

**PINECRESTSUPPORTSANDSERVICESCENTER
PROCEDURE MEMORANDUM**

SUBJECT: VISITATION GUIDELINES

DEPARTMENTS INVOLVED: Active Treatment, Clients Accounts, Nursing, Records Management, Residential Services, Client Rights Office, Human Rights Committee

GUIDING PRINCIPLES:

People who live at Pinecrest are encouraged to maintain healthy, supportive relationships with their family members and friends during their admission to Pinecrest. Maintaining healthy, supportive relationships with family members and friends during admission to Pinecrest will be beneficial to the person's treatment outcomes while admitted and will improve transition outcomes for the person upon discharge.

In accordance with R.S. 40:2005, any resident of Pinecrest eighteen years or older who is not legally interdicted or placed under continuing tutorship and who is not judicially placed in the custody of the Louisiana Department of Health may designate those individuals who will not be denied access to visit him/her in person during his/her stay at the facility.

In accordance with R.S. 40:2180.2, licensed Intermediate Care Facilities for people with Developmental Disabilities (ICF/DD) may allow any close family member or legal representative of a resident of an ICF/DD to visit the resident during any state of public health emergency.

PROCEDURES:

I. Authorized Visitor Identification

A. Authorized Visitor List

1. At the time of admission, and at least annually thereafter, the Qualified Intellectual Disabilities Professional (QIDP) shall obtain from the person and/or his/her guardian primary correspondent a list of all family members and friends who are authorized to visit the person. The QIDP shall verify for each authorized visitor:
 - a. whether or not that visitor is authorized to visit with the person off-campus,
 - b. information about the visitor's relationship to the person (e.g. parent, sibling, cousin, friend, etc.), and
 - c. current contact information to include home and mailing addresses: home, work, and/or cellular telephone numbers: and an e-mail address (if available),
2. The QIDP shall enter the authorized visitor information into the OCDD Data System Census module, Contacts section and shall generate a Face Sheet report for the person. This Face Sheet report shall be considered the Authorized Visitor List for the person.
3. Records Management staff shall file the Face Sheet report in the person's integrated record so that the person's Authorized Visitor List is available for staff with a need to know.

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4. The QIDP, Client Rights Office staff and Residential Services Specialists 7 and 8 shall have access to the Face Sheet report via the internet-based OCDD Data System in case the integrated record is not available at the time a visitor arrives.
 5. The person and/or his/her primary correspondent may add to, delete from, or revise the Authorized Visitor List at any time through contact with the QIDP.
- B. Visitor Identification Verification
1. Residential Services staff shall verify the identity of all visitors by viewing the visitor's State issued ID/driver's license and checking the person's Face Sheet for the presence of the visitor's name in the Contacts section.
 2. If a visitor does not have his/her State issued ID/driver's license on hand at the time of the visit, the Residential Services staff shall verify with the resident the visitor's identity.
 3. If the resident is not able to verify the visitor's identity, the Residential Services staff shall follow the guidelines in the Discrepancy/Conflict Resolution section below.
- C. Discrepancy/Conflict Resolution
1. If the would-be visitor's name does not appear on the Face Sheet in the Contacts section, Residential Services staff shall contact the QIDP (during business hours) or the Client Rights Officer on call (after hours, holidays, and weekends) for guidance.
 2. If the Face Sheet is not available at the Home for Residential Services staff review, Residential Services staff shall contact the QIDP (during business hours) or the Client Rights Officer on call (after hours, holidays, and weekends) for guidance.
 3. The QIDP or Client Rights Officer on call shall take appropriate measures to resolve the discrepancy/conflict in a timely manner. Potential resolution measures include but are not limited to:
 - a. Reviewing the Face Sheet report in the OCDD Data System for any relevant Special instructions,
 - b. Contacting the person and/or primary correspondent to determine if the would be visitor is someone that should be added to the Authorized Visitor List,
 - c. Speaking with the would-be visitor in person or by telephone to gather information and discussion options, next steps, etc.
 - d. Contacting Pinecrest Police for assistance in resolving any conflict that has potential to become problematic.
- D. Visitor Limitations
1. If the person identifies one or more family member or friend who he/she wishes to be excluded from the Authorized Visitor List (i.e. someone the person does not wish to have contact with), the QIDP shall include the family member(s)/friend(s) name(s) in the Special Instructions section in the OCDD Data System. The Special Instructions will appear on the person's Face Sheet so that staff will know that the person does not wish to have contact with the excluded family member(s)/friend(s).
 2. If the person's guardian or primary correspondent identifies one or more family member or friend who should be excluded from the Authorized Visitor List (i.e. someone the guardian or primary correspondent does not wish to have contact with the person), the QIDP shall include the family member(s)/friend(s) name(s) in the Special Instructions section in the OCDD Data System with a note that the visitor exclusion is at the guardian/ primary correspondent's request. The Special Instructions will appear on the person's Face Sheet so that staff will know that the guardian

