**

**COVID-19 Visitation**

*This Policy is Subject to Change at Any Time*

*Based Upon the Risk of COVID-19 Transmission, as Determined by Facility*

**POLICY[[1]](#footnote-2)**

In order to help prevent the transmission of COVID-19, it is the policy of Facility to take a person-centered approach to resident visitation and consider residents’ physical, mental, and psychosocial wellbeing, and support their quality of life in accordance with state and federal requirements. All resident visitations will be in compliance with this policy, until further notice, consistent with state and federal law and guidance.

**DEFINITIONS**

**Active Screening.** Screening performed and documented by Facility personnel. This includes asking about COVID-19 exposure, asking about COVID-19 Symptoms, observing for cough or shortness of breath, and measuring temperature.

**Compassionate Care Situations.** Case-by-case exceptions to general visitation procedures/restrictions due to special circumstances including, but not limited to:

* End-of-Life;
* A resident who was living with their family before recently being admitted to a nursing homes, is struggling with the change in environment and lack of family support;
* A resident who is grieving after a friend or family member recently passed away;
* A resident who needs cueing and encouragement with eating or drinking, previously provided by family and/or caregiver(s), is experiencing weight loss or dehydration; or
* A resident who used to talk and interact with others, is experiencing emotional distress, seldom speaking, or crying more frequently (when the resident had rarely cried in the past).

**Core Principles.** The following principles and best practices reduce the risk of COVID-19 transmission:

* Screening all who enter the Facility for Symptoms of COVID-19 (e.g., temperature checks, questions about exposure and signs and symptoms and observations of the same) and denial of entry for those with Symptoms or who have had close contact with COVID-19 infection in the prior 14 days, regardless of the visitor’s vaccination status;
* Hand hygiene in accordance with this policy;
* Face covering the mouth and nose for visitors, which must be either a surgical or procedural mask (no cloth masks permitted);
* Face covering for residents when possible;
* Social distancing of at least 6 feet between persons;
* Instructional signage throughout the Facility and proper visitor education on COVID-19 Symptoms, infection control precautions, other applicable Facility practices (*e.g.*, use of face covering or mask, specified entries, exists and routes to designated areas, hand hygiene);
* Cleaning and disinfecting high frequency touched surfaces in the Facility often, and designated visitation areas after each visit;
* Appropriate staff use of Personal Protective Equipment (PPE);
* Effective cohorting of residents (*e.g.*, separate areas dedicated COVID-19 care); and
* Residents and staff testing conducted as required by applicable state and federal law.

**End-of-Life.** A case-by-case determination by the resident’s physician or Facility staff that there is a substantial change of condition indicating end-of-life is approaching, including, but not limited to, loss of appetite, increased sleeping, delirium, unexplained agitation, mottling of skin, significant decline in cognition, and/or an increase in depression accompanying other indications. An End-of-Life determination is made independent of whether the resident is receiving hospice services or has a COVID-19 diagnosis.

**Fully Vaccinated**. Refers to a person who is ≥ 2 weeks following receipt of the second dose in a 2 dose series or following the receipt of one dose in a single dose series.

**Nursing Home-Onset COVID-19 Infections**. Refers to COVID-19 infections that originated in the nursing home. It does not refer to the following:

* Residents who were known to have COVID-19 on admission to the facility and were placed into appropriate Transmission-Based Precautions to prevent transmission to others in the facility.
* Residents who were placed into Transmission-Based Precautions on admission and developed SARS-CoV-2 infection within 14 days after admission.

**Outbreak**. An outbreak exists when a new Nursing-Home Onset of COVID-19 occurs (i.e., a new COVID-19 case among residents or staff).

**Outbreak Testing**. Testing will commence as soon as an Outbreak is identified and continue until it has been at least 14 days since the most recent positive COVID-19 result for a staff member or resident.

