

Children's Hospital and Health System Administrative Policy and Procedure

This policy applies to the following entity(s):

☒ Milwaukee Hospital

SUBJECT: Visitors and Special Guests

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Visitors and Special Guests/Process Owners: Dir. Patient/Family Amenities and Support& Dir. Public Safety

Definitions

Adult Supportive Person

An individual 18 or over, specifically identified by a parent or legal guardian, as a necessary aide to the parent or legal guardian, or in place of the parent or legal guardian.

Approved Visitor

Visitors that are on a patient's visitor list.

Hospital

The term Hospital is used in this policy to designate buildings where patient care happens, including the East, Center and West towers, Craig Yabuki Tower (including Surgery), the Clinics Building and the Skywalk Building (including the EDTC). The Children's Corporate Center is not considered "Hospital".

Immediate Caregiver

Parents, grandparents, same sex parents, step-parents, foster parents, legal guardians, or other individuals specifically identified by the parent or legal guardian as a primary caregiver of the patient.

Sibling

A sibling or other household member under the age of 18.

Special Guest

Public figures, entertainers or other individuals who are invited by Children's Wisconsin to meet with patients to provide therapeutic or programmatic support. Special Guests can also refer to authorities that may need to be on site during the care of a child. Examples of these special guests are the following: Law Enforcement, Child Protective Services, Mobile Unit Crisis team.

Staff

Employees, providers, students, interns, volunteers, and people contracted by Children's Hospital of Wisconsin to perform a service inside one of our locations.

Tours

Non-employed visitors that are here to tour our facility for purposes other than visiting a patient. Tour guests must have an official business related reason for the tour and must be escorted by an employee 'sponsor' at all times. Tour guests may be a part of a conference or education program or a donor/potential donor, etc.

Visitor

Persons who present at a location for the purpose of seeing a patient, a patient's family or a staff member. For the purposes of this policy document, "visitor" will refer broadly to all immediate caregivers, siblings, visitors, and special guests collectively, unless a specific reference to a group is made (e.g. "visitors to patient care staff").

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POLICY

Children's Wisconsin is committed to non-discrimination. See the [Nondiscrimination P&P](#).
Children's reserves the right to change/modify procedure.

Visitors should not come to the hospital if they're experiencing any symptoms of illness or are COVID-19 positive or exposed.

See the table on the next page for regular visiting and restricted visiting guidelines.

		Normal Visiting	Restricted Visiting
	▪ Acute care floors (East 5; West 5 West 7; West 9; West 10; West 11; West 12)	• 6 people (of any age) are allowed on a patient's visitor list; names can be updated/changed every 3 days in admission. • 4 people can be at the bedside at a time. • Only parents/guardians and grandparents may visit outside of our 8 a.m. – 8 p.m. visiting hours. • Visitors under 18 must be with an adult at all times.	• 6 people on the list 12 years old and up. • 4 people can be at the bedside at a time • Only parents/guardians and grandparents may visit outside of our 8 a.m. – 8 p.m. visiting hours.
	▪ Critical care floors (West 3, West 4, Center 4)	• 6 people (siblings of any age or non-siblings age 18 or over) are allowed on a patient's visitor list; names can be updated/changed every 3 days in admission. • . • No one under 18 is allowed to visit our critical care units, except for siblings of the patient. • 2 people can be at the bedside at a time • Only parents/guardians and grandparents may visit outside of our 8 a.m. – 8 p.m. visiting hours. • Visitors under 18 must be with an adult at all times.	• Visitors under 18 must be with an adult at all times. • Names can be updated/changed every 21 days.
Ambulatory Outpatient Imaging CMG Urgent Care		Patient and up to 4 visitors	Patient and 2 visitors
Surgery		2 adults	
EDTC		2 in the room	2 in the room No siblings.
Tours		Allowed with appropriate approval.	Not allowed.

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PROCEDURE

A. Visiting Guidelines

1. Visiting Hours

- Regular visiting hours are from 8:00 a.m. to 8:00 p.m.
- An overhead announcement indicating the end of visiting hours will be made each night at 8:00 p.m.
- Immediate Caregivers are able to visit 24 hours daily.

