

The Commonwealth of Massachusetts Executive Office of Health and Human Services Department of Public Health 250 Washington Street, Boston, MA 02108-4619

MARYLOU SUDDERS Secretary

Commissioner

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Memorandum

TO: Facilities designated for the treatment of Patients Committed Pursuant to Chapter

123 § 35

FROM: Deirdre Calvert, LICSW Director Bureau of Substance Addiction Services

Policies and Procedures for Restricting Visitors in Facilities Designated for the RE:

Treatment of Individuals Committed Pursuant to Chapter 123 § 35 during the

COVID-19 Outbreak

DATE: March 23, 2020

The Massachusetts Department of Public Health (DPH) continues to work with state, federal and local partners on the outbreak of novel Coronavirus 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 applicable provisions concerning visitation in the Memorandum dated March 18, 2020: "Preventing and Mitigating COVID-19 in BSAS Licensed Programs." for only those facilities designated for the treatment of individuals committed pursuant to chapter 123 § 35.

Facilities which have been designated by the DPH for the treatment of individuals committed pursuant to Chapter 123 §35 (Facilities) shall implement the following provisions effective immediately to protect the health and safety of patients and staff during the novel Coronavirus (COVID-19) outbreak.

Restrictions on Visitors:

Pursuant to an Order issued by the Commissioner of Public Health on March 18, 2020, Facilities shall restrict visitation of all visitors except for individual directly related to the legal representation of the patient (Special Visitors) or as otherwise provided in the Exception to Visitor Restrictions, below.

All Special Visitors must be escorted by staff to their destination in the Facility. Facilities must limit these individuals to a specific room when visiting and should require them to perform hand hygiene. Further, Facilities should carefully screen Special Visitor for fever or respiratory symptoms. Individuals with symptoms of a respiratory infection (fever, cough, shortness of breath, or sore throat) should not be permitted to enter the long-term care facility at any time.

When in-person access is not available due to infection control concerns, Facilities must facilitate patient communication (by phone or another format).

Notification to Potential Visitors

Facilities are expected to notify potential visitors to defer visitation until further notice. Such notification can be achieved through signage, calls, letters, or other identified appropriate methods of communication. Facilities should consider alternative electronic methods for communication between patients and visitors, such as Skype, FaceTime, WhatsApp or Google Duo.

Post Visit Requirements:

Facilities must notify any Special Visitor who enters the Facility to self-monitor for signs and symptoms of respiratory infection such as fever, cough, shortness of breath or sore throat, for at least 14 days after exiting the Facility. If symptoms occur, individuals should self-isolate at home, contact their healthcare provider, and immediately notify the Facility of the date they were in the Facility, the individuals they were in contact with, and the locations within the Facility they visited. Facilities should immediately screen the individuals of reported contact for the level of exposure and follow up with the Facility's medical director.

Exceptions to Visitor Restrictions:

Facilities may allow visitors for patients under the age of 18 subject to the conditions outlined above, for Special Visitors.

Further, in emergency situations, EMS personnel should be permitted to go directly to the patient.

For the latest information, visit the DPH 2019 Novel Coronavirus website which is updated frequently: www.mass.gov/2019coronavirus.

DPH prevention guidance: printable fact sheets

CDC website: https://www.cdc.gov/coronavirus/2019-ncov/index.html