

SUBJECT: Restrictions of Visitation Policy (Public Health Emergency)	REFERENCE
	PAGE: 1 OF: 3
DEPARTMENT: Organization Wide	EFFECTIVE: 3/16/2020
	REVISED:
APPROVED BY: Robyn Hemphill, CEO	

SCOPE:

Monroe Surgical Hospital is responsible for providing a supportive, protective and healing environment for all patients. Appropriate visitation plays an important role in the patient experience on the healing process. During public health situations/emergencies such as a pandemic or epidemic, visitation practices may be amended to reflect infection control safety concerns.

PURPOSE:

The purpose of this policy is to establish guidelines due to the CDC determined infectious outbreaks to ensure that exposure is minimized while a patient’s right to have a support person to be present during the course of the stay to provide emotional support is recognized.

Definitions:

1. **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 designation of support person is not intended to replace the term patient’s legal representative.

POLICY:

General Visitation:

1. Entrances to the campus for all visitors and patients will be restricted to the following entrances only (all other entrances will be locked and available for egress from the facility only or be accessed by badge access for certain personnel)
 - Main entrance
2. Visitation will be limited for all patients to two (2) adult (> than 12yo) per patient per day.
3. Visitation hours will be restricted to 8 hours per day maximum, between 10am and 6pm only.
4. Patients in isolation are restricted to one (1) visitor per day.
 - a) Visitors of isolation patients will not be allowed to go to common areas (cafeteria, gift shop, etc.)
 - b) Visitors of isolation patients will be required to wear appropriate PPE.
 - c) Visitors of isolation patients will be logged and tracked on entry to room.
 - d) Any visitor of a positive COVID-19 patient will be reported to the Office of Public Health, per regulatory requirements.
5. All campus visitors will be screened upon entrance to the campus for travel, new onset cough, shortness of breath and temperature ≥ 100 at the security checkpoint.
 - a) Any visitor with new onset cough, shortness of breath and temperature ≥ 100 will be referred to their primary care physician for follow up care and treatment.
 - b) Any visitor with travel history to a CDC/WHO designated high risk travel area will be denied entry to the campus to reduce the risk of disease spread.

SUBJECT: Restrictions of Visitation Policy (Public Health Emergency)	REFERENCE
DEPARTMENT: Organization Wide	PAGE: 2 OF: 3
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6. Patients undergoing surgery/procedure may have their support person visit prior to and after return from surgery and then adhere to visiting hours per this policy.
7. Non-essential vendors or personnel will not be allowed entry starting immediately including product vendors and pharmaceutical reps. Essential vendors are those bringing necessary supplies for procedures and will be approved by calling the OR.
8. All volunteer services will be suspended immediately for the safety and protection of auxiliary volunteers.
9. When the state declares a healthcare emergency, outside visiting clergy will not be allowed in the building.
10. When the state declares a healthcare emergency, all nursing home patients will be transported to the front entrance to be picked up.
11. Students on campus will be restricted from training when the state declares a healthcare emergency.
12. Upon entry of visitors, the security staff will place an armband on the visitor so they can be recognized as being permitted to enter the facility.

Visitor education on infection control processes during public health emergency:

1. Personal Protective Equipment will be used in the patient's room.
2. Nursing will educate visitor on putting on PPE prior to entering room.
3. Visitors are to remain at patient's bedside during visitation. No information regarding other "patients' condition" can be given.
4. Visitors may be asked to leave by the charge nurse for any of the following reasons: Critical admission, procedures, physician orders, or patient's condition.

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DEPARTMENT: Organization Wide	PAGE: 3 OF: 3
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