

## GUIDANCE FOR VISITOR SCREENING, MASKING, AND RESTRICTIONS DURING CORONAVIRUS DISEASE (COVID-19) PANDEMIC

BJC HealthCare is committed to serving our patients and communities and providing exceptional patient-centric care. We recognize the importance of family members and friends to our patients. However, these needs must be balanced against the need to prevent transmission of coronavirus disease (COVID-19) within our communities and facilities.

In this spirit and in recognition of the extraordinary steps required to combat the spread of COVID-19, **BJC HealthCare is limiting visitation within our facilities. In some cases, exceptions are allowed. In those cases, visitors will be required to wear a face mask. Universal masking applies to all patients, visitors, team members, physicians, or individuals who need to enter the building, and is effective May 6, 2020.**

BJC will allow full visitation to resume when the threat posed by COVID-19 lessens. To facilitate implementation of these visitor policies, BJC facilities shall place signage at all portals of entry.

In person visitors are not permitted in most inpatient care settings. Patients are encouraged to have **Virtual Visitors** by utilize phone calls, FaceTime and other virtual methods to keep connected with their loved ones during their stay with us. Additionally, in cases where patients are unable to do so on their own, the care team is required to help facilitate virtual visits through the **BJC Virtual Visitor Program**.

Limited visitors are permitted in certain circumstances, outlined below. The approved visitor(s) is/are the only visitor(s) for that day.

**Emergency Department:** Emergency Department patients may have one designated visitor; Visitors are encouraged to consider alternate locations to wait, if available - car, home, etc.

**Scheduled Outpatient or Same-Day-Admit Surgery:** Surgical patients falling into this category may have one visitor in the waiting room or designated area throughout the procedure. If a surgical patient is admitted or moved to an inpatient unit after the procedure, the inpatient setting's visitor policy would apply once moved.

**Outpatient Appointments:** Patients with an appointment in a **BJC or WUSM** outpatient setting or procedural area may have one designated visitor. During telephone screening for outpatient medical appointments, adult patients should be encouraged to come alone when possible.

**Inpatient: Inpatient visitors are restricted; however, the following EXCEPTIONS are pre-approved**

- Obstetric patients may have two designated visitors (This includes certified doulas or birthing coaches.).
- Nursery and Neonatal Intensive Care Unit (NICU) patients may have two designated visitors, who must remain in the patient room for the duration of the visit.
- Patients who are at end-of-life may have two designated visitors.

- Patients who require complicated patient or caregiver education prior to discharge may have one designated visitor attend the discharge education session if education cannot be provided through any other mechanisms.
- Pediatric patients may have two designated visitors on the inpatient units. For the purposes of this policy, pediatric patients are defined as patients under 21 years of age.
- Patients with behavioral health, developmental delays or altered mental status, or physical dependencies or limitations, for whom a family member or caregiver is integral to their care or safety may have one visitor. Altered mental status resulting from medication-induced sedation in an intensive care unit setting is not included in this exception.

For circumstances in which visitors are permitted the facility shall implement a screening process to be completed before the visitor enters a waiting area or patient care area. Children younger than age 16 will not be permitted except under extraordinary circumstances.

In addition, any one of the following criteria shall exclude a visitor from entry:

- Visitors displaying signs or symptoms of acute illness (fever, cough, difficulty breathing, sudden loss of taste and/or smell, sore throat, body aches, diarrhea or vomiting)
- Visitors who have had recent contact (<14 days) with someone suspected or confirmed to have COVID-19

*Note: Exclusion criteria do not apply to the patient entering the facility for health care services*

#### **EXPECTATIONS FOR PERMITTED VISITORS**

- Visitors must remain in the patient's room for the duration of the visit, with temporary exceptions to visit the cafeteria, chapel, restroom, etc, provided they return directly to the patient's room. Visitor must notify the care team when leaving and returning to the unit.
- Visitors shall not be permitted to be in the room during nasopharyngeal (NP) specimen collection or aerosol-generating procedures.
- Visitors shall perform hand hygiene at point of wellness screening and upon entry/exit of the patient's room.
- All visitors shall be instructed to notify the clinical care team if signs or symptoms of illness develop during visit.

BJC recognizes there might be extraordinary circumstances in which the need for patient visitors is greater than the threat posed by COVID-19. A comprehensive list of all circumstances in which the benefits of allowing visitors exceeds the risk posed by COVID-19 is impossible. Each BJC facility shall appoint someone in a formal leadership position of authority within the facility to evaluate requests from the clinical care teams for *additional* exceptions to these visitor restrictions that are not specifically described in this policy.

**SUSPECTED OR CONFIRMED COVID-19 PATIENTS**

- In-person visitation is restricted for patients admitted for suspected or confirmed COVID-19 unless one of the inpatient exceptions applies (see exceptions pre-approved for visitation). **Virtual Visitors** shall be offered as an alternative when possible.
- Infection Prevention (IP), Infectious Disease subject matter experts, and the clinical care team shall review requests to allow in-person visitation of COVID-19, including for critically ill, at end-of-life, and for pediatric patients
- IP and clinical care team shall develop procedures that must be followed for entry into patient's room, including:
  - Screening procedures for the designated visitor. Visitors must be screened for signs/symptoms of illness (as above) prior to each visit
  - Training the designated visitor how to safely don, use and doff required PPE
  - Training the designated visitor to perform hand hygiene at the point of wellness screening and upon entry/exit of the patient's room
  - Instructing to stay in room for the duration of visit
- If a visitor meets criteria for an exception, the following personal protective equipment is required:
  - Surgical/isolation mask
  - Goggles or full-face shield
  - Gloves
  - Gown
- Visitors must remain in the patient's room for duration of visit; access to other areas in the hospital (i.e. cafeteria, waiting rooms) should be restricted. Once visitor leaves the patient room, must exit the HSO.

**HOME CARE SERVICES****Guidance for staff and patients for areas with an order to remain at home**

- As more people stay home and "shelter in place", we may experience an increasing number of family members and visitors in our patients' homes. Prior to visits, please instruct patients and families on the need for social distancing, limiting non-essential visitors in the home, and promoting good hand washing.
- Social distancing protects our patients and staff from the spread of COVID-19. Social distancing is the act of deliberately increasing the physical space between people to avoid spreading illness. Staying at least six feet away from other people lessens the risk of coming into contact with droplets containing COVID-19.
- We also have our standard PPE & precautions, equipment cleaning practices, and use of barriers in the home that accompany this updated guidance