1. **Scope:**

Visitation of patients at Lakewood Ranch Medical Center (“Hospital”) by family members, friends, guardians, and other individuals (each a “Visitor”) shall be governed by this policy.

2. **Purpose:**

To establish the procedures for visitation of patients at the Hospital by Visitors and to comply with all applicable laws and regulations, including the Florida No Patient Left Alone Act.

3. **Definitions:**

   **Designated Support Person** means a family member, personal care assistant, similar disability service provider, or other individual knowledgeable about the management of the care of a Patient with Disabilities.

   **Essential Caregiver** means a patient’s Visitor who has been designated by the patient as the patient’s essential caregiver.

   **Hospital** is defined in Section 1.

   **Patients with Disabilities** may include, but is not limited to, patients with altered mental status, physical, intellectual or cognitive disability, communication barriers or behavioral concerns, who need assistance from a support person outside the Hospital to provide them with effective care due to the specifics of their disability (as examples, patients with severe hearing loss, dementia, or aphasia).

   **Visitor** is defined in Section 1.

4. **Policy and Procedures:**

   A. **Visitation by Visitors.**

      1. **In-Person Visitation.** Hospital will allow in-person visitation of a patient by any Visitor in all of the following circumstances unless the patient objects or visitation is not clinically appropriate as determined by the
patient’s physician or against a physician’s orders:
   i. End-of-life situations;
   ii. A patient who was living with family before being brought to or admitted to the Hospital is struggling with the change in environment and lack of in-person family support;
   iii. A patient is making one or more major medical decisions;
   iv. A patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died;
   v. A patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver;
   vi. A patient who used to talk and interact with others is seldom speaking;
   vii. Childbirth, including labor and delivery; and
   viii. Pediatric patients.
2. **Visitation Hours.** Patients are permitted to have Visitors each day between the hours of 9 a.m. to 7 p.m. or such other hours as posted on the Hospital’s visitation webpage.
3. **Number of Visitors.** A patient is permitted to have two (2) Visitors at any given time. Visitors can be switched out throughout the day.
4. **Consensual Physical Contact.** A patient and his or her Visitor must be permitted to engage in non-sexual, consensual physical contact. In no instance will any Hospital staff prohibit or interfere with such non-sexual, consensual physical contact.
5. **Expectation of Visitors.** Visitor conduct is expected to be appropriate and non-disruptive. Any issues related to disruptive conduct (e.g., aggression, failure to comply with Hospital’s policies and procedures, etc.) will be initially managed by the charge nurse or supervisor. If unresolved, the issue will be brought to the attention of the Hospital’s CEO or CNO or designee.

B. **Visitation by Essential Caregivers.** A patient may designate a Visitor as an Essential Caregiver. Hospital staff will document in the patient’s medical record any Visitor who is designated as that patient’s Essential Caregiver. Hospital will permit, during visitation hours, in-person visitation by a patient’s Essential Caregiver for at least two (2) hours each day in addition to any other visitation authorized by the Hospital. Hospital staff will not require an Essential Caregiver to provide necessary care to the patient.

C. **Visitation by Clergy.** Patients may receive visitation from one religious leader of their choice at any reasonable time, if such visitation can be provided without disruption to the patient’s care. The religious leader does not count as the patient’s
D. **Visitation of Patients with Disabilities.** The Hospital will also allow Visitors and Designated Support Persons for patients when doing so is required as a reasonable accommodation under the Americans with Disabilities Act and equivalent state laws. Patients with Disabilities who receive care at the Hospital may have a Designated Support Person(s) present with them to support their disability needs. Designated Support Person(s) will be subject to the Hospital’s infection control and screening policies and procedures contained in this policy.

E. **Infection Control and Education for Visitors.** The Hospital’s infection control and education policies and procedures for Visitors is maintained on the Hospital’s website (https://www.lakewoodranchmedicalcenter.com/) under the tab “Patients & Visitors”, which may be updated from time to time.

F. **Screening, Personal Protective Equipment, and Other Infection Control Protocols for Visitors.** The Hospital’s screening, personal protective equipment, and other infection control protocols for Visitors is maintained on the Hospital’s website (https://www.lakewoodranchmedicalcenter.com/) under the tab “Patients & Visitors”, which may be updated from time to time.

G. **Safety-Related Policies and Procedures.** All safety-related policies and procedures for Visitors contained in this policy shall not be more stringent than those established for the Hospital’s staff. To the extent that any safety-related policy and/or procedure for Visitors in this policy is more stringent than those established for the Hospital’s staff, the less stringent safety-related policy and/or procedure established for the Hospital’s staff shall also apply to Visitors, and the more stringent policy and/or procedure contained in this policy shall not apply.

H. **No Proof of Vaccination or Immunization Requirements.** Hospital staff are prohibited from asking any Visitor for proof of any vaccination or immunization. Visitation by Visitors, including Essential Caregivers, is not contingent upon showing proof of any vaccination or immunization.

I. **Responsible Staff Person.** The Hospital’s CEO and CNO or their designee will be responsible for ensuring that Hospital staff adhere to this policy.

5. **References:**


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