HOSPITAL VISITATION POLICY

1. PURPOSE: To set forth policy on patient visitation hours at the South Texas Veterans Health Care System (STVHCS).

2. POLICY: STVHCS is committed to Patient-Centered care incorporating a healthcare environment that is welcoming not only to veterans, but also their family and friends. Patient visitation is an important component of the care of hospitalized patients and reflects the needs of those it serves. STVHCS supports visiting hours that promote healing for veterans and families, while also promoting a therapeutic environment.

STVHCS respects the patient’s right to make decisions about his or her care, treatment and services, and to involve the patient’s family in care, services, and treatment decisions to the extent permitted by the patient or surrogate decision-maker. “Family” is defined as a group of two or more persons united by blood, or adoptive, marital, domestic partnership, or other legal ties. The family may also be a person or persons not legally related to the individual (such as a significant other, friend or caregiver) whom the individual considers to be family. A family member may be the surrogate decision-maker, as defined in VHA Handbook 1004.02, if authorized to make care decisions for the individual, should he or she lose decision-making capacity. STVHCS allows a family member, friend or other individual to be present with the patient for emotional support during the course of a stay. STVHCS allows for the presence of a support individual of the patient’s choice, unless the individual’s presence infringes on others’ rights or safety, or is medically or therapeutically contraindicated. The individual may or may not be the patient’s surrogate decision-maker or legally authorized representative. STVHCS prohibits discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression.

3. ACTION:

a. In the Mental Health Units, visiting hours are 5:00 PM to 8:30 PM weekdays and 1:00 PM to 8:30 PM on weekends and holidays. Friends may visit in designated areas. Exceptions are made by the staff nurse and noted in the patient’s medical record.

b. In all inpatient units other than Mental Health Units, visiting hours allows a family member, friend, or other individual to be present with the patient for emotional support during the course of the day.

c. The staff nurse can limit or extend the visitation practice. For example, the staff nurse may limit the number of visitors under certain extraneous circumstances. Any limits or extensions to visitation will be noted in the patient’s medical record. If necessary, the medical care provider may be consulted regarding medical issues.

d. Every employee shares the responsibility of informing patients and visitors regarding the visitation policy. The staff nurse can limit or extend the visitation practice as in the best interest of the patient and other patients.
POLICY MEMORANDUM 11-12-12

e. Friends and family may visit in the patient’s room except on psychiatry units where they visit in the dayroom or other designated areas.

f. Minors, those under 18 years of age, may visit if the patient’s nurse determines that the visit is in the best interest of the patient and the minor has no evidence of communicable disease. A responsible adult must accompany the minor at all times. A responsible adult is defined as a parent or person over the age of 18 who is caring for the safety of the minor. The staff nurse caring for the patient may make exceptions based upon age, the patient’s best interest, impact upon other patients, and the safety of the minor.

g. Visitors are requested to enter and exit the hospitals through the main entrances.

h. Any violation of visitation policies based upon discrimination against a veteran or visitor on the basis of age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, or gender identity or expression must be reported by the staff member(s) who identify the violation to the respective unit’s Nurse Manager/NOD. Nursing leadership will fulfill the requirement of the Deputy Under Secretary for Health Operations and Management (DUSHOM) to submit an issue brief regarding the violation through the VISN 17 Network Office.

4. REFERENCES:

a. The Joint Commission (JTC) Standard R1.01.01.01

b. VHA’s National Patient Rights and Responsibilities

c. STVHCS Policy Memorandum 136-10-13, Seriously Ill Patients dated July 25, 2010

d. STVHCS Patient Information Handbook


5. RESPONSIBILITY: Chief of Staff (11)


7. RECERTIFICATION: March 2017

(Original signature on file)

MARIE L. WELDON, FACHE
Director

DISTRIBUTION: A