

Clinical Services

Subject: NY Visitation Policy-COVID-19

Facilities shall resume visitation while adhering to the Centers for Medicare and Medicaid Services (CMS) *Core Principles of COVID-19 Infection Prevention* set forth below. Visitation shall be person-centered and account for residents' physical, mental, and psychosocial well-being, and support their quality of life with a degree of privacy. Facilities shall accommodate visitation through different means based upon the facility's structure and residents' needs, such as in resident rooms, dedicated visitation spaces, and outdoors.

Core Principles of COVID-19 Infection Prevention¹

- 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 *who have a positive viral test for COVID-19, symptoms of COVID-19, or currently meet the criteria for quarantine.*
- Hand hygiene (use of alcohol-based hand rub is preferred)
- Face covering or mask (covering mouth and nose) and *Physical* distancing at least six feet between persons, in accordance with CDC guidance**
 - A fully vaccinated² resident may choose to have close contact (including touch) with a visitor while wearing a well-fitting facemask and performing hand-hygiene before and after touch. Regardless, visitors should physically distance from other residents and staff in the facility.
 - Unvaccinated residents may also choose to have physical touch based on their preferences and needs, in these situations, unvaccinated residents (or their representative) and their visitors should be advised of the risks of physical contact prior to the visit. Visitors should also physically distance from other residents and staff in the facility
 - 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.

¹ Nursing Home Visitation, Centers for Medicare and Medicaid Services (CMS), QSO 20-39-nh, Revised 11/12/21, <https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf>

² According to the Centers for Disease for Control and Prevention (CDC), "fully vaccinated" refers to a person who is more than two weeks past receipt of the second dose in a two-dose series, or following receipt of the sole dose of a single-dose vaccine

Clinical Services

Subject: NY Visitation Policy-COVID-19

- 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.
- 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
- 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)
- Resident and staff testing conducted as required at 42 CFR § 483.80(h) (see QSO-20- 38-NH Revised)

Facilities must log visitor demographic information as set forth in the Screening Policy.

Facilities may **not** require visitors to be vaccinated (or show proof of such) as a condition of visitation. This also applies to representatives of the Office of the State Long-Term Care Ombudsman and protection and advocacy systems. *If the visitor declines to disclose their vaccination status, the visitor should wear a face covering or mask at all times.*

TESTING FOR VISITORS:

Facilities must verify that visitors have received a negative EUA SARS-CoV-2 test result one day prior to visitation for antigen tests and two days prior to visitation for NAAT (e.g. PCR) tests. All visitors may use either NAAT testing or antigen testing. (e.g., a Sunday visit should be conducted no earlier than Saturday if it's an antigen test or Friday if it's a PCR test.

If practical, facilities can offer to conduct onsite testing of visitors or offer self-testing OTC COVID-19 Antigen Rapid Tests. Facility to follow Testing Plan for reporting of tests results.

Clinical Services

Subject: NY Visitation Policy-COVID-19

For visitors who visit for multiple days, including a visitor who comes every day, proof of negative testing is required as often as feasible, at a minimum every third day (meaning at a minimum testing is required on day one, day 4, day 7, and so on).

OUTDOOR VISITATION

- Facilities shall conduct visitation outdoors whenever practicable, outdoor visitation is preferred when resident and/or visitor are not fully vaccinated against COVID-19, as there is lower risk of transmission due to increased space and airflow.
- Prior to conducting visitation outdoors, facilities must consider:
 - Inclement weather such as excessively hot or cold temperatures, or poor air quality; **and**,
 - Each resident's individual health status (e.g. medical condition, COVID 19 status)
- Facilities shall create accessible and safe outdoor spaces for visitation (e.g. courtyards, patios, or parking lots, including the use of tents, if available)

INDOOR VISITATION *

Facilities shall permit indoor visitation at all times and for all residents (regardless of vaccination status), *as permitted under the regulations.* (42 CFR § 483.10(f)(4)(v).)

While not recommended, residents who are on transmission-based precautions (TBP) or quarantine can still receive visitors. In these cases, visitors should adhere to the core principles of infection prevention, be made aware of the potential risk of visiting and precautions necessary. Visits should occur in the resident's room and the resident should wear a well-fitting facemask (if tolerated).

Criteria for Indoor Visitation

- *Adhere to the Core Principles of COVID-19 Infection Prevention at all times, ensuring physical distancing can still be maintained during peak times of visitation.*
- *Facilities should avoid large gatherings (e.g., parties, events) where large numbers of visitors are in the same space at the same time and physical distancing cannot be maintained.*

Clinical Services

Subject: NY Visitation Policy-COVID-19

- Facilities must limit visitor movement inside their facilities. Visitors should proceed directly to the resident's room or designated visitation area. Visitors should not roam hallways.
- Facilities should not permit in-room visits *If a resident's roommate is unvaccinated or immunocompromised (regardless of vaccination status), facilities may permit such visitation when the health status of the resident prevents the resident from leaving the room.*
- *****If the nursing home's county COVID-19 community level of transmission is substantial to high, all residents and visitors, regardless of vaccination status, must: wear a well-fitting non-surgical paper mask or a mask of higher quality (i.e., surgical mask, KN95 or N95) at all times during any visitation at the facility. If the visitor wishes, a cloth mask may be placed over the paper mask. The masks must cover both the nose and the mouth; and physically distance from facility personnel and other patients/residents/visitors that are not directly associated with the specific resident(s) being visited by that individual., at all times.***
- *****In areas of low to moderate transmission, the safest practice is for residents and visitors to wear face coverings or masks and physically distance, particularly if either of them is at increased risk for severe disease or are unvaccinated.***

Indoor Visitation during an Outbreak Investigation

- *An outbreak investigation is initiated when a new nursing home onset of COVID-19 occurs (i.e., a new COVID-19 case among residents or staff).*
- *The facility must immediately begin outbreak testing in accordance with CMS QSO 20-38-NH REVISED and CDC guidelines.*
- *While it is safer for visitors not to enter the facility during an outbreak investigation, visitors must still be allowed in the facility. Visitors should be made aware of the potential risk of visiting during an outbreak investigation and adhere to the core principles of infection prevention.*
- *Visitors during an outbreak investigation, should wear face coverings or masks during visits, regardless of vaccination status, and visits should ideally occur in the resident's room*
- **Facilities must permit compassionate care visits and visits required under federal disability rights law at all times, for any resident (vaccinated or unvaccinated).**