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Psychiatric Center Inpatient Visitation Policy

NOTE: This policy supersedes the visitation policy issued on May 22, 2023. Changes in this version include:

- Removed requirement for visits to take place in a centralized location.
- Removed requirement for visits to be by appointment only.

This guidance applies to all Office of Mental Health (OMH) civil and forensic inpatient programs that treat children, adolescents, and/or adults as well as residents at an OMH secure treatment facility (STF). For the purposes of this guidance, the term “patient” includes adults and children who are patients in an OMH Psychiatric Center (PC) as well as residents in a STF. These visitation guidelines do not apply to State-operated community residential programs.

While in-person visits are allowed under the following parameters, video visiting by friends, family, Mental Hygiene Legal Service, and the NYS Department of Corrections and Community Supervision should continue to be offered if feasible. Each facility must ensure that patients have easily available means to stay in contact with friends, family, and other supports (e.g., phones and virtual visits).

Below is guidance regarding visitors to any OMH PC including OMH STFs. These instructions apply to the following types of visitors:

- In-person visitation by family, friends, other natural supports, and service providers
- Volunteers
- Mental Hygiene Legal Service (MHLS)
- NYS Department of Corrections and Community Supervision (DOCCS)
- Surveyors (Joint Commission, Center for Medicaid & Medicare Services, Department of Health (DOH), Justice Center, Department of Labor (DOL), etc.)
- Contractors that perform intermittent work at the PC (e.g., SimplexGrinnell)
- Any individual/group attending a meeting or attending to a necessary business purpose at the PC or STF

This policy does not apply to:

- Employees
- Interns/Externs
- Trainees/Residents
- Contract Staff (e.g., Locum Tenens, Contract Nurses)

Individuals in these categories should comply with the OMH Employee Screening protocol.

Visitation Guidance

A. All visitors for whom this policy applies must adhere to the following:

1. Visitors must be able to adhere to the core principles of infection prevention and control including cough etiquette and hand hygiene. OMH staff are expected to provide regulatorily required supervision, in-house education, and monitoring for all visitors.
2. Visible signage must be placed at the building entrances, cafeterias, elevators, and other strategic areas alerting visitors to notify the PC if they meet any of the following criteria:
 - a) Tested positive for COVID-19 within the past 10 days
 - b) Experiencing new or worsening symptoms of COVID-19, including:
 - Fever (100.0°F or greater) or chills
 - Cough
 - Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - Headache
 - Loss of taste or smell
 - Sore throat
 - Congestion or runny nose
 - Nausea or vomiting
 - Diarrhea
 - c) Had close contact (15 minutes or more) with someone in the community with confirmed COVID-19 infection.

If visitors report any of the above, they will not be allowed to visit.

3. When the facility is experiencing a COVID-19 outbreak¹:
 - a. Visitors must wear a surgical mask (no cloth masks or gaiters are permitted).
 - i. Visitors who do not have an approved face covering should be provided with an OMH-issued face mask.
 - ii. Visitors who fail to wear an appropriate face mask when the PC is experiencing an outbreak will be asked to leave the facility.

B. For personal visitation to patients (unrelated to intermittent contractors, MHLS, DOCCS or any type of survey), the following additional requirements must be followed:

1. Visitors are not allowed on units where there are confirmed or suspected COVID-19 cases or exposures (except for limited circumstances described below).
2. When the PC is experiencing an outbreak, all visitors are encouraged to maintain social distancing.
3. Visits should take place in a central location and close to the main entrance to the facility,

¹An outbreak is defined as **two** or more positive individuals (patient and/or staff who worked in the 2 days prior to testing positive) **on a single unit**, OR **one** or more positive individuals (patient and/or staff who worked in the 2 days prior to testing positive) who have been **on at least two different units**.

when possible. However, other visitation spaces throughout the hospital can be used as needed to ensure visits are not unnecessarily restricted. If other visitation spaces are to be used, the ventilation of the room should be assessed to ensure appropriate ventilation and room capacity should be monitored.

4. It is recommended, but no longer required, that visits continue to be coordinated by appointment.
5. Visitors should be made aware of the visitation requirements prior to traveling to the facility.
6. The facility can determine the total visitation time for all visitors to a given patient and the appropriate visiting hours, including staggering or limiting the number of visitors at a particular time.
7. Visitors may bring personal care items and clothing that satisfy a person's cultural, preference and gender-based needs, if not provided by the facility. Appropriate health and safety protocols should remain in place to ensure items from the outside are searched for contraband and properly cleaned (i.e., to control for bed bug transmission). Items of risk concern must be properly stored and supervised. Visitors may also bring food items for shared consumption during the visit.

C. Visitation to COVID-19 Positive Patients and Units with COVID-19 Positive Patients

Visitors to COVID-19 positive patients and units with COVID-19 positive patients are generally restricted, except for patients in end-of-life situations, children, and adolescent patients in need of support persons, and surveyors with legal oversight authority (e.g., The Joint Commission, The Justice Center for the Protection of People with Special Needs).

Visitors to these patients or units approved for visitation under the above circumstances must adhere to the following infection control practices:

- Wear a surgical or procedure mask throughout their time in the OMH facility.
- Practice scrupulous hand hygiene and respiratory etiquette.
- Remain in the patient's room except for entrance and exit from the facility.
- While in the patient's room, a gown, gloves, and a face shield or goggles should be worn (provided by the OMH facility).
- In these circumstances, the risks of acquiring COVID-19 should be fully explained so the patient and the visitor can make an informed decision of whether the visitor's presence at the patient's bedside is essential to the patient's care.