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: September 16, 2020

RE: Updated Patient Visitors in Hospitals during the COVID-19 Outbreak

The Massachusetts Department of Public Health (DPH) continues to work with state, federal and local partners on the outbreak of 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 Patient Visitors in Hospitals during the COVID-19 Outbreak memorandum released on June 6.

Pursuant to an Order issued by the Commissioner of Public Health on March 15, 2020, all hospitals are directed to implement procedures published by the Department of Public Health to screen visitors and to restrict visitation as necessary to protect the health of patients and staff.

The following visitation policies shall be effective September 25, 2020, to protect the health and safety of patients and staff during the COVID-19 outbreak.

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 must screen all visitors for symptoms of possible COVID-19 infection (fever, cough, shortness of breath, sore throat, chills, myalgia, or new onset of loss of taste or smell). Individuals with any symptom should not be permitted into the hospital. Hospitals must require all visitors to perform hand hygiene before visiting a patient.

Visitors are required to wear a facemask at all times while in the hospital.

While not required, DPH encourages hospitals to maintain a record of all visitors entering the hospital to conduct contract tracing, should the need arise.

To protect the safety of patients, a patient is allowed one visitor at a time in the hospital unless visitors are members of the same household; a patient may have multiple visitors if they are members of the same household. No visitors under the age of 18 years old are allowed in the hospital, unless the visitor is a child or sibling of a patient. People waiting to visit a patient should wait outside, rather than in hospital waiting rooms, until the time of their visit.

A hospital may allow for outdoor visitation in a designated space, provided the patient’s health status permits and infection control protocols are maintained during the visit.

For ambulatory or outpatient services, one individual or companion may accompany the patient to an in-person provider visit.

Non-essential personnel including, but not limited to, non-health care professional program interns, volunteers and sales vendors, may be permitted to enter a hospital provided that such non-essential personnel are screened for symptoms of possible COVID-19 infection before entering the hospital. Non-essential personnel must wear a face mask for the duration of their time in the hospital and don any other appropriate personal protective equipment as specified by hospital policy.

Hospitals may prohibit visitation on a case-by-case basis if a patient tests positive for or shows symptoms of COVID-19 or if visitation poses a significant infection control risk to the patient, visitor, or staff.

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.

Hospitals may prepare food onsite but, in alignment with the restaurant guidance, DPH requires that self-serve, unattended buffets, topping bars, drink stations, and other communal serving areas remain closed. Hospitals should take appropriate measures to limit the number of individuals eating in their cafeteria so that social distancing measures can be observed.
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:


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