



Behavioral Health and Developmental Disabilities Administration

Communication #20-04

Resident Freedom of Movement and Visits

In response to Stay Home, Stay Safe Executive Order 2020-21

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For Questions Please Contact:

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Resident Freedom of Movement and Visits In response to Stay Home, Stay Safe Executive Order 2020-21

- This guidance replaces the memo “Memorandum Regarding Services and Setting Concerns” dated 3/20/20

This updated guidance is being issued in response to the Governor’s Executive Order 2020-21 (COVID-19) temporary requirement to suspend activities that are not necessary to sustain or protect life (Stay Home Stay Safe Order) and is directed to Pre-Paid Inpatient Health Plans (PIHPs), Community Health Service Programs (CMHSPs), provider agencies, direct care workers that provide home and community behavioral health care and supports, and residential care facilities that serve individuals with serious mental illness and individuals with intellectual and developmental disabilities.

- a. In our “Essential Services” Guidance, “care facilities” refers to licensed nursing homes, adult foster care, specialized residential setting or home for the aged.
- b. This guidance addresses activities specific to “care facilities” including licensed adult foster care and specialized residential settings.

Freedom of Movement

Consistent with the Governor's Stay Home Stay Safe Order, the behavioral health needs of individuals residing in a care facility must be provided with a person-centered approach which includes the ability for individuals to engage in outdoor activities such as walking, hiking, running, cycling, or any other recreational activity consistent with remaining at least six feet from people from outside the individual's household. Individuals living in a care facility should not be prohibited from exiting their home where they would otherwise have freedom of movement to go out for fresh air or otherwise participate in outdoor activities consistent with the Stay Home Stay Safe Order. Individuals should also continue to have access to home and community-based services, based on the Individual Plan of Service and those services necessary to maintain behavioral or psychiatric stability. These may include receiving supports for their activities of daily living, community living services (limited to supporting independent living needs, not socialization within 6 feet of others) or other activities for their mental wellness.

Individuals living in care facilities and their direct care workers should be monitored for symptoms of COVID-19. The local health department should be contacted if any individual or direct care worker has symptoms consistent with COVID-19. The care facility staff should seek more immediate medical attention depending on the severity of the symptoms. Otherwise, it is important that individuals who are symptomatic with signs of COVID-19 stay home to prevent the spread the virus, practice frequent hand washing, and distance themselves to the extent possible from others, in accordance with CDC guidelines and the Executive Order to Stay Home, Stay Safe. More information is available about this at the michigan.gov/coronavirus website.

Providers and direct care workers should help individuals understand the risks of becoming exposed to or spreading the COVID- 19 virus. Individuals are considered high-risk if there are any underlying health conditions such as chronic lung disease, moderate to severe asthma, severe obesity, serious heart conditions, immunocompromised including cancer treatment, diabetes, renal failure, liver disease, etc. These various factors should be considered in decisions regarding whether they might want to limit their exposure and reduce their own movement outside of the facility (e.g., request that others get groceries for them or walk in the yard, rather than in the park).

It is also up to direct care workers, clinical support staff and residential providers to help them with their decisions and work with their guardians to ensure unnecessary limitations on the resident's freedom of movement are mitigated, even in these extreme circumstances.

Visits

All residential providers must allow the following for individuals under their care:

- Visits that are necessary for the provision of medical care and essential mental health services.
- Visits from court appointed guardians for adult recipients and parents, foster parents, or a guardian of a recipient under the age of 21.
- Visits for those recipients that are in hospice care.
- Visits by the Office of Recipient Rights, Adult Protective Services, Child Protective Services, AFC Licensing and other persons performing official governmental functions.

To maximize safe practice of these visits with regard to spread of COVID-19, all in-person visits that cannot be shifted to video or other electronic types of visitation should be done using proper social distancing. In addition, visits should be conducted with proper screening and scheduling and other protocols and should follow guidance previously set forth in the following communications:

- BHDDA Communication #20-02: **Guidance for Specific Clinically Essential Face to Face Encounters in Behavioral Health Clinics, Substance Use Services and Residential Settings in the COVID-19 Context**
- Communication #20-03: **Infection Control Issues during Patient Close Contact Face to Face Assessment in Behavioral Health Clinic Settings in the COVID-19** BHDDA Communication 2020-02

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