



MDHHS Highlighting Visitation Guidance for Long Term Care Facilities

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MDHHS understands that nursing home residents derive value from the physical, emotional, and spiritual support they receive through visitation from family and friends and that visitation restrictions can have negative effects on wellbeing. Limiting the transmission of COVID-19 among residents of long-term care facilities is a priority. Previous visitation restrictions were to mitigate the opportunity for visitors to introduce COVID-19 into the nursing home, but currently the risk of COVID-19 transmission related to visitation is lower, especially when core principles of infection prevention are observed and in settings where vaccination rates are high. The core principles of infection prevention can be found at the end of this summary.

Facilities are required to adhere to the Center for Medicare and Medicaid Services [QSO 20-39-NH](#), revised March 10, 2022.

Failure to facilitate visitation would constitute a potential violation and a facility would be subject to citation and enforcement actions.

The current regulation from CMS provides that:

If a visitor, resident, or their representative is aware of the risks associated with visitation, and the visit occurs in a manner that does not place other residents at risk (e.g., in the resident's room), the resident must be allowed to receive visitors as they choose.

Below are some highlighted items from the guidance that facilities and visitors should consider:

Visitation:

- Outdoor visits are preferred, when weather permits.
- Indoor visitation must be offered all day, every day, and for all residents.
 - Visitors should go directly to the visitation area or resident room, when in-room visitation is occurring, and not walk around different areas of the facility.
 - While it is safer for visitors not to enter the facility during an outbreak investigation, visitors must still be allowed in the facility after they are given education on the risk and how to follow the core principles of infection prevention.
- Facilities can no longer limit the frequency and length of visits for residents, the number of visitors or require advance scheduling of visits.
 - While not recommended, residents who are on transmission-based precautions (TBP) or quarantine due to COVID-19 may still receive visitors. Education on risks and infection prevention must be provided to the visitor.
 - In these cases, visits should occur in the resident's room and the resident should wear a well-fitting face mask.

Face Coverings and Physical Distancing During Visits:

Regardless of community transmission level, visitors when around other residents or healthcare personnel are strongly recommended to wear face coverings or masks regardless of their vaccination status.

- During times of substantial to high COVID-19 community transmission it is safest for all residents and visitors, regardless of vaccination status, to wear face coverings or masks and physical distance.
- During times of low to moderate COVID-19 community transmission, the safest practice for residents and visitors is to wear face coverings or masks and physically distance especially if either of them is at increased risk for severe disease or are not up-to-date with all recommended COVID-19 vaccine doses.
- Residents who are up-to-date on their vaccinations, who are not moderately or severely immunocompromised, and visitors who are up-to-date on their vaccinations visiting in:
 - Private rooms
 - Visiting in resident room when roommate is out of the room
 - Designated visitation areas when others are not present

May choose not to wear face coverings or masks and may have physical contact when together.

- As each person's comfort level, vaccination status, and condition will vary, it is important to extend grace to one another when interacting.
- Residents may also choose to have physical touch based on their preferences and needs.
 - Education on risks and infection prevention must be provided to the resident and visitor.
- Compassionate care visits must be allowed for any resident at any time.

Core Principles of COVID-19 Infection Prevention

- 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 until they meet the criteria used for residents to [discontinue transmission-based precautions](#) (quarantine).
- Facilities shall screen all who enter for signs, symptoms, and exposure to COVID-19. Visitation screening on off shifts can be a sign in sheet stating no signs, symptoms, or exposure to COVID-19.
- Hand hygiene - Supplies should be accessible to visitors for visitation (use of alcohol-based hand rub is preferred).
- Face covering or mask, covering the mouth and nose, along with physical distancing at least 6 feet for visitors should be followed. This is in accordance with CDC [Interim Infection Prevention and Control Recommendations](#).
- Signage educating visitors on COVID-19 signs, symptoms, masking, physical distancing, and infection control precautions shall be posted throughout the facility.
- Facility staff is conducting cleaning and disinfecting of high-frequency touch surfaces often including designated visitation areas after each visit. Visitation areas using physical barriers such as clear plexiglass dividers or curtains should routinely clean and disinfect these surfaces to prevent transmission.

- Staff are wearing personal protective equipment in accordance with CDC [Interim Infection Prevention and Control Recommendations](#). Staff shall wear masks, covering their mouth and nose, or N95 respirator, depending on the type of patient encounter. During times of substantial or high transmission eye protection should be worn by staff during all patient care encounters.
- COVID positive residents are effectively cohorted such as having separate areas dedicated for the care of COVID-19 positive residents which is clearly designated with signage indicating the level of personal protective equipment needed to enter.
- Resident and staff testing is conducted in accordance with CMS [QSO 20-38-NH](#).

Those unable or unwilling to adhere to the core principles of COVID-19 infection prevention should be asked to leave and future visitation options such as phone calls, window, or virtual visitation should be implemented.