

# Visitation rights

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## Purpose

To outline the procedures to be followed to ensure the visitation rights of patients; set forth any clinically necessary restrictions or limitations that may be needed to be placed on such rights in order to advance the care, safety and well-being of patients and visitors; and define the procedures for designation of a support person for the patient.

## Responsibility

Hospital Governing Body

## Policy

The hospital shall adopt policies and procedures regarding the visitation rights of patients, which will include routine visitation hours (including any exceptions), any clinically necessary or reasonable restrictions or limitations that the hospital may need to place on such rights and the reasons for the clinical restriction or limitations. The procedure for informing the patient or support person of visitation rights upon admission will be outlined in the hospital policy. These policies will be consistent with the *Medicare Hospital Conditions of Participation (CoPs)* as described in *42 CFR, Part 482.13*.

The hospital will not restrict, limit, or otherwise deny visitation privileges on the basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability. All visitors will be treated equally in keeping with visitation privileges consistent with patient preferences.

Children under the age of 16 must be accompanied by an adult other than the patient. Children cannot be left in the care of a patient.

A patient who believes that his or her visitation rights have been violated may file a complaint utilizing the hospital's grievance process.

- I. The hospital must have a process for informing each patient (or support person, where appropriate) of their rights to:
  1. Visitation, including any clinical restriction or limitation on such rights
  2. Designate a support person (support person could be friend, family member, or other individual who is there to provide support to the patient during the course of stay)

3. Receive visitors including, but not limited to, a spouse, domestic partner regardless of sex, other family member, or friends
4. Restrict, withdraw or deny such consent for visitation at any time

II. Hospital may limit/restrict visitation based on:

1. Any valid court order limiting or restraining contact
2. Behavior presenting a direct risk to the patient, the hospital staff, and others in the immediate area
3. Behavior destructive of the functioning of the patient care area
4. Patient's risk of infection by the visitor
5. Visitor's risk of infection by the patient
6. Extraordinary precautions because of a pandemic or infectious disease outbreak
7. Substance abuse protocols requiring restricted visitation
8. Patient's need for privacy or rest
9. Need for privacy or rest of another patient in shared room
10. Patient care treatment
11. The potential to interfere with the care of other patients
12. Requests by the patient, other patient or hospital safety concerns

III. The patient may designate his or her support person in various ways, such as:

1. Oral designation of a support person is sufficient in most cases
2. When the patient is incapacitated and two or more individuals claim to be the patient's support person, documentation may be utilized to indicate a relationship such as:
  - Shared residence
  - Financial interdependence
  - Marital/relationship status
  - Acknowledgement of a committed relationship, advance directives, powers of attorney, etc.
3. State laws governing visitation, designation of support persons, or any related topic should be followed, if such laws provide for rights more expansive than, or are otherwise not inconsistent with, *Federal CoPs*.

## References

Code of Federal Regulations, 42 CFR 482. 13(h) 42 CFR 485(f)

## Procedure

Florida Law: FL Chapter No. 2022-34, The No Patient Left Alone Act

Hospital will allow a patient to designate an essential caregiver/support person who must be allowed in-person visitation for at least two hours per day, in addition to any other visitation authorized by the provider. An essential caregiver can be a family member, friend, guardian, or other individual.

Hospital will provide:

1. Infection control and education policies for visitors;
2. Screening, personal protective equipment, and other infection control protocols for visitors;
3. Hospital visiting hours: Monday to Sunday 12:00pm - 8:00pm hospital may restrict the number of visitors as outlined in the above policy **section II**; and
4. The Chief Executive Officer is responsible for ensuring that staff adhere to the policies and procedures.

Visitors are not required to submit proof of vaccination or immunization.

Consensual physical contact between a resident, client, or patient and the visitor is permitted.

The Hospital must allow in-person visitation, unless the patient objects, when a patient:

1. Is in an end-of-life situation;
2. Was living with his or her family before recently being admitted to the provider's facility and is now struggling with the change in environment and lack of in-person family support;
3. Is making one or more major medical decisions;
4. Is experiencing emotional distress, or grieving the loss of a friend or family member who recently died;
5. Needs cueing or encouragement to eat or drink that was previously provided by a family member or caregiver;
6. Used to talk and interact with others, but is now seldom speaking; or
7. Is receiving pediatric care.

The hospital requires a visitor to agree in writing to follow the provider's policies and procedures.

The hospital may suspend in-person visitation for a specific visitor if the visitor violates the provider's policies and procedures.

The hospital will provide their visitation policies and procedures to the Agency for Health Care Administration (AHCA) when applying for initial licensure, licensure renewal, or change of ownership.

The hospital will make the visitation policies and procedures available to AHCA for review at any time, upon request.

The hospital will make their visitation policies and procedures available on its website within 24 hours of establishing such policies and procedures.