

MID-COLUMBIA MEDICAL CENTER 1700 East 19th Street The Dalles, OR 97058	SCOPE: Housewide
SUBJECT/TITLE: <i>Visitation Regulations</i>	
DEPARTMENT: Emergency Management	OWNER: Emergency Preparedness Manager

Policy:

To support patient rights to visitation, to provide guidelines for the visiting public and to minimize the health and safety risks to health care workers, patients, visitors, and support persons. These rights will be consistent with federal and state law, regulatory requirements, and any reasonable restrictions as identified by state or federal agencies, or by MCMC Administration.

Procedure(guidelines):

Limit points of entry to the facility. For the hospital, points of entry will be through the atrium entrance, main entrance, and Emergency Department Entrance.

Common visiting areas are closed and visitor movement within the facility is limited to designated areas.

Screening of all individuals as they enter the facility shall consist of visual observation and questions about:

- Symptoms such as fever, sore throat, runny nose, cough, new shortness of breath and body aches.
- Testing for or diagnosis of COVID 19.
- Anyone with positive symptoms will be asked to leave except for the exceptions listed below. Visitor must always wear a mask (fabric homemade mask or one provided by the hospital if a fabric one is unavailable).
- Contact with known or suspected COVID 19 cases within the last 14 days. (Must comply with infection control guidance (wear a mask, respiratory etiquette, and hand hygiene)).
- Cruise ship travel within the last 30 days. (Must comply with infection control guidance (wear a mask, respiratory etiquette and hand hygiene)). <https://wwwnc.cdc.gov/travel/notices/warning/coronavirus-cruise-ship>
- International travel with the last 14 days to CDC level 3 risk countries. (Must comply with infection control guidance (wear a mask, respiratory etiquette and hand hygiene)). <https://www.cdc.gov/coronavirus/2019-ncov/travelers/map-and-travel-notices.html>
- Temperature checks along with screening questions

Support Persons for Patients with Disabilities:

Patients with disabilities have a right to a support person while they are in any Oregon Hospital. A patient with a physical, intellectual, behavioral, or cognitive impairment, deafness, who is hard of hearing or has another communication barrier, blindness, autism, or dementia, may designate up to three support persons to provide assistance and help with the patient’s care including: communication, making health care decisions, understanding health care information or assistance with activities of daily living.

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The patient may choose at least three support persons to provide assistance and help with the patient's care including:

- Communication with hospital staff.
- Making medical decisions and/or
- Care related to activities of daily living.

MCMC will allow at least one support person to be present with the patient, at all times, in the Emergency Department and during the patient's stay at the hospital, if necessary, to facilitate the patient's care.

Patients with disabilities may pick support persons to stay with them in the hospital when necessary to accommodate their disability.

Unless a patient states otherwise, a hospital must make sure that a support person is present for any discussion where the patient is asked to make end of life decisions. A patient's legal guardian or authorized representative must be included in those discussions.

A hospital can require a support person to follow hospital safety protocols including wearing personal protective equipment provided by the hospital and restricting physical access if the support person is sick or has flu like symptoms.

Support Persons and Visitors:

A support person may be a family member, guardian, personal care assistant or other paid or unpaid attendant selected to assist the patient physically or emotionally to ensure effective communication with the patient.

The following will be allowed 1 support person in the hospital (exceptions need to be approved by the nursing supervisor or nursing administration).

- The support person for patients with disabilities, as described above.
- The support person or caregiver for an adult discharge post-surgery.
- The support person or caregiver to receive discharge training.

Due to the nature of the patient's hospitalization the following are allowed 2 support persons at the bedside (exceptions must be approved by the nursing supervisor or nursing administration):

- Close family members of a patient undergoing end-of-life care as determined by the medical provider in charge of the patient's care.
- Parents/guardians visiting a baby or child's room. If one parent or legal guardian meets screening criteria but the other does not, only the parent or legal guardian who meets screening criteria must be guaranteed access.
- A person in labor (non-COVID) may have two support persons during labor and for 2 hours post-delivery, then only 1 support person will be allowed at the bedside. The two supports persons (only 1 allowed at bedside at a time) may switch out at bedside as needed.

