

YORKTOWN ASSISTED LIVING RESIDENCE

ADMINISTRATIVE MANUAL OF POLICIES AND PROCEDURES

DEPARTMENT: INTERDISCIPLINARY

EFFECTIVE DATE: 3/26/2021

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NEW: REVISIONS: X

POLICY: X PROCEDURE: X

SUBJECT: VISITATION, COMMUNAL DINING & ACTIVITIES

PURPOSE and APPLICATION: On March 25, 2021, the Department of Health (“Department”) issued revised guidance and recommendations regarding general adult care facility (ACF) visitation. The information contained in this directive supersedes and replaces previously issued guidance and recommendations regarding general ACF visitation as well as the November 24, 2020 Holiday Guidance and is based upon the U.S. Centers for Medicare & Medicaid Services (CMS) memorandum QSO-20-39-NH and Centers for Disease Control and Prevention (CDC) guidelines on such topics. Nothing in this directive should be construed as limiting or eliminating an adult care facility’s (ACF’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.

POLICY: It is the policy of YORKTOWN ASSISTED LIVING RESIDENCE, pursuant to the most recent New York State Department of Health directives issued on March 25, 2021, to permit visitation/activities/communal dining

PROCEDURE: Visitation can be conducted through different means based on a facility’s structure and residents’ needs, such as in resident rooms, dedicated visitation spaces, outdoors, and for circumstances beyond compassionate care situations. Regardless of how visits are conducted, there are certain core principles and best practices that reduce the risk of COVID-19 transmission including, but not limited to:

- Screening of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions about and observations of signs or symptoms), and denial of entry of those with signs or symptoms or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor’s vaccination status);
- Hand hygiene (use of alcohol-based hand rub is preferred);
- The use of face coverings or masks (covering mouth and nose);
- Social distancing at least six feet between persons;
- Instructional signage throughout the facility and proper visitor education on COVID- 19 signs and symptoms, infection control precautions, other applicable facility practices (e.g., use of face covering or mask, specified entries, exits and routes to designated areas, hand hygiene);
- Cleaning and disinfecting high frequency touched surfaces in the facility often, and designated visitation areas after each visit;
- Appropriate staff use of Personal Protective Equipment (PPE);
- Effective cohorting of residents (e.g., separate areas dedicated to COVID-19 care);
- Residents in isolation or observation and residents with suspected or confirmed COVID-19 status, irrespective of vaccination status, should not have visitors outside of compassionate care or end-of-life situations

These core principles are consistent with federal guidelines and must always be adhered to.

- Visitation should be person-centered and should consider the residents’ physical, mental, and psychosocial well-being, and support their quality of life.

- **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 ACF must document this occurrence in accordance with Title 18 of New York Codes, Rules and Regulations, 485.14 (h)

Outdoor Visitation:

While taking a person-centered approach and adhering to the core principles of COVID-19 infection prevention, **outdoor visitation is preferred even when the resident and visitor are fully vaccinated* against COVID-19.** Outdoor visits generally pose a lower risk of transmission due to increased space and airflow.

Weather considerations or an individual resident's health status (e.g., medical condition(s), COVID-19 status) may hinder outdoor visits. For outdoor visits, **YORKTOWN ASSISTED LIVING RESIDENCE** 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, all appropriate infection control and prevention practices should be adhered to.

Indoor Visitation

YORKTOWN ASSISTED LIVING RESIDENCE should consider how the number of visitors per resident at one time and the total number of visitors in the facility at one time (based on the size of the building and physical space) may affect the ability to maintain the core principles of infection prevention. If necessary, ACF's should consider scheduling visits for a specified length of time to ensure all residents are able to receive visitors or capping the number of visitors accepted at one time. Based on these recommendations Yorktown Assisted Living will:

- Schedule visitation in order to effectively track the visitors in the building at one time
- Limit visitor movement in the facility-visitors will report directly to the resident room or designated visitation area after completing the COVID-19 screening at the front desk
- Visits will be capped at 45 minutes
- Visits will not take place during mealtimes
- Residents will be allowed 2 visitors at one time based on limitations in physical space

In addition, YORKTOWN ASSISTED LIVING RESIDENCE will follow the additional guidelines outlined below which include ensuring each of the following:

- Appropriate signage regarding facemask or face covering utilization and hand hygiene, and applicable floor markings to cue social distancing delineations must always be in place.
- 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:
 - First and last name of the visitor;
 - Physical (street) address of the visitor;
 - Daytime and Evening telephone number;
 - Date and time of visit; and
 - Email address if available
- Adequate PPE must be made available by the ACF to ensure residents wear a face mask, if medically able to utilize a face covering during visitation. Visitors must always wear a facemask or face covering when on

the premises of the ACF and maintain social distancing. The ACF must have adequate supply of masks on hand for visitors and make available to visitors who lack an acceptable face covering.

