SUBJECT: VISITOR LIMITATIONS POLICY

APPROVED BY: ____________________________________________________________
Administration

POLICY

Due to the community spread of coronavirus 2019 (COVID-19), considerations must be made for the safety of health facility staff and patients resulting in many health care facilities suspending visitation, except when medically necessary or essential to the care of the patient. The California Department of Public Health (CDPH) and Arrowhead Regional Medical Center (ARMC) recognize the importance that visitors play in the mental well-being of patients, including pediatric patients, patients in labor and delivery, and patients at end-of-life. ARMC considers visitors an essential part of patient care and recovery.

Arrowhead Regional Medical Center has adopted CDPH’s recommended visitor guidelines for certain patients to ensure support for their mental health and well-being, while striving to limit the spread of the virus. (See Attachment A). This policy is not applicable to any hospital based alternative care sites. Of note, rare exceptions may be made in certain specific instances as determined by Hospital Administration. Support persons, who must be either be a parent and/or 18 years of age or older, may be allowed to visit as follows:

PROCEDURES

I. Visitation

A. Pediatric Patients
   1. Visitors are essential for the mental health of pediatric patients. CDPH recommends that pediatric patients be allowed one (1) support person per day.
   2. In the case of prolonged hospitalization (6 days or more), CDPH recommends two designated support persons for pediatric patients, provided that only one visitor is present at a time.
   3. If a pediatric patient is at end of life, two support persons may be allowed at the same time.

B. Labor and Delivery Patients
   The presence of a partner or support person is essential to the mental health of patients who are in labor and delivery. CDPH recommends that one support person be allowed to be present with the patient. This allowance will be per day.
C. Patients at End-of-Life
Visitors are essential to the mental health of patients who are at end-of-life. For their continued mental health, and well-being, the CDPH recommends that one visitor be allowed to be present with the patient per day.

D. Patients with Physical, Intellectual, and/or Developmental Disabilities and Cognitive Impairments
The presence of a support person is essential to patients with physical, intellectual, and/or developmental disabilities and patients with cognitive impairments. CDPH recommends that one (1) support person be allowed to be present with the patient when medically necessary. For hospitalized patients, especially with prolonged hospitalization (6 days or more), the patient or family/patient representative may designate two support people, but only one support person may be present at a time.

E. Patients in the Ambulatory Care Setting (not including the Emergency Department)
   a. Patients are allowed one (1) support person when they attend visits in the Ambulatory Care Setting. This includes all Outpatient Visits and Same Day Surgery except as noted in Section E(b) below.
   b. Patients with an appointment for a Non-Stress Test (NST) clinic are not allowed visitors.

F. Patients in the Emergency Department
   a. No visitors will be allowed for COVID-19 Positive or Persons Under Investigation (PUI).
   b. Low risk patients, in need of a support person, may have one visitor under the discretion of the provider, only after the patient is settled into an assigned room/location. The visitor must stay with the patient in the assigned room/location.

G. Inpatients with Medical Necessity, Non-COVID, Non-PUI
   a. Justification for medical necessity must be verified and approved by the Attending physician and the Visitor Exemption Request must be completed. (See Attachment B).
   b. In the case of a prolonged hospitalization, (6 days or more), CDPH recommends two designated support persons, however, only one visitor may be present, per day.
   c. For either medical necessity or prolonged hospitalization, only one guest per day may visit between the hours of 10:00am – 6:00pm. The guest must remain in the patient room.

