POLICY AND PROCEDURE

SCOPE

This policy applies to all Brooks workforce members which for the purposes of this policy refers to all directors, officers, managers, employees, medical staff, contractors, volunteers, students and others associated or affiliated with Brooks Rehabilitation Hospital University Campus and Brooks Rehabilitation Hospital Bartram Campus.

Any workforce member found to have violated this policy may be subject to disciplinary action up to and including termination of employment or termination of services agreement/contract as may be applicable.

PURPOSE

The purpose is to define a mechanism for identifying and monitoring visitors and vendors.

POLICY

All Patient Visitors, Vendors, and Contractors are required to be identified and monitored throughout their time at Brooks Rehabilitation Hospital. Brooks’ staff members will adhere to the following guidelines in order to fulfill this policy.

PROCEDURE

Patient Visitors

1. Public visitation and general access to patients is regulated to provide the most effective environment for care management and safety for patients and staff.
2. Visitors are allowed in the PT/OT, Speech, and Psychology areas only at the request of the therapist.
3. Visitors are limited to two visiting in semi-private rooms. For special events or larger groups, visitation can occur in community areas.
4. Visiting hours are between 8 a.m. and 8 p.m. If a visitor would like to stay overnight, he or she must be admitted between visiting hours of 8 a.m. to 8 p.m. and receive an overnight badge form the security desk in the admission lobby.
5. There are no time constraints for the length of visitation.
6. Visitors cannot be compelled to provide proof of vaccination or immunization status.
7. We will not restrict the allowance of consensual physical contact between a resident and a visitor.
8. Visitors are expected to be as quiet as possible during their presence on the floors.
9. Children under the age of twelve (12) years may visit; however, the following restrictions apply:
a. A responsible adult is expected to accompany and supervise the child.
b. If the child leaves the patient's room, the responsible adult must accompany the child.

In the event that the guidelines are not followed, or the child's behavior is disruptive, the nurse manager or designee may require that the child leave the unit with the responsible adult.
10. No pediatric patient may leave the unit unless under supervision of a staff member, parent or guardian, or family member given written permission by parent/guardian.

11. All visitors are expected to follow Isolation Guidelines as described at end of policy; Infection Control

12. Exceptions to these rules may be made by the nurse manager or designee. In the event of difficulty regarding enforcement of these policies, hospital security is contacted. Exceptions of these rules are communicated to appropriate parties.

13. All staff members assume the responsibility for the first line enforcement of these policies.

14. In circumstances wherein public or media problems may develop, the administrator on call is contacted.

15. Off-duty employees are discouraged from visiting patients.

16. If visitation is restricted, the patient's chart is tagged for “Restricted Visitors” and a sign is placed on the door of the patient’s room directing all visitors to check with the nurse. This process is used for patients under legal custody or patients who are designated “confidential”.

17. If the patient requests “no visitors,” Admissions will indicate this in the computer. This will eliminate their name from the hospital directory.

18. Visitation guidelines subject to change to accommodate special circumstances.

**Overnight Patient Visitors**

1. If the patient is in a private room, a family member/designee may request to stay, or nursing staff may request, someone to stay with the patient.

2. The overnight visitors are approved by the nurse manager or the supervisor. The nurse lists them at the unit secretary’s desk. Security officer will provide the “Overnight Visitor” badge. The visitor staying overnight is expected to wear the “Overnight Visitor” badge at all times. The badge is collected by Nursing when the visitor is no longer staying overnight.

3. The family member/visitor who stays overnight must participate in the care of the patient and must be able to care for themselves.

4. Overnight visitor must be 18 years or older with a picture ID.

5. For pediatric patients, a parent/guardian or designee is encouraged to stay with the child and participate in the patient’s care.

6. The person staying overnight will rest on a futon couch where available at bedside for this purpose. A cot may be provided if it does not interfere with patient care or present a safety hazard in the room.

7. Should any family/friend staying overnight interfere with the patient’s care, the nurse manager or supervisor will ask the visitor to leave.

