



MUSC Medical Center Policy Manual

Section	No	Title	
LD-12	A-031	Family Presence and Visitation (formerly Visiting Hours/Visitation)	
Owner:	Patient & Family Centered Care Manager		
Location/File:	N:\Hosp_Admin\Policies\Admin Policies\A-031 Family Visitation		
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01/88	06/96, 07/97, 06/09, 09/11	10/95, 09/99, 09/05, 09/11, 07/12, 12/14	01/21/15

DEFINITIONS

Family: The patient chooses who he/she considers to be their family. Most often these individuals are the patient's primary support persons - those who normally provide a patient with significant physical, psychological or emotional support. Examples might be a close family member, domestic or same-sex partner, spouse, sibling or best friend. Patients define who is family, and how they will be involved in their care.

Patient's Personal Representative/Spokesperson: It is helpful if patients can choose one support person to serve as their 'spokesperson' for visitation. The spokesperson can help relay information to family and friends, manage the patient's visitation preferences, and help coordinate 'switching' of visitors when appropriate.

POLICY

MUSC Medical Center supports a patient and family-centered approach to care and recognizes that open visitation plays an important role in a patient's healing and recovery. The purpose of this policy is to establish guidelines that support the presences and participation of families and other partners in care, according to patient preferences, while also ensuring that staff and physicians can safely and compassionately care for patients.

PROCEDURES

- A. **Visitation Rights:** MUSC will inform each patient (or the patient's representative/ spokesperson) of their visitation rights to include:
1. The patient's right to receive the visitors whom he/she designates, including, but not limited to, a spouse, a domestic partner (including a same sex domestic partner), another family member, or a friend, without restrictions by the hospital on basis of race, color, national origin, religion, sex, sexual orientation, gender identity or disability.
 2. The patient's right to withdraw or deny visitation at any time.
 3. The hospital's obligation to ensure that all visitors enjoy full and equal visitation privileges consistent with patient preferences.
 4. The clinical and special restrictions which may impose limitations on a patient's visitation rights.

- B. **Guidelines:** Guidelines for the participation of family and visitors should be flexible in order to respond to the diverse and changing needs and preferences of each patient.
1. Hospitalized patients will be asked to identify a small number of primary support people, who are considered to be the patient's 'family'. Primary support persons are those who normally provide a patient with significant physical, psychological or emotional support. These support people/family will generally be able to visit at any time during their hospital stay (24 hours a day, 7 days a week). Examples might be a close biological family member, domestic or same-sex partner, spouse, sibling or best friend.
 2. On arrival, visitors should check at the information desk or nursing unit to learn if any restrictions apply to the patient they wish to visit. *Children's Hospital, ICU's, PACU and IOP may have additional visitation guidelines, based on patient needs.*
 3. All visitors should obtain a guest badge upon entrance to the hospital and wear it at all times.
 4. Children may visit with patients in the Medical Center, however; visits by children under the age of 12 (age 3 for visiting in Nurseries) should be coordinated with the patient's healthcare team, and the patient/patient's spokesperson. Children must be accompanied by an adult, other than the patient, at all times. Children visitors may be asked to leave patient care areas if their actions interfere with the safety and care of patients. Children visiting are not permitted to stay the night in the Medical Center. *Children's Hospital, ICU's, PACU and IOP may have additional guidelines based on patient needs.*
 5. Overnight visitation should be discussed with the patient's nurse. The adult patient may choose one adult guest to spend the night in the patient room, if space allows. Exceptions must be reviewed by the Hospital Supervisor or Nurse Manager. The guest must be able to safely stay alone and take care of their own needs. Children's Hospital welcomes both parents and/or guardians of the patient to spend the night in the child's room. *(some units may have additional guidelines)*
 6. All overnight visitors are expected to follow all MUSC rules and regulations.
 7. Family or visitors may be asked to leave the premises if they become disruptive or if their presence interferes with the safety or care of patients, families, visitors, or staff. These include, but are not limited to: the possession and/or use of alcohol or illegal drugs, the possession of weapons, and the use of profanity or threatening language.
 8. All valuables should be left at home and the patient and family should only bring essential items to the hospital. MUSC Medical Center does not assume responsibility for any lost or misplaced items.
- C. **Special Considerations:** In some cases, there may be unique and extenuating circumstances that require compassionate exceptions to these guidelines. The health care team, in collaboration with the patient/patient's spokesperson, should use good judgment in considering each family's unique circumstances and each patient's needs, when applying these guidelines. Some examples of circumstances that may require a more restrictive visitation environment include:
1. Clinical and emotional needs of the patient. Examples include exhaustion, overstimulation, or marked increase in agitation.
 2. The need to maintain a sterile environment during bedside procedures.
 3. Limitations as requested by the patient/patient's spokesperson.
 4. Patient, family, or employee safety issues.
 5. Visitation infringes on the rights and/or comfort and needs of other patients.
 6. Confidential patients.
 7. Prohibitive legal documentation such as a restraining order.
 8. Space limitations in patient rooms.
 9. Family members or visitors who cannot take care of their own personal needs. In this circumstance, the family or visitor must be accompanied by a caregiver.

