

# Saluda Nursing Center's Policy and Procedure for Outdoor and Indoor Visitation

## Outdoor Visitation

Outdoor visits generally pose a lower risk of transmission so outdoor visitation is preferred when practicable. The following are considerations for outdoor visitation:

1. Weather conditions must allow for safe visitation.
2. A resident's health status may hinder outdoor visits (medical condition, COVID-19 status, quarantine status)
3. Core principals of COVID-19 infection prevention must be maintained.

## Indoor Visitation

Indoor visitation is allowed at all times during the appointed visitation times (regardless of vaccination status), except for a few circumstances when visitation should be limited due to a high risk of COVID-19 transmission (compassionate care visits are 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.

## Indoor Visitation During an Outbreak

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, outbreak testing will begin and all visitations will be suspended (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 should suspend visitation on the affected unit until the facility meets the criteria to discontinue outbreak testing.

o 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.

### **Outdoor/Indoor Visitation/Facility Criteria**

1. Visitation times will be as follows:

**Daily: 10:00a.m.-12:00p.m. (outside)**

**1:45p.m.-2:45p.m. (inside)**

**3:15p.m.-4:15p.m. (inside)**

**Thursday: 7:00p.m. – 9:00p.m. (inside)**

Visitation times may be changed depending on the weather or staffing issues.

2. Outdoor visitation will be held on the front patio area in the designated area. Indoor visitation will be held in the Mitchell assembly room in the designated areas. If a resident's health status prevents them from leaving their room at all, visitation may occur in the resident's room if the resident is in a private room or the roommate is not present during the visit. If a visit must happen with both residents in the room, the curtain should be pulled between the residents.
3. Vaccinated visitors will be allowed to visit in the resident's room during visitation hours. Unvaccinated visitors must visit in the designated visitation areas listed above in #2. (except for compassionate care or special circumstances)
4. Encourage social distancing between visitors and residents. (see exceptions below)

\*There is no substitute for physical contact, such as the warm embrace between a resident and their loved one. Therefore, if the 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. Regardless, visitors should physically distance from other residents and staff in the facility.

\*Fully vaccinated refers to a person who is  $\geq 2$  weeks following receipt of the second dose in a 2- dose series, or  $\geq 2$  weeks following receipt of one dose of a single-dose vaccine, per the CDC's Public Health Recommendations for Vaccinated Persons

- a. **\*\*Physical distancing and source control recommendations when both the patient/resident and all of their visitors are fully vaccinated:**

- While alone in the patient/resident's room or the designated visitation room, patients/residents and their visitor(s) can choose to have close contact (including touch) and to not wear source control.

- Visitors should wear source control and physically distance from other healthcare personnel and other patients/residents/visitors that are not part of their group at all other times while in the facility
- b. **\*\*Physical distancing and source control recommendations when either the patient/resident or any of their visitors are not fully vaccinated:**
- The safest approach is for everyone to maintain physical distancing and to wear source control. However, if the patient/resident is fully vaccinated, they can choose to have close contact (including touch) with their unvaccinated visitor(s) while both continue to wear well-fitting source control.
5. Visitors must be assessed for fever and must be screened before the visit for COVID-19 symptoms and possible exposures to others that are COVID-19 positive. If a visitor has a temperature over 100 degrees, COVID-19 symptoms, or recent exposure to someone who is COVID-19 positive then they will not be allowed to visit regardless of vaccination status.
  6. Visitors must be educated on infection control principles which includes notifying them of the requirement to wear a mask covering their mouth and nose at all times. (except for above exception under #3)
  7. There will be a maximum of three visitors allowed to visit at one time except for special circumstances. (this includes children)
  8. Children may visit but must be able to adhere to the core principles of infection prevention to include wearing a mask at all times while visiting.
  9. Visits may be limited to appointment times to monitor how many visitors are in the building at one time and to monitor that the core principles of infection prevention are maintained.
  10. Residents that appear to be in emotional distress or having conditions exacerbated by continued isolation may be given priority for visitation at the discretion of the facility staff.
  11. Staff must ensure appropriate personal care and supervision to residents taking into consideration their individual needs and conditions, including need for sunscreen, hydration, appropriate clothing for cold/heat, and wandering or other behaviors.
  12. The facility must provide the proper PPE needed for the resident, family members, and staff.
  13. The facility has the discretion to halt visitation at any time related to disease transmission in the facility or community, visitor non-compliance, weather or outdoor temperature, or other factors. (compassionate care visits and those required under federal disability rights law are allowed at all times)
  14. If one or more cases are identified in residents and/or staff members, visitation must be suspended until CMS testing protocols are completed. (See above for indoor visitation during outbreak)

15. The visitation policy will be communicated to residents and their families. They will be informed of any changes to visitation.

