

SUBJECT	Interim COVID-19 Screening and Visitation at Acute Care Facilities	POLICY # 8417-999
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DEPARTMENT:	Compliance	EFFECTIVE: 3/27/2020
APPROVED BY:	Governor Brown Executive Order	REVISED: 04/05/2020; 04/23/2020; 06/08/2020
REGULATION/REFERENCE:	CMS QSO-20-20-All, Executive Order 20-10 and ORS 442.025.	KEY WORD: Visitation

Purpose:

Pursuant to Governor Brown’s Executive Order 20-10, the Oregon Health Authority (OHA) has issued guidance that Ambulatory Surgery Centers, Hospitals, and Outpatient Renal Dialysis Facilities 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.

Policy and Procedure:

This policy covers Blue Mountain Hospital, Strawberry Wilderness Community Clinic, Home Health, and Hospice.

The policy limits points of entry to the following locations only:

- Blue Mountain Hospital:
 - ER Entrance
 - Main/Front Entrance
- Strawberry Wilderness Community Clinic (SWCC):
 - SWCC team members only, will use the east glass door entrance.
- Home Health/Hospice:
 - Main Entrance

Staff and door greeters are educated to offer visitors including visitors who communicate in a language other than English or who require American Sign Language (ASL) interpretation will be offered interpreter services through our vendor. Information is posted at points of entry.

At each point of entry, screening is required of all individuals seeking entry to the facility, including visual observation, temperature check and questions about:

- Symptoms including, but not limited to, fever, sore throat, runny nose, cough, shortness of breath, and body aches.
- International travel within the last 14 days to CDC Level 3 risk countries. For updated information on restricted countries visit: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>
- Testing for, or diagnosis of, COVID-19.
- Contact with known or suspected COVID-19 cases within the last 14 days.
- Cruise ship travel within the last 30 days. For updated information on cruise ships visit: <https://wwwnc.cdc.gov/travel/page/covid-19-cruise-ship>

Facilities can allow for the pre-screening of patients for symptoms, travel and contact history by telephone prior to scheduled appointments.

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In lieu of screening outside medical personnel and emergency responders upon entry to a facility, the facility may meet its 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.

Policy and Procedure for Visitation:

Facilities shall adopt and enforce policies and procedures that:

- Limit visitor movement within the facility.
- Encourage visits in patient rooms and ensure common areas can accommodate physical distancing.
- Except as provided below, restricts visitors (unless seeking medical treatment themselves) if said individual:
 - Has any of the symptoms being screened for at entry.
 - Has been determined to have suspected, presumptive or confirmed active COVID-19.
 - Refuses to comply with the facility’s infection control guidance.

In addition to the guidance from the CMS regarding patient visitation rights contained in 42 CFR §482.13(h), if a facility subject to this guidance restricts or limits visitors it must have policies and procedures that:

- The District will implement a phased approach with visitation; allowing for patients to have one visitor at a time who meets screening criteria and complies with the facility’s infection control measures of hand hygiene, respiratory etiquette, and utilization of personal protective equipment (PPE).
 - Visitors who are not compliant with PPE will not be allowed in the facility.
- The following individuals are allowed to enter the facility, even if the individuals do not meet screening criteria, if the individuals are compliant with the facility’s requirements regarding personal protective equipment and other infection control measures and do not pose a separate safety risk as determined by the facility:
 - A caregiver or attendant of a patient who needs assistance due to a language barrier or the patient’s disability, whether that disability is physical, developmental, intellectual, cognitive, behavioral or is related to altered mental status or communication, whose presence will assist the person with the disability in receiving treatment, ensure the safety of the patient or facility staff, or who must assist with activities of daily living.
 - A close family member of a patient undergoing end-of-life care as determined by the medical provider in charge of the patient’s care.

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- A parent or legal guardian of a hospitalized 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 must be guaranteed access.
- Allow that a patient is able to have at least one visitor at a time who meets screening criteria and complies with the facility's infection control measures.
- 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 Blue Mountain Hospital District policy and the requirements of the U.S. Department of Health & Human Services Office of Civil Rights.
- Implement measures to increase remote communication with families and ensure language access including CART real time captioning, ASL and spoken language interpretation services (e.g., phone, FaceTime, Skype, etc.).
- Provider discretion is allowed to overrule visitation guidance and must be documented in the patient's chat. Exceptions to take into account:
 - The communication needs of the patient;
 - A patient's individual circumstances.
 - Whether the risk of the spread of COVID-19 can be mitigated.
 - The emotional and physical toll that restrictions and limitations have on families and friends.

Policy and Procedure for 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, facilities subject to this guidance 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.
- Door screeners will obtain temperature checks of individuals entering building.
- The District shall post signage regarding visitation and screening protocols and provide this information to individuals seeking entry to the facility, including information of the hospital's grievance procedures if an individual believes they are inappropriately being restricted from the facility.

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This policy and procedure shall remain in effect until OHA informs the facility that the policies and procedures may be rescinded.