ORDER

Whereas, on March 10, 2020, Governor Ned Lamont (the Governor), in response to the global pandemic of 2019 Coronavirus disease (COVID-19), declared a public health and civil preparedness emergency throughout the State of Connecticut pursuant to Sections 19a-131a and 28-9 of the Connecticut General Statutes, to remain in effect through September 9, 2020, unless sooner terminated by the Governor; and

Whereas, the Governor’s Executive Order No. 7K, dated March 23, 2020, authorized the Commissioner of Public Health (the Commissioner) to temporarily waive, modify or suspend any regulatory requirements adopted by the Commissioner or any Boards or Commissions under Chapters 368a, 368d, 368v, 369 to 381a, inclusive, 382a, 383 to 388, inclusive, 398 to 399, inclusive, 400a, 400c and 474 of the Connecticut General Statutes as the Commissioner deems necessary to reduce the spread of COVID-19 and to protect the public health; and

Whereas, due to the COVID-19 pandemic, many health care facilities have restricted access to their premises and their patients to prevent the further spread of the disease; and

Whereas, such restrictions prevent family members, personal care assistants or similar disability service providers from accompanying a patient with disabilities through his or her stay at the facility, causing such patient with disabilities to experience barriers to obtaining the care they require as well as inconvenience and distress.

Now, Therefore, in an effort to reduce the spread of COVID-19 and to protect the public health, and, in accord with the authority set forth above, for the duration of the public health and civil preparedness emergency, unless sooner modified or terminated by me or unless the Governor sooner repeals or modifies Executive Order No. 7K or the declared public health and civil preparedness emergency, I hereby order that, effective June 15, 2020:

Sections 19-13-D3 (Short-term hospitals, general and special), 19-13-D4a (Short-term hospitals, Children’s General), 19-13-D45 to 19-13-D53 (Outpatient Clinics), 19-13-D55a (Outpatient dialysis unit) and 19-13-D56 (Outpatient surgical facility) (Facility or Facilities) of the Regulations of Connecticut State Agencies are hereby modified by adding the following provisions to each such section:

(a) Patients in such Facility with disabilities that may include, but not be limited to, altered mental status, physical, intellectual or cognitive disability, communication barriers or behavioral concerns, who need assistance due to the specifics of their disability, may have one designated support person with them to support their disability related needs.
(b) Such designated support person may be a family member, personal care assistant, similar disability service provider, or other individual knowledgeable about the management of their care, to physically or emotionally assist them or to ensure effective communication during their stay in such Facility, provided proper precautions are taken to contain the spread of infection.

(c) When the period of time any such patient with disabilities will remain in such Facility will be longer than one day, such patient or his or her family or caregiver may designate two support people, provided only one support person may be present at a time. This restriction must be explained to the patient and support person in plain terms, upon arrival or, ideally, prior to arriving at the Facility. Facility staff should ensure that the patient or his or her family or caregiver fully understands this restriction, allowing the patient to decide who he or she wishes to identify as his or her support person. Notice of the Facility’s support person policy including the requirements contained herein shall be posted at patient entry points in the Facility, on the Facility’s website and be provided to the patient at the time services are scheduled or initiated.

(d) Any such support person must be asymptomatic for, or not have previously been confirmed positive for, COVID-19. Facility staff must screen any support person for symptoms of COVID-19 (e.g., fever, cough, shortness of breath, or potential exposure to individuals testing positive for COVID-19) and conduct a temperature check prior to entering the clinical area and every twelve hours thereafter. Any support person suspected of having been exposed to COVID-19¹, may be denied access where attendant risks of such access cannot be reasonably mitigated.

(e) The Facility shall provide appropriate Personal Protective Equipment (PPE) to be worn by the designated support person as instructed by the Facility for the duration of the visit. If the Facility does not have PPE for the support person, PPE supplied by the support person that the Facility finds adequate may be used. The Facility shall determine and inform the patient and the designated support person of any policy governing the designated support person attendance including the entrance and exit policy of the Facility. Any such support person who leaves the Facility shall be screened as provided in subsection (d) above upon his or her re-entry.

(f) The support person shall comply with all reasonable requirements imposed by the Facility to minimize the potential spread of infection.

(g) Notwithstanding the foregoing, every effort shall be made to support the patient with disabilities employing virtual communication options whenever possible.

Nothing in this order should be interpreted as altering facility obligations to provide patients with effective communication supports or other required services, regardless of the presence of a designated support person or other reasonable accommodation, consistent with applicable federal or state law and regulations.

Ordered this 9th day of June 2020.

Deidre S. Gifford, MD, MPH
Acting Commissioner

¹ The determination of potential exposure shall be based upon CDC Guidance, as updated, on Community Related Exposure. See https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html.