

ANDREW M. CUOMO  
Governor

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Commissioner

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Chief Medical Officer

## MEMORANDUM

**TO:** OMH-Operated Psychiatric Center Executive Directors, Clinical Directors, Chief Nursing Officers

**FROM:** Dr. Thomas Smith, Chief Medical Officer  
Anita Daniels, Associate Commissioner, State-Operated Children's and Adult Services  
Dr. Grace Lee, Associate Commissioner, Forensic Services  
Dr. Daniel Silverman, Director, Bureau of Health Services  
Dr. Matthew Erlich, Medical Director, State-Operated Services  
Dr. Matthew Perkins, Medical Director, Children and Family Services

**DATE:** July 24, 2020

**SUBJECT:** Updated Psychiatric Center Visitation Policy

**PSYCHIATRIC CENTERS SHOULD OPERATIONALIZE THIS POLICY BY AUGUST 3, 2020**

**NOTE: THIS POLICY SUPERSEDES VISITATION POLICIES ISSUED MARCH 14 AND MARCH 18, 2020.**

### **I. Visitation Guidance- Regions in Phase Four**

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.<sup>1</sup> While in-person visits are allowed under the following parameters, video visiting by friends and family, as well as visits from Mental Hygiene Legal Service and the NYS Department of Corrections and Community Supervision, should continue to be offered if feasible. These restrictions do not apply to residential care units on Psychiatric Center grounds. Residential managers should meet with residents and advise that they should meet with visitors off grounds to the extent possible.

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 with Psychiatric Centers in regions that have entered Phase Four of the NYS phased reopening plan (see [New York Forward](#)).
- Volunteers
- Mental Hygiene Legal Service (MHLS)
- NYS Department of Corrections and Community Supervision (DOCCS)

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<sup>1</sup> 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.

- 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.

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

1. Visitors undergo symptom and temperature checks upon entering the facility and shall be denied entry if they fail the screen.

The accompanying **Visitor Screening Form** lists specific questions that must be answered in order 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 can 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 covering should be provided with a surgical mask or other face covering approved for distribution by OMH Central Office. 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 a face mask and other indicated PPE will be asked to leave the facility; and
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 for safety reasons. Visiting areas should be large enough to allow for social distancing of at least six feet.

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

5. Visits are by appointment only;
6. Total visitation time for all visitors to a given patient does not exceed two hours per day in order 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 number of visitors at a particular time;
7. All visitors are 18 years of age or older except in rare circumstances as determined by the Psychiatric Center;
8. 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;
9. Visitors should be discouraged from bringing personal belongings to the visit. Visitors should not exchange food or personal items with patients except in rare circumstances, as determined by the Psychiatric Center;
10. Visitation is not authorized for patients who currently are COVID-19 positive or have COVID-19-like illness (CLI). The following exceptions apply, with approval from the treating physician:
  - Patients in end-of-life situations; or
  - Child and adolescent patients for whom a visitor or support person has been determined to be essential to the care of the patient. Two support persons may be designated but only one may visit at a time.
11. Psychiatric Center staff must notify family and other identified contact persons of this new visitor policy as soon as possible. Visitors should be aware of screening questions prior to traveling to the facility, when feasible.

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

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

After successful completion of the visitor screening process outlined in this document, visitors to these patients or units 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, if available; and

- In these circumstances, the risks of acquiring COVID-19 should be fully explained, so that the patient and the visitor can make an informed decision of whether or not the visitor's presence at the patient bedside is essential to the patient's health.

## **II. Visitation Guidance- Regions in Phase Three and Below**

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. These restrictions do not apply to residential care units on PC grounds. Residential managers should meet with residents and advise that they should meet with visitors off grounds to the extent possible.

In the event that any region reverts to Phase Three or below of the NYS phased reopening plan (see [New York Forward](#)), the following visitation policies and procedures will be in effect. It is the responsibility of the PC Executive Directors, in coordination with Central Office, to communicate changes in the visitation policy with staff, patients, families, and other potential visitors.

1. All visitation to adults in civil and forensic PC inpatient units will be immediately restricted;
2. Visitation to children and adolescents residing in civil PC inpatient units may continue when it is essential to the care and wellbeing of the patient. In these cases, visitors to children and adolescents must follow the visitation guidelines outlined earlier in this document;
3. PC staff must notify family and other identified contact persons of this restriction as soon as possible;
4. Each 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);
5. Each PC must have procedures for considering exceptions to this visitor restriction, for example: individuals requiring access to legal counsel in advance of a hearing or other legal matter or when a patient is in an end-of-life situation. In these cases, all visitors must follow the visitation guidelines outlined earlier in this document; and
6. The Executive Director, in consultation with Central Office, will determine any restrictions for volunteers and students.

## **III. Outpatient Service Recipients**

This section applies to outpatients accessing services on-site of an OMH-operated outpatient program in any phase of New York Forward. 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 available at: <https://omh.ny.gov/omhweb/guidance/covid-19-guidance-infection-control-public-mh-system-sites.pdf>.

Outpatient service recipients must pass the **Visitor Screening**, including symptom and temperature checks upon entering the facility and shall be denied entry if they fail the screen.

The accompanying **Visitor Screening Form** lists specific questions that must be answered in order to clear outpatients and should be completed in the OMH centrally-managed [OMH Visitor Screening System](#).

An electronic log of the name and contact information for all outpatients, 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 program site 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.

CC: OMH Exec Team  
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