

**SBH Health System**  
Bronx, New York

<b>TITLE:</b> <b>Hospital Patient Visitation Guidelines</b>	<b>SECTION:</b> <b>Administrative Policy and Procedure</b>	<b>Effective: 09/88</b>
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		<b>Approved By:</b> <b>Senior Administration</b>
		<b>Date:3/11/2020</b>
<b>Prepared By: Assistant Vice President/Chief Experience Officer</b>		

**Supersedes:**

Post COVID-19 Policy for Inpatient and Emergency Department Visitation  
Post COVID-19 Policy for Outpatient Appointments and Procedures

**I. POLICY:**

St. Barnabas Hospital recognizes the importance of visitation to our patients and respects their wishes concerning who may visit them. Patient visitation is essential and contributes to the patient's well-being and care and must be allowed to the maximum extent possible. Consistent with 10 NYCRR Section 405.7(c)(20), hospitals must authorize family members, support persons, and other adults, including end-of-life religious, spiritual leaders, or cultural advisors, to visit, consistent with the facility's ability to receive visitors. Families, friends or support persons provide patient support, comfort, and important patient information throughout a hospital stay, from admission through the transition to home and community care.

All visitors and/or support persons of patients at St. Barnabas Hospital are afforded equal visitation privileges consistent with patient preferences and in accordance with the Centers for Medicare and Medicaid Services (CMS) Conditions of Participation and New York State Department of Health regulations. Visitation privileges shall not be restricted, limited or denied based on race, color, national origin, religion, sex, gender identity, sexual orientation or disability.

**II. PURPOSE:**

To provide visitation guidelines in accordance with the Hospital's philosophy of patient-centered care that supports quality and safety, taking into consideration the individual patient needs and circumstances.

**III. DEFINITIONS:**

**A. Visitor:** An individual who can visit a patient in accordance with the SBH visitation guidelines

**B. Support Person:** Support persons have a different role than visitors. A support person may be:

- A family member or guardian,
- A personal care assistant or other paid or unpaid attendant who is selected to be onsite at the hospital with a patient with a disability or cognitive impairment to assist the patient physically or emotionally or ensure effective communication with the patient. (Patients with Intellectual and/or Developmental Disabilities and/or cognitive impairments, including dementia, make it difficult for them to communicate, understand health care information or make health care decisions, or perform activities of daily life.)
- A spouse, partner, sibling, parent, doula or other person of their choice who may accompany a Labor and Delivery patient throughout labor, delivery, and the postpartum period, including recovery, until discharge to home.
- A parent or a person designated to be with a pediatric patient at all times, including during pediatric procedures
- An individual who is designated to remain with patients in imminent end-of-life situations

#### **IV. PROCEDURES:**

##### **A. Each patient (or the patient's support person or representative, where appropriate) has the right to choose who may visit them during an inpatient stay and the right to withdraw or deny consent at any time.**

1. At the time of admission to the hospital, each patient (or the patient's support person or representative, where appropriate) is advised of the hospital visitation policies, in writing, through the receipt of the Patient Guide.
2. The Hospital shall accept verbal confirmation from a patient or the patient's support person or representative, where appropriate, of individuals who shall or shall not be allowed to visit as well as, other individuals specified in policy who will support the patient during the hospital stay and may exercise the patient's visitation rights and care decisions on patient's behalf, if the patient is unable to do so.
3. In the event the patient is a minor, the legal parent/guardian shall be given the opportunity to verbally designate the individuals permitted to visit. The hospital shall allow at least one parent/guardian to remain with the patient at all times.
4. St Barnabas Hospital encourages a quiet healing environment after 8 p.m. An announcement will be made at 7:30 p.m. in English and Spanish to remind visitors that visiting hours are drawing to a close. An additional announcement will be made at 9:00 p.m. to reinforce this. Visitation after this time will be managed by nursing services.
5. All visitors and/or support persons shall enter through the hospital's main lobby. From 8 pm. to 6 am., all visitors and/or support persons shall enter through the Emergency Department.

##### **B. General Visitation Guidelines-Inpatient Services**

1. All visitors and support persons are to enter through the main entrance.
2. There can be a maximum of two people at the bedside with the ability for visitors to rotate.