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/primary correspondent does not wish for the person to have contact with the excluded family member(s)/friend(s).

- a. If the person is a non-interdicted adult and wishes to have contact with someone that the primary correspondent has excluded from the Authorized Visitor List, the QIDP shall facilitate a discussion between the person and the primary correspondent in an effort to resolve the issue without negative impact on the relationship between the person and primary correspondent. If no mutually agreeable resolution is reached, the resident's wishes will be honored with regards to the family member/friend being placed on the Authorized Visitor List,
- b. If the person is a minor or an interdicted adult and wishes to have contact with someone that the guardian has excluded from the Authorized Visitor List, the QIDP shall actively work with the guardian and the person to reach the maximum agreeable level of interaction for the person while honoring the guardian's wishes.

II. On-Campus Visits

A. Visit Guidelines

1. The person and his/her visitor have the right to engage in consensual nonsexual physical contact such as handholding or hugging during visits.
2. The facility will notify visitors of any provisions in place to protect the health, safety, and welfare of residents, staff of the facility, and/or visitors based on relevant circumstances and variables. Visitors, however, will not be required to submit proof of any vaccination or immunization.

B. Visit Locations

1. Authorized visitors may visit with residents of Pinecrest in the person's home and/or at various common areas on campus including the Parents' Park, the Canteen, or any number of outdoors areas with seating options such as the pond, serenity garden, gazebos, pavilions, etc.
2. Visits occurring in the person's home should be conducted in a private area designated for family/friend visits if at all possible so as not to disrupt the activities/routines of the person's housemates.
3. For visits occurring outside of the person's home, the visitor will be responsible for supervision/care of the person during the visit unless the visitor or the person specifically requests staff presence during the visit.

C. Visitation Times

1. Visitors are not required to provide Pinecrest with advance notice for on-campus visits.
2. Visits may occur on any day of the week and at any reasonable hour consistent with the right of the person's and his peers' privacy.
3. Visitors shall be encouraged to participate in delivery of the person's active treatment program during visits when such participation is practical and beneficial to the person.
4. If a person's visitation times begin to interfere with his/her participation and/or progress in his/her active treatment program, the QIDP will discuss the issue with the person and/or his/her guardian / primary correspondent and seek consensus on

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strategies to resolve the issue so that the person continues to benefit from family/friend visits while also continuing to participate in and make progress in his/her active treatment program.

D. Documentation:

1. All visitors shall sign in and out on the Home Visitor Log.
2. The Home Manager on duty shall document all visits in the Home Logbook.
3. The Home Manager on duty shall document any new personal possessions the visitor brings the person in the Home Logbook and on the person's Personal Inventory form.

III Off-Campus Day Visit

A. Planning

1. Visitors are not required to provide Pinecrest with advance notice for off-campus day visits.
2. The QIDP shall encourage guardians/primary correspondents to provide advance notice of off-campus day visits if one or more of the following circumstances exists for the person:
 - a. One or more of the person's medication administration times is scheduled at a time when off-campus day visits are most likely to occur (e.g. 10a, Noon, 4p, 6p. 7p medication times).
 - b. The person has frequent medical appointments related to chronic medical condition(s) or has frequent acute medical issues which require medical attention.
 - c. The guardian/primary correspondent/ visitor lives such a distance from Pinecrest that it would be inconvenient for him/her to arrive for a visit and the person not be available due to medical appointment, community integration activity, etc.

