

Visitation Guidelines (for both indoor and outdoor)

CMS and CDC continue to recommend facilities, residents, and families adhere to the core principles of COVID-19 infection control, including physical distancing (maintaining at least 6 feet between people) in accordance with CDC guidance.

These core principles of COVID-19 Infection control include:

- Visitors who have a positive viral test for COVID-19, symptoms of COVID-19 or currently meet the criteria for quarantine should not enter the facility until they meet the criteria used for residents to discontinue transmission based-precautions (quarantine).
- Screening all who enter for visitation exclusions.
- Hand hygiene (use of alcohol-based rub is preferred)
- Face covering or mask (covering both mouth and nose)
- Physical distancing at least 6 feet between persons
- Instructional signage throughout the facility and proper visitor education on COVID-19 signs and symptoms, infection control precautions, other applicable facility practices, (e.g., use of face covering or mask, specified entries, exits 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 to COVID-19 care)
- Resident and staff testing as required by state and federal guidelines.

The core principles of COVID-19 infection control should be adhered to at all times in accordance with CDC guidance. Visitation should be person-centered, consider the residents' physical, mental, and psychosocial well-being and support their quality of life.

Outdoor Visitation

Outdoor visitation is preferred when the resident and/or the visitor are not up to date with all recommended COVID-19 vaccine doses. Outdoor visits generally pose a lower risk of transmission due to increased space and airflow.

1. The facility will provide accessible and safe outdoor spaces for visitation such as in courtyards, patios, or parking lots.
 2. When conducting outdoor visitation, all appropriate infection control and prevention practices should be followed.
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Indoor Visitation

1. The facility will allow indoor visitation at all times and for all residents as permitted under the regulations
 2. The facility will no longer limit the frequency and length of visits for residents, the number of visitors, or require advance scheduling of visits.
 3. Visits will be conducted in a manner that adheres to the core principles of COVID-19 infection prevention and does not increase risk to other residents.
 4. Physical distancing will still be maintained during peak times of visitation.
 5. Large gatherings will be avoided such as parties and special events where large numbers of visitors are in the same space at the same time and physical distancing can not be maintained.
 6. The facility will limit visitor movement in the facility. Visitors will not be allowed to walk around different halls of the facility and should go directly to the resident's room or designated visitation area.
 7. If a resident's roommate is not up-to-date with all recommended COVID-19 vaccine doses or immunocompromised (regardless of vaccination status), visits will not be conducted in the resident's room, if possible. For situations where there is a roommate and health status of the resident prevents leaving the room, the facility will attempt to enable in-room visitation while adhering to the core principles of infection prevention.
 8. If the facility's COVID-19 community level of transmission is:
 - a) Substantial to high – all residents and visitors, regardless of vaccination status, will wear face coverings or masks and physically distance at all times.
 - b) Low to moderate -the safest practice is for residents and visitors to wear face coverings or masks and physically distance, particularly if either of them is at an increased risk for severe disease or are not up to date with all recommended COVID-19 vaccine doses.
 9. Visitors will wear face coverings or masks and physically distance when around other residents or healthcare personnel, regardless of vaccination status.
 10. While not recommended, residents who are on transmission-based precautions (TBP) or quarantine can still receive visitors. In these cases, visits will occur in the resident's room and the resident should wear a well-fitting facemask (if tolerated).
 11. Before visiting residents who are on TBP or quarantine, visitors will be made aware of the potential risk of visiting and precautions necessary in order to visit the resident.
 12. Visitors will adhere to the core principles of infection prevention.
 13. Although not required, the facility will offer well-fitting facemasks or other appropriate PPE to visitors.
 14. Residents, regardless of vaccination status can chose not to wear face coverings or masks when other residents are not present and have close contact (including touch) with their visitor.
 15. Unvaccinated residents may also choose to have physical touch based on their preferences and needs, such as visitors participating in certain religious practices, including end -of-life situations. In these situations, unvaccinated residents (or their representative) and their visitor will be advised of the risks of physical contact prior to the visit.
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Indoor Visitation during an Outbreak Investigation

An outbreak investigation is initiated when new nursing home onset of COVID-19 occurs among residents or staff. To swiftly detect cases, the facility will adhere to CMS regulations and guidance for COVID-19 testing, including routine unvaccinated staff testing, testing of individuals with symptoms and outbreak testing

1. When a new case of COVID-19 among residents or staff is identified, the facility will immediately begin outbreak testing.
2. While it is safer for visitors not to enter the facility during an outbreak investigation, visitors will still be allowed in the facility.
3. Visitors will be made aware of the potential risk of visiting during an outbreak investigation and will adhere to the core principle of infection prevention.
4. During an outbreak investigation, residents and visitors who wish to visit - regardless of vaccination status - will wear face coverings or masks during the visits and visits should occur in the resident's room.