2. Visiting Badging Process

- All Visitors and Special Guests are required to stop at a Welcome Center for screening upon entry to the hospital. Tours are to be pre-approved and the Children's Ambassador Manager and Director of Patient/Family Amenities and Support must be notified of numbers in advance of the day they are touring so appropriate badging can be planned for.
- Visitors for hospitalized or surgical patients will be verified through the approved visitor list.
 - If the visitor is on the approved list, the staff member will then record the current date and room number of the patient on the front of the pass and write their initials after screening the visitor for cold/flu symptoms.
 - If the visitor is not on the approved visitor list, Welcome Center staff will call the patient room and ask the parent/guardian if the visitor can be added to the list.
 - If the parent/guardian cannot be reached, the Welcome Center staff can call the nurse to see if they have visitor list information that has not yet been entered. The nurse is not to add to the visitor list without parent approval.
- Approved Visitors, Special Guests and Tours will be issued an identification badge. The badge is to be displayed above the waist at all times.
- Staff observing any individual without a badge are expected to redirect the individual to a Welcome Center to obtain a badge. If Staff have safety concerns based on the individual(s) behavior they should notify Public Safety.
- If the patient is listed as "**Anonymous**" or "**Confidential**" refer to the Confidential Patient Status Policy and Procedure. The visitor must offer the password and provide the patient's legal first name, last name without prompting or the staff member must say, "I have no information for you on that patient. I suggest you contact the family for more information." See Administrative Policy and Procedure: "Confidential Patient Status" for more details. Children's Ambassadors cannot add visitors to a confidential patient visitor list. This must be done by the Nursing unit, Social Work, or Public Safety.
- A visitor or Special Guest may be asked to provide picture identification. A note will be placed in the exception section of the visitor list if ID is required. If the visitor does not have picture ID, contact Public Safety for assistance.
- Immediate Caregivers will be given a "parent/guardian or grandparent" badge. A "visitor" badge will be given to all others.
- Badges are color coded to signify what area is authorized for the visitor.

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- Badges are to be turned in at a Welcome Center when the visitor is exiting.
- Paper badges are issued for the current date only and must be re-issued daily.
- Some units have plastic “parent” badges that are issued for the length of the stay. These badge numbers must be entered into the visitor list.

3. Visitor List

- All Visitors and Special Guests are required to stop at a Welcome Center for screening upon entry to the hospital. Tours are to be pre-approved and the Children’s Ambassador Manager and Director of Patient/Family Amenities and Support must be notified of numbers in advance of the day they are touring so appropriate badging can be planned for.
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- If the patient is listed as “**Anonymous**” or “**Confidential**” refer to the Confidential Patient Status Policy and Procedure. The visitor must offer the password and provide the patient’s legal first name, last name without prompting or the staff member must say, “I have no information for you on that patient. I suggest you contact the family for more information.” See Administrative Policy and Procedure: “Confidential Patient Status” for more details. Children’s Ambassadors cannot add visitors to a confidential patient visitor list. This must be done by the Nursing unit, Social Work, or Public Safety.
- A visitor or Special Guest may be asked to provide picture identification. A note will be placed in the exception section of the visitor list if ID is required. If the visitor does not have picture ID, contact Public Safety for assistance.
- Immediate Caregivers will be given a “parent/guardian or grandparent” badge. A “visitor” badge will be given to all others.
- Badges are color coded to signify what area is authorized for the visitor.
- Badges are to be turned in at a Welcome Center when the visitor is exiting.
- Paper badges are issued for the current date only and must be re-issued daily.
- Some units have plastic “parent” badges that are issued for the length of the stay. These badge numbers must be entered into the visitor list.

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4. Visitor List

- The visitor list will be initiated by Admitting, Registration, and Scheduling (ARS) or the unit staff. Welcome Center staff are not allowed to initiate a patient's visitor list.
- At registration, both parents will be added to the visitor list. Welcome Center Staff are not allowed to initiate a patient's visitor list.
- If the parents state they are the parents we assume they both have equal authority over the visitor list. If at any time Children's is presented with information/documentation that tells us otherwise, such information should be reviewed. For questions on the information/documentation, please contact Social Work and/or Risk Management. This information/documentation may impact who can control the visitor list. Generally, parents cannot remove each other from the visitor list.
- **For NICU patients**, contact NICU leadership for visitation guidelines in their department.
- A visitor list is required for all patients. It will be maintained in the FYI flag and include any special exceptions or restrictions.
- Patients who are their own legal guardians (i.e., generally patients 18 years old or older) may be the creator of the list. This information should be noted in exceptions on the visitor list. See Addendum B for information on what our care teams need to know and do, including how to help families build their visitor list.
- The visitor list is removed by the unit HUC upon discharge.
- Children's reserves the right to change or revoke the visitor list for reasons which may include, but are not limited to: (Exceptions are jointly determined by the Director of Public Safety and Risk Management or Legal Department, following a "huddle" of the relevant people with input for decision making.)
 - Aggressive, harassing, or threatening behavior
 - Assault, damage to property, disorderly conduct, or other crime
 - Court orders, restraining orders, or other legal mandates
 - Use of illegal drugs, alcohol, or other substances
 - Conviction record of sexual assault or child abuse.
 - Inability to follow visiting guidelines
 - Interference, disruption, or non-compliance with medical care
 - Outbreaks, epidemics, or other community-related issues
 - If a person is disallowed from visiting a patient or being on Children's property, any decision to restore visitation must be jointly determined by the Director of Public Safety and Risk Management or Legal Department, following a "huddle" of relevant people with input for decision making.
 - Contact Medical Social Work or Public Safety for assistance when a parent/guardian requests that the other parent/guardian be restricted from visiting.
- Any exceptions must be listed in the visitor list and approved by the unit leader and/or PCM on-call. If unit leadership approves, they should inform the PCM on call via secure chat. Exceptions during restricted visiting should be extremely limited.

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In order to provide the best and safest care, the number of visitors allowed at the bedside at one time are restricted according to the table above. Children's reserves the right to modify this number at any time. The patient's nurse is responsible to manage the number of visitors in the patient room at any time.

