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Updated Psychiatric Center Visitation Policy

NOTE: THIS POLICY SUPERSEDES THE VISITATION POLICY ISSUED ON FEBRUARY 7, 2022.

Changes in this version:

- **Removed requirement for Outpatients to complete the Visitor Screening Form.**

This guidance applies to all OMH facility inpatient and outpatient programs, both civil and forensic status treating children, adolescents, or adults as well as residents at OMH Secure Treatment Facilities.¹ 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 psychiatric center (PC) 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 Office of Mental Health (OMH) Psychiatric Center (PC). 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), Bureau of Inspection and Certification (BIC), 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

This policy does not apply to:

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

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

These guidelines do not apply to State-operated residential programs. Residential managers should meet with residents and advise that they should meet with visitors off grounds to the extent possible.

The Executive Director, in consultation with Central Office, will determine any restrictions for volunteers and students.

¹ Outpatient programs include state programs include Assertive Community Treatment (ACT), Clinic Treatment, Day Treatment, Mobile Integration Teams, Peer Wellness Centers and Recovery Centers. Outpatient service recipient program access guidelines are outlined in a separate section of this policy.

I. Visitation Guidance

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

1. Visitors must complete the [OMH Visitor Screening System](#) prior to their visit or upon arrival at the facility. Visitors must be able to adhere to the core principles of infection prevention and control and established OMH policies, and OMH staff are expected to provide regulatorily required supervision and monitoring for all visitors.

The accompanying **Visitor Screening Form** lists specific questions that must be answered to clear visitors and should be completed in the OMH centrally-managed [OMH Visitor Screening System](#). If a visitor refuses to complete the screening process, they will be denied entry. The Executive Director is responsible for ensuring that the Visitor Screening Form is completed.

An electronic log of the name and contact information for all visitors, the date(s) of their visits, and the name of the person(s) visited will be automatically generated when the Visitor Screening Form is completed in the OMH Visitor Screening System. The automatically generated log in the OMH Visitor Screening System will be subject to periodic audit by OMH Central Office.

Each PC should have paper versions of the Visitor Screening Form available in the event of an issue with the OMH Visitor Screening System. The data from the paper version will need to be entered into the OMH Visitor Screening System when the issue is resolved.

2. Visitors must wear appropriate personal protective equipment (PPE) as recommended by the NYS Department of Health and the Centers for Disease Control and Prevention. For patients not suspected of having COVID-19, both the visitor and the patient must wear a face mask. Visitors who do not have an approved face covering² should be provided with an OMH-issued face mask. Visitors must attempt to maintain social distancing (keep at least six feet from the patient whenever possible) and be advised to perform meticulous hand hygiene.
3. Visitors who fail to wear an appropriate face mask and other indicated PPE 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. Visits should take place in a central location close to the main entrance to the facility. On-unit visits will be allowed only in circumstances where visiting is critical to support the patient's treatment plan and the patient is unable to leave the inpatient unit. Visiting areas should be large enough to allow for social distancing of at least six feet.
2. Visits are by appointment only.

² Visitors must wear a surgical or procedure mask throughout their time in the hospital .

3. Visitors should be made aware of the visitation requirements prior to traveling to the facility.
4. Visits should take place in a central location close to the main entrance to the facility. On-unit visits will be allowed only in circumstances where visiting is critical to support the patient's treatment plan and the patient is unable to leave the inpatient unit. Visiting areas should be large enough to allow for social distancing of at least six feet.
5. Visits are by appointment only.
6. Visitors should be made aware of the visitation requirements prior to traveling to the facility.
7. Visitors shall have proof of COVID-19 full vaccination status³ (two weeks or more after the second dose in a two-dose series [Pfizer and Moderna] or after a single dose of a one-dose vaccine [Johnson & Johnson])
OR
Visitors shall have proof of a negative COVID-19 test (antigen or PCR) within 24 hours of the visit.
8. Total visitation time for all visitors to a given patient does not exceed two hours per day to accommodate as many family members or loved ones to visit safely, unless otherwise authorized by the Psychiatric Center, and depending on the patient's status and condition. The facility can determine the appropriate visiting hours within this requirement, including staggering or limiting the number of visitors at a particular time.
9. All visitors are 18 years of age or older except in rare circumstances as determined by the Psychiatric Center.
10. Visitors to individual patients are limited to one person at a time unless, at Psychiatric Center's discretion, a limited number of additional persons is determined to be appropriate.
11. 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 consumption; however, to maintain safety, the food should only be consumed by the patient during the visit and the patient/visitor need to maintain appropriate physical distance while the food is being consumed.

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).

³ Proof of vaccination includes COVID-19 card or Excelsior pass.

After successful completion of the visitor screening process outlined in this document, 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 hospital.
- Practice scrupulous hand hygiene.
- Remain in the patient's room except for entrance and exit from the hospital.
- While in the patient's room, a gown and gloves should be worn. Eye protection should be worn (provided by the Psychiatric Center); and
- 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.

II. Outpatient Service Recipients

This section applies to all outpatients accessing services on-site of an OMH-operated outpatient program. These outpatient programs include Assertive Community Treatment (ACT), Clinic Treatment, Day Treatment, Mobile Integration Teams, Peer Wellness Centers and Recovery Centers.

Outpatient programs must also follow all guidelines set forth in the OMH [Infection Control Guidance for Reopening Public Mental Health System Sites](#) guidance document.

Outpatient service recipients, and anyone who is accompanying them, no longer need to complete the Visitor Screening form. Outpatient programs should ensure that all individuals continue to wear well-fitting surgical masks while on-site and there is a process in place to remind individuals that for in-person sessions they should still assess whether any factors exist (e.g., symptoms, exposure, awaiting a test result) that suggest they should reschedule their appointment or participate via telehealth. All outpatient programs should also have ample signage posted that indicates what should be assessed prior to their visit. Every outpatient program should also have a process whereby staff are verbally verifying with individuals, and anyone who is accompanying them, that they have not had a known exposure, tested positive or are symptomatic.