

1.1 ..... moves to amend H.F. No. 4571, the delete everything amendment  
1.2 (H4571DE2), as follows:

1.3 Page 164, after line 15, insert:

1.4 "Sec. .... **[144.6514] RIGHT OF PATIENTS AND RESIDENTS TO SUPPORT**  
1.5 **PERSON.**

1.6 Subdivision 1. **Short title.** This section may be cited as the "No Patient Left Alone Act."

1.7 Subd. 2. **Definitions.** (a) For the purposes of this section, the following terms have the  
1.8 meanings given.

1.9 (b) "Facility" means:

1.10 (1) a hospital; or

1.11 (2) a nonacute care facility, including a nursing home or boarding care home, that  
1.12 provides care needed because of prolonged mental or physical illness or disability, recovery  
1.13 from injury or disease, or advancing age.

1.14 (c) "Patient" means an individual who is receiving health care services in a hospital.

1.15 (d) "Resident" means an individual who is residing in a nonacute care facility, including  
1.16 a nursing home or boarding care home, that provides care needed because of prolonged  
1.17 mental or physical illness or disability, recovery from injury or disease, or advancing age.

1.18 (e) "Support person" means an individual necessary to provide compassionate care to a  
1.19 patient or resident, including but not limited to:

1.20 (1) an individual requested to meet the physical, cognitive, mental health, companionship,  
1.21 spiritual, or social needs of the patient or resident;

1.22 (2) an individual requested in an end-of-life situation;

2.1 (3) a clergy member or lay person offering religious or spiritual support; or

2.2 (4) an individual providing a service requested by the patient or resident, such as a  
2.3 hairstylist or barber.

2.4 Subd. 3. **General rule.** Except as provided in subdivision 8, a facility must allow, at a  
2.5 minimum, one support person of the patient's or resident's choice to be physically present  
2.6 while the patient or resident is receiving health care services.

2.7 Subd. 4. **Policies and procedures; notice of rights.** (a) A facility must have written  
2.8 policies and procedures regarding a patient's or resident's right to have a support person  
2.9 present during treatment, including provisions describing any clinically necessary or  
2.10 reasonable restrictions the facility may place on access to the patient or resident and the  
2.11 reason for each restriction. A facility must inform each patient or resident and each support  
2.12 person, as appropriate, of the patient's or resident's right to have a support person present,  
2.13 including any restriction on that right, and must ensure that a support person enjoys full and  
2.14 equal visitation privileges consistent with patient or resident preferences and the facility's  
2.15 policies and procedures. A facility must have written policies and procedures regarding  
2.16 complaints and must make available to patients or residents and support persons, the contact  
2.17 information for the facility staff members tasked with investigating violations of this section  
2.18 and the Office of Ombudsman for Long-Term Care.

2.19 (b) For purposes of this section, policies and procedures are subject to the following:

2.20 (1) the support person of a minor patient or resident may not be subject to visitation  
2.21 hours, except as provided in subdivision 8;

2.22 (2) a facility must provide a support person with maximum access to the patient or  
2.23 resident who requested the support person, including by offering evening and weekend  
2.24 visits;

2.25 (3) in end-of-life or nearing end-of-life situations, every effort should be made for all  
2.26 support persons requested by the patient or resident to be accommodated, in reasonably  
2.27 sized groups of six or less at a time, with no age restrictions;

2.28 (4) when a parent or guardian of a minor is a patient or resident, the support person must  
2.29 be permitted to bring the minor to the facility in the event no child care is available;

2.30 (5) if the facility limits the number of support persons allowed to be present with a patient  
2.31 or resident, the facility must allow a clergy member or lay person offering religious or  
2.32 spiritual support to be physically present, in addition to the number of support persons  
2.33 allowed;

3.1 (6) in the event of a pandemic, a facility must identify one or more ways for  
3.2 compassionate care visitation, including personal contact, that minimize the risk of infection  
3.3 to patients or residents; and

3.4 (7) when all feasible options for the physical presence of a support person have been  
3.5 exhausted, a virtual option for visitation by a support person must be offered, except as  
3.6 provided in subdivision 8.

3.7 (c) In the event of an emergency declared by the governor, a facility may enforce infection  
3.8 control practices for support persons, including but not limited to hand washing or wearing  
3.9 a mask or gown, on a situational basis while assuring a patient's or resident's right to have  
3.10 a support person present while receiving health care services.

3.11 Subd. 5. **Limitation of rights.** (a) A patient or resident must not be required to waive  
3.12 the rights provided under this section.

3.13 (b) A patient or resident must not be required to consent to additional conditions, such  
3.14 as executing a health care directive or agreeing to a "do not resuscitate" or similar order, as  
3.15 a condition of having a support person present while the patient or resident is receiving  
3.16 health care services.

3.17 (c) In the event: (1) a patient or resident is incapacitated or otherwise unable to  
3.18 communicate the patient's or resident's wishes; and (2) an individual provides a health care  
3.19 directive designating the individual as the patient's or resident's support person, designating  
3.20 the individual to exercise health care power of attorney, or otherwise indicating the individual  
3.21 is authorized to exercise rights covered by this section on behalf of the patient or resident,  
3.22 the facility must accept this designation and allow the individual to exercise the patient's or  
3.23 resident's support person rights on the patient's or resident's behalf.

3.24 (d) The rights specified in this section may not be terminated, suspended, or waived by  
3.25 the facility, the commissioner of health, or any governmental entity, notwithstanding a  
3.26 declaration of emergency by the governor.

3.27 Subd. 6. **Violations; penalty.** A facility that knowingly or willfully violates this section  
3.28 is subject to a civil penalty of \$500 for each day of violation.

3.29 Subd. 7. **Liability of facility.** Unless expressly required under federal law or regulation,  
3.30 no action shall be taken against a facility for:

3.31 (1) giving a support person access to the facility;

3.32 (2) failing to protect or otherwise ensure the safety or comfort of a support person given  
3.33 access to the facility;

4.1 (3) choosing not to follow the guidelines of the Centers for Disease Control and  
4.2 Prevention or other national guidelines that require or recommend restricting support person  
4.3 access; or

4.4 (4) the acts or omissions of a support person who is given access to the facility.

4.5 **Subd. 8. Exceptions.** (a) A facility is not required to allow a support person:

4.6 (1) to enter an operating room, isolation room, isolation unit, behavioral health setting  
4.7 for a short-term stay, or other typically restricted area;

4.8 (2) to remain present during the administration of emergency care in critical situations;

4.9 or

4.10 (3) access beyond the rooms, units, or wards in which the patient or resident the support  
4.11 person is visiting is receiving health care services or beyond general common areas in the  
4.12 facility.

4.13 (b) A facility may restrict a support person's access:

4.14 (1) at the request of the patient or resident or of a law enforcement agency;

4.15 (2) due to a court order;

4.16 (3) if the support person has symptoms of a transmissible infection;

4.17 (4) if the support person is determined to be a danger to the patient or resident;

4.18 (5) if the support person is suspected to have abused the patient or resident;

4.19 (6) if the support person is engaging in threatening or violent behavior toward a staff  
4.20 member of the facility, a patient or resident, or another visitor, and the facility has attempted  
4.21 and documented education and de-escalation techniques; or

4.22 (7) if the support person is not compliant with facility policy.

4.23 (c) This section does not apply to designated support persons for pregnant patients  
4.24 governed by section 144.651, subdivision 10a."

4.25 Renumber the sections in sequence and correct the internal references

4.26 Amend the title accordingly