5. Siblings

- Before bringing siblings to visit a patient, the parent or legal guardian must get permission from the child's nurse. Exceptions exist during restricted visiting and for regular visiting in NICU, Critical Care (W3, PICU (W4 and C4) Surgery, and the MACC Unit. See unit specific details. Children's may allow a healthy infant sibling **less than 7 months** old whose **sole nutrition source** is breastfeeding to stay in the patient's room with the breastfeeding mother during the hospital stay.
- Siblings must be listed on the visitor list.
- Siblings must stay with their family in the patient room during visits or be accompanied by an adult in other general areas.
- Regular visiting hours for Visitors including siblings are 8:00 a.m. – 8:00 p.m. daily.
- **Siblings may not stay overnight with the patient and immediate caregiver.**
- Playrooms are intended for patient use only with the exception of the critical care playrooms.

6. Overnight Stays

- Immediate Caregivers or approved Adult Supportive Persons over the age of 18 are the only people allowed to stay overnight. **Siblings and minor children are not allowed to stay overnight.**
- The parent or legal guardian, the patient, and Patient Care Manager must approve the Adult Supportive Person; proof of age may be required.
- A maximum of two people may stay in the patient's room overnight. Due to space constraints, one is recommended.
- Sexual activity in the hospital is prohibited.
- With the approval of the Patient Care Director/Manager or Patient Care Manager On-Call, unmarried parents over the age of 18 may be approved to stay overnight after providing proof of age.
- Mothers under the age of 18 may stay overnight in the patient room alone or with their adult parent/legal guardian.
- When the patient is under the age of 18, **Children's will not allow the patient's boyfriend/girlfriend/significant other to be the Adult Supportive Person identified to stay overnight under any circumstances.**
- The Adult Supportive Person must be listed on the visitor list under exceptions and must be independent in meeting his/her self needs.
- Overnight stays may not interfere with the access to the patient at any time.
- Breastfed infants **who are not patients:**
 - Children's may allow a healthy infant sibling **less than 7 months** old whose **sole nutrition source** is breastfeeding to stay in the patient's room with the breastfeeding mom during the hospital stay. Refer to the attached Waiver form (Addendum A) to be signed and completed by the parent to plan for this

accommodation. Parents should be reminded that it is their responsibility to provide all care for the infant, as well as provide a safe sleep environment.

- In unplanned/urgent/emergent/extenuating circumstances, you may wish to explore the following in determining if exceptions need to be made and how best to serve the patient and family.
 - Best practice is for the infant to return home to limit exposure in the hospital. Does the parent have a suitable, safe, and willing support person to take the infant home?
 - Does the parent have a suitable safe sleep accommodation for the child with them? Best practice would be for the parent to have a Pack and Play for the infant to sleep in. This must be provided by the family.
 - If the parent does not have a safe sleep environment, consider the following options:
 - If before 9:00 p.m.
 - Is the Ronald McDonald House an option? Consult Social Work for assistance.
 - Does the parent have the means to find accommodations at a nearby hotel? See hotel/accommodation listing and consult Social Work if needed for additional information and/or support.
 - Patient Care Director should be consulted to assist in decision-making on above situations. Social Work can be the partner for the Patient Care Director in decision-making.
 - **Infants who are 7 months and older who are nursing and not the patient of CW may not stay overnight in the patient room with the mother.** The family will need to make arrangements to care for the healthy infant outside of CW. CW staff will support the mother's need to express milk, label, and refrigerate the milk (in family lounge refrigerators or in cold packs in for the visiting infant.) *Exception requests are reviewed by the Patient Care Director.*
- In the event of a deteriorating medical condition, nursing leadership may alter overnight stays to best accommodate the family.
- Appropriate attire, including no bare feet, is required.

7. Patient Room Sleep Restrictions

- CW does not allow the hospitalized child to sleep with the parent in the parent bed.
- CW does not allow the adult (parent or Adult Supportive Person) to sleep in the child's hospital bed.
- See Patient Care Policies and Procedures: "Fall Prevention" and "Infant Safe Sleep – CHW" for more details.

8. Infection Prevention

- All visitors should be free of infection. Staff, generally the patient's nurse, will inform visitors, including parents/caregivers, not to visit if the visitor is ill **or** is confirmed to have a communicable disease and are in their isolation time. Those with a communicable disease are not allowed to visit until their isolation time is complete, this includes those who are asymptomatic.

- Visitors will be instructed during admission process to follow respiratory etiquette guidelines and to perform hand hygiene when entering and leaving patient's room.
- Visitors are screened for illness at Welcome Centers and when on the unit. Visitors with known exposure to contagious infections other than an exposure to the patient they are visiting should not visit. (For example, if the patient has Influenza and the visitor was exposed to Measles, they should not visit.)
- Those visiting a patient who is in isolation should follow the appropriate guidelines for that patient's type of isolation. Teaching sheets are available to give to visitors and should be used each time there is a change to isolation orders.

