

Policies and Procedures

Subject: Access and Visitation

Document Name: Visitation

Effective Date: 9/14/2017

Revision Date: 08/01/2023

POLICY:

The resident has the right to receive visitors of his or her choosing at the time of his or her choosing, subject to the resident's right to deny visitation when applicable, and in a manner that does not impose on the rights of another resident. There is no limit on the number of visitors a resident may have at one time, or limits on the frequency or length of visits.

Procedure:

1. The center must provide immediate access to any resident by:
 - a. Any representative of the Secretary;
 - b. Any representative of the State;
 - c. Any representative of the Office of the State long term care Ombudsman;
 - d. The resident's individual physician;
 - e. Any representative of the agency responsible for the protection and advocacy system for the developmentally disabled individuals;
 - f. Any representative of the agency responsible for the protection and advocacy system for individuals with mental disorder;
 - g. The resident representative.
2. The center will provide immediate access to a resident by immediate family and other relative of the resident, subject to the resident's right to deny or withdraw consent at the time.
3. The Office of the State Long-Term Care Ombudsman will be given access to examine a resident's medical, social and administrative records in accordance with State law.
4. The center will provide immediate access to a resident by others who are visiting with the consent of the resident, subject to reasonable clinical and safety restrictions and the resident's right to deny or withdraw consent at any time;
5. The Center will allow in-person visitation, unless the resident objects, in the following situations:
 - a. End-of-life situations
 - b. Resident who was living with family before admission to the center is struggling with the change in environment.
 - c. Resident is making one or more major medical decisions.
 - d. Resident is experiencing emotional distress or grieving the loss of a friend or family member who recently died.

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- e. Resident needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver.
 - f. Resident who used to talk and interact with others is seldom speaking.
6. The center will inform each resident and/or resident representative of his or her visitation rights and related center policies and procedures.
7. The center will inform each resident of the right, subject to his or her consent, to receive the visitors whom he or she designates as well as deny visitation including but not limited to:
 - a. A spouse, including a same sex spouse;
 - b. A domestic partner, including a same-sex domestic partner;
 - c. Another family member;
 - d. A friend.
 - e. Essential Caregiver
 - i. Essential caregiver may be a family member, friend, guardian, or other individual as designated by the resident
 - ii. The center will allow in-person visitation by the essential caregiver for at least 2 hours daily, in addition to any other visitation authorized by the center
 - iii. The essential caregiver is not required to provide care to the resident
8. The center will not restrict, limit, or otherwise deny visitation privileges based on race, color, national origin, religion, sex, gender identity, sexual orientation or disability. The center may not require visitors to submit proof of any vaccination or immunization.
9. The center will ensure all visitors enjoy full and equal visitation privileges consistent with resident preferences,
10. Centers will provide 24-hour access to other non-relative visitors who are visiting with the consent of the resident. These other visitors are subject to reasonable restrictions, which may include:
 - a. Restrictions imposed by the center that protect the security of all the center's residents, such as keeping the center locked at night;
 - b. Denying access or providing limited and supervised access to a visitor if that individual has been found to be abusing, exploiting, or coercing a resident;

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- c. Denying access to a visitor who has been found to have been committing criminal acts such as theft;
 - d. Denying access to visitors who are inebriated; under the influence and/or disruptive;
 - e. Establishing reasonable visitation hours to facilitate care giving for the resident or to protect the privacy of other residents, such as requiring that visits not take place in the resident's room if the roommate is asleep or receiving care; or
 - f. Changing the location of visits to assist care giving or protect the privacy of other residents, if these visitation rights infringe upon the rights of other residents in the center.
- 11. The center may suspend in-person visitation if the visitor violates the center's policies and procedures
 - 12. The center will provide the visitor information on infection control including but not limited to hand hygiene, personal protective equipment, screening and any other infection protocols for visitors.
 - 13. The center will follow core principle of infection control based on the center's COVID-19 status

Screening:

- 14. Center will post guidance (signs at the entrance) regarding recommended actions for visitors who have a positive viral COVID-19 test, symptoms of COVID-19 or have had close contact with someone with COVID-19.
 - a. Visitors with confirmed COVID-19 infections or compatible symptoms should defer non-urgent visitation until they meet the CDC criteria for healthcare settings to end isolation.
 - b. Visitors who have 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 one of the following criteria:
 - i. The visitor(s) was unable to be tested or wear source control
 - ii. The visitor(s) is moderately to severely immunocompromised
 - iii. The visitor(s) resides with others who are moderately to severely immunocompromised
- 15. Staff and Healthcare personnel (including but not limited to, physicians, physician extenders, hospice providers, laboratory and radiology staff) will be instructed to report any of the following to their supervisor or the Infection Preventionist:
 - i. A positive viral test for SARs-CoV-2
 - ii. Symptoms of COVID-19 or
 - iii. A high-risk exposure to someone with SARs-CoV-2 infection

PPE for Visitors:

- 16. All visitors will perform hand hygiene prior to visitation

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17. Visitors will wear facemask covering mouth and nose when:

- a. In the room with a resident is exhibiting signs and symptoms of or has been diagnosed with COVID-19 or another infectious disease spread through droplet or airborne transmission
- b. Visitors in a room of a resident who has been diagnosed with or confirmed a condition affecting the immune system the use of facemask is necessary for resident safety
- c. Visitors who have had close contact to someone with COVID-19 will wear a facemask for 10 days following exposure
- d. Visitors who have signs or symptoms or diagnosed with COVID-19 or another infectious disease spread through droplet or airborne transmission, if visitation cannot be deferred until resolution will wear facemask
- e. If the center is experiencing an outbreak of COVID-19 or another infectious disease spread through droplet or airborne transmission the visitor will wear a facemask

Education:

18. The center will follow federal and state regulations on visitation. Center will follow the core principles of COVID-19

- a. Hand hygiene
- b. Face covering/mask covering mouth and nose in accordance with CDC guidance
- c. Signage such as but not limited to- COVID-19 symptoms, infection control precautions, mask, specified entries and exits and routes to the dedicated visitation area(s)
- d. Cleaning and disinfecting high touch surfaces in the center and in the designated visitation area(s) between visits
- e. Staff PPE
- f. Resident cohorting
- g. Resident and staff testing as required.

Note – 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 the center.

Designation of a Staff Member:

19. The center will designate a staff member to serve as the infection preventionist and will oversee and ensure staff adhere to the policies and procedures of the center.