

CATHOLIC HOSPICE	Date Effective:	4/7/2022
	Date(s) Revised:	4/01/2023
Subject: Visitation Protocol	Last Date (s) Reviewed:	1/30/2024
Applicable Service Lines: Catholic Hospice, Inc.	Page:	1 of 3

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PURPOSE:

The purpose of this policy is to establish the visitation guidelines and meet the needs of patients and families under the care of Catholic Hospice.

PROTOCOL:

Catholic Hospice believes that patients have a right to visitation by anyone he/she wishes to see, and that families should have access to their loved ones while under our care. Catholic Hospice will not restrict visitation at any time unless requested by the patient or authorized representative. Patients will be informed of their visitation rights.

PROCEDURES:

1. In-person Visitation Circumstances as listed in 408.823(2)(c), F.S.:

Catholic Hospice shall not restrict / will permit in-person visitation in the following circumstances, unless the patient objects:

- a. End-of-life situations.
- b. The patient, who was living with family before being admitted to the Hospice's care, is struggling with the change in environment and lack of in-person family support.
- c. The patient is making one or more major medical decisions.
- d. The patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died.

2. Length of Visits:

Catholic Hospice has no restrictions on visitations.

- a. Family members are allowed to stay overnight, providing sleeping accommodation.
- b. Catholic Hospice welcomes children and pets.
- c. Visitation is normally **unrestricted**, however, when the specific patient to be visited is quarantined, tested positive, or showing symptoms of a communicable disease, visits in these circumstances will likely



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require a higher level of infection prevention and control monitoring and type of PPE usage. The visitors are required to follow protocols established by the CDC, including, but not limited to, wearing Personal Protective Equipment (PPE) for infection control management. Such PPE to visitors will be provided as needed at no cost.

- 3. Visitors exhibiting inappropriate behavior(s) or failing to follow infection control protocols may be asked to leave and may not be allowed to visit in the future while Catholic Hospice provides services.
- 4. Catholic Hospice provides care to patients in either private residences or in third-party long-term care facilities, assisted living facilities, independent living facilities or in an ICC in a hospital or nursing home.
- 5. Catholic Hospice maintains a visitation policy addressing the following visitation requirements, as outlined below:
 - a. <u>Infection Control & Screening</u>: Patients and visitors with whom Catholic Hospice encounters will be educated about our infection control program, protocols, policies. Catholic Hospice will abide by CDC's requirements for screening, personal protective equipment, and other infection control protocols dictated by the third-party facility and, when appropriate, encourage patient visitors to do the same. When rendering care in patients' personal residences, Catholic Hospice will advise its patients and caregivers on infection control protocols for patients' personal visitors within their homes.
 - b. Number of Visitors and Length of Visits: Catholic Hospice has unrestricted visitations.
 - c. In addition to this protocol, to the extent applicable, Catholic Hospice will abide by the visitation policies of the facilities within which it renders care to its patients, including policies addressing number of visitors permitted per facility resident and permitted length of visits. When rendering hospice care within a patient's personal residence, our staff will observe the visitation preferences of the individual patient.
 - d. <u>Proof of Vaccination</u>: Visitors are not compelled to provide proof of vaccination or immunization status.
 - e. <u>Consensual Physical Contact</u>: Catholic Hospice allows consensual physical contact between patients and their loved ones (patient and visitor). (We do not interfere with the visitation policies and procedures of the third-party facilities within which it renders care to its patients / residents).

Designation of a person responsible for staff adherence to visitation policies and procedures:

6. The **Clinical Care Manager** is responsible for ensuring our staff adheres to this protocol and shall ensure that our staff are educated on the various third party facility visitation policies applicable to where its patients reside.

Filing a Visitation Complaint with Agency for Health Care Administration (AHCA):

- Patients and visitors may file a complaint with Agency for Health Care Administration (AHCA) for further review and action if they feel that their visitation rights have been violated. A complaint may be submitted to AHCA by telephone at 888-775-6055 or online at: <u>https://apps.ahca.myflorida.com/hcfc/</u>.
- 8. This visitation protocol is available to AHCA for review at any time, upon request, and will be provided when applying for licensure renewal.
- 9. This protocol is easily accessible from the homepage of Catholic Hospice's website. <u>Hospice Services Catholic</u> <u>Health Services</u> <u>https://www.catholichealthservices.org/hospice/</u>



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REFERENCE: Florida Statues Section 408.823 – In-person Visitation

Senate Bill 988: "No Patient Left Alone Act"

Section 1. This act is cited as the "No Patient Left Alone Act"

Section 2. Fla. Stat. § Section 408.823, Florida Statutes. In-person visitation.

- (1) This section applies to developmental disabilities centers as defined in s. 393.063, hospitals licensed under chapter 395, nursing home facilities licensed under part II of chapter 400, hospice facilities licensed under part IV of chapter 400, intermediate care facilities for the developmentally disabled licensed and certified under part VIII of chapter 400, and assisted living facilities licensed under part I of chapter 429.
- (2) (a) No later than 30 days after April 6, 2022, each provider shall establish visitation policies and procedures. The policies and procedures must, at a minimum, include infection control and education policies for visitors; screening, personal protective equipment, and other infection control protocols for visitors; permissible length of visits and numbers of visitors, which must meet or exceed the standards in ss. 400.022(1)(b) and 429.28(1)(d), as applicable; and designation of a person responsible for ensuring that staff

ss. 400.022(1)(b) and 429.28(1)(d), as applicable; and designation of a person responsible for ensuring that staff adhere to the policies and procedures. Safety-related policies and procedures may not be more stringent than those established for the provider's staff and may not require visitors to submit proof of any vaccination or immunization. The policies and procedures must allow consensual physical contact between a resident, client, or patient and the visitor.

- (b) A resident, client, or patient may designate a visitor who is a family member, friend, guardian, or other individual as an essential caregiver. The provider must allow in-person visitation by the essential caregiver for at least 2 hours daily in addition to any other visitation authorized by the provider. This section does not require an essential caregiver to provide necessary care to a resident, client, or patient of a provider, and providers may not require an essential caregiver to provide such care.
- (c) The visitation policies and procedures required by this section must allow in-person visitation in all of the following circumstances, unless the resident, client, or patient objects:
 - 1. End-of-life situations.
 - 2. A resident, client, or patient who was living with family before being admitted to the provider's care is struggling with the change in environment and lack of in-person family support.
 - 3. The resident, client, or patient is making one or more major medical decisions.
 - 4. A resident, client, or patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died.
 - 5. A resident, client, or patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver.
 - 6. A resident, client, or patient who used to talk and interact with others is seldom speaking.
 - 7. For hospitals, childbirth, including labor and delivery.
 - 8. *Pediatric patients.*
- (d) The policies and procedures may require a visitor to agree in writing to follow the provider's policies and procedures. A provider may suspend in-person visitation of a specific visitor if the visitor violates the provider's policies and procedures.
- (e) The providers shall provide their visitation policies and procedures to the agency when applying for initial licensure, licensure renewal, or change of ownership. The provider must make the visitation policies and procedures available to the agency for review at any time, upon request.
- (f) Within 24 hours after establishing the policies and procedures required under this section, providers must make such policies and procedures easily accessible from the homepage of their websites.
- The agency shall dedicate a stand-alone page on its website to explain the visitation requirements of this section and provide a link to the agency's webpage to report complaints. Fla. Stat. § 408.823

Added by 2022 Fla. Laws, Ch. 34,s 2, eff. 4/6/2022.2022 Fla. Laws, Ch. 34 may be cited as the "No Patient Left Alone Act."

(3)