

## The Shore Winds Interim Visitation Policy Pursuant to 02/22/2021 NYS DOH Guidance and CMS Guidance

### **POLICY:**

The Shore Winds (TSW) will permit outside visitation and limited indoor visitation (to be located in the activities room of the facility) and activities provided that TSW meets specific benchmarks and develops a visitation plan in accordance with New York State Department of Health Guidance (“Department”) issued on February 22, 2021 and then on February 23, 2021. The Guidance states: *“The information contained in this directive supersedes and replaces previously issued guidance and recommendations regarding general nursing home (NH) visitation and aligns with CMS and CDC guidelines on such topic. Nothing in this directive should be construed as limiting or eliminating a nursing home’s (NH’s) responsibility to ensure that resident and family communication is ongoing and supported by virtual visits, whenever possible, nor does it change the guidance previously issued relative to visitation for medically necessary or end-of life services.*

*Based on the needs of residents and a facility’s structure, visitation can be conducted through a variety of means, such as in resident rooms, dedicated visitation spaces and outdoors weather permitting. Regardless of how visits are conducted, there are certain core principles and best practices that reduce the risk of COVID-19 transmission and must be followed.”*

This policy details specific criteria TSW must follow for reducing the such restrictions, while mitigating the risk resurgence of COVID-19. Nothing in this policy absolves TSW responsibility to ensure that resident and family communication is ongoing and supported by virtual visits, whenever possible, nor does it change TSW visitation policy for medically necessary or imminent end-of-life services.

Beginning **February 26, 2021**, nursing homes may expand visitation and/or activities under this revised guidance if able to continue following the core principles of infection control and prevention, under the following conditions:

1. TSW is in full compliance with both state and federal reporting requirements including COVID-19 focus surveys, daily HERDS, weekly staff testing surveys, and the federally required weekly submission of COVID-19 data to the National Healthcare Safety Network (NHSN).
2. TSW operator or designee must retain a copy of the revised facility’s visitation plan at the facility where it is easily accessible and immediately available upon request of the Department or local health department. The plan must clearly articulate the space(s) to be used for visitation (outdoors and indoors) including the number of visitors and residents which could be safely socially distanced within the space(s). The plan must reference relevant control policies for visitors.

3. There has been no new onset of COVID-19 cases in the last **14 days** and the facility is not currently conducting outbreak testing as reported on daily HERDS submissions. Please be advised that the Department reserves the right to verify such accuracy of reporting as part of its routine surveillance activities.
4. Visitors must be able to adhere to the core principles, including infection prevention and control policies, and staff are expected to provide monitoring for those who may have difficulty adhering to core principles.
5. Facilities must have policies widely communicated to residents, staff and visitors that limit the number of visitors per resident at one time and limit the total number of visitors in the facility at one time (based on the size of the building and physical space). Facilities should consider scheduling visits for a specified length of time to help ensure all residents are able to receive visitors.
6. Facilities should limit movement in the facility, including limiting visitors from walking around different halls of the facility. Instead, visitors should go directly to the resident's room or designated visitation area. Visits for residents who share a room should not be conducted in the resident's room unless the roommates are spouses.
7. Adherence to written screening protocols for all staff during each shift, each resident daily, and all persons entering the facility or grounds of such nursing home, including visitors, vendors, students and volunteers.
8. The number of visitors to the nursing home must not exceed **twenty percent (20%)** of the resident census at any time and the number of visitors and time allocated to visitation should take into consideration that many residents and their loved ones will want to avail of such visits. Policies and procedures should be revised to afford every opportunity for visits in a safe and thoughtful manner. Policies should also contemplate the need for adequate supervision and strict adherence to the core principles of infection prevention and control.
9. Visitors under the age of 16 must be accompanied by an adult 18 years of age or older.
10. Current COVID-19 positive residents, residents with COVID-19 signs or symptoms, and residents in a 14-day quarantine or observation period remain ineligible for in-person visits. In these instances, every effort should be made to accommodate visits using electronic devices and alternative visitation techniques.

