

Visitor Testing and Vaccination Guidelines

While not required, facilities in medium- or high-positivity counties are encouraged to offer testing to visitors, if feasible. If so, facilities should prioritize visitors that visit regularly (e.g., weekly), although any visitor can be tested. Facilities may also encourage visitors to be tested on their own prior to coming to the facility (e.g., within 2–3 days).

Visitors are encouraged to become vaccinated when they have the opportunity. While visitor testing and vaccination can help prevent the spread of COVID-19, visitors should not be required to be tested or vaccinated (or show proof of such) as a condition of visitation. This also applies to representatives of the Office of the State Long-Term Care Ombudsman and protection and advocacy systems.

Federal and state surveyors are not required to be vaccinated and must be permitted entry into facilities unless they exhibit signs or symptoms of COVID-19. Surveyors should also adhere to the core principles of COVID-19 infection prevention and adhere to any COVID-19 infection prevention requirements set by state law.

Nursing Home Visitation - COVID-19. March 10, 2021

<https://www.cms.gov/files/document/gso-20-39-nh-revised.pdf>

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Visitor Cards – Core Principles COVID-19

This information could be put on small cards for staff to have:

Core Principles for Visitors

- Enter only through designated entrances
- Follow facility screening guidelines (i.e., temperature check, etc.)
- Perform hand hygiene frequently (alcohol-based hand rub is preferred)
- Keep your face covering or mask (covering mouth and nose) on at all times
- Maintain social distancing of at least six feet between you and any other person
- Limit your movement to only the designated room/area
- Respect visitation times to allow others to visit their loved ones

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**Outdoor Visitation – CMS Guidelines
COVID-19 Public Health Emergency**

Policy & Procedure

Policy:

It is the policy of this facility to adhere to CDC and CMS guidelines and best practices for outdoor visitation to support each resident's quality of life.

While taking a person-centered approach and adhering to the core principles of COVID-19 infection prevention, outdoor visitation is preferred even when the resident and visitor are fully vaccinated against COVID-19. Outdoor visits generally pose a lower risk of transmission due to increased space and airflow.

Definition of Fully Vaccinated- A person is considered fully vaccinated two weeks after the final dose of the vaccine.

Guidelines:

- Weather considerations (e.g., inclement weather, excessively hot or cold temperatures, poor air quality), or an individual resident's health status (e.g., medical condition(s), COVID-19 status) will be considered prior to allowing outdoor visitation.
- Visitors must adhere to the core principles of COVID-19 prevention and staff will monitor for those unable to fully comply with the core principles, such as children.
- Core principles include but are not limited to:
 - Screening of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions about and observations of signs or symptoms), and denial of entry of those with signs or symptoms or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor's vaccination status)
 - Hand hygiene (use of alcohol-based hand rub is preferred)
 - Face covering or mask (covering mouth and nose)
 - Social distancing at least six feet between persons
 - Instructional signage throughout the facility
 - Cleaning and disinfecting high frequency touched surfaces
 - Appropriate use of Personal Protective Equipment
 - Effective cohorting of residents
 - Resident and staff testing conducted as required
 - Respecting facility time restrictions to allow others to visit their loved ones
- Visits will be pre-scheduled and the length of time allowed may be limited to ensure all residents are able to receive visitors.
- The number of visitors per resident at one time will be limited to ____ per resident.
- The number of visitors in the facility outdoor designated area at one time will be limited to ____.

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- Residents who are on transmission-based precautions for COVID-19 will only receive virtual visits, “window visits”, or in-person for compassionate care situations.
- **While not required**, if the facility is located in a county experiencing medium or high positivity rates, the facility may test visitors who visit regularly (e.g., weekly), although any visitor may be tested with consent.
- The facility may also encourage visitors to be tested on their own prior to coming to the facility (e.g., within 2–3 days) with proof of negative test results and date of test.
- The facility will ensure items in visitation spaces are cleaned and disinfected routinely.

Procedure:

1. Outdoor, in person visits with residents will be scheduled in advance and are dependent on permissible weather conditions, facility policy on the number of visitors at one time, availability of outdoor space and appropriate staffing to meet resident care needs.
2. Each visitor will arrive with a face covering or mask and perform hand hygiene on arrival.
 - a. Facemasks will be provided if they do not arrive with a face covering/mask.
3. All visitors will be screened for signs and symptoms of COVID-19 (e.g., temperature checks, questions about and observations of signs or symptoms), and denial of entry of those with signs or symptoms or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor’s vaccination status)
4. Visitors will provide contact information on the screening log to assist in contact tracing if needed.
5. Visitors will be asked to sign a “Visitor Waiver” prior to entering the visitation area. If visitor refuses to sign, document the refusal, and maintain documentation in the visitation file.
6. Visitors will be reminded to adhere to the core principles and staff will monitor for those who may have difficulty adhering to the core principles, such as children.
7. Core principles include but are not limited to:
 - a. Screening of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions about and observations of signs or symptoms), and denial of entry of those with signs or symptoms or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor’s vaccination status)
 - b. Hand hygiene (use of alcohol-based hand rub is preferred)
 - c. Face covering or mask (covering mouth and nose)
 - d. Social distancing at least six feet between persons
 - e. Instructional signage throughout the facility
 - f. Cleaning and disinfecting high frequency touched surfaces
 - g. Appropriate use of Personal Protective Equipment
 - h. Effective cohorting of residents
 - i. Resident and staff testing conducted as required
 - j. Respecting facility time restrictions to allow others to visit their loved ones