**Symptomatic / Symptoms.** One or more of the following COVID‑19 symptoms:

* New/worsening cough
* Shortness of breath or difficulty breathing
* Sore throat
* Fever – temperature over 100° F or chills
* Fatigue
* Muscle/body aches
* New loss of taste or smell
* Congestion or runny nose
* Headache
* New GI symptoms - nausea, vomiting, diarrhea

**PROCEDURE**

1. **Visitation During COVID-19.** Resident visitors are only permitted to visit in the Facility, or on Facility premises, in accordance with this Policy.
2. **General Visitation Procedures.** All visits shall be in accordance with the following general procedures:
	1. The Facility will take a person-centered approach to visitation, taking into consideration residents’ physical, mental, and psychosocial wellbeing, and supporting their quality of life.
	2. All visits shall be conducted with an adequate degree of privacy.
	3. The number of visitors per resident at one time will be limited to \_\_\_\_[[2]](#footnote-3) and the total number of resident visitors in the Facility at one time will be limited to \_\_\_ due to available space to maintain social distancing.[[3]](#footnote-4)
	4. All visits will be in accordance with the Core Principles.
	5. Visitors must be able to adhere to the applicable Core Principles, including physical distancing (maintaining at least 6 feet) from all staff, other visitors, and residents, including the resident being visited with the following exceptions:
		1. If a resident is Fully Vaccinated and his/her visitors are Fully Vaccinated, the resident and his/her visitors may choose to have close contact (including touch) and not wear source control when alone in the resident’s room or visitation area.
		2. If a resident is Fully Vaccinated and some or all of the resident’s visitors are unvaccinated, the safest approach is for all to wear source control and maintain social distancing. However, residents can choose to have close contact (including touch) with their unvaccinated visitors while both the resident and visitors continue to wear well-fitting source control.
	6. Visitors must be screened in accordance with this Policy;
	7. Visitors will be restricted and/or asked to leave in the following circumstances (this includes Compassionate Care visits):
		1. In accordance with the Visitor Screening section of this Policy;
		2. Visitor failure to comply with applicable Core Principles (e.g., use of Personal Protective Equipment, hand-hygiene, social distancing, etc.) or this Policy;
		3. Other relevant factors related to the COVID-19 Public Health Emergency; or
		4. As otherwise permitted by law/regulation.
3. **Outdoor Visitation.** Outdoor visitation is preferred even when resident and visitor are fully vaccinated. Outdoor visitation will be held whenever practicable, as determined by the Facility, because of the lower risk of COVID-19 transmission due to increased space and airflow. Considerations regarding when and how to conduct outdoor visitation include:
	1. Creating accessible and safe outdoor spaces for visitation (*e.g.*, courtyards, patios, parking lots), including the use of tents, if available;
	2. Weather considerations (*e.g.*, inclement weather, excessively hot or cold temperatures, poor air quality);
	3. Resident’s health status (*e.g.*, medical conditions, COVID-19 status); and
	4. To support social distancing and infection prevention, reasonable limitations on the:
		1. Number and size of visits occurring simultaneously; and
		2. Number of individuals visiting with any one resident at the same time.
4. **Indoor Visitation.** General indoor visitation for non-Compassionate Care visits will be permitted for all residents, unless otherwise restricted by this Policy.
	1. As required by CMS, visitation will be limited in the following circumstances due to high risk of COVID-19 transmission:
		1. Unvaccinated residents will not be permitted indoor visitation if the \_\_\_\_\_\_\_\_[[4]](#footnote-5) County’s CMS positivity rate is > 10% **and** less than 70% of the residents in the Facility are Fully Vaccinated;
		2. Residents with confirmed COVID-19 infection will not be permitted indoor visitation, whether vaccinated or unvaccinated, until the resident has met the CDC criteria to [discontinue transmission based precautions](https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html);
		3. Residents in quarantine will not be permitted indoor visitation, whether vaccinated or unvaccinated, until they have met criteria for release from [quarantine](https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html).
		4. When an Outbreak is identified, the Facility will immediately begin Outbreak Testing and suspend general Indoor Visitation for **all** residents. Visitation will resume based on the following:
			* 1. If the first round of Outbreak Testing reveals no additional COVID-19 cases in other areas (e.g., units) of the Facility, visitation will resume for residents on the **unaffected** areas/units with no COVID-19 cases. Visitation will remain suspended for residents on the affected unit until the Facility meets the criteria to discontinue Outbreak Testing.
				2. If the first round of Outbreak Testing reveals one or more additional COVID-19 case in other areas/units of the facility (e.g., the presence of cases on 2 or more units), visitation will remain suspended for all residents until the Facility meets the criteria to discontinue Outbreak Testing.
	2. Visitors will be notified about the potential for COVID-19 exposure with an Outbreak, if applicable, at the time of visitation and/or via signage;
	3. Visits will be conducted in a designated visitation area or private resident room. For situations where there is a roommate and the health status of the resident prevents leaving the room, the Facility will attempt to enable in-room visitation while adhering to the Core Principles.
5. **Compassionate Care Situation Visits.** The need for Compassionate Care Situation visits will be identified through a person-centered approach together with residents, families, caregivers, resident representatives, and/or the Ombudsman program. Compassionate Care Situation visits will be permitted, regardless of resident’s vaccination status, the county positivity rate or Facility Outbreak status, in accordance with the General Visitation Procedures above.