- **AIRBORNE, AIRBORNE CONTACT, or HEIGHTENED ISOLATION PRECAUTIONS (Examples: Varicella (chicken pox), Measles, Covid-19, Tuberculosis (TB) Monkeypox):**

- Visitors are to remain in the patient room and should not enter any public space*
- For suspected or confirmed TB patients: Visitors should remain in the patient's room for the duration of their visit until cleared by their local health department. Contact the Infection Preventionist on call to verify if the visitor has been cleared by the health department. (This will need to occur during normal business hours so that Infection Prevention can contact the health department.)
- Visitors should have a mask on at all times, including while in the room to prevent additional exposure to themselves
- Visitors should go directly to the patient room after check-in at the Welcome Center, they should not stop in any public space*
- When leaving, they should directly exit the building and not stop at any public space*
- Unit staff should contact Infection Prevention for instructions on when the visitors may go to public areas after the patient's isolation time is complete
- For concerns regarding parent/caregiver access to food please refer the Parent Guardian Meal policy

*Public spaces include, but are not limited to: Cafeteria, Café West, Gift Shop, fish tank area, Healing Garden, unit waiting rooms, family kitchen spaces, Family Resource Center, Child Life Center, Sibling Care, etc.

- **MENINGITIS SPECIFIC REQUIREMENTS (SUSPECTED OR CONFIRMED)**

- Visitors are to remain in the patient room and should not enter any public space*
- Visitors should have a mask on at all times, including while in the room to prevent additional exposure to themselves

- Visitors should go directly to the patient room after check in at the Welcome Center, they should not stop in any public space*
- When leaving, they should directly exit the building and not stop at any public space*
- **Once an organism is identified as the cause for meningitis, follow the isolation specific guidance for that organism** (Refer to the Infection Prevention and Control Isolation chart)
- Patient's nurse should contact Infection Prevention for instructions on when the visitors may go to public areas after the patient's isolation time is complete
- For concerns regarding parent/caregiver access to food please refer the Parent Guardian Meal policy

*Public spaces include, but are not limited to: Cafeteria, Café West, Gift Shop, fish tank area, Healing Garden, unit waiting rooms, family kitchen spaces, Family Resource Center, Child Life Center, Sibling Care, etc.

- **DROPLET, DROPLET/CONTACT PRECAUTIONS (Examples: Influenza, Mumps, Pertussis):**

- Visitors may go to public places while wearing an isolation mask if they remain asymptomatic
- Visitors should complete hand hygiene with each entry and exit of patient room

- **SPECIAL CONTACT, PRECAUTIONS (Examples: C. diff, Norovirus):**

- Visitors may go to public places only after completing hand hygiene with soap and water if they remain asymptomatic
- Visitors should complete hand hygiene with soap and water with each entry and exit of the patient's room
- Movement to public places may be restricted by Infection Prevention if there is an outbreak

- **DROPLET/SPECIAL CONTACT PRECAUTIONS:**

- Visitors may go to public places while wearing an isolation mask and completing hand hygiene with soap and water if they remain asymptomatic
- Visitors should complete hand hygiene with soap and water with each entry and exit of the patient's room
- Movement to public places may be restricted by Infection Prevention if there is an outbreak

- **CONTACT PRECAUTIONS:**

- Visitors may go to public places after completing hand hygiene
- Hand hygiene should be completed with each entry and exit of the patient's room

Exceptions may include: end of life care/compassion and siblings of patients who are exclusively breastfed. **Exceptions need to be approved by the PCM on call.**

- When appropriate, travel screen question is completed by Welcome Center staff for all visitors.
- For infection control purposes and for purposes of confidentiality, families and visitors are not allowed to enter the rooms of patients other than the patient they came to visit.
- Isolation technique is to be observed at all times when indicated. Nursing personnel will provide visitors with instructions on the appropriate technique. Isolation precautions are posted outside each patient room.
- Infection Prevention is on call 24/7. Page or use secure chat to contact the Infection Preventionist on call if there are further questions regarding isolation concerns.

9. Prohibited Items

- No live animals (with the exception of the Animal Assisted Therapy Volunteer Program, service animals, or approved pet visitation) may be brought into the hospital for safety and infection control purposes. See The Patient Care Policy and Procedure: "Service Animals; Pet Visitation-Family Pet; Therapy Dogs."
- Latex balloons are not allowed.
- Alcoholic beverages, drugs, medications (other than those prescribed by the visitor's physician), pornography, weapons, or explosives will not be allowed in the hospital. Anyone suspected of using or possessing these, or any other inappropriate or illegal item(s) will be asked to leave the hospital. Public Safety must be notified in these situations.
- Telephones, televisions, computers with Internet access are available to families. Personal audio, video, or gaming equipment is allowed, but personal television are not. See Safety Policy and Procedure: "Electrical and Appliance Safety."

B. Unit/Department-Specific Guidelines for regular visiting.

1. Critical Care Specific (W3, PICU (W4 & C4))

- Siblings of any age are allowed to visit. They must be on the visitor's list and accompanied by an adult.
- Visitors under the age of 12 other than siblings are not allowed to visit. Visitors ages 12-18 must be approved by unit leadership, must be on the visitor list and must be accompanied by an adult at all times.
- It is recommended that there are no more than two visitors at the bedside at the time. This number is monitored by the patient's nurse.

