



QUINTE HEALTHCARE CORPORATION

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Surgical – Surgical Suite Visitors

Title: Surgical – Surgical Suite Visitors		Policy No:	3.23.12
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Department:	Surgery	Policy Lead:	Program Director of Surgery
Approved By:	Surgical Program Advisory Committee Medical Advisory Committee		

1. POLICY

The Quinte Healthcare Corporation (QHC) Surgical Program is committed to patient and family centered care, positive health outcomes and the safety and security of patients, their families, and our staff. The perioperative team recognizes that there are circumstances where the presence of visitors in the Operating Room (OR) Suite may be requested or required. In these accommodations, the team strives to incorporate the QHC Visitor Support Principles (Policy 2.22.3) while considering the well-being, safety, and privacy of the patient, visitor and team.

2. DEFINITIONS

Visitors may include:

Visiting Healthcare Professionals: Healthcare professionals (regulated under the Regulated Health Professions Act) involved with patient care by request of the surgical team or the patient. Examples include: visiting physicians, midwives, or surgical assistants.

Law Enforcement: Members of the police force or correctional officers that are responsible for accompanying a patient due to a previous or alleged offense or because the patient is a victim of an offense. The purpose of law enforcement’s presence is to protect the patient and staff. (Policy 2.26 – Police Investigations)

Support Person: An individual who provides emotional and/or physical support to the patient while in hospital. This may be a family member, partner, or friend.

Personal Support Worker: A professional who is employed by the patient or an external organization to support the patient in addressing their individual needs. Examples include: a person who assists a patient with special needs or a patient that resides in a group home.

Vendors: Health care industry representatives who have an expertise required by the perioperative team. By virtue of their training, knowledge and expertise they can provide technical assistance to the surgical team which expedites the procedure and facilitates desired patient outcomes.

Exclusions:

- Healthcare students (e.g., perioperative nursing students, medical students, respiratory therapy students) are not considered visitors to the operating suite under the scope of this policy.
- Pet visitors, service animals or therapy animals are covered in Policy 2.3.4 Accessibility – Pet Visitation, Service Animals and Therapy Dogs

3. PROCEDURE

- The maximum number of visitors shall be limited to two (not including a Vendor Representative).
- All visitors must adhere to policy and protocols related to infectious diseases screening, risk assessment (Policy 3-45 – Personal Protective Equipment (PPE) – General Standards and Requirements) and patient confidentiality (Policy 4.2 – Confidentiality)
- Visitors will adhere to appropriate surgical attire. It is the responsibility of the QHC employee to ensure the visitor has access to and dons the appropriate attire when visiting the surgical suite. (Policy 3.23.15 – Perioperative Dress Code).
- Visitor will not participate in direct patient care in the surgical suite. Support persons or workers will provide emotional support and comfort to the patient in manner which does not interfere with clinical care.
 - **Exception:** a visiting physician in accordance with privilege approval at QHC through the Chief of Staff’s Office. This will be discussed with the patient during the informed consent process.
- Photography and videotaping will be in accordance with Policy 3.2.9 – Photography and Audio/Video Taping Authorization and Policy 2.11.35 – Use of Cell Phone Cameras and Other Recording Devices
- All visitors in the surgical suite must be documented in the OR record. If the visitor is law enforcement personnel their badge number must also be documented.

Support Persons & Personal Support Workers

- The surgical team (surgeon, anesthesiologist, nurses, and any involved allied health member) must discuss with the patient their wishes to have a support person and/or worker accompany them to the Operating Room (OR). This conversation serves as the consent process between the patient and surgical team to have a visitor present for a portion of their surgical procedure. This decision is contingent on:
 - o The nature of the procedure (e.g., elective procedures, cesarean sections)
 - o The age of the patient (e.g., pediatric patients under 12 years of age)
 - o The needs of the patient (e.g., mentally disabled adults)
 - o The type of anesthetic (e.g., sedation, spinal)
 - o The availability of team members to support and escort the visitor
 - o The current situation in the OR departmentThis decision ultimately lies with the anesthesiologist.
- If the team is able to facilitate the patient’s request, a staff member must accompany the patient and their visitor to the OR suite.

- The visitor may stay with the patient for the length of time dictated by the anesthesiologist.
In the Q7 Labor and Delivery ORs this may include an entire procedure if the patient is under a spinal anesthetic. In the main OR, this may be during induction of anesthesia, after which the visitor must leave the OR suite.
- At any point the visitor may be asked to leave the OR suite if the patient condition or planned procedure changes. This decision is based on maintaining the safety of the patient and visitor.

Vendors

Vendors must obtain permission from the Operating Room Clinical Manager/delegate prior to entering the surgical suites. Vendors may not introduce or promote new products in the OR suites unless participating in an approved trial process.

It is the responsibility of all vendors visiting QHC to:

- Review this policy and sign a QHC confidentiality agreement annually.
- Report to the front desk (BGH OR, TMH SDS, Q7 Nursing Station) upon arrival to the department.
In exchange for an access pass, Vendors will be asked to complete a visitor log (See Appendix B). This includes their name and designation, the OR room attended, intent of the visit (e.g., education, equipment instruction), duration of visit and authorization of visit. Failure to do so may result in restricted future access.
- Display their name and company affiliation at all times during business visits to QHC.

All vendors may offer technical advice to the surgical team regarding their equipment or device. With the exception of extenuating circumstances, all industry representatives are restricted from manipulating their equipment or devices while in use with the patient.

- No vendor may scrub in on any procedure or provide any direct patient care duties.
- All vendors are prohibited from opening sterile equipment or supplies.
- Vendors shall not have access to patient's medical records.

APPENDICES AND REFERENCES

Appendices: Appendix A – Vendor Confidentiality Form
Appendix B – Visitor Log

References:

Association of periOperative Registered Nurses. (2016). *Specimen management*. Retrieved from <https://www.aorn.org/essentials/specimen-management>

ECRI. (1996) Managing the risk of sales representative in the operating room: An HRC survey. *The Risk Management Reporter*, 15, 1-7.

Operating Room Nurses Association of Canada (ORNAC). (2017). Non-licenced and/or non-employee visitors to the surgical suite. In *ORNAC Recommended Standards for Perioperative Nursing Practice* (13th ed). (pp.389-392). Ottawa, ON: ORNAC

The Ottawa Hospital (TOH). (2017). Sales representatives in the operating room. Ottawa, ON: TOH Corporate Perioperative Program Policies and Procedures

Cross References:

Policy 2.22.3 – Visitor Support Principles
Policy 2.26 – Police Investigations
Policy 2.3.4 – Accessibility – Pet Visitation, Service Animals and Therapy Dogs
Policy 3-45 – Personal Protective Equipment (PPE) – General Standards and Requirements
Policy 4.2 – Confidentiality
Policy 3.23.15 – Perioperative Dress Code
Policy 3.2.9 – Photography and Audio/Video Tapings Authorization and Policy
Policy 2.11.35 – Use of Cell Phone Cameras and Other Recording Devices