Compassionate Care Situation visits should be conducted using social distancing. If the Facility and visitor identify a way for personal contact, it will be done following appropriate infection control guidelines (e.g., use of full PPE, hand hygiene before and after, etc.). If the resident is Fully Vaccinated, the resident can choose to have close contact, including physical touch, if the resident is wearing a well-fitting mask and hand-hygiene is performed before and after. **Visitors must always remain socially distanced from staff and other residents in the Facility.**

1. **Alternatives to In-Person Visits.** Facility will facilitate alternative means of family/visitor communication with residents. Alternative communication methods may include telephone or video communication or access to email where residents may communicate electronically.
2. **Care Planning.** Resident care plans should be updated to address any need identified by the change in visitation policy including, but not limited to:
	1. Alternative social and emotional support measures;
	2. Updated family communication plans for all residents related to increased or relaxed visitation restrictions; and
	3. Routine education about the risk of COVID-19 and the appropriate precautions to protect themselves and their visitors (*i.e.*, hand hygiene, face covering/facemask, PPE (if applicable), limit physical contact).
3. **Notification.** Facility will notify residents and resident representatives/families of the Visitation Policy and any changes in the Visitation Policy via a variety of methods that may include signage at entrances/exits of Facility, letters, emails, phone calls, and/or recorded voicemail messages.
4. **COVID-19 Screening for Prospective Visitors.** Facility will screen all prospective visitors for COVID-19 prior to granting them access to Facility areas with residents or staff.
	* 1. Active Screening includes evaluation and documentation by designated Facility staff of the prospective visitor’s name (when the individual is unknown to the personnel performing Active Screening, government identification must be used to verify identity), address, business or other phone number, date, temperature, and presence of absence of any Symptoms noted above.
		2. Personnel who perform Active Screening of prospective visitors will don full PPE.
		3. If screening indicates a prospective visitor is Symptomatic, the prospective visitor should immediately return home.
		4. A prospective visitor who has been exposed to COVID-19 in the past 14 days or is Symptomatic may not enter Facility premises under any circumstances, even in Compassionate Care Situations.

**OPTIONAL TESTING [[5]](#footnote-6)**

* + 1. Facility will encourage visitors to be tested on their own within 2-3 days prior to coming to the Facility and provide proof of the negative test and date of test.

 {AND/OR}

Facility will offer to complete point of care testing on all visitors prior to entry. Visitors who test positive will not be permitted to enter.

 {OR}

When the COVID-19 positivity rate is > 5% in the Facility’s county, the Facility will offer testing to visitors using point of care testing, if feasible. Facility will prioritize regular visitors (*e.g.*, weekly), although any visitor may be tested.

1. **Education & Compliance.** Visitors will be educated on and expected to cooperate and comply with all applicable measures in this policy or they will not be permitted on Facility premises. Visitors should also be educated on the need to inform the facility if they develop signs or symptoms of COVID within 14 days of visiting the facility. Residents will be educated on the risk of COVID-19 with in-person visitation.

***DISCLAIMER*** *(REMOVE BEFORE USING):*

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1. This policy was developed to accommodate expanded visitation requirements pursuant to CMS QSO-20-39-NH revised 3/10/21. [↑](#footnote-ref-2)
2. The facility may impose limits on number of visitors. [↑](#footnote-ref-3)
3. If applicable, insert number of total visitors the facility can accommodate at one time, based on space, staffing, etc. [↑](#footnote-ref-4)
4. Enter facility’s county. [↑](#footnote-ref-5)
5. Visitors should not be required to be tested as a condition of visitation. [↑](#footnote-ref-6)