3. General Hospital visiting hours are from 11 a.m. – 8 p.m. 4. All visitors must be 12 years or older except in rare exceptions, as determined by the hospital. Anyone below the age of twelve (12) must be accompanied by an adult.
4. All Visitors must remain in the patient's room during patient visitation
5. **Overnight Visitation:**
  - a) Overnight visitors are not permitted to stay at the patient's bedside unless the patient is in a private room.
  - b) Overnight visitation is allowed under special circumstances with the approval of the Nurse Manager/Supervisor. Only one family member/significant other may stay overnight in the room.
  - c) In critical care areas, overnight visitors will not be permitted to stay in the patient's room. The waiting room/lounge will be used for this purpose.
6. **Visiting Hour Modification:**
  - a) There may be unique and extenuating circumstances (i.e. imminent death, impending surgery, etc.) that require compassionate exceptions to these visiting hours. Nurse Director/Manager/Supervisor/Physician using professional judgment and in collaboration with the patient or the patient's support person or representative, where appropriate, will consider the unique family circumstances and patient needs when applying these guidelines to the extent that it is feasible.

### **C. Specific Unit Designated Visitation Guidelines:**

1. **Labor and Delivery:** The Labor and Delivery (L&D) Unit can have a maximum of two support persons for the labor, delivery, and remaining duration of the patient's stay. In L&D, the support persons can be the patient's spouse, partner, sibling, parent, or other persons of their choice.
  - a) All L&D visitors or support persons must ring for entrance to the unit
  - b) Support person and/or doula\* will not be permitted during patient triage (evaluation) or fetal testing
  - c) Admitted patients in labor and delivery will be **permitted two consistent, healthy support persons for the labor, delivery and remaining duration of the patient's stay.**
  - d) If the patient identifies a doula, the doula is permitted, in addition to the identified two support persons
  - e) Two visitors are permitted in labor & delivery.
 

\*At this time, the support person(s)/doula do not require COVID-19 testing. If community transmission rates increase significantly, then support/doula testing may be reinitiated.
2. **Maternal Child Health:** St Barnabas Hospital respects the safety and security needs of our smallest patients by following these guidelines:
  - a) For the benefit of our mothers and their babies, general visiting hours in the Family Birthing Center are only from 11 am. to 8 pm.
  - b) All Maternal Child visitors or support persons must ring for entrance to the unit.
  - c) Only four people may visit with mother and baby simultaneously. There is a waiting room for additional visitors in the main lobby.

- d) Siblings of the new baby are encouraged to visit, as long as they are accompanied and monitored by an adult.
- 3. **NICU:** There may be a maximum of 2 visitors or support persons at the bedside.
  - a) The visiting hours for siblings 12 and under are 1 p.m. to 4 p.m. on Saturday. Siblings must be accompanied by an adult.
  - b) Adult visitors or support persons are permitted 24/7 except at 7 a.m. to 8 a.m. and 7 p.m. to 8 p.m.
  - c) All NICU visitors or support persons must ring for entrance to the unit
- 4. **Inpatient Pediatrics:** Pediatric patients may have two designated support persons with them at all times and these individuals may rotate.
  - a) If there is no other parent or guardian available, the present parent/guardian will be asked to remain in the patient's room.
  - b) All pediatric visitors or support persons must ring for entrance to the unit
- 5. **ICU, IMCU and SICU:** Two visitors and/or support persons are allowed per patient for 10 minutes per hour. Visitors can rotate.
- 6. **Psychiatry Units** (Kane 2 and Kane 3)
  - a) Visits are limited to 1 p.m. to 2 p.m. and 6 p.m. to 7 p.m.
  - b) Visiting is limited to 30-minute sessions allowing all patients a visitor.
  - c) Visitors are limited to two persons during that session unless, at the hospital's discretion, a limited number of additional persons is appropriate for team meetings, family meetings, and other care planning needs. If more than one visitor arrives at the same time, only one will be permitted at a time. The other visitors must wait in the Main Lobby.
  - d) Only food or liquids to be consumed during the visit are permitted. All foods/liquids must be in a **clear plastic** container. Glass/ceramic is not allowed. Two-liter bottles of liquid are not allowed. Any food/beverages not consumed at the end of the visit cannot be stored on the unit and must be brought home by the visitor.
  - e) Once in the facility, visitors must remain in the Day room throughout the visit except when directed by hospital staff. Visitors who fail to adhere to this will be asked to leave.
  - f) Depending on infection rates, visitors of Kane Units will be required to wear a mask at all times while on the unit.
  - g) Signage will be displayed in the Main Lobby instructing visitors of the mask mandate.
  - h) Visitors will be screened for COVID-19 symptoms by nursing staff upon entry to the unit.
- 7. **Emergency Department**
  - a) A maximum of one visitor or support person will be allowed at the bedside if approved or requested by the physician or charge nurse.
  - b) A visitor system has been implemented that provides passes for each visitor or support person of the Emergency Department. The number of visitors/support persons per patient is tracked using a log book.
  - c) As the emergency department does not have patient rooms,

visitation will only be allowed for:

- i. Critical situations as determined by the physician or charge nurse
- ii. Imminent end-of-life situations
- iii. Patients for whom a support person has been determined to be essential to the care of the patient.
- iv. Pediatric patients will be allowed one visitor or support person per patient for the duration; parent or legal guardian only.
  1. If there is no other parent or guardian available, the present parent/guardian will be asked to remain in the patient's room.
- v. Visitor restriction of "**No Visitation**" is enforced in ED 4 as a medical necessity, unless the services of a support person is required

#### **D. Visitation Guidelines for Patient-Specific Conditions:**

1. **Patients with Intellectual and/or Developmental Disabilities (I/DD) and/or Cognitive Impairments:** Patients with Intellectual and/or Developmental Disabilities (I/DD) and/or patients with cognitive impairments including dementia, may designate one support person to remain with them through their hospitalization, and additional visitors may also be with the patient during hospital-designated visiting hours.
2. **COVID Patients in Inpatient Units**
  - a) Once permitted entry, visitors and/or support persons must report directly to the nursing unit of the patient they are visiting.
  - b) COVID patients are permitted two visitors or support persons at the bedside. There can be a maximum of two people at the bedside with the ability for visitors or support persons to rotate
  - c) Visitors and/or support persons visiting COVID-positive patients will be given and shown how to wear a KN-95 mask.
  - d) Nursing staff will review hand hygiene and the use of PPE while visiting.
  - e) Visitors and/or support persons are not permitted to wander around the hospital; they must stay in the patient's room.
3. **End-of-Life Situations:** Imminent end-of-life is defined as a patient who is actively dying, where death is anticipated within less than 24 hours.
  - a) In the event the patient is a parent of a minor child, one adult family member and one child may be permitted at the patient bedside
  - b) Up to two support persons may also be designated to remain with patients in imminent end-of-life situations.
4. **Patient Expiration:** If a family arrives while the patient's body is still on the unit before postmortem care is completed, the family may be allowed to view the patient's body on the unit.
  - a) The patient's body will be transferred to the morgue within 2 hours

after the patient's expiration pronouncement. If an exception needs to be made, the Nursing Director should be contacted.

**Note:** Any additional visitor exceptions and/or extenuating circumstances will be addressed by the charge nurse and Attending physician.

#### **E. Screening of Visitors and Support Persons**

1. Before entering the hospital, all visitors and support persons must first go to the concierge. The concierge will check to see if the patient has any visitor restrictions.
2. Visitors and/or support persons can use the Kiosk located in the Main Lobby that screens and tracks all inpatient visitors.
3. Visitors and/or support persons will be asked to provide a state or government-issued form of identification.
4. If the patient has no restrictions, the concierge will give the visitor and/or support persons a pass with the patient's room and bed number.
5. A Security Officer is in attendance in the Lobby for any additional assistance
6. The Concierge will record all visitors and/or support person's names, contact information, dates of visit, and names of patients to be visited in an electronic log.
7. The visitor and/or support person will then show the pass to the Security Officer to gain entry to the hospital.
8. Visitors and/or support persons who present with or develop symptoms of COVID-19 will be asked to leave. They should be told to contact their primary care physician.
9. If a patient has come for a hospital outpatient visit/procedure and has mistakenly come to the main entrance, he or she will be permitted to pass through to go directly to the Ambulatory Surgery area.

#### **F. Visitation Restriction Guidelines.**

1. Except when the patient chooses to restrict visitors, limitations on the presence of these individuals may be appropriate in exceptional circumstances, such as when:
  2. There is a legal reason that is documented in the chart, (e.g., a restraining order or the patient is in legal custody with a court order prohibiting visitors).
  3. Their behavior creates a direct risk or threat to patients, families, staff, or others in the immediate environment or is disruptive of the functioning of the patient care unit.
  4. They have a contagious illness or have had known exposure to a communicable disease that would jeopardize the patient's health.
  5. An infectious disease outbreak in the community requires severe access restrictions. Hospitals can develop a fail process for selected family members to have access to the patient and ensure that families understand any risks they may be subject to by choosing to stay with their family members in the hospital.

The hospital may choose to limit family movement or access to specific areas within the hospital (e.g., public areas such as cafeterias, family lounges).

6. A patient in a shared room requires immediate lifesaving measures (e.g. resuscitation) or a sensitive/private discussion needs to occur. In these instances, those present with the other patient may be asked to temporarily step out of the room.
7. Decisions to restrict or limit presence must be discussed with the patient and documented in the medical record.