8. Any exceptions to these rules will be at the discretion of the nurse manager/supervisor and communicated to the appropriate parties.

**Pediatrics**

In addition to the above:

1. Only parent or guardian may stay overnight as warranted, in order to assist in the provision of care. An "Overnight Visitor" badge must be worn at all times. Any variations in these guidelines must be approved by the nurse manager/supervisor, or the physician. Any exception to parent or guardian is determined by the treatment team 24 hours in advance. Exceptions will be communicated to the appropriate parties.
**Contractors/Vendors**

1. Contractors/Vendors and non-patient visitors should have a scheduled appointment.
2. Upon arrival, all contractors/vendors and/or non-patient visitors are expected to sign in at the front reception desk. Individuals are issued "Contractors/Vendor" badges and directed to the appropriate persons. If a prior appointment was not made, the receptionist contacts the staff member to determine his/her availability. Established patient appointments and other management commitments take precedence over unscheduled calls by vendors.
3. While on facility property, contractors/vendors and/or non-patient visitors must adhere to the appointed schedules.
4. If physicians request medical/service representatives to meet with specific staff members, it is the responsibility of the representatives to notify staff of the physicians' requests and to schedule appointments prior to the visits.
5. The appropriate manager, prior to assembly, approves Contractors/Vendors displays in the facility.
6. The appropriate individual is notified immediately of any delivery made to the facility. All deliveries are removed from public areas and properly stored in a timely manner.
7. The exchange of information, product knowledge, and procedural knowledge is encouraged. However, it must be presented in a manner, which does not hamper operations nor disrupt the care of patients.
8. The contractor/vendor badge must be turned in at the front desk when leaving the building.
9. Off-duty employees are discouraged from visiting patients.
10. If visitation is restricted, the patient’s chart is tagged for “Restricted Visitors” and a sign is placed on the door of the patient’s room directing all visitors to check with the nurse. This process is used for patients under legal custody or patients who are designated “confidential”.
11. If the patient requests “no visitors,” Admissions will indicate this in the computer as Confidential which shows in the directory as “Last Name, First Name”.

**Infection Control**

**SARS-COV-2 General Precautions**

1. See Frequently Asked Question Regarding Hospital Visitation found in Road to Recovery Handbook and Brooks Hospital Home Page.
2. Every Visitor must self-screen for symptoms prior to entering the hospital and leave premises if feeling ill or experiencing symptoms such as fever, cough and/or loss of taste or smell.
3. Every visitor must report a close contact exposure and/or a positive test resulting in the last 10 days and not visit the hospital until the appropriate quarantine or isolation period has passed. Brooks is following quarantine and isolation guidelines for hospital settings based on CDC recommendations.
4. Physical distancing is encouraged and signs are posted throughout hospital.
5. Visitors are to remain in rooms when on the units.
6. Visitors are to wear masks at all times, unless eating or sleeping.
7. May have multiple different visitors, just limited to 2 at a time.
8. Visitor Restrictions subject to change based on Community Transmission rates, Hospital Surge and/or DOH, CDC, and state requirements. Future visitation restrictions aimed at the least restrictive measures necessary to keep our patients safe with alternative options including but not limited to window visits, outdoor visits, decreased visitation hours and/or decreased number of visitors or designated visitors.

9. Patients and Visitors will be educated on infection control and any visitor restrictions via Brooks Hospital Home Page, Road to Recovery Hand Book, Hospital Signs, verbal notification &/or handout/flyers.

General Guidelines for Visitors visiting patients on Contact Isolation for a MDRO

1. All visitors are encouraged to wear appropriate PPE when in contact patients’ rooms especially when participating in patient’s personal care and/or caregiver is vulnerable to infection or in contact with someone at home who is vulnerable to infection.

2. Visitors to contact rooms may not visit other patient’s rooms unless full compliance with transmission based precautions in place by visitor.

3. Frequent hand hygiene is encouraged for all visitors and signs are throughout the hospital.

REFERENCES

