



Visitation for DHS Patients During COVID-19 Pandemic

Updated: 8/11/21

Purpose:

This document describes visitation procedures for patients during the COVID-19 pandemic, as the Department of Health Services (DHS) continues to adapt its practices to respond to changes in the number of COVID-19 cases in the community and facilities. This policy strives to balance the need for safety of staff and patients with the benefits visitors play in the mental well-being and recovery of patients and will be revised accordingly to respond to changes in the pandemic. This guidance does not apply to paramedics or patient transportation staff arriving to a facility to pick-up or deliver a patient.

Procedure:

Due to the ongoing COVID-19 pandemic, visitation of patients in DHS facilities will be limited at this time. To facilitate patient-family communication, hospital staff will attempt to facilitate phone or video communication between patients and families, to the extent feasible. Visitation will be allowed as outlined below to facilitate the specific needs of certain patient populations and families.

All visitors to the hospital building to see a patient **admitted to an inpatient unit** will be required to provide either proof they are fully vaccinated against COVID-19 or show evidence of a negative COVID-19 test (negative screening test) within the 72 hours prior to their visit. Visitors who cannot be vaccinated, including minors for which vaccine is not yet recommended, require testing prior to entry.

This requirement does not apply to patients seeking emergency care in a hospital Emergency Department or coming for a hospital-based outpatient clinic visit, ancillary services, or surgical procedure.

The exceptions to the requirement for vaccination or testing are for 1) visitors of a patient in critical condition, for whom death is imminent, 2) women in active labor may have a partner present during labor and immediate post-partum period (see obstetrics section for more details), and 3) pediatric patients in some circumstances (see pediatric section). In these situations, security will call the inpatient unit to obtain approval from the clinical staff prior to enter into the hospital without providing proof of vaccination or negative COVID-19 test.

Acceptable forms of proof of vaccination include:

1. COVID-19 Vaccination Record Card issued by the Centers for Disease Prevention and Control (CDC);
2. Photo of the CDC Vaccination Record Card;
3. Photo of the CDC Vaccination Record Card stored on a phone or electronic device;
4. Documentation from a health care provider of the individual's COVID-19 vaccination
5. Digital Record that includes a QR code that when scanned by a SMART Health Care reader displays the individual's name, date of birth, vaccination dates, and vaccine type.



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The hospital is required to track verified vaccination status or documentation of full COVID-19 vaccination or negative COVID-19 test within the 72 hours prior to the visit. Hospital Security or Information Desk staff will screen all hospital visitors to the inpatient units, contact the inpatient unit for approval, provide the visitor with a "visitor badge", and use the attached log to document the visitor's name, date of visit, inpatient location, and confirmation of COVID-19 vaccination or negative test.

The entrance to each building will post signage reminding all patients and visitors (including individuals entering for business purposes) to self-screen for COVID-19 by asking themselves the following questions:

1. In the last 24 hours, have you had a temperature of $\geq 100.4^{\circ}\text{F}$ and/or thought you had a fever?
2. In the last 24 hours, have you had a cough, shortness of breath, difficulty breathing, chills, muscle or body aches, new loss of taste or smell?
3. If you have not been vaccinated against COVID-19, have you had any contact with someone who had a confirmed case of COVID-19/coronavirus in the past 14 days?

Any visitor who answers yes to any of the three questions should not enter building, even if s/he is fully vaccinated. If a WFM notices a visitor has symptoms of COVID, the visitor will be asked to immediately leave the building.

All visitors and patients on site for clinic or ancillary service visits must:

- Wear a facility-provided face mask at all times while in the hospital/clinic building
 - Patients coming to campus for an outpatient appointment who refuse to wear a mask will be required to remain outside of building until the time of appointment at which time only the patient (no visitors) will be directly escorted to the appointment site
 - Failure of a visitor to mask will result in being asked to immediately leave the hospital/clinic building
- Stay in the patient's room for the entire visit except as noted below
- Perform hand hygiene before and after the visit
- Social distancing requirements should be followed

Inpatient Visiting Guidelines

General Requirements

- Visitors must show proof of full COVID-19 vaccination or a negative COVID-19 test result within the 72 hours prior to the visit.
- Visitors must exit the hospital once they have completed the visit.
- Visitors may not gather inside waiting rooms or hospital lobbies.
- Exceptions to the visiting policy, including further limitations on visiting hours and number of visitors, may be made at the discretion of the clinical team.
- The hospital's general visiting hours will be observed and may be subject to change, at the discretion of hospital leadership.

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- Facilities may schedule inpatient visitation to assist in managing the volume and flow of visitors to the inpatient units.
- Visitors may go to cafeteria for food and should limit their movement in and out of the building

Adult Inpatients

- All inpatients may have up to two visitors per day. In hospitals with multiple-bed inpatient rooms, staff should take steps to stagger visitors to ensure that all patients do not have visitors in the room at the same time.
- For patients requiring end-of-life care and who are admitted with COVID-19, visitors will be required to wear protective personal equipment (PPE) and, in some circumstances, may only be able to visit with the patient from outside of the room.
- Patients with disruptive behavior, altered mental status, or developmental delays, where a caregiver's presence helps with the patient's care may have 1 visitor staying with the patient, including overnight stay, if space is available and their presence does not impact the provision of care to other patients in the area.