## **G. Visitation Guidelines for Patient Outpatient Services**

### **1. Procedures and Surgery in Ambulatory Surgery**

- a) All patients are to enter through the hospital's Ambulatory Surgery entrance.
- b) Patients should be educated to come to the Ambulatory Surgery Entrance when they call to schedule an appointment.
- c) Patients undergoing same-day procedures/surgery will need an adult escort available to accompany them home. Escort can wait on site but there is limited waiting room availability. They should bring the **contact information** for their escort on the surgical/ procedural day we will contact the patient's escort when the patient is ready to be discharged and transport the patient directly to the waiting room for discharge.
- d) Patients undergoing outpatient ambulatory surgery procedures and/or surgery **may have** one companion or support person.
- e) **Companions or Support Persons may NOT be present during procedures and recovery room** except for pediatrics, childbirth, and patients with an intellectual, developmental, or other cognitive disability.
- f) Patients are asked to come on time for their scheduled ambulatory surgery procedure or surgery appointment

### **2. Outpatient Appointments and Procedures within the Main Hospital**

- a) The patient must first go to the concierge.
- b) The concierge will ask the patient why they are here and confirm reason for visit.
- c) Once the appointment has been confirmed, the concierge will provide the patient and any companion/support person, with the location of the appointment.
- d) Patients or companion/support person who present with or develop symptoms of COVID-19 will be asked to leave. They should be told to contact a physician/call center.
- e) Patients or companions no longer undergo active screening upon entry to SBH facilities but are required to report any COVID-19 symptoms upon entry.
- f) Visitors who have had COVID in the last 10 days, or were exposed to someone with COVID in the last 10 days should not visit until after the 10 days. Visitors who are ill should not visit until symptoms resolve.
- g) The patient and companion/support person must go directly to the assigned location to register and then to their schedule appointment or procedure.

### **3. Ambulatory Care Center Outpatient Appointments**

- a) The Concierge will ask the patient why they are here and confirmed the reason for the visit.
- b) The patient will be referred to the designated floor for their appointment.
- c) Patients are asked to come on time for their appointment. If the patient is more than 1 hour late for their appointment, they may be rescheduled.
- d) Patients can bring one companion or support person with them to the appointment. Children who are being seen should have one caregiver or support persons.

### **H. Patient Visitation Rights**

1. If any patient believes that his or her patient visitation rights are being violated, they may file a complaint using the Hospital's internal complaint process established via notification to the Patient Relations Department.
2. The patient also has the right to file a complaint utilizing the following mechanisms:
  - a) The New York State Department of Health
  - b) The Joint Commission
  - c) Medicare beneficiaries may file a complaint through IPRO (Island Peer Review Organization)



**CROSS REFERENCE:**

Administrative Policy: Patient Rights and Responsibilities

COVID-19 Respiratory Illness Prevention and Control on Inpatient Maternity Units

**REFERENCES**

Department of Health Section 405.7

CMS § 482.13 Condition of participation: Patient's rights

NYSDOH Guidance for use of Face Masks and Face Coverings in Healthcare Facilities

02/10/2023

NYSDOH DHDTA DAL #:23-11 Revised Visitation Guidance 12/18/2023

The Joint Commission Comprehensive Accreditation and Certification Manual

**APPENDIX A**

**Main Hospital Visiting Hours**

<b>Service</b>	<b>Hours</b>
Medical, Surgical and Pediatrics	11:00 am – 8:00 pm Visitors can rotate 2 support persons per patient at bedside
Medical/Surgical	No children under the age of 12 years
Neonatal Intensive Care Unit	Siblings: Every Saturday 1:00 pm – 4:00 pm
	Parents and Grandparents: 24 hours except 7:00 am – 8:00 am, and 7:00 pm – 8:00 pm
Intensive Care Unit	11:00 am – 8:00 pm 10 minutes per hour Visitors can rotate 2 visitors per patient
Hospice	Visitation hours are 24/7 Maximum 4 people at bedside
Maternity	4 people may visit at a time.
	Husband/Partner: 10:00 am – 10:00 pm
	General Hours: 11:00 am – 8:00 pm
	Siblings 12 and below (must be accompanied by an adult): 4:00 pm – 5:00 pm
During flu season, children under 12 years of age are not permitted to visit unless vaccinated for the flu.	
Labor & Delivery	Two designated support persons are permitted at the bedside in addition to a doula.
Children under 18 not permitted unless the patient has received permission in writing from the Labor & Delivery manager or administrative supervisor.	
Psychiatry Units (Kane 2/Kane 3)	1:00 pm – 2:00 pm daily 6:00 pm – 7:00 pm daily The minimum age of visitors to the psychiatric units is 16 years old.
ED – Adult / Pediatrics	1 visitor to be determined by physician or charge nurse
ED – Psychiatry	No visiting hours.