

# Patient Visitation Guideline

**Purpose:**

Penn State Health recognizes that family is an integral part of the care team. To this extent, Family/Support Person(s) are not considered visitors and are permitted to be on-site to facilitate patient- and family- centered care.

This guideline aims to:

- support and promote the integrity of the family unit
- meet the emotional and spiritual needs of our patients while maintaining their self-identity and autonomy, and
- help protect the community, staff, visitors and patients by defining guiding principles for families and visitors during the COVID-19 pandemic.

Therefore, Penn State Health will limit the number of people at each site in order to protect the community, staff, visitors, and patients; additionally, entrances will be restricted and all people entering its buildings will be screened.

Taking guidance from the PA DOH and CDC into consideration, this guideline applies to all patients.

**Definitions:**

**Family/Support Person:** Family, as defined by the Institute for Patient- and Family-Centered Care, refers to two or more persons who are related in any way – biologically, legally, or emotionally. In the patient- and family-centered care approach, the definition of family, as well as the degree of the family’s involvement in health care, is determined by the patient, provided that he or she is developmentally mature and competent to do so. For the purpose of this document, a Support Person will be considered family under this definition.

**Visitor:** Visitors are those who come to spend time with the patient, but are not recognized by the patient as his/her family.

**Per Stay:** Guidelines that indicate “per stay” or “entire length of the stay” mean the Family/Support Person is permitted to leave the premises and return on an as needed basis, but will be the only Family/Support Person to enter/exit during the patient’s visit.



**Guidelines during the COVID-19 Pandemic:**

This document is intended to be and therefore titled a “guideline”. Scenarios not covered, or scenarios for which the defined guidelines are not in the best interest of the patient/family and need to be modified, should be discussed with and an exception made jointly by the attending physician and nurse manager/house manager or practice site leadership.

1. Family/Support Person(s) are permitted using the following guidelines:

- a. All Patient Populations:**

- i. All persons attempting to enter the facilities will be screened.
      1. Family/Support Person(s) with a history of COVID-19 may be permitted if, by applying the Penn State Health’s criteria for outpatients in “COVID-19 Duration of Special Pathogen Isolation Precautions for Patients Diagnosed or Strongly Suspected to Have COVID-19”, the person is no longer considered to be infectious (Infectious Disease/Infection Prevention can be consulted for questions).
      2. Refer to additional guidance for Family/Support Person(s) of pediatric patients
    - ii. All persons must wear a mask upon entry to any Penn State Health facility (with exceptions for patients or support person(s) for whom masking would create a further health risk or persons under two years old).
    - iii. Patients who have an intellectual, developmental or cognitive disability, communication barrier, or behavioral concerns will be permitted an attendant, caregiver or Family/Support Person in accordance with Federal and State law.
    - iv. Employees are considered to be Family/Support Person or Visitor as defined above when visiting a patient for any non-work related reasons and must adhere to these guidelines.
    - v. Visiting Hours do not apply to Family/Support Person(s).
    - vi. Family/Support Person(s) may stay overnight if space allows.
    - vii. Family/Support Person(s) must be 18 years of age or older, with the following exceptions:
      1. He/she is the parent of a pediatric patient, spouse of a patient or partner of a laboring patient.
      2. Breastfeeding infants whose mother is the patient may be permitted along with the Family/Support Person(s).
      3. An exception has been discussed with and approved by the attending physician

jointly with the nurse manager/house manager or practice site leadership.

- viii. Family/Support Person(s) are expected to respect the privacy and health care needs of the patient. In the event a Family/Support Person becomes disruptive, uncooperative, threatening or presents any safety risk, their visitation privileges may be revoked. This includes refusal to wear a mask (except in instances covered under 1(a)ii).
  - ix. In the following scenarios, regardless of patient age or Special Pathogens Isolation status, the number of people permitted at the patient bedside should be determined by the patient's condition, preference, availability of personal protective equipment, and physical space constraints:
    - 1. End-of-life care
    - 2. Cultural considerations
    - 3. Any scenario in which the inability to visit may have a significant emotional and ethical impact on the patient and/or family that would outweigh the risk to the patient or Family/Support Person(s)
  - x. No Visitors – per the definition above - will be allowed in the hospitals, outpatient clinics, or diagnostic and procedural locations.
  - xi. Conflict:
    - 1. Escalation of conflict within the team on the decision to allow an exception to these guidelines will be mediated by the senior leadership of the team(s) involved. Infectious Disease/Infection Prevention can be consulted for questions related to duration of infectivity.
    - 2. Escalations brought forth by patients or Family/Support Person(s) should be directed to Patient Relations, attending physician and nurse manager/house manager or practice site leadership, security and/or BDRT as per usual practice and deemed necessary by the situation.
  - xii. Any exceptions, either made proactively or resulting via escalation, should be communicated to the patient, Family/Support Person(s), attending physician, nurse manager/house manager, practice site leadership and shared with all staff involved in the patient's care.
- b. **Pediatric Patients:** *A Parent/Guardian may designate Family/Support Person(s) for the patient*
- i. Patient Meets Special Pathogens Isolation Criteria