B. Pre-Visit Notifications

1. The employee who receives notification from the person, guardian/primary correspondent, or authorized visitor that an off-campus day visit is planned/being planned, shall immediately notify the QIDP.
2. The QIDP shall notify the following parties in advance of the planned off- campus day visit as appropriate:
 - a. Interdisciplinary Team so that the ID Team can discuss and review with the visitor any current person-specific health/safety/behavior concerns related to an off-campus visit and so that any members of the ID Team who need to speak with the visitor can plan to do so before or after the visit.
 - b. Home Manager on duty so that he/she can note the planned off-campus day visit on the Home calendar and in the Home Logbook.
 - c. RN Supervisor for the person's Program/Home so that he/she can make preparations/arrangements for any medication administration that would normally occur during the off-campus day visit.
 - d. Shift Supervisor (RSS6) who will be on duty on date of visit so that he/she can make arrangements to be present at the person's Home to greet the visitor(s) at the appointed time.
3. When a visitor arrives at the person's Home for an off-campus day visit (planned or unplanned). the Home Manager shall:
 - a. Notify the Program/Home Nurse on duty.
 - b. Notify the Shift Supervisor (RSS6) on duty.

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C. Commencement of the Off-Campus Day Visit

1. If the off-campus day visit was planned:

- a. The Program/Home Nurse shall bring any medications which need to be administered during the off-campus day visit to the Home at the appointed time and shall provide the visitor with the medication(s) and instructions related to medication administration and any other significant health care concerns that the visitor needs to be aware of during the off-campus day visit.
- b. The Shift Supervisor (RSS6) shall report to the Home prior to the time the visitor's planned arrival time and shall ensure that the person is well-groomed and appropriately dressed in his/her own well-fitting weather-appropriate clothing. Once the visitor(s) arrives, the Shift Supervisor (RSS6) shall greet the visitor(s) and provide his/her name and work contact information to the visitor(s) so that they know who to contact should issues arise during the visit.

2. If the off-campus day visit was not planned:

- a. The Program/Home Nurse will determine whether or not any medication needs to be administered during the timeframe the person will be off-campus with the visitor(s). If one or more medication needs to be administered during the timeframe of the off-campus day visit, the Program/Home Nurse shall prepare the needed medication(s) and provide the visitor with the medication(s) and instructions related to medication administration and any other significant health care concerns that the visitor needs to be aware of during the off-campus day visit. The Program/Home Nurse shall make every effort to complete this step within one (1) hour of notification that a visitor wishes to take the person off-campus for a day visit.
- b. The Shift Supervisor (RSS6) shall report to the Home within 30 minutes of notification that the person has visitors who wish to take him/her on an off-campus day visit and shall greet the visitor(s) and provide his/her name and work contact information to the visitor(s) so that they know who to contact should issues arise during the visit.

D. Return from Off-Campus Day Visit

4. Upon the person's return from an off-campus day visit, the Home Manager shall:
 - a. Inquire of the person and visitor as to whether any incidents or injuries occurred during the off-campus visit and, if so, complete incident reporting protocols.
 - b. Inquire of the person and visitor as to whether or not the person is bringing any new personal possessions or property into the facility after the visit and, if so, complete personal inventory protocols.
 - c. Notify the Program/Home Nurse of the person's return so that any medication administration-related needs can be addressed.

E. Documentation

1. All visitors shall sign in and out on the Home Visitor Log.
2. The Home Manager on duty shall document all visits and individual departures from and returns to campus in the Home Logbook.
3. The Home Manager on duty shall document any new personal possessions the person returns with after the off-campus visit in the Home Logbook and on the person's Personal Inventory form.
4. The Program/Home Nurse shall complete the "Off-Campus Care Instructions"