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8. Residents will wear masks (if able) and will be transported to outdoor visitation areas without going through a designated COVID-19 care space or space where residents suspected or confirmed to be infected with COVID-19 are present.
9. Visitors will have limited movement in the facility and will go directly to the designated visitation area.
 - a. Visitors should not move through areas/corridors where residents suspected or confirmed to be infected with COVID-19 are present.
10. Privacy will be maintained during the visitation unless otherwise contraindicated due to the resident's medical status.
11. Hand sanitizer will be provided at each designated outdoor visitation space and visitors will be required to perform hand hygiene prior to visiting with residents.
12. A designated staff member trained in patient safety and infection control measures will remain in the designated visitation area with the resident during each visit.
13. Staff, residents, and visitors will always wear a face mask during the visit.
14. Upon exit, visitors will be reminded that if they develop signs and symptoms of COVID-19 within 2-14 days after visiting the center they should immediately notify the center of the date they visited.
 - a. Any individuals who had contact with the visitor will be screened for the level of exposure and discussed with the Medical Director/health department for guidance.

Nursing Home Visitation - COVID-19. March 10, 2021

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Administrator Signature: _____ Date: _____

Medical Director Signature: _____ Date: _____

Review Dates: _____

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**Indoor Visitation - CMS Guidelines
COVID-19 Public Health Emergency**

Policy & Procedure

Policy:

It is the policy of this facility to adhere to CDC and CMS guidelines and best practices for indoor visitation to support each resident's quality of life.

While taking a person-centered approach and adhering to the core principles of COVID-19 infection prevention, outdoor visitation is preferred even when the resident and visitor are fully vaccinated against COVID-19. Outdoor visits generally pose a lower risk of transmission due to increased space and airflow.

Definition of Fully Vaccinated- A person is considered fully vaccinated two weeks after the final dose of the vaccine.

If a resident is fully vaccinated, they can choose to have close contact (including touch) with their visitor while wearing a well-fitting face mask and performing hand-hygiene before and after contact. Visitors should physically distance from other residents and staff in the facility.

Guidelines:

- The facility will allow indoor visitation at all times and for all residents (regardless of vaccination status), except for a few circumstances when visitation should be limited due to a high risk of COVID-19 transmission (note: compassionate care visits should be permitted at all times). These scenarios include limiting indoor visitation for:
 - Unvaccinated residents, if the nursing home's COVID-19 county positivity rate is >10% and <70% of residents in the facility are fully vaccinated;
 - Residents with confirmed COVID-19 infection, whether vaccinated or unvaccinated until they have met the criteria to discontinue Transmission-Based Precautions; or
 - Residents in quarantine, whether vaccinated or unvaccinated, until they have met criteria for release from quarantine.
 - See separate guidelines for indoor visit during an outbreak.
- Visitors must be able to adhere to the core principles of COVID-19 prevention. Staff will monitor visitors who are unable to adhere to the core principles, such as children.
- Core principles include but are not limited to:
 - Screening of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions about and observations of signs or symptoms), and denial of entry of those with signs or symptoms or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor's vaccination status)

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- Hand hygiene (use of alcohol-based hand rub is preferred)
 - Face covering or mask (covering mouth and nose)
 - Social distancing at least six feet between persons
 - Instructional signage throughout the facility
 - Cleaning and disinfecting high frequency touched surfaces
 - Appropriate use of Personal Protective Equipment
 - Effective cohorting of residents
 - Resident and staff testing conducted as required
 - Respecting facility time restrictions to allow others to visit their loved ones
- The number of visitors per resident at one time will be limited to ___ per resident.
 - The number of visitors in the facility at one time will be limited to ___.
 - Visits will be scheduled, and the length of time allowed may be limited to ensure all residents are able to receive visitors.
 - Visits with residents in shared rooms will not be conducted in the resident room but rather in a designated visitation area.
 - If the health status of a resident prevents them from leaving their room, an in-room visit will be coordinated.
 - Residents who are on transmission-based precautions for COVID-19 will only receive virtual visits, “window visits”, or in-person for compassionate care situations.
 - The facility may also encourage visitors to be tested on their own prior to coming to the facility (e.g., within 2–3 days) with proof of negative test results and date of test.

