

FAQs for Long Term Care and Assisted Living Facilities

June 17, 2020

Today's Overview



NH Situational Update



New Visitation Guidance

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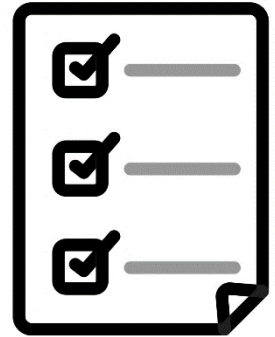
Audience Q&A

Visitation Guidance for LTCF

- ▶ While community transmission has slowed in NH, COVID-19 continues to pose a significant risk for LTCF staff and residents
 - 35% of cases, 83% of deaths in NH
- ▶ LTCFs may now allow visits with residents under provided guidance
 - This guidance replaces visitor prohibition issued on Mar 15, 2020 for LTCFs
 - LTCFs should continue to use alternative electronic methods for visits
- ▶ Eligible facilities
 - Long term care, assisted living, and similar settings that have previously prohibited visitation with Executive Order 2020-04
 - Facilities with active COVID-19 outbreaks are excluded

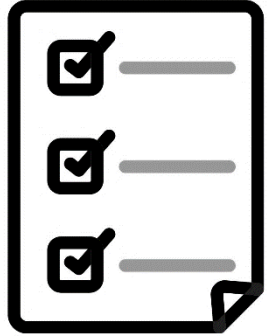
How Many and How Long?

- ▶ The number of visits per resident depends of facility size and staff capacity
- ▶ A facility decides
 - Length of visits
 - Days for visits
 - Hours during a day when visits will be permitted
 - Number of times during a day or week a resident may have a visit
- ▶ Maintain a visitor log with contact information for all visitors in case public health contact tracing is necessary

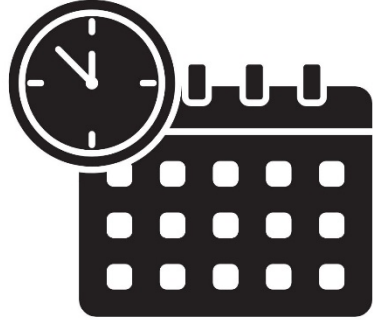


Outdoor Visitation

Facility Visitation Requirements



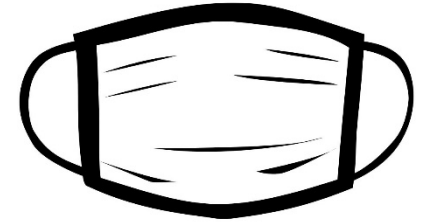
Develop a facility-specific visitation plan



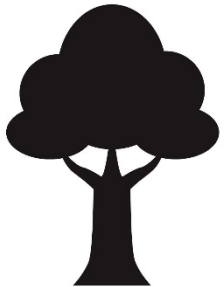
Establish a schedule of visitation beforehand



Adequate staff must be present



The facility must have adequate PPE



The outdoor location must allow for physical distancing



Spaces for people to sit should be demarcated in the visitation area



Everybody must sanitize their hands before and after visitation



Maintain a visitor log with contact information for all visitors

Which Residents Can Have Visitors?

- ▶ NOT residents suspected or confirmed with COVID-19
- ▶ YES, residents who:
 - HAD COVID-19 as long as off transmission-based precautions
 - Can safely transition from their room to outdoor visitation location
 - Can wear a surgical face mask covering their nose and mouth when transiting to/from the visit site, and during the visit
 - Can perform hand hygiene with an alcohol-based hand sanitizer immediately before and after visit

Which Visitors Can Visit?

- ▶ One or two visitors per visit
- ▶ >12 years old
- ▶ HAD COVID-19 as long as beyond 10/3 rule
- ▶ Screened and found to have no symptoms or risk factors of COVID-19 prior to the visit and:
 - Attest to be willing/able to wear a cloth face covering over their nose and mouth for the entire duration of the visit
 - The facility may provide a surgical facemask
 - Attest to willingness to perform hand hygiene with an alcohol-based hand rub immediately before and after visit

Residents and Visitors Must be Screened

Before visit, residents and visitors must be screened for symptoms of COVID-19:

- ▶ Fever (feeling feverish or a document temperature of 100.0 degrees Fahrenheit or higher);
- ▶ Respiratory symptoms such as runny nose, nasal congestion, sore throat, cough, or shortness of breath;
- ▶ Whole body symptoms such as muscle aches, chills, and severe fatigue;
- ▶ New gastrointestinal symptoms such as nausea, vomiting, or diarrhea;
- ▶ Changes in your sense of taste or smell

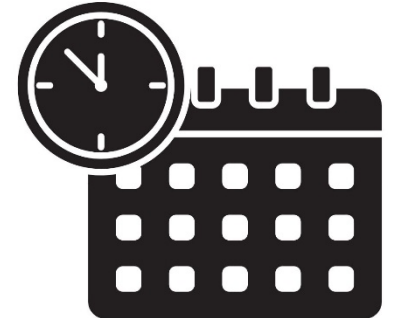
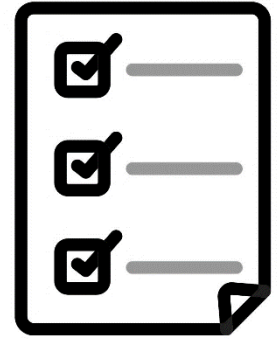
Visitors Must Also Have Additional Screen

