# MUCH MORE THAN JUST A VISITOR:

An Executive Summary of Policies in Canadian Acute Care Hospitals

Canadian Foundation for Healthcare Improvement

Fondation canadienne pour l'amélioration des services de santé

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This summary was prepared by the Canadian Foundation for Healthcare Improvement following the Better Together: Partnering with Families campaign. Better Together was a three-year campaign launched by the Institute for Patient and Family-Centered Care (IPFCC – a non-profit organization in the United States) to change the concept of families as "visitors" to families as partners in care in hospitals across North America. In 2014, CFHI partnered with IPFCC to spearhead the Better Together campaign in Canada. The campaign provided support and resources to encourage the adoption of family presence policies that enable patients to designate family members or other caregivers to participate in their care and have unrestricted access to them while hospitalized. Family presence policies differentiate between "family" – who have unrestricted access – and other "visitors" for whom visiting policies apply.

This summary offers a review of visiting policies in general medical-surgical units at large acute care hospitals in Canada between January and February 2020, just a month before the COVID-19 pandemic arrived in earnest in Canada. It is the first comparison to a baseline study conducted in 2015, at the start of the Better Together campaign. Additionally, in order to assess changes to policies due to COVID-19, a review of changes was conducted for a representative sample of 30 percent of the hospitals.

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#### **Rationale**

CFHI's experience and evidence suggest that effective engagement of patients and families is a transformative lever for catalyzing improvements in patient- and family-centred care and other quality domains. Family presence policies are innovations at the level of organizational design and service improvement that can have a profound impact on the culture of organizations delivering health services and can catalyze patient- and family-centred care.

An acute care hospitalization can be a major event in the lives of patients and their loved ones. Not only are patients at their most vulnerable, they can often feel mentally and emotionally compromised. They need the support of the people who know them best. Establishing accommodating visiting policies (or family presence policies) is an essential step to supporting the integration and engagement of patients and their families and care partners in the care process. It has been shown to improve satisfaction and outcomes without introducing added risk. In fact, there is growing evidence in favour of family presence policies, showing that they result in decreased anxiety during procedures, lower readmission rates, improved medication adherence, maintained cognitive function in older adults and prevention of falls, 3.4.5 improved accuracy and quality of shared information and improved transitions and understanding of discharge instructions. Visiting policies that are not accommodating and do not involve family members in a patient's care increase anxiety and dissatisfaction in both critically ill patients and their families, increase risk for medication errors and falls, and can result in inconsistent patient care or withholding of needed treatment while in hospital.

#### **Methods**

A review of visiting policies in general medical-surgical units at large acute care hospitals in Canada was undertaken by CFHI between February and April 2015 and the process repeated between January and February 2020. The survey method was selected in order to identify and evaluate information publicly available to families wishing to visit their loved one in hospital. The methodology was adapted from a study conducted in the US¹⁰ and was identical to the process used for the baseline study in 2015.¹¹ Hospital websites were scanned and scored based on how accommodating their policies were for family members and visitors; and the availability and usefulness of information on visiting hours and visiting policies. Two phone calls were made to each hospital to validate data posted on websites. Hospitals received two scores, each between 0 and 10 for the openness of visiting policies and the availability and usefulness of website information on visiting policies.

In total, 118 eligible acute-care hospitals across all Canadian provinces and territories were included in the review. The sample included 55 large community hospitals, 59 teaching hospitals, two medium-sized community hospitals, one community acute care hospital and one small hospital. As there were no large hospitals in the territories, one medium-sized hospital was included from each of Yukon and Northwest Territories and one small hospital was included from Nunavut to ensure pan-Canadian representativeness.

In order to assess changes that hospitals made to their family presence and visiting policies in efforts to "flatten the curve" of COVID-19 cases, a sample of the websites were re-visited and a social media scan was performed in March and April 2020. Thirty-five out of the 118 hospitals were included: specifically, 16 large community hospitals and 16 teaching hospitals were sampled from all the provinces, as well as the three medium-sized and small hospitals from the territories.