11. Facilities should use the COVID-19 county positivity rates, found on the CMS COVID-19 Nursing Home Data site (link can be found at: <https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg>) to determine when visitation should be paused. When the county positivity rate is high (>10%), visitation must only occur for compassionate care situations according to the core principles of COVID-19 infection prevention and facility policies.
12. Facilities should accommodate and support indoor visitation, including visits for reasons beyond compassionate care situations, when the COVID-19 county positivity is less than 10%, based on the guidelines above.
13. Facilities must use the CMS COVID-19 county positivity rate, found on the COVID-19 Nursing Home Data site (link available at: <https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg>) as additional information to determine how to facilitate indoor visitation, and must abide by the following:
  - a. Low (<5%) = Visitation should occur according to the core principles of COVID-19 Infection prevention and facility policies (beyond compassionate care visits). For county COVID-19 positivity rates below 5%, visitor testing is strongly encouraged; and facilities may utilize rapid testing.
  - b. Medium (5%-10%) = Visitation should occur to the core principles of COVID-19 infection prevention and facility policies (beyond compassionate care visits). Visitor testing is required. Visitors must either: present a negative COVID-19 test result from within the past seventy-two hours (72), or facilities may utilize rapid antigen testing to meet the testing requirement. Alternatively, the visitor(s) may provide proof of having completed the COVID-19 vaccination series no less than 14 day prior to the date of the visit but also within 90 days of the last vaccination. However, proof of vaccination is not a guarantee that a visitor is not transmitting COVID-19, so testing is still recommended, and facilities may choose to require testing for these individuals. Additionally, all visitors must adhere to all infection control practices.
  - c. High (>10%) = Visitation must only occur for compassionate care situations according to the core principles of COVID-19 infection prevention and facility policies. Facilities should offer rapid testing whenever possible, even for such

compassionate care visits.

14. While taking a person-centered approach and adhering to the core principles of COVID-19 infection prevention, outdoor visitation can be conducted in a manner that reduces the risk of transmission. Outdoor visits pose a lower risk of transmission due to increased space and airflow. Therefore, all visits should be held outdoors whenever practicable. Aside from weather considerations (e.g., inclement weather, excessively hot or cold temperatures, poor air quality), an individual resident's health status (e.g., medical condition(s), COVID-19 status), or a facility's outbreak status, outdoor visitation should be facilitated routinely. 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. When conducting outdoor visitation, facilities should have a process to limit the number and size of visits occurring simultaneously to support safe infection prevention actions (e.g., maintaining social distancing). We also recommend reasonable limits on the number of individuals visiting with any one resident at the same time.

**In addition, nursing homes must follow the additional guidelines outlined below which include ensuring each of the following:**

- Adequate staff present to allow for personnel to help with the transition of residents, monitoring of visitation, and cleaning and disinfecting of areas used for visitation after each visit using an EPA-approved disinfectant.
- Appropriate signage regarding facemask or face covering utilization and hand hygiene, and applicable floor markings to cue social distancing delineations must be in place at all times.
- Screening for signs and symptoms of COVID-19 prior to resident access.
- Documentation of screening must be maintained onsite in an electronic format and available upon the Department's request for purposes of inspection and potential contact tracing. Documentation **must** include the following for each visitor:
  - i. First and last name of the visitor;
  - ii. Physical (street) address of the visitor;
  - iii. Daytime and Evening telephone number;
  - iv. Date and time of visit; and
  - v. Email address if available

