

The Commonwealth of Massachusetts

Executive Office of Health and Human Services
Department of Public Health
Bureau of Health Care Safety and Quality
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Memorandum

TO: Massachusetts Hospital Chief Executive Officers and Administrators

Department of Mental Health Hospitals Department of Public Health Hospitals

FROM: Elizabeth Kelley, MPH, MBA, Director

Bureau of Health Care Safety and Quality

DATE: January 5, 2022

RE: Updated Patient Visitation in Hospitals Considerations during the COVID-19

Public Health Emergency

The Massachusetts Department of Public Health (DPH) continues to work with state, federal and local partners to address Coronavirus Disease 2019 (COVID-19), caused by the virus SARS-CoV-2, and we continue to appreciate the essential role you have in responding to this evolving situation. This memorandum replaces the Updated Patient Visitors in Hospitals Considerations following the COVID-19 State of Emergency memorandum released on July 22, 2021 to clarify safer visitation while there is substantial levels of community transmission of COVID-19.

Hospitals must urge potential visitors to defer visitation until further notice and are expected to notify them to do so. Such notification can be achieved through signage, calls, letters or other identified, appropriate forms of communication.

Screening:

Hospitals must establish a process to ensure everyone arriving at the hospital is assessed for symptoms of COVID-19 (fever, cough, shortness of breath, sore throat, chills, myalgia, or new onset of loss of taste or smell), and exposure to others with suspected or confirmed SARS-CoV-2 infection. Options could include (but are not limited to): individual screening on arrival at the facility or unit where the patient is admitted; or implementing an electronic monitoring system in which, prior to arrival at the facility, people report absence of fever and symptoms of COVID-19, absence of a diagnosis of SARS-CoV-2 infection in the prior 5 days, and confirm they have not been exposed to others with SARS-CoV-2 infection during the prior 5 days. Visitors with

any symptom or exposure within the past 5 days should not be permitted into the hospital. Any visitor who had a diagnosis of SARS-CoV-2 in the prior 10 days must have been diagnosed at least 5 days prior to visiting the facility, be able to wear a facemask at all times, and is strongly encouraged to have received a negative COVID-19 test prior to entering the hospital. Any visitor who had an exposure to SARS-CoV-2 in the prior 10 days must have quarantined for at least 5 days prior to visiting the facility, or have received their booster vaccine or been fully vaccinated recently (within the past five months with Pfizer or Moderna vaccine or two months with Janssen vaccine), be able to wear a facemask at all times, and is strongly encouraged to have received a negative COVID-19 test prior to entering the hospital.

Visitation Considerations:

Visitors must be provided a facility-issued mask upon entry to the hospital. Visitors are required to wear a mask at all times while in the hospital and to perform hand hygiene when visiting a patient.

To protect the safety of patients and to ensure that hospital staffing resources are preserved, hospitals may restrict visitation to one visitor at a time in the hospital setting and may limit the amount of time per visit. For ambulatory or outpatient services, hospitals must permit at least one individual or companion to accompany the patient to an in-person provider visit.

Hospitals may prohibit visitation on a case-by-case basis if the patient to be visited tests positive or shows symptoms of COVID-19.

In compassionate care situations, including but not limited to end-of-life-situations, decisions about visitation should be made collaboratively with the patient and loved ones, as appropriate, on a case-by-case basis.

Hospitals should continue to support alternative electronic methods for communication between patients and all other visitors, such as Skype, FaceTime, WhatsApp or Google Duo, to augment visitation.

Other Individuals Beyond Visitors:

For purposes of this guidance, birth partners, parents of patients who are under the age of 18 years old, attorneys of patients and companions or designated support persons for patients with a disability or special needs, are not considered visitors, but must be screened. A designated support person may include but shall not be limited to: a guardian or other legally authorized decision-maker, family member, caregiver, personal care assistant or another disability service provider knowledgeable about the patient's care. Designated support persons should be provided reasonable access to treatment areas as well as afforded access to food and bathroom facilities.

Hospitals should also restrict any non-essential personnel who do not provide direct care, such as sales representatives, from entering the facility.

Hospitals should take appropriate measures to facilitate social distancing, to the maximum extent possible for individuals eating in their cafeteria and congregating in other common spaces.

DPH strongly encourages all hospitals in Massachusetts to monitor the Centers for Medicare & Medicaid Services (CMS) website and the Centers for Disease Control and Prevention (CDC) website for up-to-date information and resources:

- CMS website: https://www.cms.gov/About-CMS/Agency-
 Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page
- CDC website: https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/index.html

Additionally, please visit DPH's website that provides up-to-date information on COVID-19 in Massachusetts: https://www.mass.gov/2019coronavirus.