Procedure:

1. Visits are scheduled with the facility staff.
2. Visitation will be limited to a specific area, private resident room, or another private location.
3. Each visitor will arrive with a face covering or mask and perform hand hygiene on arrival.
 - a. Facemasks will be provided if they do not arrive with a face covering/mask.
4. All visitors will be screened for signs and symptoms of COVID-19 (e.g., temperature checks, questions about and observations of signs or symptoms), and denial of entry of those with signs or symptoms or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor’s vaccination status).
5. Visitors will provide contact information on the screening log to assist in contact tracing if needed.
6. Visitors will be asked to sign a “Visitor Waiver” prior to entering the visitation area. If visitor refuses to sign, document the refusal, and maintain documentation in the visitation file.

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7. Visitors will be reminded to adhere to the core principles and staff will monitor for those who may have difficulty adhering to the core principles, such as children. Core principles include but are not limited to:
 - a. Pre-entrance screening for COVID-19 symptoms
 - b. Hand hygiene (use of alcohol-based hand rub is preferred)
 - c. Face covering or mask (covering mouth and nose) at all times during the visit
 - d. Social distancing at least six feet between persons
 - e. Respect to facility visitation times to allow others to visit their loved one
8. Visitors will perform hand hygiene prior to entering resident care areas.
9. Visitors will have limited movement in the facility and will go directly to the resident's room or designated visitation area.
 - a. Visitors may not move through areas/corridors where residents suspected or confirmed to be infected with COVID-19 are present.
10. Privacy will be maintained during visits unless otherwise contraindicated due to the resident's medical status.
11. Upon exit, visitors will be reminded that if they develop signs and symptoms of COVID-19 within 2-14 days after visiting the center they should immediately notify the center of the date they visited.
 - a. Any individuals who had contact with the visitor will be screened for the level of exposure and discussed with the Medical Director/health department for guidance.

Nursing Home Visitation - COVID-19. March 10, 2021

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Indoor Visitation During an Outbreak

Policy:

It is the policy of this facility to adhere to CDC and CMS guidelines and best practices for indoor visitation to support each resident's quality of life

Visitation can still occur when there is an outbreak, but there is evidence that the transmission of COVID-19 is contained to a single area (e.g., unit) of the facility.

The facility will adhere to CMS regulations and guidance for COVID-19 testing, including routine staff testing, testing of individuals with symptoms, and outbreak testing.

Guidelines:

An outbreak exists when a new nursing home onset of COVID-19 occurs (i.e., a new COVID-19 case among residents or staff).

When a new case of COVID-19 among residents or staff is identified, the facility will immediately begin outbreak testing and suspend all visitation (except that required under federal disability rights law), until at least one round of facility-wide testing is completed. Visitation can resume based on the following criteria:

- If the first round of outbreak testing reveals **no additional COVID-19 cases in other areas (e.g., units) of the facility**, then visitation can resume for residents in areas/units with no COVID-19 cases. However, the facility will suspend visitation on the affected unit until the facility meets the criteria to discontinue outbreak testing. For example, if the first round of outbreak testing reveals two more COVID-19 cases in the same unit as the original case, but not in other units, visitation can resume for residents in areas/units with no COVID-19 cases.
- If the first round of outbreak testing **reveals one or more additional COVID-19 cases in other areas/units of the facility** (e.g., new cases in two or more units), then facilities should suspend visitation for all residents (vaccinated and unvaccinated), until the facility meets the criteria to discontinue outbreak testing.
- If subsequent rounds of outbreak testing identify **one or more additional COVID-19 cases in other areas/units of the facility**, the facility will suspend visitation for all residents (vaccinated and unvaccinated), until the facility meets the criteria to discontinue outbreak testing.
- Outbreak testing is discontinued when testing identifies no new cases of COVID-19 infection among staff or residents for at least 14 days since the most recent positive result.
- Visitors will be notified about the potential for COVID-19 exposure in the facility (e.g., appropriate signage regarding current outbreaks), and adhere to the core principles of COVID-19 infection prevention, including effective hand hygiene and use of face-coverings.
- These guidelines provide information on how visitation can occur during an outbreak but does not change any expectations for testing and adherence to infection prevention and control practices.

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Core Principles of COVID-19 Infection Prevention

- Screening of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions *about* and observations *of* signs or symptoms), and denial of entry of those with signs or symptoms *or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor's vaccination status)*
- Hand hygiene (use of alcohol-based hand rub is preferred).
- Face covering or mask required (covering mouth and nose).
- Social distancing at least six 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 on a scheduled basis and prn.
- Cleaning and disinfecting designated visitation areas after each visit.
- Appropriate staff use of Personal Protective Equipment (PPE).
- Effective cohorting of residents.
- Resident and staff testing conducted as required.