form (PSSC MED-015) and obtain necessary signatures,

IV. Off-Campus Overnight Visits**A. Planning**

1. The QIDP shall strongly encourage visitors to provide Pinecrest with advance notice for off-campus overnight visits by contacting the QIDP at least five (5) days in advance of proposed off-campus overnight visits so that preparations can be made for the visit in advance resulting in minimal wait time for the person and visitors on the date of visit.
2. When informed by an authorized visitor of a proposed off-campus overnight visit, the QIDP shall convene the person's Interdisciplinary Team within one (1) business day to discuss and review with the person, guardian/primary correspondent, and/or visitor with whom the person will spend time away from campus overnight:
 - a. any current person-specific health/safety behavior concerns related to the proposed off-campus overnight visit and
 - b. the person's active treatment program including any training, equipment, service, or support needs the person may encounter during the visit time-frame with attention to the importance of (family members)/friend(s) implementing the active treatment program in the off-campus setting.
3. If after review by the ID Team and discussion with the person, guardian/primary correspondent, and/or visitor with whom the person will spend time away from campus overnight, the ID Team determines that the proposed off-campus overnight visit should not be approved:
 - a. The QIDP shall, within one (1) business day of the ID Team meeting, seek HRC ad hoc committee approval to deny the proposed off-campus overnight visit.
 - b. The QIDP will seek this approval from the HRC ad hoc committee by presenting a written report to the ad hoc committee via the Client Rights Office detailing the proposed off-campus overnight visit (,who, when, where), the ID Team's rationale for disapproving the off-campus overnight visit, and the ID Team's actions to resolve the issue collaboratively with the person, guardian/primary correspondent, and/or would-be visitor prior to seeking HRC ad hoc committee approval to deny the proposed visit.
 - c. The HRC ad hoc committee shall review the ID Team's request and approve or disapprove the request within one (1) business day and shall provide notice to the ID Team of the ad hoc committee decision via the Client Rights Office.
 - d. If the HRC ad hoc committee approves the ID Team's request to disapprove the proposed off-campus overnight visit, the QIDP shall inform the person, the guardian/primary correspondent, and the would-be visitor that the off-campus overnight visit is denied along with a rationale for the decision.
 - e. If the HRC ad hoc committee does not approve the ID Team's request to disapprove the proposed off-campus overnight visit, the QIDP shall inform the person, the guardian/primary correspondent, and the would-be visitor that the off-campus overnight visit is approved.

B. Pre-Visit Notifications and Preparations

1. Once an off-campus overnight visit is approved, the QIDP shall notify the following parties of the upcoming visit:

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- a. Home Manager on duty.
 - b. RN Supervisor for the person's Program.
 - c. Shift Supervisor (RSS6) who will be on duty on date of visit.
 - d. Director of Food and Nutrition Services.
2. The OIDP shall initiate the Home Visitation Record (PSSC CLS-013) for the visit and shall deliver the form to the person's Home at least one (1) business day prior to the scheduled visit.
 3. The Home Manager on duty shall note the home visit initiation and end dates on the Home calendar and in the Home Logbook as notification to staff on subsequent shifts.
 4. The Shift Supervisor (RSS6) who will be on duty on the date the off-campus visit is initiated shall:
 - a. Ensure that the person has an adequate supply of well-fitting, weather-appropriate personal clothing, including shoes, for the visit.
 - b. Ensure that the person has adequate luggage in which to place his/her possessions for the visit.
 - c. Ensure that the person's belongings needed for the visit are packed prior to the time the visit is to be initiated.
 5. The RN Supervisor for the person's Program shall:
 - a. Ensure that an adequate supply of each of the person's medications are on hand at the person's Home or in the Program nursing office on the date the visit is to start to meet medication administration requirements for the time-frame that the person will be away from the facility. This may involve requesting earlier-than-usual medication refills from the pharmacy if a medication refill would normally occur during the visit period.
 - b. Complete the sections of the Off-Campus Care Instructions (PSSC MED-015) that can be filled in prior to the date the visit starts so that the information can be efficiently reviewed with the visitor and visitor signature obtained on date of visit.
 - c. Notify Centralized Scheduling of the planned off-campus visit dates so that appointments will not be scheduled for the person during the visit period.
 6. The Director of Food and Nutrition Services shall notify the Food Service contractor of the dates and meals that the person will be away from the facility so that meals will not be provided to the Home for the person while he/she is away from the facility.
- C. Commencement of Off-Campus Overnight Visit
1. If the off-campus overnight visit was planned:
 - a. The Program/Home Nurse shall bring any medications which need to be administered during the off-campus day visit to the Home at the appointed time and shall provide the visitor with the medication(s) and instructions related to medication administration and any other significant health care concerns that the visitor needs to be aware of during the off-campus overnight visit.
 - b. The Shift Supervisor (RSS6) shall report to the Home prior to the time the visitor's planned arrival time and shall ensure that the person is well-groomed and appropriately dressed in his/her own well-fitting weather-appropriate clothing. Once the visitor(s) arrive, the Shift Supervisor (RSS6) shall greet the visitor(s) and provide his/her name and work contact information to the visitor(s) so that

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they know who to contact should issues arise during the visit.