2. NICU Specific

- The visitor list is managed and edited by NICU staff only.
- No Visitors under the age of 18 are allowed unless they are the siblings of the patient.
- Siblings of the parents that are over the age of 12 may be allowed to visit.

3. EDTC Specific

- No more than two visitors at a time are allowed in an exam room.

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- EDTC Staff will issue the family two numbered badges and explain the two visitors at a time restriction.
- Patient's parents or guardians are permitted to handoff the two numbered badges to exchange the two people allowed in the room.
- Exceptions to the two visitor restriction can be made if a lone adult brings the patient to the EDTC with more than one other child present. The children may be allowed into the exam room until another adult arrives to supervise the child(ren) in an EDTC Waiting Room.
- If there are large numbers of visitors in an EDTC Waiting Room, the large group may be moved to another area of the hospital or asked to leave as deemed appropriate by Public Safety. Contact Public Safety for assistance.

4. Surgery/Day Surgery

- General
 - Two parents, or adult visitors are welcome to accompany their child on the day of surgery. For safety reasons and due to limitations on space, only two adults are allowed back in the pre-op areas.
 - Children under the age of 18 are not allowed. Exceptions will be listed in the arrival comment box and should be added to the visitor list upon arrival. (Exceptions are limited and generally made for a breast feeding sibling under the age of 7 months of age)
 - If a visitor is not on the list or is asking for an exception, contact the Day Surgery department 414-337-9399 and ask to speak to the charge nurse.
 - Hospital visiting hours of 8:00 a.m. – 8:00 p.m. do not apply for Day Surgery patients, as some procedures are conducted outside of these hours. The department is open from 06:00 a.m. to 9:00 p.m.
- PACU (Post Anesthesia Care Unit/Recovery Room)
 - One family member may be invited to unite with the patient in the PACU.
 - During the visit, the family member will remain at the patient's bedside to respect patient privacy for others.
 - Visitors (including siblings) under the age of 18 will not be allowed.

C. Special Circumstance Guidelines

1. Crowd Management

- Crowd or a potential for a crowd occurs when
 - Trauma/ED all
 - End of life
 - Staff discover a sizeable gathering of people
- Crowd management team are notified and collaboration begins amongst the following, with final decision coming from the following:
 - Patient Care Manager
 - Public Safety leader
 - Social Work
- Decision considerations for crowd management plan are discussed to include the following:

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- Physical space to house visitors
 - Time of day
 - Hospital resources (personnel)
 - Anticipated number of visitors
 - Behavior of visitors – visitors creating a disturbance may be asked to leave
 - Viral visitor restrictions
- Crowd management plan
 - Epic documentation will reflect where the visitors will gather, how many visitors will be allowed and how long the visitors can stay in the hospital.
 - Visitor screening and monitoring – how and who will screen visitors and what staff will monitor the visitors
 - Briefing staff and family/visitors on the crowd management plan
- 2. Police Protective Custody
 - Refer to Children's P&P: Patients with Law Enforcement Involvement
 - Visitation may be restricted. See exception notes in the visitor list.
 - Hospital staff will not supervise visitation for parents; if supervision is required, the requesting organization (i.e. Child Protective Services, Law Enforcement, etc) must provide and arrange for supervised visits.
 - If the patient is in the custody of law enforcement or corrections, then the agency that has custody of that patient can restrict visitation and use of TV, telephone, or other electronic devices.
 - Public Safety must be notified of all patients in protective custody.
- 3. End of Life
 - A Patient Care Manager or Administrator on Call must approve lifting visiting restrictions.
 - Unit staff must enter "end of life" in the exceptions field of the patient's visitor list.
 - End of life means all visitors are allowed at all hours, to the extent visiting does not interfere with patient care. Patient care leaders, in conjunction with Public Safety and Social Work, are responsible for assessing situation and determining if a limit must be placed on total number of visitors on the unit at one time.
 - Public Safety must be consulted if there is a Security Risk Assessment for the patient.
- 4. Suicide Precaution
 - See the Suicide Risk Assessment / Care of the Suicidal/Self-harm or Potentially Suicidal Patient Policy and Procedure for details on restrictions on visitation.
 - Visitors are not allowed to give any item to a patient on suicide precautions unless the patient sitter, nurse, or physician check the item thoroughly to determine it is safe.
- D. Other Visitor Guidelines
 1. Former patients and/or their parents
 - Children's does not allow visitors to go to patient care areas unless they are named on a patient visitor list.

