

# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

Deidre S. Gifford, MD, MPH  
Acting Commissioner



Ned Lamont  
Governor  
Susan Bysiewicz  
Lt. Governor

### HEALTHCARE QUALITY AND SAFETY BRANCH

## BLAST FAX 2020-93

TO: Chronic Disease Hospitals

FROM: Commissioner Deidre S. Gifford, MD, MPH

A handwritten signature in blue ink that reads "Deidre S. Gifford".

CC: Deputy Commissioner Heather Aaron, MPH, LNHA  
Adelita Orefice, MPM, JD, CHC, Senior Advisor to the Commissioner  
Barbara Cass, RN., Branch Chief, Healthcare Quality and Safety Branch  
Donna Ortelle, Section Chief, Facility Licensing and Investigations Section

DATE: September 25, 2020

SUBJECT: DPH Guidance on visitation in a Chronic Disease Hospital.

The Department of Public Health (DPH) is in the process of rescinding the Commissioner's Orders dated April 21 and August 27, 2020, regarding visitation. Once these Commissioner's Orders are rescinded, a chronic disease hospital may permit patient visitation under the conditions and pursuant to the guidance set forth below.

The Department recommends each chronic disease hospital develop a hospital-wide visitation policy. The chronic disease hospital's visitation plan should include the following basic Core Principles of COVID-19 Infection Prevention:

1. Screening for all who enter the facility;
2. Hand hygiene recommendations;
3. Personal protection equipment as applicable;
4. Social distancing requirements;
5. Instructional signage throughout the facility;
6. Cleaning and disinfecting high frequency touched surfaces in the facility; and
7. Effective cohorting of patients as applicable;



Phone: (860) 509-7400 • Fax: (860) 509-7543  
Telecommunications Relay Service 7-1-1  
410 Capitol Avenue, P.O. Box 340308  
Hartford, Connecticut 06134-0308  
[www.ct.gov/dph](http://www.ct.gov/dph)

*Affirmative Action/Equal Opportunity Employer*



8. Visitors should be able to adhere to the core principles and staff should provide monitoring for those who may have difficulty adhering to core principles;
9. Facilities should limit the number of visitors per patient at one time and limit the total number of visitors in the facility at one time (based on the size of the building and physical space). Facilities should consider scheduling visits for a specified length of time to help ensure all patient are able to receive visitors; and
10. Facilities should limit movement in the facility. For example, visitors should not walk around different halls of the facility. Rather, they should go directly to the patient's room or designated visitation area.

The chronic disease hospital should assess each patient and develop a visitation plan that meets the physical and psychosocial needs of each patient prior to allowing inside visitation.

All such visitors should be subject to any risk screenings and use of personal protective equipment (PPE) or other infection control measures required for visitors as outlined in the chronic disease hospital's visitation plan. Any such PPE for visitors shall be provided by the chronic disease hospital.

All in-person visits should be planned with the chronic disease hospital in collaboration with the patient's family and/or conservator with guidelines for infection control and safety as part of the chronic disease hospital's visitation policy.

Should you have any questions, please contact Susan Newton, Supervising Nurse Consultant at 860-509-8018.