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 Owner: Cynthia Sidley: Exec Dir
 Nursing
 Policy Area: Patient's Rights and Ethics
 References:
 Applicability: WA - SWSA - St. Peter
 Hospital, Centralia Hospital

Visitor Policy During Pandemic

PURPOSE:

Our goal is to compassionately care for our patients and family members while promoting caregiver and community safety and responsible stewardship of resources.

APPLIES TO:

This policy applies to caregivers (all employees) and representatives of Providence Health & Services Southwest Washington Service Area (SWSA), all inpatient, observation and outpatient areas during periods of Code Triage. (For additional information on Code Triage refer to SWSA Emergency Operations Plan (EOP).

POLICY STATEMENT:

Crisis State: (As determined by the Facility Incident Commander)

1. General
 - A. Visitors are restricted, except as described below:
 - B. Patients are allowed to have an Essential Support Person (ESP) accompany/visit them if the patient meets any of the following criteria:
 - i. Under the age of 18
 - ii. Altered mental status or developmental delay
 - iii. Dementia
 - iv. Disabilities requiring assistance with ambulation/communication/etc.
 - v. Language barriers without ability to access interpreter
 - vi. Hearing or vision impairment
 - vii. Requirement for a 24-hr caregiver
 - viii. Debilitating anxiety OR
 - ix. Psychosocial trauma
 - C. ESP must be screened and meet screening criteria prior to entry into the facility. Those who do not meet criteria are not allowed entry under any circumstances.

- D. Patients who are COVID + or a Person Under Investigation (PUI) are not allowed to have Visitors/ESP with the exception of end of life.
 - i. Spiritual Care and the Care team may determine alternative visitation measures.
- E. Spiritual Care Ritual Needs
 - i. Visiting Priests/Clergy must follow hospital safety policies, including screening for COVID, must follow proper infection prevention practices (such as hand washing/sanitizing, and physical distancing) and must wear a face mask.
 - ii. The Director of Spiritual Care (designee) will ensure that Priests/Clergy members wishing to visit a COVID +/PUI patient has completed fit testing and PPE training prior to being allowed to visit.
 - a. The Director of Spiritual Care (or designee) will assist Priests/Clergy to complete fit testing and PPE training as requested.
 - iii. When a visit has been requested for a COVID +/PUI patient, the following guidelines will be utilized to ensure the safety and respect of all.
 - a. The on-call Chaplain will contact an appropriately trained Priest/Clergy member and request a visit.
 - b. The Chaplain will appropriately communicate with security, the Administrative Supervisor and the unit Charge nurse regarding the Priests/Clergy's arrival.
 - c. Upon entry to the facility, the Priest/Clergy will be appropriately screened.
 - d. When necessary the Chaplain will escort the Priest/Clergy to the patient's location.
 - e. The unit staff will assist the Priest/Clergy to appropriately don PPE.
 - f. The Priest/Clergy will complete the visit.
 - g. The Priest/Clergy will then appropriately exit the room, doff his PPE, and clean and sanitize his hands and face shield. Staff will assist with appropriate doffing/cleaning as needed.
 - h. The Priest/Clergy will then exit the facility.

Out-patient Procedures/Surgical Services visitor exception criteria (see [attached algorithm](#)):

1. Patients may have one Essential Support Person accompany them to the surgery waiting area
2. Patients under 18 may have one Essential Support Person with them before and after surgery, who wait in the surgery waiting room during the procedure
3. All patient drivers will be asked to provide contact information for post-procedure notification
 - A. The contact information will be tested prior to the driver leaving the facility
 - B. The driver will be contacted by the provider, via phone, following the procedure
 - C. Discharge teaching will be provided via phone. If visual is required, this will occur away from other people in the lobby area

Women and Children's Services (see [attached algorithm](#))

1. **Pediatrics** (see attached algorithm) exception criteria for visitation
 - A. One Essential Support Person (parent/guardian) permitted at a time.

- B. Must remain in patient's room other than to go to cafeteria for food as needed.
 - C. Allowed to leave the facility once each day for personal care and return to facility
2. **Special Care Nursery** (see attached algorithm) exception criteria for visitation
- A. Two Essential Support Persons (parents/guardians) are permitted to visit
 - B. No siblings allowed
 - C. Must remain in patient's room other than to go to cafeteria for food as needed
3. **OB Triage / Antepartum** (see attached algorithm)
- A. No Essential Support Person allowed. This is considered an emergency triage area and once the patient enters the Family Birth Center (FBC), the visitor must leave.
 - B. The patient may contact the ESP/driver letting them know if she is being admitted or going home
 - C. If the patient is moved to a labor room, the Essential Support Person may be notified by the patient to come to the FBC.
4. **Labor & Delivery** (see attached algorithm)
- A. One Essential Support Person allowed to remain with mom for duration of stay, including Mother/ Baby unit.
 - B. Professional doula is considered part of the labor care team and will be allowed once the provider determines the patient to be in active labor
 - C. Once delivery occurs or the patient leaves the labor room for a Cesarean Section, the doula must leave the facility
 - D. Must remain in patient's room other than to go to the cafeteria for food as needed
 - E. Allowed to leave the facility once each day for personal care and return to facility

