



May 11, 2023

To all OSH staff,

This Chief Medical Officer (CMO) Directive replaces the Superintendent directive dated April 3, 2023.

This CMO Directive modifies and adds to Oregon State Hospital policies, procedures, and protocols.

It is my directive that today, May 11, 2023, that:

As pertains to patient visitation:

- Visitation locations are as follows:
  - BY1 and BY2: Springs treatment mall and Kirkbride Café
  - Harbors: Kirkbride family dining
  - All other Salem patients: Kirkbride Café
  - JC Patients: Valley Café
- If a visitor and patient wish to spend time together outside, all visitors must agree to go outside. However, if Security has the staffing to support both indoor and outdoor visitation while still providing support to the rest of the hospital, Security may make that accommodation.
- Walk-in visits will be allowed if there is room in the visitation location.
- Patients can visit with up to four adult visitors at a time.
- Patients can visit with up to two adults and no limit on children during child visits.
- There is no limit on the number of times a week a visitor can visit.
- Visitation hours in Salem have been expanded per Attachment A.
- If a visitor and patient need to visit outside of the standard visitation rules (i.e. length, hours, number of visitors), the exception process should



be followed. It is preferred that exceptions be requested in advance to allow for planning and staffing:

- Requests prior to the date of the visit: Unit leadership will send an email containing the information for the exception to the Program Director for the unit. The Program Director will collaborate with the Deputy Director of Security to make the necessary accommodations if possible.
- Requests on the day of the visit: The Nurse Manager (NM) or Program Nurse Manager (PNM) will contact the Security Manager on Duty with the visitation exception request info. The NM or PNM and security leadership will collaborate to make the necessary accommodations if possible.
- Visitation exception request format:
  - Patient name:
  - Unit:
  - Date and time of requested visit:
  - Location where visit is to be held if not in regular visitation:
  - What is being requested (ex. 2-hour visit):
  - Why this request is being made:
  - Staffing plan:
  - Does the IDT support this request?
- Going forward, all changes to visitation will be handled through the visitation committee with representation from all stakeholders.
- Patients and visitors may eat food purchased at OSH during visitation. No food will return with the patient to the unit.

As pertains to other patient treatment and infection prevention measures:

- OSH may return to staff social dining with patients with previous standard work process in place.
- Comingling is allowed in the following areas:
  - Treatment mall groups
  - Spiritual services
  - On and off grounds outings
  - Educational services
  - Outdoor spaces
  - Hairdressing services
  - Vocational services

- Treatment will continue per stack, but patients may receive treatment from other stacks and come in if they have specific treatment needs outside of their stack treatment mall. Please continue to follow current processes, such as the mall-to-mall referral form, to address patient treatment needs outside of their current treatment mall.
  - All centralized services within Treatment Services department, including the occupational/physical therapy (OT/PT) clinic, evening and weekend activities, support groups, and groups listed above do not have any COVID-19 related limitations. We will send updates if there are scheduling changes.
  - The life skills cooking group COVID-19 restrictions are lifted in full. Staff who are trained to provide this intervention will accept referred patients to these groups as it relates to their care plan. Staff and patients may socially dine together in these groups. The limit of patients per group is related to safety, kitchen space and tool accessibility. Please connect with your mall manager or Director of OT/PT for more information.
- Hairdressing services will continue with set schedules. At this time, we are not starting chemical/hair dying services.
- Please remember that a max of five patients at a time are allowed during in-person shopping at the Market.
- No appointments are required for the clothing shop with a maximum of two patients. Junction City will continue to use the ordering process.
- For on-grounds and off-grounds departures and returns, Salem campus may access sally port 5 in addition to sally ports 1 and 2. This will allow for Springs and Harbors patients with privileges to leave via a sally port closer to their home units.
- Effective May 22, 2023 for Junction City, sally port 2 must be used for all patient movement in and out of the hospital. Staff may also use it as a staff entrance and exit. We will no longer use the front entrance for patients. Junction City staff must check out at Sally Port 2 with Security staff for on and off-grounds movement. Security staff review the trip slip, exchange any required information, and verify staff have a state-issued cell phone or radio before exiting Sally Port 2.
- Staff must contact access control 10 minutes prior to departure and 10 minutes prior to return from an on- or off-grounds outing.
- Scheduling for outdoor spaces will be managed through mall managers.

- Though masks are no longer required, staff and patients are encouraged to wear a mask as they see fit. Any masks worn inside OSH must be hospital issued masks, which will continue to be available at hospital entrances.
- OSH will no longer perform routine COVID-19 testing for patients upon admission.
- OSH will no longer perform routine COVID-19 symptom screening for patients on the unit.
- OSH will no longer restrict patients to the unit for five days after admission. If patients have symptoms concerning for an acute illness, the patient will need to be restricted to the unit until evaluation is completed and instructions are given regarding care.

