



## **Visitation Policy**

**Policy:** Visitation for New York State Skilled Nursing Facilities.

**Procedure:** To safely accommodate visitors to New York State Skilled Nursing Facilities under NYSDOH and CMS guidance. Visitation can be conducted through different means based on a facility's structure and residents' needs. Regardless of how visits are conducted, certain core principles and best practices should be followed to reduce the risk of COVID-19 transmission.

### **Core Principles of COVID-19 Infection Prevention**

Visitation 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. Regardless of how visits are conducted, certain core principles and best practices reduce the risk of COVID-19 transmission.

Instructional signage will be posted throughout the facility to include proper visitor education with guidance if visitors have a positive viral test for COVID-19 or have had close contact with someone with COVID-19, COVID-19 signs and symptoms, infection control precautions, and other applicable facility practices (e.g., use of face covering or mask, specified entries, exits and routes to designated areas, hand hygiene).

Easy-to-read fact sheet outlining visitor expectations with appropriate core principles of COVID-19 infection prevention will be available.

All visitors will be educated and encouraged to become up-to-date with all recommended COVID-19 vaccines.

Testing of visitors will comply with the most up to date guidance from the governors E.O., NYSDOH, CMS, and the CDC. The facility will encourage testing prior to visitation but it is not mandated or a required prior to visitation.

Passive screening of visitors will be conducted throughout the facility during visitation.

The facility will conduct active screening during a COVID-19 outbreak. Screening will require anyone entering the facility to complete a symptom screening questionnaire or an in-person interview and/or have their temperature taken before being allowed entry into the facility.

Visitors who have had close contact with someone with COVID-19 infection, it is safest to defer non-urgent in-person visitation until 10 days after their close contact if they meet criteria, however, if visitor is asymptomatic and resident wishes to have visit, the visitor may be required to wear a surgical

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mask during the entire visit, and socially distance from other residents and staff for a total of 10 days after.

Visitors who have a positive viral test for COVID-19, signs or symptoms of COVID-19, or currently meet the criteria for quarantine will not enter the facility until they have met the following criteria:

At least 10 days have passed since symptoms first appeared and

At least 24 hours have passed since last fever without the use of fever-reducing medications and Symptoms (e.g., cough, shortness of breath) have improved.

The facility staff will adhere to and assist visitors with the core principles of COVID-19;

- Hand hygiene including use of alcohol-based hand rub
- Facemask, N-95 or equivalent (as needed/required)
- Cleaning and disinfecting high-frequency touched surfaces in the facility often, and designated visitation areas after each visit
- Appropriate use of Personal Protective Equipment (PPE)
- Encouraging socially distancing during large gatherings
- Effective cohorting of residents
- Testing conducted as required

Visitors who are unable to adhere to the core principles of COVID-19 infection prevention should not be permitted to visit or should be asked to leave.

### **Outdoor Visitation**

Outdoor visits generally pose a lower risk of transmission due to increased space and airflow. For outdoor visits, facilities should create accessible and safe outdoor spaces for visitation, such as in courtyards, patios, or parking lots, including the use of tents, if available. However, weather considerations (e.g., inclement weather, excessively hot or cold temperatures, and poor air quality) or an individual resident's health status (e.g., medical condition(s), COVID-19 status, and quarantine status) may hinder outdoor visits. When conducting outdoor visitation, all appropriate infection control and prevention practices should be followed.

### **Guidance for Indoor Visitation:**

The facility will allow indoor visitation at all times and for all residents. Although there is no limit on the number of visitors a resident can have at one time, visits should be conducted in a manner that adheres to the core principles of COVID-19 infection prevention and does not increase risk to other residents. During peak times of visitation and large gatherings (e.g., parties, events) facilities will encourage physical distancing.

### **Face Coverings and masks during visits:**

When the nursing home's county COVID-19 transmission rate is high, everyone in a healthcare setting will wear face coverings or masks.

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If the nursing home's county COVID-19 community transmission is not high, the safest practice is for residents and visitors to wear face coverings or masks, however, the facility will choose not to require visitors wear face coverings or masks while in the facility, except during an outbreak.

Regardless of the community transmission level, residents and their visitors when alone in the resident's room or in a designated visitation area, may choose not to wear face coverings or masks and may choose to have close contact (including touch). Residents (or their representative) and their visitors should be advised of the risks of physical contact prior to the visit. If a roommate is present during the visit, it is safest for the visitor to wear a face covering or mask.

### **Indoor Visitation during an Outbreak Investigation**

When a new case of COVID-19 among residents or staff is identified, a facility will immediately begin an outbreak investigation. To swiftly detect cases, we will adhere to CMS, DOH, and the CDC regulations and guidance for COVID-19 testing, including routine staff testing, testing of individuals with symptoms, and outbreak testing.

While it is safer for visitors not to enter the facility during an active outbreak, visitors will still be allowed in the facility. While an outbreak is occurring, facilities may limit visitor movement in the facility. Visitors should not walk around different halls of the facility. Rather, they should go directly to the resident's room or designated visitation area. If residents or their representative would like to have a visit during an outbreak, they should wear a face masks during visits and visits should occur in the resident's room. In these cases, visits should occur in the resident's room and the resident should wear a well-fitting facemask (if tolerated). Visitors should physically distance themselves from other residents and staff, as possible.

If visitation takes place in common area, upon completion of the visit, facility staff will clean and sanitize the visiting area using EPA approved cleaning products and disposed of properly.

Alternative visitation will be offered to all visitors of resident, when requested, for those who are in TBP or quarantine. 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. Visitors and residents will receive education on the potential risk of visitation and precautions necessary in order for the visit to occur. If the visitor and resident wish to have in person visitation the visits will occur in the resident's room. The resident will wear a well-fitting facemask (if tolerated). Visitors will adhere to the core principles of infection prevention, including wearing appropriate PPE (N-95 or equivalent, gown, gloves, proper hand washing).

**If the visitor is unable to adhere to the core principles of infection prevention, during visit with a resident, and a clinical or safety issues is identified, this may lead to denial of entry.**

The facility Administrator will be notified of any violation or variance to this policy.

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

Required visitation and access to the Long Term Care Ombudsman will be in accordance to current NYSDOH guidance.

These core principles are consistent with the Centers for Disease Control and Prevention (CDC), CMS, and DOH guidance for nursing homes, and should be adhered to at all times.

The facility's policies regarding face coverings and masks are based on recommendations from the CDC, state and local health departments, and individual facility circumstances.

The administrator must be notified immediately if testing kits are not available, when visitor testing is required. Currently, the facility is encouraged to verify that visitors have received a negative SARS-CoV-2 test result one day prior to visitation for antigen tests and two days prior to visitation for NAAT (e.g. PCR) tests, when county transmission rates are high.

**NOTE:** CDC states that Community Transmission is the metric currently recommended to guide select practices in healthcare settings to allow for earlier intervention, before there is strain on the healthcare system, including its workforce, and better protect the vulnerable individuals seeking care in these settings. The Community Transmission metric is different than the COVID-19 Community Level metric used for non-healthcare settings. Nursing homes should use the Community Transmission Level metric not the Community Level metric.

Limited visitation can only be approved when the facility has met specific criteria. The administrator and the Infection Control Nurse will be notified prior to any restrictions or limitations of visitation. The Regional Epidemiologist will be contacted and compliance to all regulations will be adhered to.