- Children's does not allow former patients to visit staff in any patient care areas. Staff may meet their visitors in and remain in common areas and must accompany their visitors throughout duration of the visit. Common areas include Cafeteria, Café West, Lobbies.
2. Visitors to Patient Care Staff
 - Children's does not allow visitors for staff to go to any patient care area.
 - Children's does not allow staff to escort their visitor(s) to any patient care area.
 - Staff may meet their visitors in common areas (Cafeteria, Café West, Lobbies).
 - Staff must have the approval of their supervisor before leaving the patient care area.
 - Welcome Center staff cannot accept any item dropped off for staff.
 - During restricted visitation, visitors to patient care staff should be limited.
 3. Staff Visiting Patients
 1. Staff who wish to visit a patient must be listed on the patient's visitor list.
 2. Staff may only visit during visiting hours.
 3. Staff may not visit a patient on paid time.
 4. Leadership Rounding
 - Leaders may round with families in patient care areas for the following reasons:
 - Experience
 - Quality of care
 - Patient Operations issues
 - Safety
 - Leaders will check in with the patient's RN or provider before entering the room
 5. Donations, Gifts, Food
 - Groups who wish to donate gifts must call the Donation Hotline at 414-266-2687.
 - See Administrative Policy and Procedure: "Gifts/Donations of Toys, Clothing, Books – Screening and Distribution."
 - Welcome Center staff cannot accept any food item dropped for patients or visitors. The individual is responsible to contact the patient or family to receive the food item in the hospital lobby. See Administrative Policy and Procedure "Mail and Package Deliveries".
 6. Observers/Job Shadow
 - See Administrative Policy and Procedure: "Observers – Job Shadows."
 7. Special Guests
 - In most cases, we do not allow groups to distribute gifts or visit directly with patients. Any exceptions must be approved by the Patient Care Director in consultation with Director of Patient/Family Amenities & Support and MarCom.
 - All visits must be arranged ahead of time with the Patient/Family Amenities Support leadership and/or Child Life Department.
 - Any special guests who arrive at the hospital without prior approval with the exception of legally required authorities who arrive as a result of court order or investigative purposes, will be asked to leave and given information about how to schedule a future visit.

- The CW Foundation, Administration, or Marketing and Communications may arrange for a group of special guests to visit a patient care area during regular (non-restricted) visitation times. All such events are generally pre-arranged with the Special Events Planning Team and should be communicated to the Director of Patient/Family Amenities & Support and the manager for Welcome Centers.
 - Special guests are restricted to public figures and groups whom children will recognize and like to meet, such as professional athletes and entertainers.
 - Special Guests may also be those required to be on site as a result of an investigation such as law enforcement, child protective services. These entities should be working with Public Safety and or Social Work team members.
 - Performers must be professional entertainers with experience performing for children. Child Life staff screens anyone interested in performing for patients. Interested individuals should be directed to call 414-266-2182.
 - Bedside visits are limited and written permission from the child's legal guardian must be provided ahead of time.
 - Photos of patients may not be taken without the written consent of the patient's legal guardian. A staff member will ask legal guardians to sign a consent form for media or visitors to photograph or videotape. See Administrative Policy and Procedure: "Privacy – Photographing – Videotaping and Other Imaging of Patients and/or Caregivers."
 - Entertainers or other special guests who wish to invite the media must work with Marketing and Communications at least one week prior to the proposed visit.
 - A hospital representative must accompany special guests at all times.
 - We recommend special guests visit on regular business days, Monday through Friday, between 10:00 a.m. and 4:00 p.m., when most children are awake and staff is available to help.
 - Visits must not interfere with the medical needs of the child.
 - Due to infection control concerns, special guests under the age of 16 cannot have any direct contact with patients.
 - All special guests must wash hands upon entering or exiting a patient room.
8. Media
- Media personnel are never allowed without prior approval from Marketing and Communications (MarCom).
 - If MarCom has not notified Patient/Family Amenities & Support and Public Safety of the visit, contact MarCom to confirm. Contact Public Safety if needed.
 - Any questions after hours can be directed to the on-call MarCom staff.
9. Photography
- See Administrative Policy and Procedure: "Privacy – Photographing – Videotaping and Other Imaging of Patients and or Caregivers."
10. Conference Attendee(s)
- Conferences should be pre-arranged with a Welcome Center Manager and a Public Safety leader.

- All attendees must be badged with CW visitor badges or pre-approved CW conference badges. CW, Medical College of Wisconsin, or Froedtert Health staff can attend with their employee badge.
- For conferences, conference planners are asked to provide additional staffing at a Welcome Center to efficiently manage attendees.

11. Vendors

- Vendors must use the vendor management system (Intellicentrics) at a Welcome Center to log their arrival and print a vendor badge, even if they are simply here for a meeting.
- Questions should be directed to Supply Chain x63114 or x63434.
- See Administrative Policy and Procedure: "Vendor Representatives."

12. Tours

- Children's does not allow individuals or groups to tour our facility without the expressed permission of hospital Administration or Foundation.
- Staff are not allowed to invite individuals or groups for tours without permission from Administrative leaders.
- Tours must be scheduled with the Director of Patient/Family Amenities & Support.
- Tours in the 'hospital' (as defined above – any building where patient care takes place) will not be allowed during restricted visiting. Tours that have been scheduled prior to restricted visiting will be encouraged to be rescheduled or relocated. Any exception will be based on intention/criticality of tour, numbers of tour guests, where tours are to visit and must follow masking guidelines.
- During restricted visiting, all tours or group meetings in the Corporate Center require approval from Administration or Foundation leaders.
- If the tour is expected to exceed 20 guests, Children's Public Safety Manager or Director must be notified in advance to discuss and confirm parking accommodations before confirming the tour.
- The Children's Ambassador Manager must be notified a week in advance for badge prep for large 'hospital' tours (day prior is acceptable for tour groups smaller than 10).
- All tour groups must be escorted by an employee 'sponsor' at all times. At no time may a tour group or individual be left unattended.
- Child Life conducts regular pre-op tours for patients scheduled for surgery.

