

AH0900-VISITATION AND PRESENCE OF FAMILY AND PARTNERS-IN-CARE

1.0 PURPOSE

Interior Health (IH) has adopted and is committed to Person and Family-Centred Care. IH recognizes that family members/partners-in-care are vital to an individual's safety, comfort, physical and psychological health and wellbeing. This policy supports and encourages family presence in all IH sites while balancing with the highest standards in quality of care and safety.

2.0 DEFINITIONS

TERM	DEFINITION
Cultural Safety (culturally safe)	Is an outcome based on respectful engagement that recognizes and strives to address power imbalances that exist in the health-care system. It results in an environment free of racism and discrimination, where people feel safe when receiving healthcare. "Safety" is defined by those who receive the services, not by those who provide it.
Families / Partners-in-care	Refer to persons who are related in any way (biologically, legally, or emotionally), including immediate relatives and other individuals in the persons' support network. Families/partners-in-care include a person's extended family, partners, friends, advocates, guardians, and other individuals. The person defines the makeup of their family/partner-in-care, and has the right to include or not include family members/partners-in-care in their care, and redefine the makeup of their family over time.
Influenza (Flu)	Is a serious contagious disease spread by droplet transmission.
Person	Refers to the individual who is involved with the organization in an interaction or relationship about their well-being or health. A person may also be called a patient, client, consumer, individual, participant, or resident. Where the organization does not provide services directly to individuals, this refers to the community or population that is served by the organization.
Site	Refers to any IH owned, operated or contracted facilities where treatment/procedures and other health services are delivered by or in partnership with IH.
Staff	IH employees, medical staff, students, volunteers, and other persons acting on behalf of IH

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3.0 POLICY

- 3.1 IH welcomes and promotes family presence and visitations including cultural practices and traditional ceremonies in all IH sites 24 hours a day / 7 days a week. IH staff are expected to practice healthcare in a manner that promotes cultural safety and partnership in the health service journey. Family presence is welcomed during all health-care activities provided safety is not compromised.
- 3.2 Instructions for hand hygiene are posted in all IH sites to promote health, healing and better health outcomes. ([AH0700 Hand Hygiene](#)).
- 3.3 Privacy and confidentiality must be maintained and the person receiving care must provide consent or permission as per policy ([AR0400 – Privacy and Management of Confidential Information](#)) prior to disclosure/sharing of any information with a family member/partner-in-care.
- 3.4 People occasionally wish to take photographs, video-record or audio-record interactions with care providers or persons receiving care in IH sites. The *BC Privacy Act* requires the individuals taking photographs, video or audio recording to obtain consent from any individuals including but not limited to persons receiving care, visitors, Staff, Agents and physicians, who could potentially be captured in the images or recordings. Failure to do so violates the personal privacy; or possibly the safety of others and if done willfully and without authorization, such “surveillance” is an actionable offense under that Act. See [AR1000 Photography, Videotaping & Audio-Recording in IH Owned Facilities or Served Care Areas](#).
- 3.5 IH reserves the right to ask any families or individuals whose behaviour is disruptive, aggressive or infringes upon any other person’s rights or safety to leave the sites. See [AV2900 – Managing Disrespectful, Aggressive or Violent Behaviours of Visitors](#).
- 3.6 Cell phones and other personal electronic devices should be placed on silent/vibrate mode; there may be restrictions regarding cell phone use. Some care areas have implemented quiet times to allow rest to promote the healing process.
- 3.7 IH may limit the number of people a person receiving care may have present at any one time, especially in rooms occupied by more than one person. A safe workspace for the health-care team will be considered at all times. Children who require supervision must be accompanied by a responsible adult who is not the person receiving care. Limitations will be communicated collaboratively with the person receiving care and family, and IH staff will make all reasonable efforts to accommodate the person’s wishes regarding the presence of family members/partners-in-care.
- 3.8 Family members/partners-in-care are to refrain from wearing or using scented products in IH sites in accordance with the IH no-scent policies. See: [VD0200 Scent-Free/Reduced Environment](#); [AU0800 Dress Code/Personal Appearance](#).
- 3.9 Washrooms designated for persons receiving care are for their use only. Public washrooms are available within all sites.

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- 3.10 Family members/partners-in-care who are not feeling well or have signs and symptoms of a communicable illness should refrain from entering IH sites.

Family members/partners-in-care may be restricted due to medical acuity, infectious disease outbreaks or other reasons specific to a care area. Staff will explain the restriction(s) and may require family members and partners-in-care to wear appropriate clothing (i.e. gown and gloves).

- 3.11 The Provincial Health Officer establishes the annual Influenza (Flu) season. During influenza season, in accordance with the IH Influenza Prevention Policy ([AV1350 Influenza Prevention](#)), family members/partners-in-care are asked to be vaccinated against influenza or are required to wear a surgical/procedure mask provided by the site.
- 3.12 Pets may be restricted in some care areas for health and safety reasons in accordance with the IH Infection Prevention and Control Pet Therapy and Visitation document [IX0400](#).
- 3.13 IH staff must verify the legal authority of family members/partners-in-care to provide consent to procedures or care under applicable IH policies. See: [AL0100 Consent - Adults Policy](#); [AL0200- Consent – Persons Under 19 Years of Age](#); [AH 4000 MOST and ACP](#).
- 3.14 Should concerns arise due to limitations on visitation in any IH site, Staff shall work with the Person and Families to find a reasonable solution. Staff shall ensure they direct Persons and Families to the [IH Patient Care Quality Office](#) with any concerns that could not be resolved at the local level.

4.0 PROCEDURES

- 4.1 All IH employees, medical staff, students, volunteers, and other persons acting on behalf of IH must comply with this policy.

5.0 REFERENCES

- Alberta Health Services (2017). Visitation with a Family Presence Focus. <https://extranet.ahsnet.ca/teams/policydocuments/1/clp-prov-visitation-family-presence-focus-pol-hcs-199.pdf>
- Canadian Foundation for Healthcare Improvement (2015). Much More Than Just a Visit: A Review of Visiting Policies In Select Canadian Acute Care Hospitals. https://www.cfhi-fcass.ca/sf-docs/default-source/patient-engagement/better-together-baseline-report.pdf?sfvrsn=bb65d044_10
- Fraser Health Authority (2014). Family/Visitor Presence in Acute Care Hospitals Policy.

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<https://www.fraserhealth.ca/-/media/Project/FraserHealth/FraserHealth/About-Us/Accountability/Policies/FamilyVisitorsPresenceHospitals-Policy-201412.pdf>

- Lakeridge Health (2017). Family Presence Policy and Procedures. <https://www.lakeridgehealth.on.ca/en/patientsandvisitors/resources/Patient-Experience/Family-Presence-Policy.pdf>

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