

Supporting Family Presence Through the Elimination of Visiting Restrictions

FREQUENTLY ASKED QUESTIONS

Why has the organization decided to make this change?

Research has shown that when a client is supported by family and friends their emotional and mental health is much better, resulting in improvements to their physical health. It also improves management of chronic and acute illnesses. Often families can provide information that health providers are not aware of. There is also evidence that clients who have family involvement in care fall less while in hospital and retain the lessons taught in client education activities better. With all of this evidence, it is best practice to recognize that family members are integral to the overall well-being of the client thus we welcome family members to be there whenever the client would like them to be present.

What do other organizations do?

The province is moving towards a client and family centred care approach and removing visiting hour restrictions is in line with this approach. Many health care facilities and organizations around the world have successfully transitioned away from defined visitor restrictions.

So who is considered family?

It is whoever the client identifies that they consider 'family' or 'partner(s) in care'. This is determined during the admission process and may be modified by the client at any time.

Family: Defined as "a group of individuals who are connected by kinship, affection, dependency or trust. Family members are the people who provide the primary physical, psychological, or emotional support for the client. Family is not necessarily blood relatives. The family is defined by the client."

Partner in Care: Family member(s) and/or friend(s) that the client has indicated will be involved in their care and decision-making.

Visitors: In addition to family members, the Five Hills Health Region recognizes that other visitors may wish to see the client. Visitors are 'guests' of the client or his/her family. In some cases, visitors may be relatives.

What do I do if there are too many visitors?

Discussions with the client and family are necessary to determine the number of people welcomed at the bedside at any one time. If this is a shared room, these discussions must include the other client

How do I ask a visitor to leave?

As is current practice, if it is mutually agreed by the client and care team that a visitor's presence is not benefiting the client and client care, the clinical provider may, as an advocate for the client, ask that person to leave out of consideration for the client.

What do I do if someone refuses to leave and/or is exhibiting disruptive behaviour?

While this is usually a rare occurrence, you would follow the current practice of calling Security Services (if available in your facility) or the Manager/designate to address the problem.

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What if the client does not want any visitors?

It is the client's right to refuse visitors while in care. As is current practice, clinical providers can advocate for the client's wishes by sharing this decision with the primary support person/'partner in care' and request that they notify other potential visitors. Clinical staff can also share the client's decision to not receive visitors to those who do visit the unit.

Does this mean someone can visit at 1 AM?

Yes. There are no hourly restrictions for visits. As long as the visits are beneficial to the client and not disruptive to other clients on the unit, then late hour and overnight visits are permitted.

What do I do if the visitor(s) are affecting the care or ability to care for the client or other clients?

As is current practice, if visitors are impeding the ability to give the best care possible, clinical providers have the right and responsibility to ask the visitors to step away from the room while procedures are in process or until the context of the situation changes.

What if I think that there have been too many visitors for the client?

Care providers should respectfully and discreetly discuss this observation with the client and work together to develop a visiting plan that meets the client's current needs and preferences. This visiting plan should then be communicated within the care plan. However, there is also the potential that the client disagrees with your assessment and we must endeavor to respect the client's wishes regarding family presence as much as possible.

What if the facility is on Outbreak Status?

Limiting traffic and visiting does assist us in controlling an outbreak however we also recognize that there are times where family members must be there. It is through collaborative discussions with client and family that decisions would be made as to what family members would be welcomed during the outbreak. In such cases these family members need to be instructed in proper hand hygiene and use of Personal Protective Equipment to assure the client's and their safety.

What if a visitor has signs/symptoms of infection or illness?

We ask family members and other visitors to refrain from visiting if they have the following symptoms:

- Cough
- Fever
- Diarrhea
- Cold
- Flu-like symptoms
- Rash

In circumstances where family members must visit with any of the above symptoms, the care team should instruct them regarding appropriate personal protective equipment (such as masks or gowns).

Remember – the client is the one who determines their family/ partner(s) in care. We need to respectfully welcome them as an active part of the care team.