BETHEL HOMES/Glen Arden

POLICY AND PROCEDURE

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New Policy Date: 7/15/20	Revision Dates: 9/9/20, 9/16/20
Department: Administration	Approval: Administrator
Nursing	
All	

POLICY: Bethel Homes recognizes the importance of visitation for the mental health and psychosocial wellbeing of our residents. Bethel Homes will follow all NYS DOH/CDC and local DOH guidance to facilitate in person visitation for residents in a safe manner. Understanding that certain requirements must be met prior to instituting this visitation (e.g. Covid free residents and staff for 28 days, development of P&P addressing how visitation will occur, assuring adequate PPE, staffing etc; as well as development and submission of a New York Forward plan) we also understand that meeting these requirements are fluid and visitation may require 'pausing' if the situation requires.

PROCEDURE: Bethel Homes/ and Glen Arden including Bethel Nursing and Rehabilitation Center, Bethel Springvale Inn, Fieldstone at The KNOLLS; The KNOLLS EH. Bethel Nursing Home, Glen Arden Healthcare Center and Glen Arden EH will establish guidelines and a procedure for in person visitation. Each facility will designate a proscribed area of the facility where visitation will occur in their NY Forward plan. Visitation will occur outdoors; weather permitting. Each facility will also identify an indoor location that may be used if outdoor conditions do not allow for visitation. They will also indicate the process for signing up for visitation, who will supervise visitation, provide Temperature and Covid symptom checks, etc. Each facility will notify their families and residents of the process and post information on the facility website with contact information.

Definitions:

NH= Nursing Home ACF= Enriched Housing or Assisted Living DOH= Dept. of Health

Responsibility

Action

Administrator

The Administrator will ensure the following criteria are met before visitation can resume and these must also be included in the NH, or EH/AL NY Forward Safety Plan:

- 1. The NH/ACF must be in a region that has entered Phase 3 of the NYS reopening plan.
- 2. The NH/ACF facility must be in compliance with all state and federal requirements, state Executive Orders and guidance, as well as state and federal reporting requirements (I.E. daily HERDS reporting; weekly staff testing, and weekly staff survey, and submission of COVID-19 data to the National Healthcare Safety Network (NHSN).
- 3. The facility has protocols to separate residents into cohorts of positive, negative, and unknown as well as separate staffing teams to deal with COVID-positive residents and non-positive residents.
- 4. The facility has undergone a focused Infection Control Survey conducted by the DOH and found to be in substantial compliance with their infection control program (after May 1, 2020).

- 5. The facility has no staffing shortages as evidenced by the facility individual staffing plan [and as reported by the NH through submissions to the NHSN].
- 6. The absence of any **new** onset of COVID-19 among staff or residents for at least 28 days as reported to the DOH HERDS daily survey.
- 7. Revision 9/9/20 ACF- The absence of any new onset COVID-19 among staff or residents for at least 14 days as reported to the NYSDOH HERDS daily survey. The visitor is 18 years of age or accompanied by an adult 18 years of age or older. Residents that are COVID positive, symptomatic or in a 14 day quarantine observation period are not eligible.
- 8. Access to adequate testing. The facility has conducted a baseline COVID 19 testing of all consenting in house residents. The facility must have the ability to test or arrange for testing of all residents upon identification of any individual with symptoms consistent with COVID 19. If a staff member tests positive the facility must have the capacity to continue re-testing of staff and residents as applicable.
- 9. There should be a protocol, with demonstrated adherence, to screen all staff during each shift, and each resident at least daily; and any other persons entering the facility including visitors. Screening must include daily symptom checks, temperature monitoring, (and in Nursing Home pulse oximetry checks).
- 10. A copy of the NH/ACF formal visitation plan should be posted to their public website and broadcasted via email to provide visitors with guidelines for visiting. Notification should be broadcast in the same way if visitation is paused due to any instance of positive COVID 19 diagnosis in either resident or staff.
- 11. The facility has completed the NY Forward Safety Plan and submitted a copy of the completed plan to the NYS DOH (covidnursinghomeinf@health.ny.gov). A copy of the plan will be retained at the facility where it is easily accessible and immediately available upon request of the NYS DOH or local health department. The plan will be updated as needed and any changes will be communicated to the DOH. The plan must clearly articulate the spaces to be used for visitation (indoors and outdoors) including the number of visitors and residents which could be safely socially distanced within the space(s).

