMENT AT GHS IS AT WILL. ALL PREVIOUSLY ISSUED VERSIONS OF THIS POLICY ARE HEREBY REVOKED.

- with the patient's nurse and with the patient or the patient's designated representative.
- b. Children should not remain overnight in a patient room with the exception of the birthing areas if they are supervised by a responsible adult other than the patient.
- VII. All individuals seeking to visit patients in the Children's Hospital or in Women's Hospital without a bracelet must be registered in the Fast Pass visitor management system. Passes will be available in the West Tower Lobby (24 hours per day) and at the main lobby Visitors Desk (6a – 9p daily).
- a. Each visitor age 15 or older will be positively identified through some form of official identification, i.e., South Carolina Driver's license, passport, etc. A copy of the identification will be made through the Fast Pass system.
- b. Visitors will be issued a Fast Pass that will include a picture of the individual, location to visit, and expiration date.
- c. Visitors without ID will still be issued a Fast Pass and allowed entry.
- d. Individuals on patient floors without a Fast Pass will be directed by return to the 1st floor to obtain a Fast Pass.
- VIII. Infection Control
- e. Family and visitors exhibiting any of the following symptoms should not visit until symptoms are gone: runny nose, cough, sore throat, sneezing, cold, flu, measles, mumps, rashes, draining wound, fever greater than 100.40, vomiting, and diarrhea.
- f. Family and visitors with airborne/droplet transmitted (e.g., influenza, TB, chickenpox) communicable diseases or any other condition as recommended by the Infection Control Department (e.g., lice, scabies) should not be permitted to visit.
- g. As appropriate, nursing staff will provide directions to family and visitors regarding special precautions including hand cleaning and the use of personal protective equipment, e.g. gloves, gowns, and masks.
- h. During high levels of community illness, the GHS Epidemiologist, or his/her designee, has the authority to restrict visitation to prevent further transmission within a GHS facility.
- i. Hospital personnel may ask family members or visitors to leave the facility if they show signs of illness.
- VIII. Late Visiting and Overnight Stays
- a. All GHS facilities will be secured between 9:00 p.m. and 6:00 a.m. All family members, visitors, patients and staff must enter through controlled access points during these times.
- b. All persons (family members, visitors, including clergy) should display a hospital approved visitor badge between the hours of 9:00 p.m. and 6:00 a.m. Late night visitors may be photographed according to security guidelines.
- c. Family members and visitors arriving to visit after 9:00 p.m. without a visitor badge should be stopped by the security officer or GHS police officer on duty at the after-hours entrance.
- d. Visitation in exceptional situations (e.g. critical care or Labor and Delivery admissions, critical patient condition, out-of-town visitors) should be reviewed for appropriateness and all approved Family Members and Visitors allowed to proceed to the patient care area after signing in at the security post and receiving a temporary visitor badge. In such a case, when an exception to the policy is allowed, the Administrative Supervisor and/or the Administrator on Call should be notified.

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- e. One Family Member per patient is permitted to stay overnight. Two Family Members per patient are permitted overnight stays in special circumstances such as critical care areas and pediatrics.

IX. Staff Responsibilities

- a. Staff members should respect the privacy of fellow employees who are hospitalized by observing all visitation guidelines and abiding by policies regarding patient privacy.
- b. Staff members should communicate to the patient and/or Family Member(s) the reasons for any limitation or restriction of the patient's visitation rights.
- c. Staff members who play a role in facilitating or controlling visitor access to patients will be trained to assure appropriate implementation of this Visitor Policy and avoidance of unnecessary restrictions or limitations on patients' visitation rights.

X. Communication

- a. This visitor policy should be explained to each patient by registration, reception desk or nursing staff.
- b. General Visitation information should be distributed to all patients and should also be available in waiting rooms and reception desks. Information related to visitation in critical care or specialty areas will be distributed as appropriate.
- c. Information regarding visitation at GHS facilities, including alternatives to visitation, will be available to the general public and employees.

RELATED DOCUMENTS (optional):