## **How Accommodating are Hospital Visiting Policies?**

A total of 86 Canadian hospitals with "accommodating" visiting policies were identified, compared with 36 in 2015, an increase from 32 percent to 73 percent. This improvement is commendable and demonstrates a commitment to creating environments supportive of patient- and family-centred care. The average score of hospital policies was 7.43, up from 4.64 in 2015. This signifies that in general, existing policies are accommodating.

Table 1. Counts of Scores for Visiting Hour Openness and Notification of Flexibility for General (Medical/Surgical) Units

Score for Openness of Visiting Policy	Count of Hospitals 2015	Aggregate Count (%) 2015	Count of Hospitals 2020	Aggregate Count (%) 2020
10	2	5 (4.39)	20	74 (62.71)
9	3		54	
8	25	31 (27.19)	6	12(10.17)
7	6		6	
6	8	19 (16.67)	2	8 (6.78)
5	11		6	
4	17	28 (24.56)	5	15 (12.71)
3	11		10	
2	11	31 (27.19)	2	9 (7.63)
1	13		5	
0	7		2	
T . I	444	•	110	•

**Total** 114 118

Based on visiting hours reported on hospitals' websites, an estimated 67 percent (79) of hospitals used language to describe their visitation policies as "open," "24/7," "any time" and/or "flexible," an increase from 23 percent of hospitals in 2015.

# What is the Availability and Usefulness of Website Information?

The average score for availability and usefulness of website information was 6.81 on a 10-point scale indicating that website information is between somewhat useful and useful. The average score saw an increase of more than one point compared to the 2015 score (5.29). More than 59 percent of reviewed hospitals (70) offer a way for family and others to get in touch with a patient by sending an email or, with patient's permission, get a status update via the hospital website (an improvement from 38 percent in 2015).

## **COVID-19 and Changes to Family Presence Policies**

By April 10, 2020, all 35 hospitals reviewed had suspended or significantly restricted visitor access, where in January and February 2020, 20 out of the 35 had open/flexible family presence visiting policies. All the hospitals were either not allowing any visitors or only allowing essential visitors, limited to one per patient in certain exceptional circumstances such as a patient nearing end-of-life, in labour, requiring a substitute decision maker, or under the age of 18. Although these exceptions were noted in the policies for patients with extreme circumstances, due to the panic and rapid nature of the policy changes, these exceptions were not always provided.

#### Conclusion

Over the past 20 years, family presence practice has been endorsed by many influential organizations. CFHI's Better Together Campaign was supported by <u>13 organizations</u> from across Canada and resulted in <u>53 organizations</u> that took a pledge to enact family presence policies. The results of the comparison between 2015 and early 2020 clearly show significant change had occurred and family presence was the norm for Canadian hospitals.

Unfortunately, the changes in policies in response to COVID-19 are also clear. Although these restrictions may be understandable for a time, they are considerably difficult for patients and families, adding stress and fears for patient safety given the lack of ability to have the support of loved ones while sick in hospital. With the rapid emergence of the COVID-19 pandemic and directives on restricting visitor policies, many hospitals rolled out policies without full engagement of patients, families, caregivers or staff.

These changes are a stark representation of the fragility of the family presence policies that had been so commendable just a month earlier. It is important to revise and assess these policies together as the pandemic continues and changes. This review identified 80 Canadian hospitals where policies accommodated family presence and participation in care, an increase from 30 just five years ago. The leadership shown by these hospitals is commendable and shows there is a foundation that can be accessed for rebuilding the policies again. The evidence that family presence contributes to improved experiences for patients and their families and better health outcomes should encourage all Canadian hospitals and other healthcare organizations to begin rebuilding their family presence policies.

However, changing policies is not as simple as flicking a switch. For more accommodating policies to be accepted, a dialogue among staff, patients, families and caregivers, and the broader community is required, Patients and families should be recognized as partners in care and allies for quality and safety. As part of the Better Together campaign, CFHI supported Canadian organizations to enact family presence policies through an e-collaborative and created resources and tools that help organizations assess current policy and then develop and implement family presence policies. Additionally, a pan-Canadian <u>policy roundtable</u> was brought together to encourage broad implementations across provinces and territories. CFHI is committed to helping organizations as they rebuild their family presence policies. All developed resources are available via the <u>CFHI website</u>.

#### **Endnotes**

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