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**Compassionate Care Visitation – CMS Guidelines
COVID-19 Public Health Emergency**

Policy & Procedure

Policy:

It is the policy of this center to adhere to CDC and CMS guidelines regarding Compassionate Care Visitation. Compassionate visits may be permitted to assist in maintaining and/or improving the health of a resident experiencing a physical/psychosocial decline.

Compassionate care visits, and visits required under federal disability rights law, should be allowed at all times, regardless of a resident's vaccination status, the county's COVID-19 positivity rate, or an outbreak.

General Considerations:

- While end-of-life situations have been used as examples of compassionate care situations, the term "compassionate care situations" does not exclusively refer to end-of-life. Examples of other compassionate care situations include, but are not limited to a resident who:
 - Previously living with family recently being admitted to a nursing home and is struggling with the change in environment and lack of physical family support.
 - Is grieving after the recent death of a friend or family member.
 - Previously had family and/or caregiver(s) provide cueing and encouragement with eating or drinking and is experiencing weight loss or dehydration.
 - Used to talk and interact with others, and is now experiencing emotional distress as evidenced by seldom speaking, or crying more frequently when rarely cried in the past, etc.
- In addition to family members, compassionate care visits can be conducted by any individual who can meet the resident's needs, such as clergy or lay persons offering religious and spiritual support.
- Visits will be conducted using social distancing; however, if during a compassionate care visit, a visitor and/or the facility identifies a way to allow for personal contact, it should only be done following all appropriate infection prevention guidelines, and for a limited amount of time. Residents who are fully vaccinated, may choose to have close contact (including touch) with their visitor while wearing a well-fitting face mask and performing hand-hygiene before and after contact. Visitors should physically distance from other residents and staff in the facility.
- Residents who are on transmission-based precautions for COVID-19 should be encouraged to receive virtual visits or "window visits" if possible. If in-person compassionate care visits are permitted, strict adherence to transmission-based precautions will be required and monitored.

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- The facility will consult with state leadership, families, and ombudsman, as needed to help determine if a visit is recommended for compassionate care.

Procedure:

1. Compassionate Care Visitation will be provided upon request by a resident or designated responsible party using a person-centered approach.
2. Visitation will be limited to a designated area within the center or the private resident room.
3. Each visitor is required to wear a face covering or mask and perform hand hygiene on arrival.
 - a. Facemasks will be provided if they do not arrive with a face covering/mask.
4. All visitors will be screened for signs and symptoms of COVID-19 (e.g., temperature checks, questions about and observations of signs or symptoms), and denial of entry of those with signs or symptoms or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor's vaccination status)
5. Visitors will provide contact information on the screening log to assist in contact tracing if needed.
6. Visitors will be asked to sign a "Visitor Waiver" prior to entering the visitation area. If visitor refuses to sign, document the refusal and maintain documentation in the visitation file.
7. Visitors will be reminded to adhere to the core principles and staff will monitor for those who may have difficulty adhering to the core principles, such as children.
8. Core principles include but are not limited to:
 - a. Screening of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions about and observations of signs or symptoms), and denial of entry of those with signs or symptoms or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor's vaccination status)
 - b. Hand hygiene (use of alcohol-based hand rub is preferred)
 - c. Face covering or mask (covering mouth and nose)
 - d. Social distancing at least six feet between persons
 - e. Instructional signage throughout the facility
 - f. Cleaning and disinfecting high frequency touched surfaces
 - g. Appropriate use of Personal Protective Equipment
 - h. Effective cohorting of residents
 - i. Resident and staff testing conducted as required
 - j. Respecting facility time restrictions to allow others to visit their loved ones
9. Compassionate care visits with residents in transmission-based precautions requires visitors to adhere to transmission-based precautions.
10. Visitors will perform hand hygiene prior to entering resident care areas.

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11. Visitors will have limited movement in the facility and will go directly to the resident's room or designated visitation area.
 - a. Visitors should not move through areas/corridors where residents suspected or confirmed to be infected with COVID-19 are present.
12. Privacy will be maintained during visitation unless otherwise contraindicated due to the resident's medical status.
13. Upon exit, visitors will be reminded that if they develop signs and symptoms of COVID-19 within 2-14 days after visiting the center they should immediately notify the center of the date they visited.
 - a. Any individuals who had contact with the visitor will be screened for the level of exposure and discussed with the Medical Director/health department for guidance.

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Welcome, Visitors!

We are so excited to invite you back into our facility to spend time with your loved ones. Please use this card as a reference to help keep staff, residents, and other visitors safe during your visit!



HealthCap
RISK MANAGEMENT & INSURANCE

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