All the following information has not changed and is still applicable:

We announced on April 24, 2023 that:

- The trip slip will now have the ability to change the departure and return time for Unit based trips only. If the time needs to be changed for a trip, this must be completed prior to the RN screening. The RN screening must be completed within the 2-hour time frame.
- Reasons for changing the time include not enough staffing at the original time.
- There can be no other additions or changes to the trip slip on the day of the outing, unless the outing is medical, legal, or discharge focused.
- Contact Technology Services for trip slip system technical issue support.

We announced on April 3, 2023 that:

- The OSH mask requirement for staff, patients, and visitors is discontinued.
  - Mask-on directives may still be issued by the Superintendent, CMO, or their designee per OSH policy 2.017, "Influenza Prevention."
  - Closed units under infection prevention protocols, such as PUI Lite, must follow all protocol requirements, including mask wearing.
  - All staff are subject to infection prevention protocols as allowed per OSH policy 1.001, "Policy System at OSH."
- Return to work testing for COVID-19 has ended.
- Contact tracing for COVID-19 has ended.
- Transfers on/off a closed unit on either campus require CMO or Chief of Medicine approval.

- Patients may have food in their room only when a unit is closed by the CMO or Chief of Medicine for contagious illness.
  - Staff will order clamshell meals for these patients. Staff must remove all food and utensils and clean the room when patients are done eating.
- Visitors can schedule visits for up to one hour at a time per day. Visits are scheduled in 30-minute increments.
- As related to visitation, items purchased from the Market during a visit will stay with Security staff, and unit staff will deliver the items to the patient the evening of the visit.

We announced on October 11, 2022, that effective October 31, 2022, the following changes be made related to patient outings:

- For patient privileges:
  - Privileges available to patients for on-grounds outings include 1:1,2:1, 2:4, and 2:6. Privilege ratios of 1:3 and 2:8 are no longer permitted.
  - Privileges available to patients for off-grounds outings include 1:1,2:1, and 2:4. Privilege ratios of 1:3, 2:6, and 2:8 are no longer permitted.
- For all on and off grounds movement:
  - Patients under Aid and Assist commitments may not participate in on-grounds or off-grounds outings.
  - Escorting staff:
    - All off-grounds outings must be coordinated and escorted by at least one Treatment Services Staff.
      - An exception, interdisciplinary team (IDT) members may escort a patient who is on a 2:1 and 1:1 off-grounds outing to ensure safe and successful participation on the outing.
    - Escorting staff protocol for checking out for an on- or off-grounds outing:
      - Salem staff must check out at the Security Services window by Sally Port 2. Reception Center staff will review the trip slip, exchange any required information, and verify staff have a state-issued cell phone or radio before exiting Sally Port 2.
      - Satellite phones must be checked out if a destination has poor/no cell phone coverage.

- Salem staff returning from on/off grounds patient outings are required to enter through the main lobby.
  - Security staff:
    - For all patients leaving from and returning to the secure perimeter, Security staff must:
      - Perform a personal search per OSH policy 8.041, “Patient Personal Searches.” Personal searches will be conducted by:
        - Wanding – Security staff should follow current Security department protocol 5.013, “Wanding Procedures for Patient Screening;”
        - Pat downs;
        - Requesting that patients empty their pockets; and
        - Personal searches must be conducted per provisions of OSH policy 8.041 and OSH policy 6.061, Transgender Gender Non-Conforming Treatment.”
      - Complete an X-Ray screening of any patient property (such as backpacks).
      - Check the amount of money a patient is carrying. Appropriate amounts are as listed in OSH policy 8.037, “Patient Property and Valuables.”
      - Update the trip slip database.
        - Security staff must verify and document the departure and return of each patient individually.
        - Security staff must check off personal search tasks in the trip slip database for each patient. There are checkboxes for each of these tasks:
          - Personal search conducted
          - Money confirmation
  - On and Off-Grounds Outing Process Roles:
    - Originator: means the person starting and responsible for ensuring completion of the trip slip process
    - Group Lead: takes the lead of the group of patients during the outing.
    - Trip Staff Contact and Documenter: same person as the Group Lead.
      - Each trip slip has a box that identifies the Trip Slip Contact and Documenter
      - The Trip Staff Contact and Documenter must document in each patient’s electronic health record after every on-



and off-grounds outing. In the “New Group Progress Note” section of the electronic health record, there is a new template that identifies the core elements of the pre- and post-trip meeting.