- Adequate PPE must be made available by TSW to ensure residents wear a face mask, if medically able to utilize a face covering during visitation. Visitors must wear a face mask or face covering at all times when on the premises of the nursing home and maintain social distancing. TSW must have adequate supply of masks on hand for visitors and make available to visitors who lack an acceptable face covering.
- TSW will provide alcohol-based hand rub to visitors or representatives of the long-term care ombudsman visiting residents and those individuals are able demonstrate appropriate use.
- TSW should develop a quick, easy to read fact sheet outlining visitor expectations including appropriate hand hygiene and face coverings. The fact sheet must be provided upon initial screening to all visitors.
- Small group activities will be permissible when the facility is not experiencing an outbreak and when space allows for appropriate social distancing, however, no more than 10 residents and staff will be permitted to engage in such activities at any one time.
- Weather permitting, residents may also be assisted to go outdoors with staff supervision and the appropriate infection control, safety and social distancing requirements maintained.
- All non-essential personnel are subject to the same infection control requirements as staff, including but not limited to testing for COVID-19 with the same frequency as for staff; screening, wearing a mask, performing hand hygiene, maintaining social distancing.
- TSW will allow for students and trainees enrolled in programs to become licensed, registered, certified, board eligible or otherwise to complete a program for health care professionals to receive training and otherwise participate in duties relevant to their program of training provided the nursing home environment is appropriate to the student's education, training and experience. Students should follow the guidelines established in their agreement between the nursing home and academic institution.
- TSW interdisciplinary team will review visitation program compliance with the Health Advisory.
- If any visitor fails to adhere to the protocol, he/she/they will be prohibited from visiting for the duration of the COVID-19 state declared public health emergency.

TSW has established additional guidelines as needed to ensure resident and staff safety and continuity of facility operations. Hours of visitation are clearly delineated in the procedure and within the visitation

fact sheet. TSW continues to refrain from sending residents to non-medically necessary trips outside the nursing home until further notice. Communal dining remains suspended at this time (2/23/2021).

If TSW falls out of compliance with requirements listed in this advisory, the NH will immediately halt visitation and inform the Department. In addition, the Department can halt visitation at the nursing home at any time due to community or facility spread of infection, or when the Department identifies that the NH has failed to comply with requirements of this advisory.

As a reminder, the resumption of existing construction projects, and specifically, those projects directly impacting the lives of nursing home residents that were previously approved by the Department may move forward with submission of and approval by the Department of a revised mitigation/prevention plan outlining at a minimum, testing, screening, PPE use, distance from residents, etc.

***Note: Under no circumstance, will the Department allow for such resumption of a renovation or construction project(s) in or adjacent to a functioning and occupied dedicated COVID unit.***

Facilities should establish additional guidelines as needed to ensure resident and staff safety and continuity of facility operations. The Department will continue to evaluate and make additional recommendations 30 days after the effective date of this directive.

#### **TSW VISITATION PROCEDURE:**

**ATTESTATION:** TSW is in full compliance with all state and federal requirements, state Executive Orders and guidance, state reporting requirements including COVID-19 focus surveys, HERDS and staff testing surveys, and federally required submission of COVID-19 data to the National Healthcare Safety Network (NHSN).

**VISIT SITE(S):** TSW will use the enclosed/gated outdoor courtyard area located on the side of the facility to accommodate outdoor visitation, weather permitting. The courtyard will accommodate 1 resident, 2 visitors and 1 staff person per visitation time period (maintaining a social distancing of at least 6 ft.). The visitation site is stocked with hand sanitizer (consisting of at least 60 percent (60%) alcohol), EPA approved disinfectant, face masks, gloves, and is clearly marked to maintain a minimum 6 ft. of socially distanced space between the resident and visitors.

If weather does not permit for outdoor visitation due to inclement conditions, TSW will utilize the activities room for all indoor visitation. The room is a well-ventilated space that will accommodate up to three simultaneous visitations to occur (there will be 1 staff person assigned to monitor the visitations to ensure all safety measures and infection control procedures are appropriately followed and adhered to), that would consist of 1 resident and 2 visitors per visitation time period (maintaining a social distancing of at least 6 ft.). The visitation site is stocked with hand sanitizer (consisting of at least 60

percent (60%) alcohol), EPA approved disinfectant, face masks, gloves, and is clearly marked to maintain a minimum 6 ft. of socially distanced space between the resident and visitors.

**VISITATION HOURS and SCHEDULING:** Visitation will occur between the hours of 10am - 4pm, Monday – Friday. There will be no visits scheduled during resident mealtimes. Visits are pre-scheduled in increments of 45 minutes. You must arrive 30 minutes prior to your scheduled visitation time, to allow for COVID-19 testing, as well as health and travel questionnaire screening (if you fail to arrive early to allow for appropriate screening time, your visit will be rescheduled). The visit time of 45 minutes (which will be monitored by a staff member to ensure proper social distancing at all times, proper use of PPE, and proper hand hygiene) allows for 15 minutes for disinfection of room between visits.

