March 22, 2021

REVISED COVID-19 Guidance on Screening and Visitation at Hospitals

Authority:

- **CMS Hospital Visitation – Phase II Visitation for Patients who are COVID-19 Negative**
- **CMS Guidance for Infection Control and Prevention of Coronavirus Disease (COVID-19) in Hospitals, Psychiatric Hospitals, and Critical Access Hospitals (CAHs): FAQs, Considerations for Patient Triage, Placement, Limits to Visitation and Availability of 1135 Waivers [QSO-20-13-Hospitals-CAHs (REVISED)]**
- **Oregon Executive Order 20-22 and ORS 441.025**

Applicability: This guidance applies to hospitals.

I. Screening

Hospitals shall adopt and enforce policies and procedures that require the *screening* of all individuals including but not limited to all facility staff and health care personnel before entry. Screening policies and procedures must comply with the **CMS Guidance for Infection Control and Prevention of Coronavirus Disease (COVID-19) in Hospitals, Psychiatric Hospitals, and Critical Access Hospitals (CAHs): FAQs and Considerations for Patient Triage, Placement, Limits to Visitation and Availability of 1135 Waivers**.

- In lieu of screening outside medical personnel and emergency responders upon entry to a facility, the facility may meet the screening requirement by accepting documentation from an employer of outside medical personnel or emergency responders that indicates all employees are screened before the beginning of every shift using criteria that are at least as stringent as those required by the facility.

- Hospitals may pre-screen patients for symptoms, travel and contact history by telephone prior to scheduled appointments.
II. Visitation

- Hospitals shall adopt and enforce policies and procedures that comply with the CMS Hospital Visitation – Phase II Visitation for Patients who are COVID-19 Negative.
  
  - Psychiatric Inpatient Facilities must also comply with OHA guidance which can be found here: https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2275.pdf
    Where the CMS and OHA guidance differs, the more restrictive guidance should be implemented.

- Support persons who provide assistance to individuals with disabilities are not visitors and may only be denied entry to a facility in certain circumstances. See OAR 333-505-0033 and 2020 Special Session 1, Oregon Laws, Chapter 20. Support persons are subject to CMS screening requirements. A support person is defined as “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.” OAR 333-505-0033.

III. Education and Signage

In addition to the Guidance from CMS regarding patient visitation rights contained in 42 CFR §482.13(h) and the Title VI language access requirements, hospitals must:

- Provide education to individuals seeking entry to the facility regarding:
  
  - Hand hygiene: before entering a patient room and after leaving a patient room, individuals shall wash hands with soap and water for 20 seconds, or clean hands with alcohol-based hand sanitizer.
  
  - Avoidance of face touching.
  
  - Use of good respiratory etiquette: covering coughs and sneezes with the elbow and proper use and disposal of tissue.
  
  - Appropriate personal protective equipment use.

- Require appropriate signage regarding visitation and screening protocols and provide this information to individuals seeking entry to the facility, including a link to the hospital’s grievance procedures if an individual believes they are inappropriately being restricted from the facility.

You can get this document free of charge in other languages, large print, braille or a format you prefer. Contact Mavel Morales at 1-844-882-7889, 711 TTY or OHA.ADAModifications@dhsoha.state.or.us.