1. One Family/Support Person (must remain in the patient room for the entire length of the stay). Due to household contact it is likely that this Family/Support Person will also meet Special Pathogens Isolation criteria, and will be permitted as long as there is no additional safety risk to the patient/family.
- ii. Neither Patient nor Family/Support Person Meets Special Pathogens Isolation Criteria
  1. Two Family/Support Person(s) per patient per stay are permitted in the inpatient, observation, emergency department, outpatient procedural and surgical settings
    - Ideally, there will be no more than two Family/Support Person(s) in any single stay, but there are situations in which additional Family/Support Person(s) are permitted so long as there are never more than two such people in the hospital unit at any one time. Examples include, but are not limited to, the following examples:
      - If two Parents/Guardians live separately, each Parent/Guardian is permitted to spend time in the room on the same calendar day along with a second Family/Support Person of that Parent/Guardian's choosing. A common example would be for a Parent/Guardian and their partner to stay overnight into the next day but be replaced later that day by the other Parent/Guardian, who might also come with a partner.
      - If two Parents/Guardians need to leave at the same time, additional Family/Support Person(s) can serve in their place. A common example would be for both Parents/Guardians to need to go leave for work, asking grandparents or other family members to stay with the child until they get back.
      - More than two Family/Support Person(s) cannot take turns being in the room during a stay simply to allow for additional visitors, unless otherwise permitted by section 1(a)ix of this document. Exceptions are to be made jointly by the attending physician and nurse

manager/house manager.

- In the surgical setting, both Family/Support Person(s) will be allowed to accompany the patient during Pre-Op and Post-Op Recovery.
2. One Family/Support Person is permitted for outpatient clinic visits (entire length of the stay)
  - iii. When the patient does not meet Special Pathogens Isolation criteria, but the Family/Support Person(s) present with health that is cause for concern, the attending physician and nurse manager/house manager jointly, or practice site leadership, should set visitation guidelines in the best interest of the patient, family and staff, with guidance from Infectious Disease/Infection Prevention.
- c. **Adult Patients:** *Adult patients have the right to reject the presence of any Family/Support Person*
- i. Patient Meets Special Pathogens Isolation Criteria
    1. Family/Support Person(s) are only permitted per the following sections of this document: 1(a)i1, 1(a)iii, 1(a)vii3, or 1(a)ix
  - ii. Neither Patient nor Family/Support Person Meets Special Pathogens Isolation Criteria
    1. One Family/Support Person is permitted for labor and delivery, inpatient, observation, and procedural area visits (entire length of the stay)
    2. One Family/Support Person per patient per stay is permitted for the surgical setting
      - Due to space limitations, no Family/Support Person will be allowed to accompany the patient during Pre-Op or PACU/Phase 1 Recovery, unless the patient is not legally able to consent personally.
      - The Family/Support Person is permitted in Post-Op/Phase 2.
    3. Due to space limitations, Family/Support Person(s) are only permitted in the emergency department and outpatient clinic settings per the following sections of this document: 1(a)i1, 1(a)iii, 1(a)vii3, or 1(a)ix
  - iii. When the patient does not meet Special Pathogens Isolation criteria, but the Family/Support Person(s) present with health that is cause for concern, the attending physician and nurse manager/house manager should set visitation guidelines in the best interest of the patient, family and staff, with guidance from Infectious Disease/Infection Prevention.
2. For ease of discovery, the following is a list of common exceptions noted in the above guidelines.
    - a. Patients who have an intellectual, developmental or cognitive disability, communication barrier, or behavioral concerns will be permitted an attendant, caregiver or Family/Support Person in accordance with Federal and State law (even if this means the individual must “switch” with another during the stay)

- b. End-of-life care
- c. Cultural considerations (e.g., the father is the decision-maker in Amish families, but the mother is necessary to have at the appointment – both may be permitted)
- d. Any scenario in which the inability to visit may have a significant emotional and ethical impact on the patient and/or family that would outweigh the risk to the patient or Family/Support Person(s)
- e. Pediatric patients whose parents live separately

**RELATED POLICIES and references**

Patient and Visitor Exception Standard Operating Procedure

PC06-HAM

COVID-19 Duration of Special Pathogen Isolation Precautions for Patients Diagnosed or Strongly Suspected to Have COVID-19