

# COVID-19 Guidance for Visitors in Assisted Living

Residents in assisted living facilities have been isolating from activities and from visitors due to the COVID-19 pandemic. Isolation, loneliness and depression have taken a toll on residents' mental and physical health and wellbeing. With the lessening of restrictions statewide, it is proposed to take steps toward re-socialization of residents living in these facilities. Facilities may develop policies to outline the steps below to facilitate compliance.

## Guidance for Visitation

#### **Facilities**

This policy is limited to Assisted Living facilities, Types I and II. Facilities must follow all infection control guidance from previous policies. Facilities must be free of COVID-19 infections with residents and staff to allow visitation from outside parties. Any facilities that have residents with COVID-19 infections are excluded from this visitation policy until the Healthcare-Associated Infections and Antibiotic Resistance (HAI/AR) Program from the Utah Department of Health clears the facility. Access to adequate testing must also be available to consider visitation for residents. Facilities that do not have adequate personal protective equipment (PPE) and those that have not been able to implement facility-wide PPE use for their staff should not attempt to open to visitors until those issues have been resolved.

### **Screening Policies**

All family members or other visitors for residents will be screened prior to visits. A Self-Screening Tool and Passport can be used as a guide for facilities to screen staff and outside visitors prior to visiting residents, and can be found at: <a href="https://coronavirus-download.utah.gov/Health-provider/COVID-19-HCW-Screening-Tool-Passport.pdf">https://coronavirus-download.utah.gov/Health-provider/COVID-19-HCW-Screening-Tool-Passport.pdf</a>.

- Screen visitors for symptoms of illness including cough, shortness of breath, and two or more of the following: fever, chills, sore throat, headache, muscle pain, or new loss of sense of taste or smell. Check body temperature; it must be less than 100°F to enter the facility;
- Screen visitors for exposure to family members or others who have been positive for the COVID-19 virus, or exposure to anyone who has been sick or has symptoms of COVID-19;

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Require visitors to sign a log to document name, date, time of visit and phone contact.

#### General Visitation Policies

- Schedule visits before visitors arrive at the facility;
- At the time of scheduling, give the visitor information on what to expect at the visit;
- Limit visitors to two at a time per resident;
- Limit visits to 30 minute sessions per resident;

- Require visitors to maintain six-foot social distancing guidelines and wear masks at all times. Failure to
  do so should result in visitors being asked to leave. Facilities are encouraged to use barriers to prevent
  visitors from physical contact with residents;
- Do not allow visitation during meal times;
- Determine frequency of visits by facility policy to avoid overwhelming facility staff and as supplies of PPE allow.

#### Visits Outside on Facility Grounds

- Visits outside of the facility on facility grounds are encouraged;
- Require visitors and residents to wear masks at all times during visits. Masks may be provided by the facility or by the visitor;
- Ensure that children who visit should are old enough to wear a mask and keep it on during the entire visit;
- Staff should ensure proper 6 foot social distancing and PPE during visits.

### Visits Inside of the Facility

- Require visitors and residents to wear full PPE for visits inside the facility. Full PPE consists of masks, gloves and gowns.
  - Masks may be provided by the visitor; gowns and gloves should be provided by the facility.
  - o Facility staff should ensure that visitors wear appropriate PPE for each visit.
  - o The facility should assess their PPE supplies to determine the feasibility of inside visits;
- Instruct visitors to don PPE as they enter the facility before being escorted to visit areas;
- Instruct visitors to wash hands upon entry;
- Designate specific areas for visits inside the facility, or in individual resident apartments;
- Clean and disinfect areas for visits before and after each visit;
- Ensure that children who visit are old enough to wear full PPE and keep it on during the entire visit;
- Instruct visitors to discard PPE as they leave the facility in an area designated by the facility;
- Request that visitors leave any unnecessary personal items out of the facility;
- Any items brought into the facility must be pre-packaged and must be cleanable.

## Visits for Memory Care Units

- Do not allow visits inside memory care units;
- In these types of units, facilities are encouraged to use virtual, window or other visits that don't include physical visits;
- Memory care residents may have visits with families/friends outside on the grounds of the facility if:
  - The resident is assessed to be capable of wearing and keeping a mask on;
  - o The resident is attended by a staff person to ensure proper distancing with the visitors; and,
  - The resident does not have to pass through common areas to go outside to visit.

Facilities should ensure these processes are conducted in accordance with infection control guidelines. If transmission to residents or staff occurs in the facility, discontinue these activities and return to full visitation restrictions.

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Facilities should also adhere to any state, local or county phasing restrictions that may be more stringent than these guidelines.

Recommendations of the Long-Term Care Facility Subcommittee of the Utah Governor's COVID-19 Community Task Force

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## Attachment

PPE Contingency Use Grid

# PPE Contingency Use Grid

	Eye protection	Gowns	Gloves	Facemasks	N95 respirators	PAPR/ elastomeric face masks
Conventional Capacity	Use according to product labeling	Use isolation gown alternatives with equivalent or higher protection	Use according to standard and transmission- based precautions	Use according to product labeling	<ul> <li>Use of NIOSH         <ul> <li>approved</li> <li>respirators</li> </ul> </li> <li>Use in accordance with OSHA standards (e.g., fit testing)</li> </ul>	Use in accordance with OSHA-compliant written respiratory protection program
Contingency Capacity	<ul> <li>Shift from disposable to reusable</li> <li>Extended use</li> </ul>	<ul> <li>Shift from disposable to reusable</li> <li>Use of coveralls</li> <li>Use beyond shelf life</li> </ul>	Use beyond shelf life for training activities (i.e., no exposure to pathogens)	<ul> <li>Extended use</li> <li>Restricted use to healthcare personnel rather than patients</li> </ul>	<ul> <li>Use beyond shelf life for training and fit testing activities (i.e., no exposure to pathogens)</li> <li>Extended use</li> </ul>	Filter reuse with proper cleaning and disinfection
Crisis Capacity	<ul> <li>Prioritized use for splashes/sprays/ prolonged close contact</li> <li>Use of safety glasses</li> </ul>	<ul> <li>Prioritized use for splashes/sprays/ aerosol-generating procedures/high-contact activities</li> <li>Extended use of gowns</li> <li>Reuse of cloth gowns</li> </ul>	<ul> <li>Use beyond shelf life</li> <li>Use of non-healthcare glove alternatives</li> <li>Extended use of disposable medical gloves</li> </ul>	<ul> <li>Use beyond shelf life</li> <li>Prioritized use for splashes/sprays/aerosol-generating procedures/high-contact activities</li> <li>Limited reuse (removal between patient encounters)</li> </ul>	<ul> <li>Use beyond shelf life</li> <li>Limited reuse (removal between patient encounters)</li> <li>Use of respirators not evaluated by NIOSH</li> <li>Prioritized use for direct patient care and aerosolgenerating procedures</li> </ul>	<ul> <li>Sharing of elastomeric respirators</li> <li>Waiving of fit testing requirements (elastomeric respirators)</li> </ul>