Visitor Testing and Vaccination

1. During times of substantial or high levels of community transmission, the facility will offer testing to visitors when feasible. If unable to offer testing, the facility will encourage visitors to be tested on their own before coming to the facility. (within 2-3 days).
2. The facility will encourage visitors to become vaccinated and will provide education about the benefits of vaccination.
3. The facility may ask visitors about their vaccination status, but visitors will not be required to be tested or vaccinated or show proof of such as a condition of visitation.
4. If the visitor declines to disclose their vaccination status, the visitor should wear a face covering or mask at all times.

Compassionate Care Visits

Compassionate care visits are allowed at all times.

Required Visitation

The facility will not restrict visitation without a reasonable clinical or safety cause. There are no longer any scenarios related to COVID-19 where visitation should be limited, except for certain situations when the visit is limited to being conducted in the resident's room or the rare event that visitation is limited to compassionate care. The facility will facilitate in-person visitation consistent with the applicable CMS regulation.

Access to Long Term Care Ombudsman

1. In person visits may not be limited and the representatives of the Office of the State Long-Term Care Ombudsman should be given immediate access to any resident.
2. If the ombudsman is planning to visit a resident who is in TBP or quarantine, or an unvaccinated resident where the county level of community transmission is substantial or high in the past 7 days, the resident and ombudsman will be made aware of the

potential risk of visiting, and the visit should take place in the resident's room.

Entry of Healthcare Workers and Other Providers of Services

1. All healthcare workers will be permitted to come into the facility as long as they are not subject to a work exclusion or showing signs or symptoms of COVID-19.
2. Health care workers, personnel education and assisting in resident transition to the community should be permitted entrance consistent with the general guidelines of this policy.
3. EMS personnel do not need to be screened so they can attend to an emergency without delay.
4. All staff, including individuals providing services under arrangement as well as volunteers, will adhere to the core principles of COVID-19 infection prevention and must comply with COVID-19 testing requirements.

Communal Activities, Dining and Resident Outings

1. Communal activities and dining may occur while adhering to the core principles of COVID-19 infection prevention.
2. Everyone, regardless of vaccination status will wear a face covering or mask while in communal areas of the facility.
3. Residents will be permitted to leave the facility as they choose.
4. Should a resident choose to leave, the facility will remind the resident and any individual accompanying the resident to follow all recommended infection prevention practices including wearing a face covering or mask, physical distancing and hand hygiene and to encourage those around them to do the same.
5. Upon the resident's return the following actions will take place:
 - a) Residents will be screened for s/s of COVID-19.
 - If the resident or family member reports possible close contact to an individual with COVID-19 while outside of the nursing home, test the resident for COVID-19, regardless of vaccination status. Place the resident on quarantine if the resident is not up to date with all recommended COVID-19 vaccine doses.
 - If the resident develops s/s of COVID-19 after the outing, test the resident for COVID-19 and place the resident on Transmission-Based Precautions, regardless of vaccination status.
 - b) Residents may be tested if they are not up-to-date with all recommended COVID-19 vaccine doses, without signs or symptoms if they leave the nursing home frequently or for a prolonged length of time such as over 24 hours.
 - c) Residents who are not up-to-date with all recommended COVID-19 vaccine doses and leave the facility may be quarantined, if based on an assessment of risk, uncertainty exists about their adherence or the adherence of those around them to recommended infection prevention measures.
 - d) Residents will be monitored for s/s of COVID-19 daily.

Residents who leave the facility for 24 hours or longer should generally be managed as a new admission or readmission as recommended by the CDC's "Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes". Please note, there are exceptions to quarantine, including for residents who are up-to-date with all recommended COVID-19 vaccine

doses.

Survey Considerations

The facility will not restrict access to surveyors based on vaccination status, nor ask a surveyor for proof of his or her vaccination status as a condition of entry. Any questions about access should be addressed to the State Survey Agency office.

Surveyors will not enter a facility if they have a positive viral test for COVID-19, s/s of COVID-19 or currently meet the criteria for quarantine.

Surveyors will be expected to adhere to the core principles of COVID-19 infection prevention and adhere to any COVID-19 infection prevention requirements set by federal and state agencies.