

EATON COUNTY HEALTH & REHABILITATION SERVICE

POLICY & PROCEDURE

C-05 VISITATION DURING COVID 19 PANDEMIC

POLICY

It is the policy of the Eaton County Health & Rehabilitation Services (ECHRS) to follow CMS and CDC guidance regarding visitation in nursing homes during the COVID-19 pandemic.

PROCEDURE

- a. The Infection Preventionist will monitor the status of COVID-19 through the CDC website, MDHHS and local/state health department and will keep leadership informed of current directives/recommendations and the need for restricting visitation.
- b. The Facility may communicate this visitation policy through multiple channels. Examples may include signage, newsletters, social media posts, website, and recorded messages.
- c. Visits must occur in a manner that does not place other residents at risk. Visits can be conducted through different means based on a facility's structure and residents' needs, such as in resident rooms, dedicated visitation spaces, and outdoors.
- d. CMS does not recommend visitation during an active outbreak or with residents who are on transmission-based precautions or quarantine, but visitation is still permitted if core principles of infection prevention are followed. Visitors must be made aware of the risks of visiting during an outbreak situation and wear appropriate PPE regardless of vaccination status of the resident or visitor.
- e. CMS strongly encourages all visitors to become vaccinated and facilities should educate and encourage visitors to become vaccinated. Visitor testing and vaccination can help prevent the spread of COVID-19 and facilities may ask about a visitors' vaccination status, however, visitors are not required to test or be vaccinated or show proof of vaccination.
- f. CMS states facilities must have a reasonable clinical or safety cause to restrict visitation and allows for the facility to consult with the local health department for guidance or direction on how to structure visitation to reduce the risk of COVID-19 transmission. Should this occur, the facility will immediately communicate this with residents and responsible parties.

ECHRS Process:

All visits will be logged and visitors screened for contact tracing and source control purposes using the AccuShield Kiosk.

Information regarding the risks associated with visitation will be shared.

Visitors must be able to adhere to the core principles of infection prevention.

Visitors should not visit if they have any of the following and have not met the same criteria used to discontinue isolation and quarantine for residents:

1. A positive viral test for SARS-CoV-2,
2. Symptoms of COVID-19, or
3. Close contact with someone with SARS-CoV-2 infection

Visitors are expected to wear PPE as required by the facility dependent on the community transmission rate and/or resident's isolation requirements, just as staff.

i. INDOOR VISITS

- a. When transmission rate is substantial and higher, will occur in either a private, semi-private, or dedicated visitation space, depending on the resident/responsible party's preference.
- b. While there is no limit to the number of visitors allowed, to maintain appropriate physical distancing requirements and adequate infection control practice, we recommend up to 4 visitors in a private room. For semi-private rooms, up to 3 visitors, if the visit does not pose a risk or infringe upon the other resident's rights. Visitors shall not enter the other resident room or use the shared bathroom.
- c. Children are permitted to visit, however are included in the total number of people recommended for social distancing purposes. Visitor must bring proper fitting PPE for each child if the facility issued PPE is not sufficient.
- d. While it is NOT recommended, if the resident and all their visitor(s) are up to date with all recommended COVID-19 vaccine doses, they can choose not to wear source control and to have physical contact if the visit takes place in a private visiting area. All visitors must wear a face covering (and face shield if transmission rate requires) while in communal areas in the facility and around other residents or HCP, regardless of vaccination status. Residents who choose to not follow this must be informed of the risks and well-documented.
- e. Visitors in Private Rooms, if the resident consents to it and all parties are educated in the risks associated with transmission, may eat in the resident's room. Visitor will only lower mask while eating, and door will remain shut. No other PPE will be removed. Mask will be put back in place and hand hygiene completed as soon as visitor(s) is/are done eating. Visitors must maintain social distancing during this time.
- f. While NOT recommended, residents who are on transmission-based precautions or quarantine can still have visitors. Education will be provided on the risks and infection prevention and visitors will be required to wear appropriate PPE.
- i. The visitors will stay in the resident room, unless leaving to use the public restroom, and will limit the amount of interaction with the staff members.

ii. COVID POSITIVE VISITATION:

- a. Visitors to COVID positive patients must complete a competency prior to visiting to ensure proper wear and removal of PPE to prevent transmission of COVID to the facility and the public.
- b. If visitors are unable or unwilling to wear the appropriate PPE for the COVID positive unit, they will not be permitted to visit due to the increased risk of transmission.
- c. The visitors will exit the building after properly doffing PPE through the Healing Center A entrance. These visitors will not proceed through the building to exit at the back door to reduce the risk of transmission.

iii. End of Life and Compassionate Care Visits

- a. Visitation is open for all visits regardless of isolation status.
- b. If the facility closes to visitation due to recommendations from the Health Department for multiple outbreaks throughout the facility, End of Life and Compassionate Care Visits will still be permitted without restriction.

iv. OUTDOOR VISITS

- c. If visitor will require assistance with an outdoor visit, the facility requests that visitors notify the facility 24 hours prior to the visit to ensure resident is ready and staff are available to transport to/from visit.
- d. All visits will be coordinated through the activities department.
- e. If there are inclement weather conditions, the visitation can be rescheduled for as soon as possible, or moved indoors while adhering to infection control practices. The lowest temperature for visits is 45 degrees and the highest temperature for visits is 85 degrees heat index.
- f. Outside visits will be conducted in the interior courtyard allowing for multiple visits at one time in the area.
- g. Outdoor visitation will be allowed on any neighborhood regardless of outbreak status.

PETS AT VISITATION will be allowed.

- i. Must provide proof of vaccination to activities staff prior to pet visit.
- ii. Maintain animal on a leash.
- iii. Keep animal with the visitor the entire time of the visit.
- iv. Immediately report any injuries that animal may have caused during visit (scratch, bite, etc.).

Anytime the resident has had a potential risk of exposure due to non-compliance with the social distancing practices, or guidelines set forth in this policy, they will be placed in observation for enhanced monitoring of COVID related symptoms.

Those visitors unable or unwilling to adhere to the core principles of COVID-19 infection prevention will be asked to leave and future visitation options may include phone calls, window, or virtual visitations.

Sources:

Nursing Home Visitation Frequently Asked Questions (FAQs). February 2, 2022.
<https://www.cms.gov/files/document/nursing-home-visitation-faq-1223.pdf>

Nursing Home Visitation – COVID-19 REVISED. November 12, 2021.
<https://www.cms.gov/medicareprovider-enrollment-and-certificationsurvey/certificationgeninfopolicy-and-memos-states-and/nursing-home-visitation-covid-19-revised>

Reviewed/Revised:	
Date: Dec 2020	by: JW/MR
Date: Jan 2021	by: JW/MR
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Date: Mar 2021	by: JW/MR
Date: Apr 2021	by: JW/MR
Date: May 2021	by: JW/MR/DKG
Date: Nov 2021	by: JW/MR
Date: Nov 2021	by: MR/MR
Date: Dec 2021	by: MR/MR
Date: Jan 2022	by: MR/MR
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