2. If the off-campus day visit was not planned:

- a. The Home Manager shall contact the QIDP (during business hours) or the Client Rights Officer on call (after hours, weekends, and holidays) and notify the QIDP or Client Rights Officer on call of the arrival of visitor(s) for an unplanned off-campus overnight visit.
- b. The QIDP or Client Rights Officer on call shall gather information from staff and the visitor(s) as well as relevant ID Team members (during business hours) to determine whether or not to approve the impromptu off-campus overnight visit. In the absence of clear contraindications for approving the requested off-campus overnight visit (e.g. person has had a recent increase in behavioral or psychiatric challenges which make him/her a threat to self or others outside of the facility environment and structure, person is ill, person has had recent balance issues requiring a level of supports the visitor is not prepared to provide, there have been issues with the person participating in similar visits with the visitor in the past), efforts should be made to accommodate the requested visit.
- c. The Program/Home Nurse will determine whether or not any medication needs to be administered during the timeframe the person will be off-campus with the visitor(s). If one or more medication needs to be administered during the timeframe of the off-campus day visit, the Program/Home Nurse shall prepare the needed medication(s) and provide the visitor with the medication(s) and instructions related to medication administration and any other significant health care concerns that the visitor needs to be aware of during the off-campus day visit. The Program/Home Nurse shall make every effort to complete this step within one (1) hour of notification that a visitor wishes to take the person off-campus for an overnight visit.
- d. The Shift Supervisor (RSS6) shall report to the Home within 30 minutes of notification that the person has visitors who wish to take him/her on an off-campus overnight visit and shall greet the visitor(s) and provide his/her name and work contact information to the visitor(s) so that they know who to contact should issues arise during the visit.

D. Return from Off-Campus Overnight Visit

1. Upon the person's return from an off-campus day visit, the Home Manager shall:
 - a. Inquire of the person and visitor as to whether any incidents or injuries occurred during the off-campus visit and, if so, complete incident reporting protocols.
 - b. Inquire of the person and visitor as to whether or not the person is bringing any new personal possessions or property into the facility after the visit and, if so, complete personal inventory protocols.
 - c. Notify the Team Nurse of the person's return so that the nurse can conduct medication reconciliation protocols.
2. The Home Manager shall assist the person to unpack his/her luggage and to reintegrate into the Home environment.

E. Documentation

1. All visitors shall sign in and out on the Home Visitor Log.
2. The Home Manager on duty shall document all visits and individual departures from and returns to campus in the Home Logbook.

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3. The Home Manager on duty shall document any new personal possessions the person return with after the off-campus visit in the Home Logbook and on the person's Personal Inventory form.
4. The Program/Home Nurse shall complete the "Off-Campus Care Instructions" form (PSSC MED-015) and obtain necessary signatures.
5. The Home Manager shall document on the Home Visitation Record the day and time that the person leaves for his/her visit. This documentation must be completed on the date the visit is initiated.
6. The QIDP shall provide a copy of the Home Visitation Record to the Clients' Accounts office and to the Residential Services Office on the business day after the visit is initiated.
7. The Home Manager shall document on the Home Visitation Record the day and time that the person returns -from his/her visit. This documentation must be completed on the date the visit is completed.
8. The QIDP shall provide a copy of the completed Home Visitation Record to the Clients 'Accounts office and to the Residential Services Office on the business day after the visit is concluded.

TRAINING:

I Existing Employees

Existing employees in impacted departments shall receive training on revisions to this procedure within 30 days of each revision date beginning with the November 2015 revision. Training will be provided by supervisors/managers in impacted departments using the in-service training method with documentation of training maintained in the Quality Assurance office.

II New Employees

New hire employees in impacted departments shall receive training on the current version of this procedure within 30 days of hire. Training will be provided by supervisors/managers in impacted departments using the in-service training method with documentation of training maintained in the Quality Assurance office.

III Employees Transferring Into Impacted Departments

Employees transferring into impacted departments -from non-impacted departments shall receive training on the current version of this procedure within 30 days of transfer. Training will be provided by supervisors/managers in impacted departments using the in-service training method with documentation of training maintained in the Quality Assurance office.

Effective date: July 11, 2023


Shannon Thom
MR/DD Regional Administrator

THIS PROCEDURE REPLACES: II.A.01-09 Visitation Guidelines, Effective 11/23/2015.

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Issue: 05/01/97

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