


Family Presence Policy Assessment Checklist

This self-assessment checklist is designed as a resource for program/service areas to help determine the alignment of existing practices with the requirements of the *AHS Family Presence Policy Suite*. It is not intended for reporting purposes or for judgment of current practices, but rather as a resource for your team to identify and prioritize opportunities for improvement.

The assessment should be initiated by a leader or assigned designate from the program/service area, and completed in collaboration with care team members in different roles, reflecting the processes of days/evenings/weekends as applicable.

Collaboration between the program/service area(s) and local quality councils is encouraged to develop improvement strategies as part of an action plan. The program/service area should review their action plan as a part of regular team meetings and/or huddles and discuss opportunities for improvement. We recommend teams reassess their practices using the checklist every 3-6 months to determine improvement over time. Click on the  symbol below to view online family presence resources related to the specific question.

A. Creating a Welcoming Environment						
	Always	Often	Rarely	Never	N/A	Action Plan
1. Does your team have a consistent approach to ensure the environment is welcoming and supportive for family presence?						
2. Does your team support patients to have a DFSP present any time of day or night?						
3. Does your team inform DFSPs of available space and resources to support their in-person presence?						
4. Does your team support virtual options for visitation when in-person options are not available?						
Section Total	/					

B. Identification and Documentation						
	Always	Often	Rarely	Never	N/A	Action Plan
1. Does your team distinguish between the terms Designated Family/Support Persons and visitors in verbal and written communications?						
2. Does your team use separate Designated Family/Support Person and visitor identification?						
3. Does your team communicate early with patients to determine their DFSPs, and how the patient wants them to be involved in their care?						
4. Does your team document the DFSPs identified by the patient, and how they will be involved?						
Section Total	/					

C. Communication						
	Always	Often	Rarely	Never	N/A	Action Plan
1. Does your team discuss available options to enhance communications between staff, patients and their DFSPs?						
2. Does your team publicly communicate any access limits in place at a unit or site level?						
3. Does your team follow the processes outlined in the MANAGING LIMITS TO DESIGNATED FAMILY / SUPPORT PERSON AND VISITOR ACCESS procedure HCS-199-02 (ahsnet.ca) when limits are necessary?						

4. Does your team have a process for informing DFSPs and patients of changes to access requirements or limits, and discuss options for family presence?						
Section Total	/					

D. Partnering and Participation						
	Always	Often	Rarely	Never	N/A	
1. Does your team provide DFSPs with written/verbal communication about partnering with staff to support a patient?						
2. Does your team discuss with DFSPs and patients who they wish to be present in the event of acute deterioration/resuscitation?						
3. Does your team have a clear process in place to support DFSPs during acute clinical deterioration and/or resuscitation?						
4. Does your team assess and support a patient's needs for cultural, spiritual, or religious practices?						
5. Does your team inform DFSPs and patients about areas in which they could participate and partner?						
6. Does your team engage with DFSPs to ensure they are comfortable participating in roles identified by the patient?						
7. Does your team respond to ideas, requests, questions and concerns of patients, their DFSPs and visitors in a compassionate and timely manner?						

8. Does your team inform patients, DFSPs and visitors of how they can support safe and respectful health care environment?						
9. Does your team have a plan for managing larger groups such as at end of life or special celebrations?						
Section Total	/					

E. Infection Prevention						
	Always	Often	Rarely	Never	N/A	Action Plan
1. Does your team have a process to facilitate access and share information during challenging times such as outbreaks?						
2. Does your team know who is responsible for coaching DSFPs and visitors on PPE use?						
3. Does your team orient DFSPs and visitors to standard practices of hand hygiene, masking and physical distancing?						
Section Total	/					

Check to confirm completion

Date Completed

Overall Policy Assessment Score: /

This assessment checklist is intended as quality improvement tool to increase awareness of the policy suite and identify areas for the service/program area to address to achieve policy compliance. Results are weighted as follows: Always =3, Often=2, Rarely=1, Never=0. N/A responses are removed when calculating the total score.

Have questions or need support? Visit our website or contact us at patient.engagement@ahs.ca