Obstetric Inpatients

- Women presenting in active labor are considered a medical emergency, and the birth partner may attend the delivery without testing or proof of vaccination.
 - When the mother is transferred to post-partum unit, the standard adult vaccination/screening test rules apply
 - If infant is admitted to NICU, the rules for pediatric patients will apply
- Scheduled admission for induction or C-sections, may have up to 2 partner/birth support persons accompany them if proof of vaccination or negative screening testing is available.
- A doula may be present and will count as one support but **must** meet the above criteria on vaccination or screening testing prior to entry. Arrangements for the doula to be present must be made prior to the patient's admission to the hospital. The doula will be required to wear appropriate PPE and follow infection control guidelines, in accordance with hospital policies.
- If the newborn rooms in with the mother, the birth partner will be permitted to stay with the mother overnight if they are vaccinated or have a negative screening test valid at the time of entry into the hospital.
- In addition to birth partner, a single visitor may visit the newborn and the mother during the same visit between 8:00 a.m. and 5:00 p.m., if vaccinated or have a negative screening test. If the person is unable to visit during these hours, upon consultation with the clinical team, alternative times can be arranged on a limited basis.

Pediatric Inpatients

- A parent/guardian of may visit without proof of vaccination or evidence of a negative test if the clinical team deems it necessary for the wellbeing of the patient, and parent(s) refuses testing, and after discussion with the hospital's Infection Control department and appropriate precautions are taken.



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- If the parent is symptomatic and not able to visit, another designated family member who is NOT PUI/COVID-19 positive or exposed to COVID-19 may visit.
 - Parents who have recently been exposed to COVID-19 may still come into building if they have received and are two weeks beyond all required doses of the COVID-19 vaccination and can show proof of vaccination.
- Nursing staff will advise parents of importance of vaccination and testing and provide information on vaccination/testing sites.
- Neonatal Intensive Care Unit patients may have up to two birth parents at a time, each day between 8:00 a.m. to midnight.
 - If there is only one birth parent, one additional support person may be identified by the parent if vaccinated.
- Neonatal Intensive Care Unit patients may have up to two birth parents at a time, each day between 8:00 a.m. to midnight.
 - If there is only one birth parent, one additional support person may be identified by the parent.
 - If parents are unable to visit during these hours, by physician determination and consultation with nursing, alternative times can be arranged on a limited basis.
 - Overnight stays are permitted for 1 parent at a time, if space is available and their presence does not impact the provision of care to other patients in the area. Visitors may go to cafeteria for food and should limit their movement in and out of the building
 - Breast feeding mothers may be allowed to visit as needed or they may provide expressed breast milk
- Visitors for patients under the age of 18 are limited to parents and/or guardians.

Discharge Training of Family Members

- Technology, such as video conferencing or other technology, should be used for discharge education/training whenever feasible
- If technology-based solutions cannot be used by physician determination and consultation with Nursing, up to a maximum of 2 family members may come to receive in person training. This should be used as a last resort to limit the exposures of patients and staff

Outpatient Visiting Guidelines

The requirement to show proof of COVID-19 vaccination or a negative test COVID-19 within the prior 72 hours does **not** apply to visitors accompanying patients to the outpatient areas listed below.

Emergency Department

- Patients visiting the Emergency Department may have up to 2 visitors, at the discretion of the clinical care team.
- Visitors may be required to wear appropriate PPE, per Nursing instructions based on isolation precautions. In some circumstances, visitors may only be able to view the patient from outside of the room.

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Surgical Patients

- Patients who are coming to the hospital for a surgical procedure are permitted up to 2 visitors prior to the patient being taken to the pre-operative area and up to 2 visitors once the patient is in the post-anesthesia recovery unit and preparing for discharge.

Outpatient/Ancillary Patients

- Outpatients coming for a clinic visit may bring to their visit one person, for assistance with mobility of communication, if the individual is from the same household or is a care provider with regular contact with the patient, and the individual may accompany the patient into the exam room, if there is sufficient space to maintain appropriate social distancing. If the visitor is not accompanying the patient into the exam room, the visitor may wait in the patient waiting room.
 - If the visitor is required to ensure safety or adequate care of the patient, the provider may waive the social distancing requirement in the exam room, as long as all individuals present are masked.
- A parent/guardian bringing a child under the age of 18 to an outpatient appointment, may bring 1 additional child to the visit.
- A parent/guardian coming for an appointment may bring up to 2 minor(s) under the age of 18, to an outpatient visit, if no procedures, imaging, or lab draws that would require the minors to be outside of the direct control of the parent (e.g. outside the room) are expected.
- On a case-by-case basis, as approved by local leadership teams, a site may allow more than two children to come with a parent.
- Outpatient chemotherapy/infusion patients may have 1 visitor with them
- Patients who have a clinic, laboratory, or radiology appointment may have 1 person with them

Other

Vendors performing equipment repair/maintenance or bringing equipment to areas for provision of patient care services (e.g., operating rooms), media, union representatives, or regulatory evaluators must follow the facility screening process described above and any other applicable screening procedures and must comply with hospital masking and PPE requirements.

Spiritual care visitation will be permitted for patients who are at end-of-life care or for whom life support is being withdrawn. All spiritual care visitors must be a recognized member of the hospital's work force (i.e., properly on-boarded and badged to the facility). When tending to COVID-19 patients, spiritual care visitors will be required to wear protective personal equipment (PPE) and, in some circumstances, may only be able to administer religious rites for the patient from outside of the room. Spiritual care providers will be required to provide evidence they are fully vaccinated against COVID-19 or a negative COVID-19 test within the 72 hours prior to their visit. The only exception to this requirement is instances in which they are providing spiritual care services to a patient in critical condition,



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for whom death is imminent.