To identify potential COVID-19 exposure (and risk of asymptomatic shedding):

- ▶ In the past 14 days, have you been in close contact with someone who is suspected or confirmed to have COVID-19?
 - Healthcare workers caring for COVID-19 patients while wearing appropriate PPE should answer “no” to this question
- ▶ Have you traveled in the past 14 days either:
 - Internationally (outside the U.S., including Canada);
 - By cruise ship; or
 - Domestically (within the U.S.) outside of NH, VT, or ME on public transportation (e.g., bus, train, plane, etc.)?
- ▶ If visitor answers in the affirmative to any of the questions, the visit may not occur

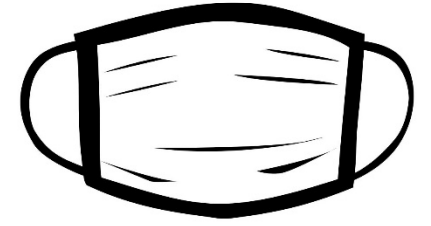
First Steps to the Visit

- ▶ Visits must be scheduled in advance
 - “Visits are dependent on weather, availability of outdoor space, and sufficient staffing”
 - At the time the visitor calls to arrange a visit, ask about symptoms/risk factors for exposure
 - Let them know when they arrive, they call to notify the facility and be re-questioned about symptoms/risk factors
- ▶ On arrival, conduct screening and – only if the visitor does not report any symptoms/risk factors – instruct them where to go for the visit



Facilitate the Safe Visit

- ▶ All surfaces should be cleaned and disinfected
 - Any chairs and tables
- ▶ Screen resident for symptoms and take their temp
- ▶ Transport resident to designated outdoor visitation space
 - Cannot transport through space with suspected/confirmed COVID-19
- ▶ Staff and residents wear a surgical face mask and visitors wear cloth face covering or mask
- ▶ Visitors remain ≥ 6 feet from the resident and staff
- ▶ A trained staff must observe the entire visit
 - Ensure all practice hand hygiene before, maintain 6 foot distance, wear their masks appropriately, perform hand hygiene after
 - Balance with privacy between resident and visitors



What if Something Goes Wrong?

- ▶ Depends
- ▶ Low threshold for quarantine
- ▶ Call HAI program

After Visit

- ▶ All surfaces should be cleaned and disinfected
 - Any chairs and tables
- ▶ Instruct visitors to monitor for symptoms and if develop symptoms within 2 days after visiting, immediately notify the LTCF
 - Inform the facility 1) date of their visit, 2) the individuals (both residents and staff) they were in contact with, and 3) the locations within the facility they visited
- ▶ Immediately quarantine and symptom screen the contacts and follow up with your medical director or resident's care provider
- ▶ Follow the NH DPHS guidance for actions to take in response to residential institutional outbreaks of COVID-19

Indoor Compassionate Care Visitation

Can We Have Visits Indoors?

- ▶ Indoor visitation is allowed on a limited basis and under controlled circumstances for residents who:
 - Are unable to go outdoors (e.g., due to a disability or advanced dementia)
 - Are in end-of-life circumstances
 - Whose psychological well-being requires a visit
- ▶ Decisions about compassionate care visitation should be made on a case-by-case basis by the LTCF

Indoor Compassionate Care Visitation

- ▶ Most of the same processes apply as for outdoor
 - Limit to two visitors (including clergy, bereavement counselors, etc.)
 - Visitor screening should include taking temperature
 - Visitors must wear a mask, perform hand hygiene before/after visit
 - Setting cleaned after visit
- ▶ The LTCF must identify a single consistent specific room for indoor visitation
 - Close to the facility entrance, to limit visitors' movement through living areas
 - Large enough to allow demarcating 6 feet of space between all individuals
 - Windows should be opened to allow in outdoor air if/when possible
- ▶ End-of-life visitation may continue within a resident's room but visitor takes all appropriate precautions and wearing PPE (gloves, gown, eye protection, and a surgical face mask)

Inpatient Pediatric Visits

Inpatient Pediatric Facility Visits

- ▶ Children benefit emotionally and developmentally from regular close contact with their parents/guardians
- ▶ Children with underlying medical conditions at risk for serious complications with SARS CoV-2
- ▶ Facilities have responsibility to find the balance to support a child's bonding with family and to protect their patients
- ▶ References:
 - [Children's Hospital Los Angeles](#)
 - [Johns Hopkins Children's Hospital FL](#)
 - [Johns Hopkins Children's Center, Baltimore](#)
 - [Boston Children's Hospital](#)
 - [Mt. Washington Children's Hospital, Baltimore](#)

Parental Visitation Suggestions

- ▶ Restrict to one parent/guardian/primary caregiver at a time
 - Consider asking family to designate one parent/guardian to serve in this role
 - Encourage quarantine to reduce their risk of infection and transmission
- ▶ To the extent possible, conduct visits outdoors
- ▶ Screen permitted visitors for symptoms/risk factors for prior exposure
- ▶ Require visitors to perform hand hygiene before, during and after visit
- ▶ Enable visitors
 - To wear a facemask for source control in the building
 - If any physical contact may occur, wear full PPE (gloves, gown, surgical facemask, eye protection)

Additional Q&A