

July 7, 2020

**MEMORANDUM**

**TO:** Ambulatory Surgical Facilities  
Intermediate Care Facilities for Individuals with Intellectual Disabilities  
Hospices  
Hospitals  
Renal Dialysis Facilities

**FROM:** Gwen C. Thompson, Director of Healthcare Quality

**SUBJECT:** Guidance Regarding Reasonable Access to Support Persons During COVID-19

On March 13, 2020, Governor Henry McMaster issued Executive Order 2020-08, which declared a State of Emergency in South Carolina based on the determination that the 2019 novel coronavirus (“COVID-19”) was an imminent public health threat. Subsequently, on March 17, 2020, Governor McMaster issued Executive Order No. 2020-10, which directed state agencies to take appropriate actions regarding provisions of existing regulations that in any way prevent, hinder, or delay necessary action in coping with the emergency. On June 26, 2020, Governor McMaster issued Executive Order 2020-42, which further extended the State of Emergency.

As Ambulatory Surgical Facilities, Intermediate Care Facilities for Individuals with Intellectual Disabilities, Hospices, Hospitals, and Renal Dialysis Facilities (“Facilities”) continue to provide care to patients during the ongoing State of Emergency, the South Carolina Department of Health and Environmental Control (“Department”) understands that Facilities may modify their visitation policies in order to combat the spread of COVID-19 and ensure the safety of all patients, in accordance with recommendations and guidance from the Centers for Medicare & Medicaid Services (CMS) and the Centers for Disease Control and Prevention (CDC).

The Department encourages Facilities to maintain visitation policies that ensure that people with disabilities have reasonable access to needed support persons, while still protecting the health and safety of all patients. **Specifically, the Department encourages Facilities to consider including provisions similar to the following in their visitation policies during the State of Emergency:**

1. Patients with disabilities (that may include, but are 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.

2. A designated support person may be a family member, personal care assistant, disability service provider, or other individual knowledgeable about the management of the patient's care that can physically or emotionally assist them, or ensure effective communication during their stay in a Facility, as long as proper precautions are taken to contain the spread of infection.
3. When a patient with disabilities will remain in a Facility longer than one day, the patient, their family member, or their caregiver may designate two designated 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, their family member, or their caregiver fully understands this restriction. The patient should be allowed to decide who they wish to identify as their support people. 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.
4. Any 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 other symptoms listed by the CDC in their [Symptoms of Coronavirus Page](#)) and for any known exposure to individuals whom have tested positive for COVID-19. A temperature check must be conducted prior to entering the clinical area and every twelve hours thereafter. Any support person showing symptoms of COVID-19, having a temperature of 100.4°F or greater, who has tested positive for COVID-19, or who is suspected of having been exposed to COVID-19 may be denied access where attendant risks cannot be reasonably mitigated. The determination of potential exposure risks is based on the CDC's recommendations on Community Related Exposure available [here](#).
5. 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, the support person can use their own PPE that the Facility deems adequate for use. The Facility shall determine and inform the patient, their family member, or their caregiver, along with the designated support person, of any policy governing the designated support person's attendance, including entrance and exit policies. Any support person who leaves the Facility shall be screened, as stipulated in subsection 4, upon their re-entry.



6. The support person shall comply with all reasonable requirements imposed by the Facility to minimize the potential spread of infection, including wearing PPE correctly and limiting their movements within the Facility.
7. Notwithstanding the foregoing subsections, every effort shall be made to support the patient with disabilities employing virtual communication options whenever possible.

**This memorandum expires upon the expiration of the State of Emergency and is subject to modification or revocation at DHEC's discretion.**