- Preparing for on- and off-grounds Movement – Patient Privileges and Trip Slips:
  - Staff must accurately complete trip slips, verify privilege levels, and verify that relevant privileges are active before each trip. Escorting staff must adhere to any restrictions to patients’ privileges.
    - Patient privileges may be verified in Avatar by reviewing the “\*Privilege Grid by Unit” report or the “Patient Privileges” form.
    - Privileges which have been approved by Risk Review but have not been entered into the “Patient Privileges” form (and are therefore not present on the “\*Privilege Grid by Unit” report) may not be used.
    - If privileges have been suspended, they may not be used. Suspension of privileges will be reflected on the “\*Privilege Grid by Unit” report and the “Patient Privileges” form. If it is clinically appropriate for privileges to be suspended, privileges must be suspended in Avatar and staff must document the rationale.
    - Off-grounds privileges that are limited only to secure van rides or medical appointments may not be used for other off-grounds outings.
  - One additional staff is required for some outings:
    - All on-grounds outings which include more than four patients.
    - On-grounds outings to the Empowerment Center or Treatment Cottages in Salem, irrespective of the number of patients.
    - All off-grounds outings which include more than one patient.
    - The additional staff is responsible for driving, checking and monitoring restroom use, and maintaining line of sight if any patient attempts to leave the group.
  - Except for urgent medical, legal, or discharge outings, trip slips must be generated at least 24 hours before a trip, and no additions of patients or destinations can be made after this
  - After the manager has approved the trip slip, the registered nurse (RN) screening required by OSH policy 6.006 must be completed no sooner than 2 hours prior to the outing.
    - RNs are required to complete a set of nursing screening questions.

- If a patient is declined by an RN or a patient declines an outing, a declination, including the reason, must be completed in the trip slip database per Nursing protocol.
- Additional Off-grounds Movement Requirements:
  - Off-grounds outings are permitted for patients under PSRB and Civil commitments who have the necessary privileges, except for patients on Admission or medical isolation units.
    - Patients on medical isolation units may not participate in outings until they have completed required monitoring.
    - Off-grounds outings must be for outdoor destinations or indoor locations that directly pertain to medical care, legal/court appearances, or discharge (ex. Obtaining photo ID, residential site visit) only.
    - Secure van rides, including visits to drive-throughs, are permitted. Patients must remain in the van while off campus.
- Staff Training Requirement:
  - All policy language referencing iLearn training is discontinued and replaced with Workday learning.
  - Escorting staff must review the policies, processes, and trainings required for on/off campus trips. Staff must complete the indicated training and policy review for OSH policies 6.006, and OSH policy 8.018, “Unauthorized Leave.”
    - Policy 6.006 required training is updated to, “Patient Movement Outside the Secure Perimeter.” This training is a review of OSH policy 6.006 and includes links to each role/responsibility in the trip slip process
- “Escorting staff” means staff that accompany or supervise a patient on an on- and/or off-grounds outing.

We announced on September 9, 2022, as related to patient visitation, that:

- The visitor will call reception to schedule a visit.
- Reception/Security will inform units of scheduled visits. Reception is the primary contact for units, but Security will cover them when necessary.
- Patients who are medically isolating (including all patients on units under temporary PUI Lite status) will not be permitted to visit until the isolation period is complete.
- When transporting a patient to visitation, staff must sign the patient in and check in with Security before leaving the visitation area.
- Video visitation will continue to be available to all patients and their approved visitors.



- Inappropriate or revealing clothing or clothing images that promote the use of drugs, alcohol, or violence may be disruptive to patients at OSH. For patients' well-being and safety, and for the security of staff and other visitors, visitors must dress for the hospital environment.
- Clothing for visitors and patients during visitation should include a dress or a shirt with either a skirt, pants, or shorts. Visitors and patients should also wear shoes or sandals.
- Inappropriate visitation attire for visitors and patients includes, but is not limited to:
  - Camouflage or military-type clothing, except as approved in advance by OSH.
  - Clothing with words or logos related to alcohol, tobacco products, drugs, vulgarity, violence, bigotry, sexual connotations, or those containing allusion to any of these items.
  - Clothing that may be considered provocative, including, but not limited to, see-through, skin-tight, or low-cut clothing and/or clothing that exposes undergarments, back, midriff, or thighs at any time (i.e. while sitting, standing or bending over).
  - Excessively short skirts or shorts
  - Hats or other head coverings which obstruct facial features
  - Shoes or accessories that might be a safety hazard, including anything that may be used as a weapon or ligature device.
- Expectations regarding food and property during visits have changed. Staff must ensure patients are aware of these changes.
  - Purchasing from the Market:
    - During the visit, visitors may buy items in the Market from a patient's approved Market order form.
    - Patients must submit Market order forms for staff approval at least 24 hours prior to the scheduled visit.
    - Staff must verify the patient has space for the items they wish to purchase and that those particular items are approved for that specific patient to possess.
    - The patient will take their approved Market order form to their visit.
    - The visitor will use their money to pay for the patient's Market items.
  - Visitors may not bring items for patients to use during their visit or to take back to their unit.

The definition of "staff" includes all employees, volunteers, trainees, interns, contractors, vendors, and other state employees assigned to work at OSH.

This directive will remain in effect until OSH Policies and Procedures are updated or the directive is otherwise rescinded.

Sincerely,

A handwritten signature in blue ink that reads "Sara C. Walker, MD". The signature is fluid and cursive.

Sara C. Walker, MD  
Chief Medical Officer

Attachment A – Salem Visitation Schedule