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- A Person in labor that is positive for COVID-19 infection or person under investigation (PUI) may have only 1 visitor at bedside during labor and post-partum.

Staff is to ensure that visitors and support person(s) have proper PPE and instructions on how to enter the unit. All visitors and support persons must wear a mask and adhere to infection prevention practices. Non-compliance will result in visitor or support person being asked to leave the facility.

A **visitor** is defined as a person who is temporarily in the hospital to see the patient and is not involved in any care coordination/caregiving.

- **No visitors are allowed in adult inpatient units, outpatient units or procedural areas, effective August 27, 2021.**
- **Patients who are COVID + or Person Under Investigation (PUI) for COVID 19 will not be allowed visitors unless patient is at end of life.**
- **End of Life Care: Patients who are actively dying that are in a private room or semi-private room with no roommate** may have up to 4 visitors at any one time. All visitors must remain masked for the entirety of the visit. The visitors may swap out as needed and all must pass the screening. **Patient that are actively dying in a semi-private room with a room-mate may** have two visitors at one time. All visitors must remain masked for the entirety of the visit. The visitors may swap out as needed and all must pass the screening. **COVID + patients that are actively dying** may have two visitors at one time. All visitors must remain masked for the entirety of the visit. The visitors may swap out as needed and all must pass the screening. Visitors leaving a COVID + patient must leave the building immediately after visit.
- **EMERGENCY ROOM patients will not be allowed any visitors. Patients will be allowed support persons per support persons definition.**
- Laboratory and Diagnostic Imaging will be allowed one support person only if needed due to limited waiting area capacity.

Staff will provide education as needed to all individuals regarding:

- All support persons and visitors will be given the handout titled: Visitor Regulations During the COVID-19 Pandemic
- Hand hygiene: before entering a patient room and after leaving a patient room. Wash hands for 20 seconds with soap and water or clean hands with alcohol-based hand sanitizer.
- Avoidance of face touching.
- Use of good respiratory etiquette: covering coughs and sneezed with elbow and proper disposal of tissue.
- Wearing a mask.

The hospital does not restrict, limit, or otherwise deny visitation privileges based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, gender identity or expression.

Visitors will be fully and appropriately dressed, including shoes and shirt.

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The healthcare provider may ask a visitor or visitors or support person to leave based on the patients and/or other patients' clinical conditions, if the visitor or support person is unwelcome or engages in disruptive or threatening behavior of any kind.

Staff will ensure that the needs of patients including patients who communicate in a language other than English, minors and patients with disabilities, are being met, in accordance with the requirements of the U.S. Department of Health & Human Services Office of Civil Rights and Oregon rules (e.g. SB 1606).

References:

Oregon Health Authority (2020, April), REVISED COVID 19: Guidance for Entry into Acute Health Care Facilities: April 23,2020

Governor Kate Brown (2020, March 19) Executive Order No. 20-10. (Rescinded as of May 1, 2020)

Prohibition on Non-essential Visitation. Pursuant to ORS 433.441(3)(a), (b), (d) and (f), ORS.401.175(1), ORS 401.168(1), and ORS 401.188(2), I continue my delegation of authority to the Oregon Health Authority to provide guidance, which may be revised from time to time, regarding limitations and screening requirements for visitors to hospitals and ambulatory surgical centers, based on best practices, to ensure the safety of patients and health care workers, and to slow the spread of COVID-19. Such guidance is available at: <https://govstatus.egov.com/OR-OHA-COVID-19>.

Oregon Health Authority (2020, April 4) Oregon Guidance on Use of Homemade Masks or Face Coverings by the Public to Prevent Spread of COVID-19: April 4, 2020

Oregon Health Authority (2020, June 8) REVISED COVID-19 Guidance on Screening and Visitation at Acute Health Care Facilities.

Oregon Senate Bill 1606, June 26, 2020

OHSU: OHSU Visitation Grid: Effective 8/18/2021

Review/Revision Date	Title	Description of Change
4/29/2020		Replaces Nursing Visitation Policy
6/9/2020		
7/27/2020		
8/7/2020	EM and QR	Changes in language related to support persons.
1.6.2021		Changes to DI/Lab limited to one support person.
8.25.2021		Changes to labor and delivery
8.26.2021		CHANGED TO NO VISITOR.

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