## **Resident Criteria**

- Residents that are currently in isolation due to recently testing positive for COVID-19, have signs and symptoms of COVID-19, or currently are in a quarantine or observation period are not eligible for visits except for compassionate care visits. Residents should not participate in visitation beyond compassionate care visits if they have any other medical conditions that do not allow for safe visitation.
- Residents that are not currently but have previously tested positive for COVID-19 are permitted only if they no longer require transmission-based precautions in accordance with CDC and DHEC guidelines.
- Residents must not be transported through any space designated as COVID-19 care space or space where residents suspected or confirmed to be infected with COVID-19 or under quarantine are present.
- Residents are encouraged to wear a mask, unless a contraindication is present, at all times during the visit, including the transition to and from the visitation location. Residents must be positioned at least six feet away from visitors at all times (see exception below \*).

\*There is no substitute for physical contact, such as the warm embrace between a resident and their loved one. Therefore, if the 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. Regardless, visitors should physically distance from other residents and staff in the facility.

\*\*See exception in #4 under **Outdoor/Indoor Visitation/Facility Criteria**

## **Visitor Criteria**

- Only three visitors are permitted to visit a resident at one time except for special circumstances. (this includes children)
- Children must be accompanied by their guardian at all times. The child's guardian is responsible for ensuring the child follows safety measures, including social distancing and wearing a face mask for the duration of the visit.
- Visitors should wear a face mask over their mouth and nose for the duration of the visit. Face shields may not be used in lieu of face masks for visitors, though they may be used in addition to the mask or covering if the visitor so chooses.

**\*\*See exception in #4 under Outdoor/Indoor Visitation/Facility Criteria**

- Visitors must maintain social distancing for the duration of the visit, including remaining at least six feet away from residents. (see exception below \*)

\* There is no substitute for physical contact, such as the warm embrace between a resident and their loved one. Therefore, if the 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. Regardless, visitors should physically distance from other residents and staff in the facility.

**\*\*See exception in #4 under Outdoor/Indoor Visitation/Facility Criteria**

- Upon arrival for a visit, visitors must go to the designated visitor screening location (front desk) to sign-in and provide contact information. All visitors will be given a “visitor sticker” for identification and to identify the area of the building they will be visiting.

- In the facility’s designated screening location, visitors must be screened for signs and symptoms of COVID-19 and possible exposure to COVID-19, including checking temperature to assess for fever (100°F or greater).

- Visitors must use alcohol-based hand rub upon entering and exiting the visitation location.

- Visitors are only permitted in the designated visitor screening location and the designated visitation locations. Visitors should limit movement in the facility.

- Visitors must only visit the resident they intended to visit.

- If a visitor develops signs and symptoms of COVID-19 within 2 days after visiting, visitors should notify Saluda Nursing Center so any possible exposures can be handled appropriately

## **Compassionate Care Visits**

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.

“Compassionate care situations” does not exclusively refer to end-of-life situations. The decision to allow compassionate care visits will be at the discretion of the facility staff based on the individual needs and situations.

COVID-19 testing is encouraged for unvaccinated visitors but not required before visiting for compassionate care visits that will take place in the resident’s room. (testing frequency based on county positivity rate)

Source: DHEC Guidelines for Outdoor and Indoor Visitation 10-16-20

DHEC Updated Guidelines for Visitation 3-19-21

Policy Updated 3-11-2021 (QSO-20-39-NH Revised edition 3-10-21)

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4-28-21 (CMS -Ref: QSO-20-39-NH, <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html>)

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

Facilities MUST adhere to the core principles listed below at all times. Visitors unable to adhere to the core principles should not be permitted to visit or should be asked to leave.

- Screening of all people who enter the facility for signs and symptoms of COVID-19 and denial of entry to those who screen positive for signs and symptoms or who have been exposed to someone with COVID-19 in the last 14 days
- Frequent hand hygiene
- Face coverings or masks that cover mouth and nose
- Social distancing at least 6 feet
- If the 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. Regardless, visitors should physically distance from other residents and staff in the facility.
- \*Fully vaccinated refers to a person who is  $\geq 2$  weeks following receipt of the second dose in a 2-dose series, or  $\geq 2$  weeks following receipt of one dose of a single-dose vaccine, per the CDC's Public Health Recommendations for Vaccinated Persons
- Signage throughout the facility and visitor education on COVID-19 signs and symptoms and infection control methods. (Visitation Policy available on SNC website at [www.saludanursing.org](http://www.saludanursing.org))
- Cleaning and disinfecting of frequently touched surfaces often and of visitation areas after each visit
- Appropriate personal protective equipment (PPE) use by staff
- Effective cohorting of residents
- Resident and staff testing performed in accordance with CMS guidelines