D. **Guidelines for Health Care Providers:**

1. The patient's nurse should review the family presence and visitor guidelines with the patient on or shortly after admission, so the patient may make choices about family presence and visitor access. If the patient is unable to participate in this discussion and/or make decisions, the patient's spokesperson should be involved.
2. The nurse should communicate that the patient, or patient's spokesperson may make changes to their visitation choices at any times.
3. The nurse should provide family and visitors with unit-specific brochures or guidelines.
4. The healthcare team should be flexible in order to respond to the needs and preferences of each patient and because time and treatment alters patients needs and/or preferences.
5. Visitation limitations should be documented in the medical record.

E. **Supporting Documents:**

1. MUSC Family and Visitor Rights and Responsibilities (attached – English and Spanish)
2. A-021 Visiting – Psychiatry Clinical Services
<https://www.musc.edu/medcenter/policy/iop/a21visiting.pdf>

ADDENDUM
Family Presence and Visitation in the Nurseries

Definitions:

Visitation is encouraged to: 1) promote bonding between family and infant, 2) provide opportunities for parent education related to transitioning from hospital to home, infant behavioral development, general infant care, and any special care needs, and 3) increase caregiver comfort level as they are assisted in developing appropriate infant care skills.

Parents = mother, father, significant other

*Recommended visiting time to **handle** infant is near scheduled feedings.

Procedure:

A. **Family Identification:**

Level I: The infant's ID band should be matched with the mother's ID band.

Level II/III: The infant's mother will be given a 4-digit security number for nursery access and for parents to receive phone information. The infant's mother may provide this number to the infant's father/significant other.

Nursery staff will not be held responsible for information given to others who provide the security code. The security code will be documented in a designated notebook located at the front desk.

1. The parents will provide a list of up to 6 adults they consider "family". The 6 people will be "Designated Support Persons" (DSP). They must provide photo identification to be copied and kept at the front desk. This will be used as identification. The DSP cannot receive any medical information. All other visitors must be accompanied by the parents.

2. The nurseries have 24-hour visitation. During change of shift (0700-0730 and 1900-1930), all other visitors must step out and return after shift change has occurred. Visitation by minors other than the patient's siblings is per MUSC Hospital Visitation policy (12 years and older).
3. Only parents will receive patient information over the phone.
4. Visitors must sign the visitor log and perform a 2 minute scrub per NNICU policy.
5. Holding infants is limited to parents and DSP (see Sibling section below for children's guidelines). Handling of infants may be limited according to their stability, per the nurse's discretion. (N-20 Infant Holding (<https://www.musc.edu/medcenter/policy/Nursery/N-20.pdf>))
6. Two adult visitors are allowed at the bedside at one time. During sibling visitation, children may accompany the adult(s), for a maximum of 3 visitors at the bedside at a time.
7. Nurses have the discretion to limit visitation for purposes of confidentiality, safety, and infection control. In such cases, the nurse will allow the family in to see the infant as soon as possible or limit the number of visitors in the case of over-stimulation for the infant.
8. Any visitor who has a cold, fever, and/or diarrhea should postpone planned visits and may not be allowed in the nursery. Exposure to chicken pox or other communicable diseases may necessitate postponing visits for up to 21 days.
9. Any visitor who appears incapacitated by drugs or alcohol will not be allowed in the nursery.