End of Life, Comfort Care, or Recently Deceased (see [attached algorithm](#))

1. Spiritual Care and the Care Team should be consulted and involved in facilitating visitation for these patients. Security will be notified by Spiritual Care/Floor Staff with names of expected Essential Support Person(s) approved to enter the facility.
2. Visitor for End of Life, Comfort Care, or Recently Deceased
 - A. Determined/authorized by legal surrogate. (See attached [EOL Patient Daily Visitor Form PSPH](#))
 - B. Two visitors may be present at the same time.
 - C. Unless stated above, there is no time limitation for the visit.
 - D. Must remain in the patient's room other than to go to the cafeteria for food as needed.
 - E. Allowed to leave the facility once each day for personal care and then return to the facility.
3. Visitor for End of Life COVID+ Patients (see attached [Designated Visitor Guidelines](#))
 - A. Legal surrogate will determine/authorize up to 6 designated visitors for one visit with patient. (See attached [EOL Patient Daily Visitor Form PSPH](#))
 - A. Minors under the age of 13 will not be permitted to visit
 - B. Clinical staff will educate visitors on potential risks associated with visiting COVID+ patients. Staff will provide Visitor Guidelines to each visitor and provide instruction on proper donning/doffing of PPE.

Staff will document visitor education in EMR for each visitor (by name).

- a. See attached [EOL COVID+ Patient Visitor Nursing Checklist](#)
- C. Two visitors may be present in the room at the same time with visit limitation of up to four hours. If the patient is on a ventilator, the visit will be limited to one hour and visitors may be asked to view the patient from the doorway as determined by clinical staff.
- D. Visitor must adhere to PPE guidance of clinical staff.
- E. Exceptions will need approval of the Visitor Exception Team (VET) (See attached [VET Exceptions Guidance Form](#))

4. Definitions:

- A. **End-of-Life** (high likelihood that patient will die within 12-24 hrs).
- B. **Comfort care** transitions (compassionate extubation, transitioning off BIPAP/high flow O2, starting full comfort measures with anticipated in-hospital death).
- C. **Recently Deceased:** The time immediately after a patient has expired until the deceased patient's body is removed from the room.
- D. **Visitor Exception Team:** The composition of VET members will include the Nursing Supervisor and one or more of the following: Department Manager or Director, Administrator on call, or the Hospital Chaplain.

Modified Crisis: (As determined by the Facility Incident Commander)

1. Visitors are allowed on identified units, as described below. (Note: ESPs continue to be allowed as defined under Crisis State listed above.)
 - A. **Critical Care Unit (CVICU and NTICU)**
 - a. Patients may request one ESP to visit during his/her stay while in Critical Care.
 - b. Visitation will be limited to the hours of:
 - i. 1000 to 1200
 - ii. 1600 to 1800
 - B. **Pediatrics**
 - a. Two ESP (parents/guardians) will be allowed to visit.
 - b. No siblings will be allowed.
 - c. Must remain in the patient's room other than to go to the cafeteria for food as needed.

Conventional State: (As determined by the Facility Incident Commander)

1. Return to regular [Visitor Guidelines Policy](#) #86100-PRE-040 when Code Triage status has been resolved.

CONTRIBUTING DEPARTMENTS

- Spiritual Care

ATTACHMENT:

1. [Designated Visitor Guidelines](#)

2. [End of Life Algorithm](#)
3. [EOL COVID+ Patient Visitor Nursing Checklist](#)
4. [EOL Patient Daily Visitor Form \(PSPH\)](#)
5. [EOL Patient Visitor Screening Process](#)
6. [VET Exceptions Guidance Form](#)
7. [Surgical Services Algorithm](#)
8. [Women and Children's Algorithm](#)

OWNER:

Executive Director of Nursing - PSPH

ADMINISTRATIVE APPROVAL:

Regional Chief Nursing Officer, SWSA

All revision dates:

2/9/2021, 8/31/2020, 7/1/2020, 6/9/2020, 4/3/2020

Attachments

[Designated Visitor Guidelines](#)
[End of Life Algorithm](#)
[EOL \(End of Life\) COVID + Visitor Nursing Checklist-PSPH](#)
[EOL Patient Daily Visitor Form \(PSPH\)](#)
[EOL Patient Visitor Screening Process](#)
[Surgical Services Algorithm](#)
[VET Exceptions Guidelines](#)
[Women and Childrens Algorithm](#)

Approval Signatures

Approver	Date
Jennifer Sipert: Mgr Patient Safety	2/9/2021

Applicability

WA - Providence Centralia Hospital, WA - Providence St. Peter Hospital