13. Potential Employees – Interviews

- When a candidate presents at a Welcome Center, the Welcome Center will contact the leader scheduled to do the interview. That leader, or designee will come to meet the candidate at the Welcome Center.

Related Policies and Procedures

- Administrative Policies and Procedures
 - Privacy – Confidentiality Patient Information

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Visitors and Special Guests/Process Owners: Dir. Patient/Family Amenities and Support & Dir. Public Safety

- Observers/Job Shadow
- Harassment/Bullying/Disruptive Behavior
- Vendor Representatives
- Access to or Obtaining a Copy of Medical Records by a Patient or Personal Representative
- Privacy: Photographing - Videotaping and Other Recording of Patients, Clients and Caregivers
- Acceptance of Donations and Gifts to Children's Hospital of Wisconsin Foundation
- Gifts/Donations of Toys, Clothing, Books - Screening and Distribution
- Safety Policies and Procedures
 - Cellular Phones and Portable Radio Use Restrictions Electrical Safety
 - Violence in the Workplace
- Infection Control Policies and Procedures for Visitation
 - MACC Fund Center (Hospital and Outpatient Units) Infection Control
 - Neonatal Intensive Care Unit Infection Control
- Patient Care Policies and Procedures
 - Security Risk – Care of Patients
 - Behavioral Outbursts – Care of the Patient
 - Fall Prevention
 - Infant Safe Sleep – CHW
 - Surrogates
 - Medical Record – Adoption – Protection, Access and Management of
 - Confidential Patient
- Unit Specific Policies and Procedures
 - EDTC - Traffic Control/Visiting
 - NICU – Visitor List

Approved by the Chief Nursing Officer and VP CHW Supt Svc April 10, 2025

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Visitors and Special Guests/Process Owners: Dir. Patient/Family Amenities and Support& Dir. Public Safety

Addendum A



Release of Liability for Extended Visitation of Breastfeeding Infant Sibling

WAIVER

Children's Hospital of Wisconsin (CHW) may allow a healthy infant sibling who is breastfeeding to stay in the patient's room with the mom during the stay. Based on patient care needs, we may not be able to accommodate healthy siblings to stay the night. This will be a conversation with the patient's health care team. Please know that depending on care needed, this decision may change throughout the course of the stay.

I understand and agree to the following:

- Infant is the sibling of the patient.
- Infant is healthy and does not have a fever.
- Infant is under 7 months of age.
- Infant has all immunizations up-to-date.
- Breastfeeding mom is sole/only source of nutrition for the infant.
- Family will provide sleep environment in the form of a Pack and Play and follow all safe sleep guidelines as outlined in the safe sleep teaching sheet. No co-sleeping will be allowed in the hospital.
- CHW makes no arrangement for expressed breast milk containment for a non-patient.
- Infant is primarily restricted to patient room and parent must always be present to supervise visiting infant, even if infant is sleeping.
- CHW is not responsible for care of the infant.
- Family must provide all personal care items for the infant (diapers, wipes, clothing, etc.).
- Failure to comply with any of the above will result in loss of this privilege.

In consideration for bringing my healthy infant to stay in the hospital, I hereby release from any and all liability, extend absolute immunity to, and agree not to sue Children's Hospital of Wisconsin, Inc. and any related entity thereof and/or its authorized employees, officers, agents, volunteers, directors, and/or representatives from/for any and all claims, damages, liabilities, costs and/or expenses which might occur related to injury, death or property damage resulting from my healthy infant staying in the hospital.

I understand that this release applies to myself and my personal representatives, heirs and assigns. I also waive the right I have to bargain for different release of liability terms. I have read this waiver and understand the terms used in it and their significance.

This waiver is freely and voluntarily given with the understanding that I am giving up my right to legal recourse against Children's Hospital of Wisconsin. My signature on this document is intended to bind myself and/or my legal representative.

Parent/Legal Guardian: _____
Print Name

Parent/Legal Guardian Signature: _____ Date: _____

Witness of Parent/Legal Guardian Signature: _____ Date: _____

When completed, scan into electronic medical record.

C8041N/NS (07/22)



DT728

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Visitors and Special Guests/Process Owners: Dir. Patient/Family Amenities and Support & Dir. Public Safety

**Liberación de responsabilidad
por visitas extendidas de un
hermano lactante**

EXENCIÓN

Children's Hospital of Wisconsin (CHW) puede permitir que un hermano lactante sano que esté amamantando permanezca en la habitación del paciente con la madre durante la estancia. Según las necesidades de atención del paciente, es posible que no podamos alojar a los hermanos sanos para pasar la noche. Esta será una conversación con el equipo de atención médica del paciente. Tenga en cuenta que dependiendo de la atención necesaria, esta decisión puede cambiar a lo largo de la estadía.