Visitors will be pre-scheduled for a designated day and time by TSW staff in an organized manner so as to ensure that all residents will have an opportunity to receive visitors. At the time of scheduling, visitors are instructed to wait in their car and to call the reception desk to notify us of their arrival and location. The receptionist will then notify the designated staff person responsible for completing visitor COVID-19 testing and screening questionnaire, of your arrival and location, in order to complete the aforementioned tasks prior to entering the facility.

Facility maintains an electronic tracking sheet to record visitors on which will be recorded:

- i. First and last name of the visitor;
- ii. Physical (street) address of the visitor;
- iii. Daytime and evening telephone number;
- iv. Date and time of visit;
- v. Email address, if available; and
- vi. A notation indicating the individual cleared the screening (negative COVID test, temperature and questions) that does not include any individual temperatures or other individual specific information.

**VISITATION PROTOCOLS:** No more than 20% of residents shall have visitors during any given day, and only 2 visitors are allowed per resident during each scheduled visit. Visitors under the age of 16 years old, must be accompanied by an adult 18 years or older throughout the entirety of the visit.

Current COVID-19 positive residents, residents with COVID-19 signs or symptoms, and residents in a 14-day quarantine or observation period are not eligible for visits.

Residents are screened daily for COVID-19 symptoms including, temperature, vital signs, and pulse-oximetry.

**BEFORE VISIT:** Visitors must test negative for COVID-19 (facility will furnish and administer the COVID-19 test utilizing a rapid mid-turbinate Point of Care (POC) viral antigen test) prior to the visitation, in conjunction with completing a screening sheet which includes, temperature (staff member to capture and record upon arrival), questions regarding recent travel, COVID-19 related symptoms, and any recent temperatures greater or equal to 100.0 degrees Fahrenheit. The verified negative test result along with the screening sheet, is reviewed by the staff member monitoring the visitation site **before** the resident

arrives at the site. If there are questions that need further investigation, the site monitor will contact the administrator. Visitation must be refused if the individual(s) do not test negative for COVID-19 prior to the scheduled visit, exhibit any COVID-19 symptoms or do not pass the screening questions.

Prior to resident's arrival at visitation site, visitor(s) receive education from the site monitor on proper use of PPE, dons facemask, and demonstrates proper hand hygiene technique using hand sanitizer consisting of at least 60 percent (60%) alcohol.

Each visitor receives a fact sheet at the time of screening and signage is posted at the visiting site indicating safety protocols outlined on the fact sheet, in addition, both are posted on the facility website, along with this policy.

**DURING VISIT:** Social distancing of at least 6 ft. is maintained throughout the entire visit. Visitors are required to wear a facemask/face covering that covers their nose and mouth at all times while on the premises of the NH, and will need to bring/provide their own (NH can/will provide you with a mask if the mask you are wearing does not meet the facilities infection control standards).

Residents are required to wear a facemask/face covering that covers their nose and mouth throughout the entire visit as medically tolerated and perform hand hygiene, using hand sanitizer consisting of at least 60 percent (60%) alcohol. A social distance of at least 6 ft. is also maintained by the resident.

**POST VISIT:** A staff member will assist the resident back to their unit. The site monitor will then disinfect the visitation area with an EPA approved disinfectant and allow for appropriate dwell time per manufacturers guidelines/product specifications prior to the next scheduled visit occurring.

**If any visitor fails to adhere to the protocol, he/she/they will be prohibited from visiting for the duration of the COVID-19 state declared public health emergency.**

If the facility fails out of compliance with the requirements listed in this advisory, the NH should immediately halt visitation and inform the NYS DOH. In addition, the NYS DOH can halt visitation at the NH at any time due to community or facility spread of infection, or when the NYS DOH identifies that the NH has failed to comply with requirement of this advisory.

This plan is subject to change. When changes occur TSW will notify residents, families and the NYS DOH accordingly.

References:

1. NH\_Visitation\_update\_2-22-2021.pdf