Administrator/ designee

- 1. The instructions and parameters of visitation will be put into a fact sheet that will be posted on each facilities' individual website and sent by email to families.
- 2. The Administrator will assign staff responsible for development of a schedule to sign up for visitation, and indicate the hours that visitation is available. (The hours of visitation will be indicated on the Fact Sheet Protocol for each facility) The number of visitors at any one time may be no more than 10% of the facilities census: ie if there are 100 residents no more than 10 residents may have visitors at one time; and there will be no more than 2 visitors allowed per resident. HOWEVER, this number may be modified depending on the available space in the designated visiting area; allowing for adequate spacing for

- social distancing of at least 6 feet between residents and visitors; and 6 feet between groups.
- 3. The following criteria/parameters for visitation will be individualized for each facility as indicated in their NY Forward Safety Plan:
- a. Visitation should be limited to outdoor areas, weather permitting. Under certain limited circumstances, as defined by each facility, visitation may be conducted in a well-ventilated inside area with no more than 10 individuals at one time who are wearing a facemask or face covering while in the presence of others. This may include residents visiting one another.
- **b.** Visitors should be limited to adults 18 or over; or accompanied by an adult 18 or over. Priority should be given to family members/HCP, then loved ones, ombudsman, or preference of resident. **Revision 9/17/20-Nursing Home visitors must be 18 years of age or older.**
- c. Visitation is strictly prohibited in resident rooms or care areas.
- d. There must be adequate staff available to perform screening and temperature checks, assist with transporting residents, monitor visitation, and clean and disinfecting of the area between visitors.
- e. Visitors will be given a Visitation Protocol fact sheet prior to the visit with expectations and protocol for the visit. Any visitor not adhering to the protocol will result in he/she/they will be prohibited from visiting during the duration of the COVID-19 state declared public health emergency.
- f. Signage will be posted in the visitation area indicating the need for facemask utilization and hand hygiene practices as well as applicable floor or area markings to cue for social distance delineations.
- g. Screening of visitors will include both temperature checks and asking screening questions which include questions on COVID symptoms (SOB, cough, sore throat, GI symptoms [nausea, vomiting or diarrhea], headache, myalgia, chills or loss of smell or taste); as well as questions regarding International travel or travel to States designated under the Commissioner's travel advisory or the Governor's mandatory quarantine. (See Governor's list of States which is updated regularly) [include link]
- h. Revision 9/17/20: Nursing Home visitors must provide a verified negative COVID-19 test result completed within the last week (7 days). Visitation must be refused if the individual fails to present such negative test result, exhibits any COVID-19 symptoms or does not pass screening questions.
- i. Visitors will be screened and documentation of screening will be maintained onsite in an electronic format which will be available for DOH inspection and contact tracing. The screening will include:
 - 1. First and last name of visitor(s)
 - 2. Physical (street address) of visitor
 - 3. Daytime and evening phone number
 - 4. Date and time of visit
 - 5. Email address if available
 - 6. Notation that the individual cleared the screening (both temperature and questions). Individual temperatures or specific information should not be on the form.
- j. Adequate PPE will be available to ensure that residents wear a mask or face covering during visitation (if medically tolerated). Visitors must

- wear a mask or face covering at all times covering the nose and mouth; and the facility must have these available if a visitor arrives lacking a face covering.
- k. Hand sanitizer will be available and visitors are able to demonstrate appropriate use; with staff assistance if needed.
- I. Areas where visitation occurs will be appropriately disinfected between visitations using an EPA approved disinfectant. This may be done with spraying of the disinfectant on the tables/chairs and allowing to air dry or alternatively using EPA disinfectant with disposable cloths/cloths and allowing to air dry or utilizing EPA approved wipes. A log shall be maintained of cleaning.
- m. The area will have an appropriate receptacle for the disposal of used PPF
- n. Visiting hours and numbers of residents receiving visitors at any one time will be set by each facility. Every effort will be made to ensure that there is a fair system to allow all residents/families that wish visitation to do so during the proscribed visiting hours.
- o. An interdisciplinary team will be created at each facility to review visitation program compliance with the DOH Health Advisory dd. 7/10/20. (ACF must include administrator, case manager and quality assurance manager at a minimum).
- 4. Any resident with s/s of Covid 19 or on quarantine may not have visitors.
- 5. If at any time the DOH restricts visitation for any reason at any facility the facility will follow these restrictions.
- 6. Once a facility is open and accepting visitors then specialty practitioner, podiatric and dental services may continue.

Appendix:

- A. Signage for facemasks/ face covering
- B. Signage for social distancing
- C. Signage for not visiting if sick
- D. Visitation Protocol Fact Sheet(s)
- E. NY Forward Safety Plan- including specific areas of each building's visitation area and hours of visitation/ number of residents allowed visitors at one time.
- F. Sample of Visitor screening log