- **YORKTOWN ASSISTED LIVING RESIDENCE** 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.
- **YORKTOWN ASSISTED LIVING RESIDENCE** will develop a quick, easy to read fact sheet outlining visitor expectations including appropriate hand hygiene and face coverings. The factsheet must be provided upon initial screening to all visitors.
- Principles of cohorting and physical distance should be central components of plans to restart communal activities. The ACF should consider creating small cohorts (10 or less) of residents to be tablemates or “activities buddies”
- Residents who are on isolation/observation or with suspected case of COVID-19 will be prohibited from attending communal meals/activities
- **YORKTOWN ASSISTED LIVING RESIDENCE** will communicate to resident families/resident representative of the procedure for scheduling indoor visitations with residents.
- **YORKTOWN ASSISTED LIVING RESIDENCE** requires ALL visits be prescheduled through Administration or Case Management
- **YORKTOWN ASSISTED LIVING RESIDENCE** will schedule visits for a specified length of time to help ensure all residents are able to receive visitors.
- Residents will be permitted one visit per day, unless there is an available time slot for an additional visit. Visits will not exceed 2 in a 24-hour period.
- **YORKTOWN ASSISTED LIVING RESIDENCE** will limit movement in the facility, including limiting visitors from walking around different halls of the facility. Instead, visitors will be assigned a visitation area to utilize and will be directed to the assigned designated visitation area. All visitors are required to stay in the designated area throughout his/her visit.
- 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 will be made to accommodate visits using electronic devices and alternative visitation techniques.

Compassionate Care Visits:

While end-of-life situations have been used as examples of compassionate care situations, the term “compassionate care situations” does not exclusively refer to end-of-life situations.

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. Using a person-centered approach, ACF’s should work with residents, families, caregivers, resident representatives, and the Ombudsman program to identify the need for compassionate care visits.

Compassionate care visits should include, but not be limited to the following:

- Newly admitted residents with difficulty adjusting to the facility environment and lack of in-person family support;
- A resident, who was living with their family before recently being admitted to an ACF, is struggling with the change in environment and lack of physical family support.
- A resident who is grieving after a friend or family member recently passed away.
- A resident who needs cueing and encouragement with eating or drinking, previously provided by family and/or caregiver(s), is experiencing weight loss or dehydration.
- A resident, who used to talk and interact with others, is experiencing emotional distress,
- Residents who are exhibiting signs and symptoms of emotional distress including, but not limited to, seldom speaking or crying more frequently (when the resident had rarely cried in the past), refusing to participate in an activity or activities, staying in bed longer than usual, or exhibiting behavior considered abnormal for the individual.
- Visits by any individual that can meet the resident’s needs, such as clergy or lay persons offering religious and spiritual support.

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.

Window Visits

1. Window visits will take place in the resident's room or solariums on the memory care unit for the residents that reside on that unit
2. Windows must remain closed for the duration of the visit.
3. Visits will be limited to 30 minutes.
4. To allow for proper cleaning techniques in between window visits, we are limited on how many visits we can allow per day. Please be patient with us – we understand your excitement to see your loved one, but we must be extremely careful and cautious during the pandemic.
5. Please always remain outside and do not attempt to enter the building at any time during scheduled window visits. Your loved one will be just inside the window and we understand the desire to hug and kiss them, but it simply is not safe at this time.
6. Please do not leave your home and come visit if you are experiencing ANY symptoms of illness.
7. Please do not bring any items to give to your loved one. We are still being cautious of outside items and deliveries due to reports that COVID-19 may last on certain surfaces for long periods of time.

Communal Dining and Activities:

Communal dining and activities may occur while adhering to the core principles of COVID-19 infection prevention. Residents may eat in the same room with social distancing (**e.g., limited number of people at each table and with at least six feet between each person**). **YORKTOWN ASSISTED LIVING RESIDENCE** will consider additional limitations based on status of COVID-19 infections in the facility and the size of the room being used and the ability to socially distance residents (e.g. limit to 10 residents and staff in smaller spaces).

Group activities may also be facilitated (for residents who have fully recovered from COVID-19, and for those not in isolation for observation, or with suspected or confirmed COVID- 19 status) with social distancing among residents, appropriate hand hygiene, and use of a face covering (except while eating)



YORKTOWN ASSISTED LIVING RESIDENCE
Visitors Expectations Fact Sheet

- Visitors are screened for signs and symptoms of COVID-19 prior to resident access and visitation will be refused if the individual(s) exhibits any COVID-19 symptoms or do not pass the screening questions.
- 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.
- Documentation must include the following for each visitor to the adult care facility: first and last name of the visitor; physical (street) address of the visitor; daytime and evening telephone number; date and time of visit; and email address, if available.
- Visitation will occur in the resident's room or other area designated by the facility
- Visitors are to report directly to the designated visiting area and are not to linger in common areas, visit with other residents or staff in the facility, or exit the building other than through the front entrance
- Visitors must socially distance and maintain a 6-foot distance from the residents as well as other visitors in your party
- Visitors must wear a face mask or face covering which always covers both the nose and mouth when on the premises of the ACF
- Facilities will provide alcohol-based hand rub, 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.
- Visitation hours are by appointment only
- Visits are capped at 45 minutes. At the conclusion of your visit you will be informed by a staff member (either in person or by phone call) that your visit has ended, and you must proceed to the front entrance to exit the building
- Please refrain from eating or drinking during your visit as masks are to be worn during the entire visit
- The staff reserves the right to pop in on visits in resident rooms to ensure that face masks are being worn and that social distancing is being complied with. If any visitor fails to adhere to the protocol, he/she/they will be asked to leave and may be prohibited from visiting for the duration of the COVID-19 state declared public health emergency.

I have read and agree to the visitor expectations outlined above

Print Name

Signature

Date