

OCEANSIDE CARE CENTER

VISITATION POLICY

POLICY

It is the policy of Oceanside Care Center to promote and support visitation for residents, families and resident representatives while ensuring safety and adherence to infection prevention strategies to minimize any potential spread of infection. This will be done in accordance with all State and Federal guidance for the prevention of COVID-19.

PURPOSE

To enhance resident quality of life by implementing visitation to combat psychological impacts of isolation from family and representatives.

NYSDOH CRITERIA (Revised 2.22.21)

Nursing Homes may conduct **limited visitation and activities under the following revised NYSDOH guidelines.**

The facility 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 NHSN.

1. The facility has protocols to separate residents into cohorts of positive, negative, and unknown as well as separate staff teams to deal with COVID-19 positive residents and non-positive residents.
2. The facility has completed the NY Forward Safety Plan and submitted a copy of the complete plan to covidnursinghomeinfo@health.ny.gov. The facility must retain a copy of the plan at the facility where it is accessible and immediately available upon request of the Department or local health department.
 - a. 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 distance within the space.
3. The **absence of any 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.
4. Adherence to written screening protocols for all staff during each shift, each resident daily, and all persons entering the facility or grounds of the facility, including visitors. Visitors may be asked for ID as needed.
5. Documentation of screening will be maintained in an electronic format and available upon request of the NYSDOH.
6. Resident monitoring must include daily symptom checks, vital signs, and pulse oximetry.
7. A copy of the facility's formal visitation plan is posted to their public website and broadcasted via email or social media to provide visitors with clear guidelines for visiting and to announce if and when visitation is paused due to an increase in the number of residents and/or staff with confirmed positive COVID-9 diagnosis.

PROCEDURE

1. Beginning February 26, 2021, Nursing Homes may expand visitation and/or activities, while following NYSDOH revised guidance.
2. Facility visitation can be conducted through a variety of means:
 - In resident rooms
 - Dedicated visitation spaces
 - Outdoors (weather permitting)
3. In order to limit movement in the facility during visitation, the following guidelines will be followed:
 - (a) When weather permits, visitation will take place in the designated outdoor area which is the patio. Our patio allows 4 residents at a time with at least 6 feet distancing from each other.
 - (b) When weather does not permit visitation will take place in the designated and monitored indoor area which is the lobby. The lobby will allow (2) residents at a time. There is a plexiglass divider that separate the (2) residents and ensures the 6 feet distancing.
 - (c) In instances when the resident cannot leave his/her room due to medical/psychosocial reasons, visitation may take place in the resident's room.
 - Visitor (s) will go directly to the resident's room or designated area.
 - If a resident shares a room, visitation will not be conducted in the resident's room (arrangement will be made for designated room/area)
4. Visits will be made in advance and scheduled by Activities Staff.
 - (a) The facility will assign staff to assist with the transition of residents, monitoring of visitation, and cleaning and disinfecting areas used for visitation after each visit using an EPA-approved N-List disinfectant.
 - (b) The facility will post signage regarding facemask utilization and hand hygiene and uses applicable floor markings for social distancing.
 - (c) A log will be kept for all visitors that includes:
 - First and Last Name of the visitor;
 - Physical (street) address of the visitor;
 - Daytime and evening telephone number;
 - Date and time of visit;
 - Email address, if available
 - (d) Visitors and residents must wear a facemask or face covering (must always cover both the nose and mouth when on the premises of the facility). Mask will be available on hand for visitors as needed.
 - (e) Visiting areas will have easily accessible alcohol-based hand rub for residents, visitors, and staff.
 - (f) Visitors who are younger than 16 years old must be accompanied by an adult 18 years of age or older.
 - (g) **No more than 20 percent** of the resident census shall have visitors at any one time and the number of visitors/ times allocated for each visit should be considered as many loved ones will want to avail of such visit.
 - (h) Current COVID-19 positive residents, residents with COVID-19 signs or symptoms, and residents in a day 14 – day quarantine or observation period are not eligible for visits.

- (i) The facility will provide and post a fact sheet outlining visitor expectations including appropriate hand by hygiene and face coverings. The fact sheet will be provided upon initial screening to all visitors.
5. Facilities must use **COVID-19 county positivity rates** to determine how to facilitate indoor visitation, and must follow the below:
 - **Low (<5%)** = Visitor testing is strongly advised. Facilities may use rapid testing. (Facility to insert whether they will require testing)
 - **Medium (5% -10%)** = Visitor testing is required. Visitors must present a negative 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 days prior to the date of the visit but also within 90 days of the last vaccination. NYSDOH has indicated that proof of vaccination is not a guarantee that a visitor is not transmitting COVID-19, so testing is still recommended. (Facility to insert whether they will require testing for visitors with vaccination documentation as above)
 - **High (>10%)** = Visitation must only occur for compassionate care situations. Facilities should offer rapid testing whenever possible.
 6. Facilities should limit movement in the facility.
 - i.e. Visitors should not walk around throughout the facility. Instead, they should go directly to the area dedicated to visitation or the resident's room. If a resident shares a room, visitation should not be conducted in the resident's room. For situations where there is a roommate and health status of the resident prevents them from leaving the room, facilities should try to facilitate in-room visitation while following principles of COVID-19 infection prevention.
 7. Residents will also be assisted to go outdoor with staff supervision weather permitting. The appropriate infection control and safely and social distancing requirements must be maintained.
 8. The IDT Team will review the Visiting program and monitor for any needed adjustments and report to QA Committee as needed.
 9. 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.

Compassionate Care Visits

Compassionate Care Visits are permitted when visitation may not otherwise be permitted (in accordance with NYSDOH current visitation guidance), and facilities may waive requirement of a visitor presenting a negative COVID-19 test prior to commencement of such visit under the following circumstances:

- Newly admitted residents with difficulty adjusting to the facility environment and lack of in-person family support.
- Residents recently grieving the loss of a friend or loved one.
- Residents who previously received in-person support and / or cueing from family for eating and drinking and are now experiencing dehydration and/or weight loss.
- Residents who exhibiting signs and symptoms of emotional stress (i.e. seldom speaking or crying more frequently when the resident had rarely cried in the past, refusing to participate in an activity/activities, staying in bed longer than usual, exhibiting behavior considered abnormal for the resident).
- Residents who receive religious or spiritual support from clergy or another layperson.

The situations above are not intended to be an exhaustive list. Additional compassionate care situations may be considered by the facility on a resident-specific basis. Testing to be encouraged / facilitated wherever possible.

End of Life Visits

For any resident assessed to potentially be at the end-of-life-, family/resident representative will be contacted by SW/Designee to allow visitation. Testing is not required for end-of-life visits. Family will be screened, provided with PPE and escorted to resident's room.

Date: 09/17/20

REVISED DATE: 03/01/2021