

SUBJECT: VISITATION	REFERENCE # ADM 2200
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DEPARTMENT: DISTRICT-WIDE	EFFECTIVE DATE:
APPROVED BY: JENNIFER GREEN, BSN RN CHIEF NURSING OFFICER	07/30/2019
REVISED: 04/06/2025	
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NEXT REVIEW DATE: 04/2025	

Visitors, as identified by the patient, provide support, comfort and important information during the care experience and in the transition to home and/or community care.

Visitors may be requested to leave a care area at the discretion of the attending provider or nursing staff for patient care or safety reasons. An explanation will be provided at the time of the request.

In the event of a local infectious disease outbreak, visitors will be asked to follow infectious disease restrictions as appropriate for the event.

**Objective:**

To provide guidelines regarding the presence and participation of visitors. This is in addition to the patient’s right to a support person.

**DEFINITIONS**

1. **Support Person** - defined by each patient. A family member, guardian, personal care assistant or other paid or unpaid attendant selected by the patient to physically or emotionally assist the patient or ensure effective communication with the patient. This is to facilitate the patient’s care, including but not limited to when the patient:
  - A. Has a cognitive (such as but not limited to: dementia or autism) or a mental health disability that affects the patient’s ability to make medical decisions or understand medical advice.
  - B. Needs assistance with activities of daily living (ADLs) and the hospital staff are unable to provide or less effective at helping.
  - C. Is deaf, is hard of hearing or has other communication barriers (such as blindness) and requires assistance of a support person to ensure effective communication with hospital staff.
  - D. Has behavioral health needs that the support person can address more effectively than hospital staff.
2. **Visitors** - defined by each patient/family.

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**Procedure:**

**I. In all district facilities:**

1. Patients and visitors must comply with infection prevention guidelines and don appropriate Personal Protective Equipment (PPE) when indicated.
  - A. If a patient is presenting with signs of respiratory illness, a facemask will be provided to them and those accompanying them.
    - 1) They will be encouraged to maintain special separation, ideally a distance of at least three feet from others in common waiting areas.

*\*See IC-017 Isolation Guidelines: Standard Precautions & Transmission-Based Precautions.*
    - 2) If unable to tolerate a facemask, a face shield will be provided. If a visitor refuses to comply with the facilities infection prevention guidelines and don appropriate PPE, the visitor will be restricted from the facility.
2. Patients and Visitors will be provided with hand sanitizer at all points of entry.
3. Visitors for patients with known or suspected communicable diseases (Influenza, COVID-19, Clostridium Difficile etc.) must limit their movement in the facility to the patient/exam room.
4. Visitors should be free from any symptoms of viruses or contagious disease. If visitors appear ill, they will be asked to leave for the safety of the patient and staff, as well as their own health and safety.

**II. Emergency Department (ED)**

1. ED patients are allowed one support person and one visitor. Visitors may rotate; only one visitor at a time is permitted.

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2. Exceptions will be made for the following:

- A. May have more than one visitor for special circumstances (e.g., End of Life (EOL). Administration or the medical provider in charge of the patient's care may allow for additional visitors.
- B. Minors under the age of 18 will be allowed both parents or guardians.

**III. Acute Care Unit (ACU)**

- 1. No visitor restrictions.
- 2. Visitors must follow precautions and/or isolation guidelines in place for the patient they are visiting.
- 3. Visitation may be restricted in instances where precautions and/or isolation guidelines must be followed.
- 4. Visiting hours will end at 8 PM each evening, subject to evaluation on a case by case basis, at the discretion of the individual patient's Registered Nurse (RN) and the provider.

**IV. Intensive Care Unit**

- 1. Visitors and/or visiting times may be limited according to the condition of the patient and activity on the unit.

**V. Outpatient services:** Dunes Family Health Clinic (DFHC), Reedsport Medical Center (RMC), Same Day Clinic, Physical/Occupational/Speech Therapy, Pharmacy, Pre-Op appointments, Wound Care/Infusion Clinic, Radiology, Lab, Dietary Consults & Respiratory

- 1. Outpatients are allowed one support person and one visitor as circumstances and space permits.
- 2. Restriction of visitors and allowance for additional visitors are at the discretion of the service provider.

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## VI. Surgery

1. Visitors are not allowed for surgery patients during the perioperative process (Operating Room and Post Anesthesia Care Unit (PACU)).

*\*For full details on visitation and exceptions for surgical patients, refer to policy #2511, Visitor Control.*

## VII. Additional Considerations for Patient's Support Person

1. Unless a patient requests otherwise, a support person designated by the patient, or patient's legal representative must be physically present for any discussion in which the patient is asked to:
  - A. Elect hospice care
  - B. Sign an advanced directive
  - C. Sign any other document allowing the withholding or withdrawing of life-sustaining procedures or artificially administered nutrition.
2. If the hospital denies a patient's request for a support person's physical presence with the patient or a portion of such request the hospital shall:
  - A. Immediately notify the patient and the patient's designated support person(s) orally and in writing of the opportunity to request a support care conference to discuss the denial and any parameters for permitting a support person to be physically present.
  - B. If a support care conference is requested the hospital will conduct the support care conference as soon as possible but no later than 24 hours after admission or prior to a procedure or operation.
  - C. Following a support care conference, the hospital shall document the decision and any reason for limitation, restriction, additional precautions or prohibition in the treatment plan. If a support conference does not occur, the hospital shall document in the treatment plan why the support care conference did not occur.

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D. The support care conference should include the following individuals if available: Provider, Primary RN, Nurse Manager and/or Chief Nursing Officer, and Infection Control Nurse, if applicable.

3. The hospital may refuse to allow the presence of a designated support person who refuses or fails to comply with the conditions imposed by the hospital or remove a designated support person from an area where generally only patients and hospital staff are allowed, if necessary to ensure the safety of the patient, support person, and staff.

A. When this occurs, the hospital will ensure that another designated support person is permitted to be physically present with the patient if otherwise in compliance with the restrictions of this policy.

4. If a patient, or a patient's legal representative does not designate a support person(s) and the hospital determines that a patient has a communication barrier or other disability, the hospital will take reasonable steps to further communicate the patient's right to a support person to the patient, patient's family or patient's legal representative.

5. Requests by the public to obtain alternate formats of this policy should be referred to the Chief Nursing Officer.

6. Patients will be informed orally and in writing notice of their right to support persons as described in this policy.

**References:**

OAR 333-505-0033

2020 Special Session 1, Oregon Laws, Chapter 20  
Oregon Health Authority Revised COVID-19 Guidance on Screening and Visitation in Hospitals  
March 22, 2021