Michigan.gov/Coronavirus

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Executive Summary

This document provides recommendations for visitation standards in residential care facilities. "Residential care facilities" means a nursing home, home for the aged, adult foster care facility, hospice facility, substance use disorder residential facility, or assisted living facility. It does not include independent living facilities.

As the epidemiology of COVID-19 around the country and the state of Michigan evolves, MDHHS will continue to review and update these recommendations.

General Mitigation Measures for Visits in Residential Care Facilities

MDHHS recommends that all residential care facilities, regardless of facility size, implement the following criteria to safely conduct visits indoors and outdoors:

1. Schedule visits and limit duration of visits.

- Schedule visits by appointment.
- Facilities may consider imposing reasonable time limits on visits and require that visitors log arrival and departure times, provide their contact information, and attest, in writing, that they will notify the facility if they develop symptoms consistent with COVID-19 within 14 days after visiting.
- Limit the number of visitors *per scheduled visit* to two persons or fewer at any given time.
- Limit the number of overall visitors at the facility in any given time based upon limited space, infection control capacity, and other necessary factors to reduce the risk of transmission.

2. Limit visitor movement.

- Restrict visitor movement within the facility to reduce the risk of infection.
- Limit visitor entry to designated entrances that allow proper COVID-19 screening.
- Disallow visitation during aerosol-generating procedures or during collection of respiratory specimens unless deemed necessary by staff for the care and well-being of the resident.

- Make accommodations to support visitation for residents who share a room with another resident.
- Prohibit indoor visits to residents who are in isolation or quarantine due to known or suspected exposure to COVID-19. Facilities should support and accommodate other visitation arrangements in these instances (window visits, virtual visits, etc.).

3. Conduct health screenings.

- Perform a health evaluation of all visitors each time the visitor seeks to enter the facility and deny entry to visitors who do not meet the evaluation criteria.
- Screenings could include tests for fever (≥100.4°F), other symptoms consistent with COVID-19, and known exposure to someone with COVID-19.
- Facilities should restrict anyone with fever, symptoms, or known COVID-19 exposure from entering the facility.
- Post signage at all visitor entrances instructing that visitors must be assessed for symptoms of COVID-19, will, if applicable, be required to test before entry, and instruct persons who have symptoms of COVID-19 to not enter the facility.

4. Wear masks and follow safe hygiene practices.

- Exclude visitors who are unwilling or unable to wear a face mask for the duration of their visit or follow hand hygiene requirements, and instead encourage those persons to use video or other forms of remote visitation.
- Require visitors to wear appropriate PPE, and comply with the facility's visitor PPE requirements based on applicable infection control protocols.
- Educate visitors on additional PPE use requirements for visitors beyond a face mask, if any. The facility should supply the visitor with the additional PPE. Entry should not be denied based on a visitor not having the additional PPE required by the facility.
- Make hand sanitizer and/or hand washing facilities safely available to visitors and post educational materials on proper hand washing and sanitization.

5. Practice physical distancing.

- Implement physical distancing requirements that limit or restrict physical contact with residents and employees during indoor and outdoor visits with limited exceptions:
 - Compassionate care visits may involve physical contact with a resident if the visitors are wearing appropriate PPE and the time spent within 6 feet of the resident is no longer than 15 minutes.
 - o If the resident is fully vaccinated, he or she can choose to have close contact (including touch) with their visitor while wearing a well-fitting face mask and performing hand-hygiene before and after.
- Advise residents and visitors to not share food.

6. Staff accordingly.

- Ensure availability of adequate staff or volunteers trained in infection control protocols to assist with the transition of residents, monitoring of visitation, and for cleaning to disinfect surfaces in the visitation areas after each visit.
- Make available an employee or volunteer trained in infection control measures at all times during the visit. This individual is not required to supervise a visit but must be available for questions.
- Communicate regularly with residents and their families to inform them of updated visitation protocols.

7. Optimize outdoor spaces and encourage outdoor visitation whenever possible.

- Outdoor visitation is preferred even when the resident and visitor are fully vaccinated against COVID-19.
- Outdoor visitation areas should allow for at least six feet between all persons.
- Tables are recommended as a barrier to ensure proper physical distancing.
- Marked areas and signage may be necessary to inform visitors of expectations.
- Tables and chairs should be disinfected after each use.
- Provide adequate protection from weather elements (e.g., in a shaded area).

Testing Recommendations for Visitors in Residential Care Facilities

Testing is an additional mitigation measure to identify otherwise undetected cases in our communities, thus, limiting potential outbreaks in residential care settings. MDHHS recommends that residential care facilities conduct point of entry testing of visitors whenever possible. When point of entry testing is not available, MDHHS recommends that residential care facilities encourage visitors to be tested on their own within 72 hours of coming to the facility and provide proof of negative test results upon entry.

MDHHS has the capacity to provide rapid COVID-19 tests to residential care facilities for visitor testing. For further information about supplies and support visitor testing, please visit the MDHHS COVID-19 LTC website.

Please note: The staff and resident testing requirements for adult foster care facilities licensed to care for 13 individuals or more, homes for the aged, and nursing homes outlined in October 28, 2020- <u>Testing in Skilled Nursing Facilities</u>, <u>Homes for the Aged, and Adult Foster Care Facilities</u>- MDHHS Epidemic Order remain in effect.

For further information

- CMS Visitation Guidance for Skilled Nursing Facilities
- Antigen Test FAQ and Guideline
- CDC SARS-CoV-2 Antigen Testing in Long Term Care Facilities
- CMS FAQ on Antigen Testing in Skilled Nursing Facilities