

Department: Infection Prevention and Control
 Title: Interim Limited Visitor Policy During Pandemic
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PURPOSE: To provide a limited patient visitation plan in the context of SARS-CoV-2 (COVID-19) pandemic. This encompasses patients’ rights to have visitors such as caregivers, family or other support persons, as well as management of visitors under the guidance of Centers for Disease Control and Prevention (CDC) and Oregon Health Authority (OHA) to reduce the risk of spreading COVID-19. As required by Oregon Senate Bill 1606 (SB 1606), the facilitation and designation of support persons for eligible patients with disabilities is included.

DEFINITIONS under SB 1606 and this Policy:

1. **Disability:** Shall mean, but not limited to, (i) a physical, intellectual, behavioral, or cognitive impairment, (ii) deafness or being hard of hearing or other communication barrier, (iii) blindness, (iv) autism, or (v) dementia.
2. **Support Person:** A family member, guardian, personal care assistant, or other paid or unpaid attendant selected by the patient to physically or emotionally assist the patient or ensure effective communication with the patient.

POLICY: Grande Ronde Hospital and Clinics (Corporation) has a responsibility to mitigate the spread of COVID-19 by implementing screening procedures, visitor restrictions and reducing visitor movement within the facility. Acceptable visitors under this policy are serving the role of support person(s) for the patient they are visiting or accompanying. The main role of a support person is to help their loved one heal through support, encouragement and communication during their stay or appointment.

In compliance with SB 1606, a patient with disability who needs assistance to effectively communicate with hospital staff, make health care decisions, or engage in activities of daily living shall designate at least three (3) support persons when admitted to the hospital or emergency department. At least one support person is allowed to be present at all times, unless the patient requests otherwise. At least one support person should be present for any discussion in which the patient is asked to elect hospice care or to sign an advance directive, POLST, or other instrument allowing the withholding or withdrawing of life-sustaining procedures or artificially administered nutrition or hydration.

Each patient (or the patient support person) is informed of their right to designate a support person(s). Not only may the support person visit the patient, but he or she may also exercise a patient’s visitation rights on behalf of the patient with respect to other visitors, when the patient is unable to do so. Corporation must accept a patient’s designation, orally or in writing,

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of an individual as the patient's support person. Refer to Corporation policy [Patient's Right to Have Visitors](#).

1. Hospital visitation hours (8:00am-8:00pm) will be enforced for the Medical/Surgical (M/S), Intensive Care Unit (ICU) and Family Birthing Center (FBC). Exceptions are for pediatric, end-of-life and maternity patients as deemed appropriate by the patient's care team.
2. Wearing a face covering or mask is required of all visitors. If they arrive without one or the one they have is found to be inappropriate, one will be provided.
3. In-person visitation is limited to those patients who do not have COVID-19 and are not under investigation for the virus. Telephone and remote communications with family and friends are encouraged and electronic devices will be provided for the purpose of visitation.
4. Visitors are limited to two adults (18 and older) per patient per day who meets screening criteria and complies with the facility's infection control measures, safety and privacy policies.
Exceptions are as follows:
 - a. Visitors should not be present during aerosol-generating procedures or during collection of respiratory specimens.
 - b. Patients facing end of life – may have a reasonable number of visitors for the situation as deemed appropriate by attending medical staff, department manager or house supervisor.
 - c. In special circumstances, allowances for visitors outside the parameters listed in this policy must be mutually agreed upon by the attending provider and applicable manager or house supervisor who will take into account:
 - i. The communication needs of the patient
 - ii. Whether the risk of spreading COVID-19 can be mitigated
 - iii. The emotional and physical toll that restrictions and limitations have on family and friends.
5. All individuals entering Grande Ronde Hospital and Clinics will be observed and screened for risk factors, signs and symptoms of COVID-like illness as instructed by OHA.
 - a. The needs of visitors including those who communicate in a language other than English or who require American Sign Language (ASL) interpretation will be met in accordance with the requirements of the U.S. Department of Health & Human Services Office of Civil Rights.

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- b. Education on hand hygiene, good respiratory etiquette, face covering, and appropriate personal protective equipment (PPE) use will be provided to individuals seeking entry to the facility.
 - c. The following individuals ARE ALLOWED to enter the facility, even if they DO NOT meet screening criteria, as long as they are compliant with requirements regarding personal protective equipment and other infection control measures and do not pose a separate safety or security risk as determined by Corporation:
 - i. A designated support person of a patient who needs assistance due to a language barrier, disability or altered mental status..
 - ii. A close family member or designated support person of a patient undergoing end-of-life care as determined by the medical provider in charge of the patient's care.
 - iii. A parent or legal guardian of a child. If one parent or legal guardian meets screening criteria but the other does not, only the parent or legal guardian who meets screening criteria will be guaranteed access.
 - d. Visitors who do not qualify under 5c above and who have COVID-19-like symptoms, fever, recent return from high-risk travel or have had close contact with a person who has COVID-19 will not be permitted to visit, but offered a phone call or virtual visit.
6. Visitor mobility is limited.
- a. Visitors will be instructed to stay with the patient they are supporting or remain in the patient's room if the patient is temporarily moved for testing or exercise to reduce the mobility of people in the hallways and gathering of people in waiting rooms.
 - b. Visitors with a red sticker, indicating they did not pass screening but are an essential support person for the patient, are excluded from using the cafeteria. Alternative food service accommodations may be made in these instances.
7. The limited visitor policy will remain in effect until OHA informs Corporation that it may be rescinded.

PROCEDURE:

Hospital Screening Station:

1. All visitors will have a body temperature taken and screened using standard symptom, travel and exposure questions as recommended by Oregon Health Authority.
2. If they pass screening, they will be given a green sticker to wear and allowed entry.
3. If they fail screening, they will be given a red sticker to wear when allowed to enter the building as a support person for a patient with a disability as per exceptions listed in 5c above. Otherwise, visitors have to pass screening to stay inside Corporation buildings.

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4. Visitors will be logged for the purpose of contact tracing in the event of a potential COVID -19 exposure.
5. If a visitor is not expected, not accompanying a patient and there is question regarding a patient's visitor limit, the department may be called by the screener or admitting clerk to request approval for the visitor.

Surgical Services, Emergency Services Department (ESD), M/S, ICU, and FBC:

1. It is preferred, these departments will obtain a daily list of designated visitors from the patient or patient's support person when patient is unable to speak for themselves and provide the list to Admitting personnel.
2. These departments will monitor and manage the visitors for the day to ensure compliance with this policy.
3. If social distancing between one patient's visitor and another patient is not feasible, visitation may be further restricted at the discretion of nursing staff. Accommodations will be made for disabled patients requiring a support person.

Outpatient Clinics:

1. All visitors will be screened with the same procedure as patients, including a temperature taken to ensure they do not have a fever above 100°F.
2. A green sticker will be provided to those who pass screening.
3. A red sticker will be provided to a support person of a patient with a disability as defined above or a pediatric patient and allowed to enter the facility as long as they follow infection control methods in place to reduce spread of illness. Otherwise, visitors are not permitted to stay if they fail screening.
4. The name of the visitor will be documented in the patient's medical record for that encounter.

RESOURCES:

- Oregon Health Authority Health Facility Licensing and Certification Public Health Division, COVID-19 Guidance on Screening and Visitation at Acute Health Care Facilities, June 8, 2020.
- Governor Brown Executive Order No. 20-22, April 27, 2020.
- Centers for Medicare and Medicaid Services (CMS) 42 CFR §482.13(h)
- Senate Bill 1606, August, 2020

LEVEL of APPROVAL:

Incident Command System – 9/28/2020