PARTNERS IN CARE WELCOME POLICY

I. PURPOSE:
The purpose of this policy is to provide guidelines that supports and welcomes 24/7 presence and participation of a family member and/or care partner in the patient’s care experience during their clinic visit, emergency room visit, and/or hospital and health center visit. CCRMC recognizes that family members and/or care partners play an important part in the patient’s healing process.

Family members and/or care partners, according to patient preferences, are respected as essential members of the patient’s health care team in sharing information and providing support and comfort during their health center visit, emergency room visit and/or hospital stay. They enhance quality and safety. They also provide pertinent information essential to the care plan.

In the event that family member/care partner presence would need to be limited to ensure safety or confidentiality, CCRMC employees will work with the family member and/or care partner to continue the visit as soon as possible.

The right of a patient to have family members and/or care partners may be restricted should visitation impact the care of the patient and/or the care of other patients. These restrictions might include (but are not limited to) when:

- there may be infection control issues;
- visitation may interfere with the care of other patients;
- the hospital is aware that there is an existing court order restricting contact;
- visitor exhibits behavior that is a direct threat to patients, families, staff, or others in the immediate environment;
- visitor is disruptive of the functioning of the care unit;
- the patient or patient’s roommate(s) need rest or privacy;
- the patient or roommate(s) are undergoing care interventions.

Partners in Care, as identified by the patient, provide essential information during their time in our health care system and also during the transition to home or community care.

DEFINITIONS

A. **Partners in Care** are person(s) identified by the patient who are family members and/or friends or other individuals that are present to support the patient during the course of the patient’s stay at the health care facility and may exercise the patient’s visitation rights on patient’s behalf if patient is unable to do so. The support person(s) may provide emotional and/or social support and comfort according to the patient’s preference. Such individual(s) may or may not be an individual legally responsible for making medical decisions on the patient’s behalf.

B. **Patient** refers to anyone admitted to the Hospital who has an appointment at any one of our Health Centers, or is actively receiving care at any one of our facilities.

C. **Family** as defined by the Institute for Patient and Family Centered Care, “family” refers to two or more persons who are related in any way – biologically, legally, or emotionally. Patients and families define their “family.”

II. REFERENCES:
CMS regulations revising the Medicare Conditions of Participation as set forth at 42 CFR § 482.13
Patient’s Bill of Rights
TJC 2016 Standard RI.01.01, “The hospital respects, protects and promotes patient rights.”

III. POLICY:
   A. All CCRMC & HC staff as well as physicians shall not restrict, limit or otherwise deny visitation on the basis of race, color, national origin, religion, sex, gender identity, gender expression, sexual orientation and presentation or disability.

   B. Partners in care are welcomed, based on the patient’s preferences and wishes. A patient may verbally designate a partner in care to exercise the patient’s visitation rights on his or her behalf in the event the patient becomes unable to do so. Upon such designation by a patient, the legal status of the relationship between the patient and the designated partner in care shall be irrelevant. This designation of an individual as the patient’s partner in care, however, does not extend to medical decision making.

   C. All CCRMC & HC staff and physicians will work collaboratively with the patient and Partners in Care to make any adjustments or changes to maintain the health, safety, privacy, and confidentiality of all patients.

IV. AUTHORITY/RESPONSIBILITY:
   This policy applies to all CCRMC & HC staff and physicians.

V. GUIDELINES:
   A. Share the “Partners in Care Welcoming Guide” with all patients and their partners in care.

   B. There are no specified visiting hours. However, in the hospital, quiet time has been designated for the hours of 10 PM until 7AM every day to promote a restful healing environment for our patients.

   C. Every effort will be made to work collaboratively and respectfully with the patient and their partners in care to ensure health, safety, quality care, privacy and confidentiality for all patients.

VI. ATTACHMENTS/FORMS USED:
   603A Partners in Care Welcoming Guide

APPROVED BY:
Clinical Practice Committee – CPC
Ambulatory Clinical Practice Committee – ACPC
Patient Care Policy and Evaluation Committee – PCP&E
Medical Executive Committee – MEC

REVIEWED:
4/2013 (new), 4/2017, 11/2017