

STATEMENT ON PATIENT VISITATION RIGHTS

St. Francis Regional Medical Center embraces a philosophy of patient and family centered care as part of its holistic approach to care, treatment and service. Open and flexible visitation that welcomes and encourages the involvement of family and significant others in the patient's care is an important component of this approach, and to support this has adopted this Statement on Patient Visitation Rights.

1. St. Francis Regional Medical Center has open and flexible visitation hours. Patients may receive visitors of their choosing, without limitation unless such infringes on the rights of other patients and/or visitation is not in the best interest of the patient medically or therapeutically. See number 5 below.
2. St. Francis Regional Medical Center will ensure that all visitors enjoy full and equal visitation privileges consistent with patient preferences. St. Francis 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, nor will it permit anyone else to do so.
3. Patients may designate a "Support Person" to exercise their visitation rights on their behalf. Patients may designate a Support Person in any manner, including orally, in writing, or through non-verbal communications (such as pointing). The support person designated will be afforded the same visitation rights and/or limitations as a family member. The support person, at the request of the patient may be involved in discussions, etc. related to the patient's care and treatment.
4. Patients may refuse to consent to a person visiting them, or may withdraw consent to see a visitor at any time.
5. St. Francis can apply reasonable clinical restrictions and other limitations on patient visitation. Reasonable restrictions may be based upon, but are not limited solely to, any of the following:
 - a. A court order limiting or restraining contact;
 - b. A visitor's behavior presenting a direct risk or threat to the patient, hospital staff, or others in the immediate environment;
 - c. Visitor behavior that is disruptive to the functioning of the patient care unit involved;
 - d. The patient's risk of infection by the visitor;
 - e. The visitor's risk of infection by the patient;
 - f. A patient's need for privacy, confidentiality or rest;
 - g. The need for privacy or rest by another patient in the patient's shared room; or
 - h. When it is determined by the healthcare team that the presence of visitors and/or the designated support person might not be medically or therapeutic for the patient.