

Visitors Guidelines Fact Sheet

1. Recommended visitation hours will be from 10am until 8pm. Although, there is no limit to the number of visitors, visits should be conducted in a manner that adheres to the core principals of COVID-19.
 - a) Visits will occur in the resident rooms, outside in the courtyard (weather permitting), or in designated area in the facility.
 - b) Semi-private rooms with a roommate, we ask you limit the number of visitors to 2 at a time.
 - c) Larger groups we ask to schedule your visit with Social Services ext. 144/147.

2. Location of visits:**Outdoor Visits:**

While taking a person-centered approach and adhering to the core principles of COVID-19 infection prevention.

- Facility visitation will be conducted in the outdoor courtyard, weather permitting;
- In inclement weather, such as high heat or foul weather and as facility space allows, visitation will be inside the residents room for 2 or less family members. Larger groups will be arranged in a designated area by Social Services ext. 144/147
- Facilities must permit residents to leave the facility as they choose. Should a resident choose to leave, the facility should remind the resident and any individual accompanying the resident to follow all recommended infection prevention practices including wearing a face covering or mask, physical distancing, and hand hygiene and to encourage those around them to do the same.
- Taking resident out of the facility: Must have a MD order and family/individual must complete safe care transfer training with PT/OT

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

Indoor Visits:

The facility shall allow indoor visitation at all times and for all residents (regardless of vaccination status)

- Visitors who have a positive viral test for COVID-19, symptoms of COVID-19, or currently meet the criteria for quarantine, should not enter the facility.
- Face covering or mask (covering mouth and nose) and social distancing at least six feet apart between persons, in accordance with CDC guidance.
- If a resident's roommate is unvaccinated or immunocompromised (regardless of vaccination status), visits should not be conducted in the residents room if possible.
- If the nursing home's county COVID-19 community level of transmission is substantial too high, all residents and visitors, regardless of vaccination status, should wear a face covering or mask and physically distance, at all times.
- If the resident and all their visitor(s) are fully vaccinated and the resident is not moderately or severely immunocompromised, they may chose to not wear face covering or masks and to have physical contact.
- Visitors should wear face covering or masks when around other residents or healthcare personnel, regardless of vaccination status.

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- Facilities shall 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.
- Visitation for residents under Transmission-Based Precautions (TBP) and/or quarantine is not recommended. If visitation is to occur in these cases, the visit should occur in the resident's room and the resident should wear a well-fitting facemask (if tolerated). Before visiting residents, who are TBP or quarantine, visitors should be made aware of the potential risks of visiting and precautions necessary in order to visit the resident.
- For any resident under TBP and/or quarantine window visits will also be made available.
- When/If a new case of COVID-19 is identified among residents or staff, the facility will immediately begin outbreak testing.

3. 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). With the appropriate safeguards, visitation can still occur when there is an outbreak. When a new case of COVID-19 among residents or staff is identified, Acadia Center shall immediately begin outbreak testing.

In addition, the New York State Department of Health issued emergency regulations regarding Personal and Compassionate Caregivers in Skilled Nursing Facilities. (See Personal and Compassionate Caregiving Visitors Policy & Procedure)

- While it is safer for visitors not to enter the facility during an outbreak investigation, visitors will still be allowed in the facility. Visitors will be made aware of the potential risk of visiting during an outbreak investigation and adhere to the core principles of infection prevention (see attachment A).
- If residents or their representative would like to have a visit during an outbreak investigation they should wear face coverings or masks during visits, regardless of vaccination status.
- The facility will assign staff to assist with the transporting of residents, monitoring of visitation for appropriate infection control, safety and social distancing. Cleaning and disinfecting areas used for visitation after each visit using and EPA- approved disinfectant.
- While not required, the facility will offer COVID-19 rapid testing to visitors (if feasible)
- The facility will also ask for a copy of any visitors COVID-19 vaccination card to keep on file, even though visitors are not required to be tested or vaccinated (or show proof of such).
- If the visitor declines to disclose their vaccination status, the visitor should wear a face covering or mask at all times.

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- a) Families may resume laundering the residents clothing (we still recommend getting all clothing labeled)
 - b) Visitors are remitted to bring in items during visitation (i.e. food, beverage, flowers, ect.) We ask that any item or food is in a container that can be disinfected. And we ask that any food brought in is consumed after the visit to encourage the use of mask/face covering.
 - c) Visiting areas will have easily accessible alcohol-based hand rub, for residents, visitors and staff.
4. We strongly encourage use of masks or face coverings while visiting your loved one (especially because we are unable to disclose another resident's vaccination status).
- a) Screening shall consist of both temperature checks and asking screening questions to assess potential exposure to COVID-19 which shall include questions regarding international travel or travel to other states designated under the Commissioner's travel advisory
 - b) Documentation must include the following for each visitor to the nursing home: first and last name of the visitor; physical (street) address of the visitor; daytime and evening telephone number; date and time of visit; vaccination status, and email address, if available
 - c) If any visitor fails to adhere to the CMS Guidance for Core Principles of COVID-19 Infection Prevention, he/she/they will be prohibited from visiting for the duration of the COVID-19 state declared public health emergency.
 - d) The facility will adhere to screening protocol for all staff during each shift.
5. **Potential Visit Related Exposures:**
If a visitor to the facility tests positive for SARS-CoV-2 by a diagnostic test and the visit to the facility occurred from two days before the visitor's symptom onset (or in the 2 days before the date of collection of the positive sample for visitors who remained asymptomatic) to the end of the visitor's isolation period, there is a potential for exposure. **Any visitor who tests positive for SARS-CoV-2 within this time frame must notify the facility as soon as possible.**
6. The facility will maintain signage regarding face mask utilization and hand hygiene and uses applicable floor markings to cue social distancing delineations.
7. Facilities will provide alcohol-based hand sanitizer consisting of at least 60 percent (60%) alcohol, to residents, visitors, and representatives of the long-term care ombudsman prior to visiting the residents. Rub hands together using friction.
8. The facility will continue to provide other methods to meet the social and emotional needs of residents, such as video calls and window visits;

9. Specialty practitioners, podiatrist, and dental services may continue with strict adherence to infection control guidelines.