H. Discharge Planning
Outside facilities may need to send a provider to conduct an on-site assessment of a patient to assist with a transfer to another level of care outside of ARMC. This will be allowed provided:
   a. The visitor is screened upon entry and is negative for COVID symptoms, and
   b. The visitor complies with ARMC’s policy to wear a mask and any other personal protective equipment as provided in Section III below, and

II. COVID-19 Positive Patients and PUIs
A. Visitation of COVID-19 positive patients is generally prohibited and will be allowed only in the manner provided below:
   1. End of Life - Consistent with the limitations already provided in Section I(C), the visitor will only be allowed provided:
      a. The visitor is screened upon entry and is negative for COVID-19 symptoms,
      b. The visitor complies with ARMC’s policy to wear a mask and any other personal protective equipment as provided in Section III below, and
      c. Only if the COVID-19 patient is in the ICU. With this, the visitor may observe from outside of the room and may not be allowed to enter.
2. Pediatrics – COVID-19 pediatrics patients may be allowed visitation consistent with Section I(A) above but with additional limitations as follows:
   a. The visitor is screened upon entry and is negative for COVID symptoms,
   b. The visitor complies with ARMC’s policy to wear a mask and any other personal protective equipment as provided in Section III below,
   c. Only one (1) support person is allowed for the entire duration of the visit, and
   d. The support person is not allowed to leave the patient’s room. Once the support person leaves the patient’s room, they support person is not allowed to return until the patient is COVID-19 negative or the patient is discharged.

III. Support Persons and Enforcement

   A. All support persons must stay in the room unless otherwise recommended by the healthcare team and are not allowed in and out privileges in the hospital.
   B. Support persons must be asymptomatic for COVID-19, and not be a suspected or have confirmed COVID-19 transmission within the last 6 weeks. Support persons may be screened prior to entering the clinical areas. Support persons must comply with any health facility instructions on personal protective equipment that at minimum include wearing a mask.
   C. Visitors should minimize physical contact with patients and staff pursuant to ARMC guidelines.
   D. Visitors who refuse to comply with ARMC’s infection control measures may be asked to leave the premises.
   E. CDPH strongly encourages facilities, including but not limited to skilled nursing facility (SNF), to create ways for residents and patients to have frequent video and phone call visits. If shared devices are used for video calls, facilities should ensure appropriate infection control measures are in place.

IV. Additional Resources

   A. Hospitals may permit students obtain their clinical experience as a part of an approved nursing, medical, pharmacy and radiology training program into the facility if they meet Centers for Disease Control guidelines for healthcare workers.
State of California—Health and Human Services Agency
California Department of Public Health

SONIA Y. ANCELL, MD, MPH
State Public Health Officer & Director

GAVIN NEWSOM
Governor

August 7, 2020

TO: All Facilities

SUBJECT: Visitor Limitations Guidance
(This AFL supersedes AFL 20-38.3)

All Facilities Letter (AFL) Summary

• This AFL notifies all facilities of updated visitor guidelines for pediatric patients, patients in labor and delivery, neonatal intensive care unit (NICU) patients, pediatric intensive care unit patients (PICU) patients, and patients at end-of-life and patients with physical, intellectual, and/or developmental disabilities and patients with cognitive impairments.

• Health facilities may permit a support person to accompany a patient for whom a support person has been determined to be essential to the care of the patient (medically necessary), including patients with physical, intellectual, and/or developmental disabilities and patients with cognitive impairments.

• This AFL has been updated to clarify that long-term care facilities and hospitals may permit students obtaining their clinical experience into the facility if they meet the CDC guidelines for healthcare workers. This revision also clarifies when a doula may be permitted during labor and delivery.

Due to the community spread of Coronavirus Disease 2019 (COVID-19), considerations must be made for the safety of health facility staff and patients, resulting in many health care facilities suspending visitation, except when medically necessary or essential to the care of the patient. The California Department of Public Health (CDPH) recognizes the importance that visitors play in the mental well-being of patients, including pediatric patients, NICU and PICU patients, patients in labor and delivery, and patients at end-of-life. CDPH also recognizes the importance of ensuring people with disabilities receive the support they need while hospitalized. CDPH considers visitors an essential part of patient care and recovery.

CDPH has developed recommended visitor guidelines for certain patients to ensure support for their mental health and well-being, while striving to limit the spread of the virus.

Pediatric Patients

• Visitors are essential for the mental health of pediatric patients. CDPH recommends that pediatric patients be allowed one support person.