Entiendo y estoy de acuerdo con lo siguiente:

- El bebé es el hermano del paciente.
- El bebé está sano y no tiene fiebre.
- El bebé tiene menos de 7 meses de edad.
- El bebé tiene todas las vacunas al día.
- La madre que amamanta es la única fuente de nutrición para el bebé.
- La familia proporcionará un Pack and Play (corralito) para dormir y deberá seguir todas las pautas de seguridad del sueño como se indican en la hoja de enseñanza dormir seguro. No se permitirá que el bebé duerma con los padres en el hospital.
- CHW no hace ningún arreglo para guardar la leche materna extraída para un niño que no sea paciente.
- El bebé está principalmente restringido a la habitación del paciente y un padre siempre debe estar presente para supervisar al bebé, incluso si el bebé está durmiendo.
- CHW no es responsable de cuidar al niño.
- La familia debe proporcionar todos los artículos de cuidado personal para el bebé (pañales, toallitas, ropa, etcétera).
- El incumplimiento de cualquiera de los puntos anteriores resultará en la pérdida de este privilegio.

Con el fin de traer a mi bebé sano a quedarse en el hospital, por medio de la presente libero de cualquier y toda responsabilidad, extendiendo inmunidad absoluta y estoy de acuerdo en no demandar a Children's Hospital of Wisconsin, Inc. ni a cualquier entidad relacionada con la misma o a sus empleados autorizados, presidentes, agentes, voluntarios, directores, gerentes o representantes de/para cualquier y todo reclamo, daños, responsabilidades, costos o gastos que puedan ocurrir relacionados con lesiones, muerte o daños a la propiedad resultantes de que mi niño sano se quede en el hospital.

Entiendo que esta liberación de responsabilidades aplica a mi persona y a mis representantes personales, herederos y cesionarios. También renuncio al derecho que tengo de negociar términos diferentes de liberación de responsabilidades. He leído esta renuncia y entiendo los términos utilizados y su significado.

Esta exención se otorga libre y voluntariamente con el entendimiento de que estoy renunciando a mi derecho de un recurso legal contra Children's Hospital of Wisconsin. Mi firma en este documento pretende obligarme o a mi representante legal.

Padre o tutor legal: _____
Nombre en letra de molde

Firma del padre o tutor legal: _____ Fecha: _____

Firma del testigo del padre o tutor legal: _____ Fecha: _____

When completed, scan into electronic medical record.

C8041N/NS (07/22)

Addendum B



Children's
Wisconsin

Our visitor policy:

What our care teams need to know and do

Supporting our families and teams

We've learned that the number of visitors can significantly impact the care environment. Limiting the number of visitors helps our teams provide more streamlined, effective care while maintaining a safer environment.

Our visitor policy — See the other side of this page for an overview the visitor policy.

What's changing?

- Visitors under the age of 12 are allowed to visit.
- Visitor list and limit for non-viral season is now 6 instead of 20.
- Patient visitor lists can be changed every 3 days.
- Masking is no longer required for direct patient care, standard infection prevention practices should be followed.

What's staying the same?

- Per our policy, the patient's nurse is responsible for managing the number of visitors in the patient room at any time.
- Critical care units (NICU and PICU/CICU), EDTC and our Surgical Services department have specific guidelines.
- Exceptions must be approved by unit leadership with a Voalte message to the PCM on call or by the PCM on call.

Why is the non-viral season visitor limit now 6 instead of 20?

To improve safety and security and help prevent hospital infections, we've reduced the visitor limit at both hospitals from 20 to 6. This helps us better manage hospital access, reduce security risks and create a more secure environment to provide the best and safest care.

You impact our patient experience

We must support equity for all children and families, and this requires consistency across all patient care units and areas at Children's. Our families notice when others receive exceptions and they haven't — we see this reflected in patient experience comments and complaints to our Patient Relations team. It's critical for all of us to stay consistent in applying our policy. If we don't, it creates a negative and confusing experience for our patients and families, and for our teammates. Your colleagues are the ones confronted about unfair treatment.

How to help families build their list and remind them about masking

It's important to work with our families to create this list. We want you to be transparent and clear about expectations when discussing the list. Here are some ideas:

- As you begin your conversation about our viral season precautions ending, remind families this means our masking requirement is ending as well, "The masking requirements in place during viral season have ended. However, if you would like us to continue masking when caring for your child, just let us know and we'll note that for your care team."
- Start by saying: "Let's create your visitor list. The individuals you put on this list can be changed every 3 days."
- Then ask: "Who is important to have on your list? Let's start with them first."
- If families start with just a few names, let them know they can add more if needed: "That's a great start. If you want to revisit adding more, just me know."
- Note: NICU, PICU/CICU and surgical services should use the visitor guidelines that apply to their units as they use these talking points (ie: no visitors under 18 except for siblings of patient).

Questions?

If you have questions about the policy, how to have conversations with families or want to share your feedback, please reach out to your leader. Thanks for everything you do.

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