B. Siblings:

1. Siblings are defined as brother, sister, step-brother/sister, half-brother/sister.
2. The minimum age for sibling visitation is 3 years old.
3. Children must be accompanied by an adult in the nurseries and waiting areas.
4. When visiting, children must remain at their sibling's bedside.
5. Visitation may be limited to 10-20 minutes for children who are distracted and need to take a break.
6. Siblings may be allowed to "hold" the infant when appropriate, with parental and nursing supervision.
7. Siblings are required to don a mask while visiting the nurseries.

Approvals:

As Required	Date
List Hospital Committee(s): Regulatory Affairs/Accreditation; Chair, Ethics Cte	11/14, 12/14
Ethics Committee	
Accreditation Review	12/14
Legal Review	12/14
Administration/Operations	01/15
Medical Staff Executive Committee	01/15
Governing Body	

Distribution:

Policy Applies to: All	Y	Nursing (Y/N): Y
	Other Clinical Staff (Specify): All	Other Staff (Specify): All
Educational Plan	EROC, Posting of Rights/Responsibilities in Public Areas	
Required Competencies		

Family and Visitor Rights and Responsibilities

Open visitation plays an important role in a patient's healing and recovery. MUSC Medical Center promotes patient and family centered care and supports the role of the patient's family and loved ones as our partners for quality and safety. Family and friends are welcome to visit often while their loved ones are in the hospital. It is helpful if patients can choose one person to serve as their 'spokesperson' for visitation. The spokesperson can help relay information to family and friends, manage the patient's visitation preferences, and help coordinate 'switching' of visitors when appropriate.

On arrival, visitors should check at the information desk or nursing unit to learn if any restrictions apply to the patient they wish to visit. When visiting a patient, obtain and wear a visitor badge at all times.

Family/Visitors have a right to:

1. Spend time with your loved one. Patients will be asked to identify a small number of primary support people, who are considered to be the patient's 'family'. Examples might be a close family member, domestic or same-sex partner, spouse, sibling or best friend. These support people will generally be able to visit at any time (24 hours a day, 7 days a week) during their hospital stay. Exceptions may be made based on patient needs. Discuss visits by children with your nurse/nurse manager. Children visitors may not spend the night in the facility. Some units have additional guidelines for children visitors.
2. Some of our patient rooms are small and too many visitors can make patient care difficult. We appreciate your help in limiting visitors in the room to a manageable number to support the patient's recovery.
3. At times we may need to limit visitation while patients are in therapy, or for other periods during the day, based on patient needs. Please comply with any visitation restrictions recommended and communicated by the healthcare team, based on the needs of the patient.
4. Know the names of the people who are helping or caring for your loved one.
5. Ask questions and receive answers in a way that meets your needs and helps you understand.
6. Access pastoral care, interpretive services, social work and other support services as needed.
7. Access helpful information. Please visit an information desk to request information regarding food, gift shops, parking, maps, guest services, and local accommodations.

Family/Visitors have a responsibility to:

1. Delay visiting if you have a cold, fever or illness. Adults or Children recently exposed to illnesses such as chicken pox, flu, measles, or who are feeling sick, should not visit.
2. Follow the special rules when visiting a patient who is on 'isolation' to protect the safety of all families and patients. To help ensure that our patients are not exposed to contagious diseases, children or adults recently exposed to illnesses such as chicken pox, flu, measles, or who are feeling sick, should not visit.
3. Comply with any visitation restrictions recommended and communicated by the healthcare team, based on the needs of the patient.
4. Be considerate and respectful of people who are caring for you or your loved one.
5. Wash hands or use hand sanitizer as you enter and leave patient rooms.
6. Support the rest and recovery of our patients in a healing environment by speaking quietly.
7. Follow all MUSC Medical Center policies and guidelines. Refrain from using profanity or threatening language or behavior. Possession of alcohol, illegal drugs or weapons is prohibited at MUSC Medical Center. Any visitor who interferes with the care of patients, or whose behavior or actions are a threat to patient safety, will be asked to leave.
8. Supervise children visitors at all times.
9. Look after your personal possessions and valuables, as MUSC Medical Center does not assume responsibility for lost or misplaced items.

Thank you for spending time with your loved one at MUSC Medical Center!