• In the case of prolonged hospitalization, CDPH recommends two designated support persons for pediatric patients, provided that only one visitor is present at a time.

• For NICU and PICU patients, CDPH recommends two designated support persons that may visit at the same time.
Labor and Delivery Patients

- The presence of a partner or support person is essential to the mental health of patients who are in labor and delivery. CDPH recommends that one support person be allowed to be present with the patient. CDPH also recommends that a doula, if used, be permitted to be present if prior arrangements have been made with the hospital and the doula complies with hospital PPE and infection control guidelines.

Patients at End-of-Life

- Visitors are essential to the mental health of patients who are at end-of-life. For their continued mental health, and well-being, the department recommends that one visitor be allowed to be present with the patient.

Patients with Physical, Intellectual, and/or Developmental Disabilities and Patients Cognitive Impairments

- The presence of a support person is essential to patients with physical, intellectual, and/or developmental disabilities and patients with cognitive impairments. CDPH recommends that one support person be allowed to be present with the patient when medically necessary.
- For hospitalized patients, especially with prolonged hospitalization, the patient or family/patient representative may designate two support people, but only one support person may be present at a time.

Students Obtaining Clinical Experience

- CDPH supports efforts to help ensure that new nurses and other professionals coming into the healthcare workforce are able to obtain necessary clinical experience. CDPH encourages students obtaining their clinical experience be permitted to come into the facility if they meet the CDC guidelines for healthcare workers to maintain the workforce needed during this pandemic.

All support persons must stay in the room and be asymptomatic for COVID-19 and not be a suspected or recently confirmed case. Support persons may be screened prior to entering clinical areas. Support persons must comply with any health facility instructions on personal protective equipment.

Additionally, CDPH strongly encourages facilities, including but not limited to skilled nursing facilities, to create ways for residents and patients to have frequent video and phone call visits. If shared devices are used for video calls facilities should ensure appropriate infection control measures are in place.

If you have any questions about this AFL, please contact your local district office.

Sincerely,

Original signed by Heidi W. Steinecker
Heidi W. Steinecker
Deputy Director

Resources
CDC Guidelines
**VISITOR EXEMPTION REQUEST**

**Nursing Staff:** Visitors for inpatient end of life, pediatrics, labor and delivery etc. do not require completion of this document. This document is utilized only for those who are requesting an exemption from current ARMC visitor policy during the pandemic. For those outside of the areas listed above, this Visitor Exemption Request is required. When an exemption is requested, please complete this section then fax it to Bed Management at extension: 0-3354. Keep the original on your unit. Upon discontinuation of the visitation period or discharge of the patient, please write the patient disposition across the top i.e. “discontinue” or “discharged” and fax to Bed Management at 0-3354

Date of request: ___________ Number of days of visitation requested: __________ 

Employee advocating for visitor exemption: ___________________________________________

Approving Attending physician (required): ________________________________

Describe impairment requiring exemption for medical necessity:

- [ ] Physical impairment: ______________________________________________________
- [ ] Intellectual impairment: ________________________________________________
- [ ] Developmental disability: ______________________________________________
- [ ] Cognitive impairment: _________________________________________________
- [ ] Patient education for discharge
- [ ] Wound care education
- [ ] Other: __________________________

**Bed Management:** For each request, please make two copies and give to Security at the ED and Main Entrance. Keep the copy in Bed Management. When the visitor requested time period is over and/or the patient is discharged, the unit will fax a copy to Bed Management. Once visitation is discontinued or the patient is discharged, please pull the copies from the ED and Main Entrance. Combine the 3 documents and keep in Nursing Office for 2 weeks then discard following appropriate HIPAA guidelines.

**Security:** Please remember that only one visitor per patient per day (24 hours) is allowed and there are no in and out privileges. When a visitor first presents to you, please contact the other entrance to ensure that no additional visitor has been allowed entry. Visitor hours during the pandemic 10:00am – 6:00pm

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